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**PRACTICE POTENTIALS:**  
IMPACT OF PARTICIPATION IN  
PROFESSIONAL DEVELOPMENT AND  
SUPPORT ON QUALITY OUTCOMES FOR  
CHILDREN IN CHILDCARE CENTRES

JUNE 2008

A RESEARCH REPORT OF A NATIONAL STUDY THAT EXPLORES THE SIGNIFICANCE OF PROFESSIONAL DEVELOPMENT AND SUPPORT IN CONTRIBUTING TO QUALITY OUTCOMES FOR CHILDREN IN CHILDCARE CENTRES IN RECEIPT OF AUSTRALIAN GOVERNMENT FUNDING.

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# PRACTICE POTENTIALS: FINAL REPORT

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This research was commissioned by the National Professional Support Coordinators (PSC) Alliance. The variety of resource and training agencies that make up the Alliance was initially funded by the Australian Government Department of Family and Community Services and Indigenous Affairs (FACSIA) to coordinate professional development and support services for Australian Government funded children's services, including childcare centres. This year, in renewing the funding contract of the PSCs in each state/territory, the policy responsibilities shifted to the new Office of Early Childhood Education and Child Care located within the Department of Education, Employment and Workplace Relations. The names and contact details of the various PSC agencies are listed below.

- **QLD PSC**  
**Health and Community Service Workforce Council Inc**  
Phone: 1800 112 585 (toll free) Website: [www.pscq.org.au](http://www.pscq.org.au)
- **NSW PSC**  
**Children's Services Central**  
Phone: 1800 157 818 (toll free) Website: [www.cscentral.org.au](http://www.cscentral.org.au)
- **WA PSC**  
**Resource Unit for Children with Special Needs**  
Phone: 1800 783 768 (toll free) Website: [www.pscwa.org.au](http://www.pscwa.org.au)
- **SA PSC**  
**Lady Gowrie Child Centre Inc**  
Phone: 1800 129 606 (toll free) Website: [www.pscsa.org.au](http://www.pscsa.org.au)
- **NT PSC**  
**Resource Unit for Children with Special Needs**  
Phone: 1800 138 662 (toll free) Website: [www.pscnt.org.au](http://www.pscnt.org.au)
- **VIC PSC**  
**Community Child Care Association**  
Phone: 1800 177 017 (toll free) Website: [www.cccvic.org.au](http://www.cccvic.org.au)
- **ACT PSC**  
**Communities at Work**  
Phone: 1800 228 772 (toll free) Website: [www.actpsc.com.au](http://www.actpsc.com.au)
- **TAS PSC**  
**Lady Gowrie Child Centre Hobart**  
Phone: 1800 647 718 (toll free) Website: [www.psctas.org.au](http://www.psctas.org.au)

## LIST OF RECOMMENDATIONS

### DEFINITION AND VALUE OF PD&S

- That the PSC Alliance promotes the importance of incorporating continuous learning through PD&S experiences within the development of a comprehensive Early Childhood Workforce Strategy for Australia. **(Recommendation #1)**
- That Early Childhood Australia's policy on professional development is used as a reference point to stimulate dialogue with key stakeholders to establish a national policy statement on PD&S for Australia's children's services practitioners. **(Recommendation #2)**
- That the PSC Alliance advises the Australian Government of the importance of developing a national system for articulating early childhood professional qualifications between the Vocational Education & Training (VET) sector and the Higher Education sector for use by children's services practitioners any where in Australia. **(Recommendation #3)**
- That the PSC Alliance engages in dialogue with key stakeholders, including government and employers, to establish a national minimum standard of 5 days per year of planned PD&S for each children's services practitioner employed in a prior to school setting. **(Recommendation #4)**

### PARTICIPATION, EFFECTIVENESS & RESOURCING PD&S

- That each PSC maintains a mix of PD&S approaches and increases its capacity to provide customised PD&S as requested by centres either on an individual centre basis or as a collective within a region/neighbourhood, with an emphasis on capacity building at the centre level. **(Recommendation #5)**
- That the PSC Alliance designs and develops a broad range of professional tools and strategies to assist childcare centres to assess, identify, implement and evaluate the PD&S needs of their staff in strategic ways, meaningful and relevant to local contexts. **(Recommendation #6)**
- That in developing their annual PD&S priorities, each PSC maintains a continuous and consultative approach when undertaking their state/territory needs analysis dialogues so as to ensure responsiveness to changing demands of children's services. **(Recommendation #7)**
- That the PSC Alliance collates and analyses the state/territory PD&S needs analysis data from a national perspective, to inform and effect national policy change as appropriate. **(Recommendation #8)**
- That advertising/promotional material about planned PD&S opportunities delivered by each PSC, carry explicit information about the target audience in relation to the experience level and the role/position (such as centre director, teacher, cook, and assistant) of children's services practitioners who may consider attending these sessions. **(Recommendation #9)**
- That each PSC continues to offer childcare centre staff PD&S opportunities to keep up-to-date with innovation and change within the early childhood sector. **(Recommendation #10)**
- That the PSC Alliance seeks government funding to establish a national mentoring initiative to support those currently working in senior management and leadership positions in children's services. **(Recommendation #11)**
- That the PSC Alliance urges the Australian government to facilitate the development of appropriate postgraduate courses to enhance business management and leadership qualifications of children's services practitioners as a part of the National Early Childhood Workforce Strategy. **(Recommendation #12)**

- That the PSC Alliance seeks government support and resources to undertake a national research initiative to investigate leadership and business management concerns that impact on capacity building within childcare centres around Australia. **(Recommendation #13)**

#### **QUALITY OUTCOMES REALISED THROUGH PD&S**

- That the PSC Alliance advises the Australian Government of the importance of ensuring that PD&S opportunities for all children's services practitioners is an essential component of any national system of quality assurance for children's services. **(Recommendation #14)**
- That the PSC Alliance utilises the data from this study to collate and disseminate a range of best practice PD&S strategies used by childcare centres to encourage participation in continuous PD&S, including upgrading of qualifications through diploma and degree based studies in early childhood. **(Recommendation #15)**
- That the PSC Alliance seeks to develop guidelines that can be used as benchmark criteria to facilitate the effective delivery of various PD&S experiences, including the participation in Certificate III programs by children's services practitioners located in rural and remote areas. **(Recommendation #16)**
- That each PSC identifies mandatory training aspects covering childcare service provision within their state/territory;
- That collectively, the PSC Alliance collaborates to develop these aspects/areas into PD&S packages for use by children's services practitioners; and
- That steps be identified to systematically evaluate the use and effectiveness of these PD&S packages over time. **(Recommendation #17)**
- That each PSC continues to broaden the range and diversity of PD&S providers used as presenters, within each state/territory as well as across Australia more broadly, as appropriate. **(Recommendation #18)**
- That each PSC continues to support the regular presenters of PD&S within their state/territory to perform their role in mentoring children's services practitioners and in evaluating the effectiveness of the PD&S they have presented. **(Recommendation #19)**
- That the PSC Alliance seeks government funding to sponsor research on innovations in PD&S on related matters such as:
  - Enhancement of pedagogical practice, business management and leadership potentialities of children's services practitioners achieved through their involvement in major government initiatives established within local communities.
  - Investigation of workforce participation capacities of specific groups of children's services practitioners including family day care providers, in-home carers, outside school hours care providers, male practitioners, those from Indigenous backgrounds, and those with overseas qualifications. **(Recommendation #20)**

## CHAPTER 1

### INTRODUCTION

This research was made possible through the cooperation of a variety of children's services practitioners based in every state/territory of Australia. In the preparation of this final report, we honour their contributions which have enabled us to raise awareness and reflect critically upon future directions for policy making in provisioning Professional Development and Support (PD&S) for children's services practitioners throughout Australia. We also commend the Professional Support Coordinators' Alliance (from hereafter referred to as the PSC Alliance) for identifying the need to establish a national research study to explore the significance of PD&S for childcare centre practitioners as it relates to quality outcomes for young children and their families. There is an unequivocal body of research evidence that demonstrates the relationship between characteristics of childcare staff and indices of quality care. Continuing professional learning through participation in planned PD&S, access to mentoring and professional networks are major contributors to the development and sustainability of high quality children's services. At the time of commissioning this research, the extent to which children's services practitioners in Australia understood these phenomena had not been researched on a national scale. In April 2007, a research team of six early childhood specialists from Macquarie University and Charles Sturt University (from hereafter referred to as the Research Team) were contracted to undertake this research and prepare a report on the basis of data collected with the assistance of childcare centre directors/managers and owner operators located in each state/territory.

#### 1.1 PROJECT BRIEF

This study is based on experiential and attitudinal data from a specific group of early childhood stakeholders namely, directors or managers of long day childcare centres in receipt of funding under the Australian Government Child Care Benefit scheme. The data collected relate to childcare centre staff access to, participation in, and perceived benefits of professional development, support and training programs as understood by childcare centre directors or managers located in every state/territory across Australia.

The research methodology was framed around three objectives identified in the project brief supplied by the PSC Alliance. Namely,

- *“To develop an understanding of how childcare centre directors/managers view the value of professional support including training for their staff and their understanding of the relationship between professional development and support and quality outcomes.*
- *To develop an understanding of the range of measures that are effective in supporting services to implement improvements/changes in practice through in depth study of services experiences.*
- *To explore possible links between participation in professional development strategies and achieving identified outcomes through exploring a particular area of interest (eg behaviour guidance or organisational management).”*

To enhance the study further, the Research Team proposed an additional objective, as follows:

- To provide a broad national picture of the links between participation in professional development and support programs and quality outcomes

This additional objective was the starting point for this research, and was addressed in relation to accessing relevant data from the following sources: (1) most recent professional development needs analysis data collected by the PSC Alliance; (2) staff participation in in-service training contained within the national Census of Child Care Services completed in 2004; and (3) data from the Longitudinal Study of Australian Children on staff participation in professional development from Wave 1, 2004 as this relates to indicators of program quality.

## **1.2 STRUCTURE OF THE REPORT**

In addressing the four objectives of this study, the Research Team prepared a series of performance reports, which were issued progressively when each set of data was initially available. Findings based on existing data sources were presented in our first Performance Report delivered in May 2007. The data collected from the national online survey questionnaire was the focus of the second performance report submitted in August 2007. Subsequently, the bulk of the qualitative data derived through focus group discussions and case study interviews were presented in Performance Report 3 submitted in September 2007. Much of the data collated and analysed for these progress reports were refined and extended as a comprehensive report submitted in October 2007. Subsequently, based on discussions with the PSC Alliance in December 2007, the Research Team was contracted to extend the case study sample by including eight private-for-profit centres, one in each state/territory. These visits occurred during January-February 2008. This final report now contains the analysis and reflections based on this full data set collected during 2007 and 2008.

The content of this final report is organised under eight chapters. Chapter 1 describes the project origins and structure of this report. In Chapter 2, the background context of this research including a review of recent literature on professional development and a discussion of information on professional development data taken from three national databases identified above as well as findings from the PD&S needs analysis reports prepared by the PSC Alliance agencies in each state/territory. Chapter 3 provides information about the approach adopted by the Research Team in undertaking this research. It describes the research methodology, instruments used to collect data, sample size and response rates achieved. We conclude this chapter with a discussion on the potential limitations of the study design and sample.

In Chapter 4 we provide a discussion of the key features of the childcare centres and their personnel who participated in this study. This information must be considered when reflecting on the substantive findings presented in the next three chapters. That is, Chapters 5, 6 and 7 provide specific findings in relation to the three research questions we set out to explore in this study. In each of these chapters, we have adopted an integrated approach to the analysis whereby the full set of data emanating from the online survey, focus groups and case study interviews are systematically interrogated in a consistent way. This discussion is arranged under key themes and patterns aimed at addressing the three research questions which provided the focus for this research.

In Chapter 8, we provide our recommendations to the PSC Alliance, and these are embedded within an overall discussion and conclusion of lessons to be learnt from this research.

## CHAPTER 2

### BACKGROUND TO THE STUDY

In setting the scene for this research, we report on three tasks that were completed as preparation for this research. That is, the Research Team examined information pertaining to Professional Development and Support (PD&S) available through three sources that contain relevant data from a national perspective as follows:

- a. Quantitative data from two external sources: a) the 2004 Census of Child Care Services (FACS, 2004) and b) the first wave of data collected through the Longitudinal Study of Australian Children (LSAC, 2004).
- b. Review of literature on research into PD&S undertaken during the past ten years.
- c. Overview of findings from most recent needs analysis of childcare staff PD&S, undertaken by each PSC Alliance representative in every state/territory in Australia.

Key findings that emerged from each of these data collations and analysis are discussed next.

#### 2.1 QUANTITATIVE DATA FROM EXTERNAL SOURCES

We begin with a discussion of relevant data taken from the 2004 Census of Child Care Services (FACS, 2004). The Department of Family and Community Services (FACS) carried out this national Census, and included participants from a variety of children's services funded through the Australian Government's Child Care Support program. According to this Census, "at March 2004, 42% of all staff working in long day care centres were employed fulltime, 30% were employed part-time, 25% were paid casuals and 3% were unpaid." (FACS, 2004: 8). For our purposes, we have extracted data relevant to staff qualifications and professional development from the following service types:

- LDC – P = Long Day Care centres – Private
- LDC – CB = Long Day Care centres – Community Based
- FDC = Family Day Care schemes ( including scheme staff and caregivers)
- OCC = Occasional Care Centres
- Multifunctional Centres
- MACS = Multifunctional Aboriginal Childcare Services
- OSHC = Outside School Hours Care services
- VC = Vacation Care services

A summary of key data extracted from the 2004 Census is presented in [Table 1](#). We have retained the terminology of in-service training (IST) used by FACS for this purpose.

Overall, there was a total of 10,998 paid staff employed in the children's services listed above. It is also important to note the following:

*The average number of paid staff per service in long day care centres increased from 11.9 staff per service in 2002 to 12.1 staff per service in 2004. This increase was reflected for both private and community based long day services from an average of 10.9 to 11.2 staff per service for private services and an average of 13.6 to 14.0 staff per service for community based services. (FACS, 2004: 18)*

Although the Census provides state/territory details, for ease of reference, it is sufficient to use only the national data to paint the overall context reflected through this Census (FACS, 2004).

**Table 1**  
**Childcare Staff information from the 2004 Census of Childcare Services**

| Service types           | # SERVICES | # paid STAFF | Have relevant Qualifications |     | Have undertaken IST in the past 12 months |     |
|-------------------------|------------|--------------|------------------------------|-----|---|-----|
| LDC - P                 | 2515       | 28347        | 18311                        | 65% | 22137                                     | 78% |
| LDC - CB                | 1297       | 18124        | 12524                        | 69% | 14184                                     | 78% |
| OCC                     | 101        | 926          | 630                          | 68% | 706                                       | 76% |
| Multifunctional centres | 13         | 179          | 93                           | 52% | 151                                       | 84% |
| MACS                    | 30         | 351          | 163                          | 46% | 258                                       | 74% |
| FDC - Scheme staff      | 318        | 1770         | 1666                         | 94% | 1563                                      | 88% |
| FDC - Caregivers        |            | 11893        | 3403                         | 29% | 9984                                      | 84% |
| OSHC                    | 2137       | 11531        | 5406                         | 47% | 7776                                      | 67% |
| VC                      | 1340       | 10998        | 5398                         | 49% | No data                                   |     |

Firstly, Table 1, depicts the number of services that participated in the Census and the number of paid staff that were employed in these childcare services. It also shows, of these staff, how many held relevant qualifications in terms of early childhood education, primary education, childcare and nursing backgrounds, and how many participated in in-service training activities during the 12 months leading up to the 2004 Census.

Census data presented in Table 1 also reflect that during 2004, long day care centres employed the largest number of paid staff, numbering nearly 50000 workers, across all the major types of formal children's services in Australia. It is also worth noting that although two thirds of the Long Day Care centres were managed privately (n = 2515 or 66%) and the remaining one third was in community hands (n = 1297 or 34%), the latter employed almost 40% of the paid employees (n = 18124) in Long Day Care centres as a whole. Of these, a similar proportion of staff, representing at least 65% overall, had relevant qualifications including fields of study such as early childhood teaching, primary education, nursing and childcare.

Likewise, more than three quarters (78%) of Long Day Care centre staff who participated in this survey, had attended in-service training programs over a 12 month period leading up to the Census. The Census also indicated that:

Of Long Day Care staff who have undertaken in-service training, 19% undertook training for additional needs children, while 70% of staff undertook other childcare related training course in the previous 12 months. Eight per cent undertook management/financial training and 63% participated in other relevant training (eg, First Aid certificate). (FACS, 2004: 18)

Additional information available in this Census (FACS, 2004) indicate that about 19% (n=5351) and 12% (n=2128) of staff in private and community based childcare centres respectively were also engaged in upgrading their formal early childhood qualifications during 2004.

When comparing long day care centres with other service types, it can be seen that Family Day Care staff (n=1770) who administered and resourced these schemes were relatively better qualified (94% or n =1666) and reflected a higher rate of participation in in-services (88% or n=1563).

In contrast, however, the caregivers who worked at the coalface of service delivery in Family Day Care, represented the least qualified population overall (29% or n=3403). These FDC caregivers, like their Scheme staff, also tended to have a relatively higher rate of participation in-services (84% or n=9984). When compared with LDC centre participants, FDC participants had a higher rate of participation in in-service training during 2004. Note also that in comparison to FDC staff (n=11,647) there was more than triple the number of paid staff employed in LDC centres (n=36,321) who participated in this Census.

*Growing Up in Australia*, the only national Longitudinal Study of Australian Children (LSAC), provides a nationally representative sample of more than 10,000 families recruited to the study in 2004. About half these families have an infant as the study child and the other half have a child aged 4 to 5 years. The LSAC is following the development of these two cohorts of children until at least 2010, returning to the children and their families every two years.

One of the key aims of the LSAC is to investigate the impact of early childhood environments on children's development, learning and wellbeing. To assist in meeting this aim, each wave of the LSAC includes a mail-out questionnaire to be completed by the child's teacher or carer. For centre-based programs, the items include questions about the teacher/carer's current qualifications, any further education being undertaken, and experience of professional development completed over the past year. LSAC, therefore, provides an important opportunity to generate a broad profile of early childhood staff' access to professional development from a national perspective.

In the LSAC questionnaire, teachers and carers working in schools and centre-based early childhood services were asked the following: '*In the last 12 months, what is your best estimate of hours spent on professional development activities?*' Examples of professional development included "in-service programs, pupil-free days, seminars, workshops, conferences, short courses". Response options were "nil, 1 to 6 hours (1 day), 7 to 12 hours (2 days), 13 to 18 hours (3 days), 19 to 24 hours (4 days), 25 hours or more (5 days)". For the purposes of this report, we discuss findings on professional development from the LSAC data collected in the first wave of the study in 2004. In Table 2, responses from teachers of 4 to 5-year-old children are presented first, followed by Table 3, which presents responses from carers of infants.

The results for teachers of 4 to 5-year-olds showed that time spent in professional development, for the sample as a whole which included LDC centres, preschools, and schools, was generally high with just under half (48.6%) of the sample spending 25 hours or more in professional development activities over the past 12 months. However, the proportions differed by type of early childhood setting. For long day care, 658 teachers completed the item on professional development. Results, summarised in [Table 2](#), show that only one-quarter (26.3%) had received 25 hours or more of professional development during the previous 12 months. The majority (44.7%) had attended between 7 and 18 hours (2 to 3 days) of professional development for the same period. These figures indicate that children's services practitioners employed in LDC centres were less well supported in their access to professional development and support than their counterparts in preschools and schools.

**Table 2**  
**Estimated number of hours spent on professional development activities in last 12 months by teachers of 4 to 5-year-olds in long day care (LDC)**

| Number of hours (days) PD         | Not-for-profit LDC |            | For-profit LDC |            | All LDC    |            |
|-----------------------------------|--------------------|------------|----------------|------------|------------|------------|
|                                   | n                  | %          | n              | %          | n          | %          |
| Nil                               | 9                  | 2.9        | 9              | 2.6        | 18         | 2.7        |
| 1 to 6 hours (1 day)              | 34                 | 11.1       | 54             | 15.7       | 89         | 13.5       |
| 7 to 12 hours (2 days)            | 59                 | 19.2       | 94             | 27.3       | 153        | 23.3       |
| 13 to 18 hours (3 days)           | 75                 | 24.4       | 62             | 18         | 141        | 21.4       |
| 19 to 24 hours (4 days)           | 40                 | 13         | 43             | 12.5       | 84         | 12.8       |
| 25 hours or more (5 or more days) | 90                 | 29.3       | 82             | 23.8       | 173        | 26.3       |
| <b>Total</b>                      | <b>307</b>         | <b>100</b> | <b>344</b>     | <b>100</b> | <b>658</b> | <b>100</b> |

For the long day care sample, sub-group analyses were used to compare the figures for staff working in for-profit services, such as private, franchised or commercial childcare chains, and staff working not-for-profit services, which were sponsored by a community-based organisation, religious faith, local government, school or higher education institution, or were employer-sponsored childcare centres. Results summarised in Table 2, indicate that the proportion of those who received the maximum hours of professional development was higher in not-for-profit services (29.3%) and was lower in for-profit (23.8%) services. At the lower end, 30.3% of staff in not-for-profit centres attended 1 to 12 hours (1 to 2 days) of professional development compared to 43% of staff in for-profit centres.

The next table summarises the results from questionnaires returned by 233 carers/teachers working with infants in long day care centres. All but one carer completed the item on professional development. Results, summarised in Table 3, showed that less than one-quarter (23.7%) had received 25 hours or more of professional development during the previous 12 months. The majority (43.2%) had attended between 1 and 12 hours (1 to 2 days) of professional development.

**Table 3**  
**Estimated number of hours spent on professional development activities in last 12 months by carers/teachers of infants in long day care (LDC)**

| Number of hours (days) PD         | Not-for-profit LDC |            | For-profit LDC |            | All LDC    |            |
|-----------------------------------|--------------------|------------|----------------|------------|------------|------------|
|                                   | n                  | %          | n              | %          | N          | %          |
| Nil                               | 4                  | 2.9        | 4              | 4.3        | 8          | 3.4        |
| 1 to 6 hours (1 day)              | 22                 | 16.1       | 26             | 28.3       | 50         | 21.6       |
| 7 to 12 hours (2 days)            | 30                 | 22.1       | 18             | 19.6       | 50         | 21.6       |
| 13 to 18 hours (3 days)           | 26                 | 19.1       | 11             | 12         | 37         | 15.9       |
| 19 to 24 hours (4 days)           | 19                 | 14         | 13             | 14.1       | 32         | 13.8       |
| 25 hours or more (5 or more days) | 35                 | 25.7       | 20             | 22.7       | 55         | 23.7       |
| <b>Total</b>                      | <b>136</b>         | <b>100</b> | <b>92</b>      | <b>100</b> | <b>232</b> | <b>100</b> |

Sub-group analyses were then conducted to compare the data for staff working in for-profit services versus not-for-profit services. Results, summarised in Table 3, indicate that the proportion who received the maximum hours of professional development was higher in not-for-profit services (25.7%) and lower in for-profit (22.7%) services. At the lower end, 19% of staff in

not-for-profit centres attended 6 hours or less (2.9% + 16.1%) of professional development compared to 32.6% (4.3% + 28.3%) of staff in for-profit centres.

Over 3,000 early childhood teachers participating in LSAC provided questionnaire information on their attendance at professional development activities in a 12 month period. Results showed that staff working in LDC centres were considerably less resourced in terms of professional development than their counterparts in pre-schools and schools. The majority of LDC staff had attended between 7 and 18 hours (2 to 3 days) of professional development; whereas for the majority of the full sample the figure was 25 hours or more (5 days). Receipt of professional development also differed by the age group, with teachers of 4 to 5-year-olds being more advantaged than carers/teachers of infants. More staff working with infants in long day care had received only minimum hours (1 to 6) of professional development, and less staff had received the maximum hours (25 or more), than staff working with 4 to 5-year-olds. For both groups of LDC staff, working in not-for-profit services provided more advantages for professional development than working in for-profit services.

## 2.2 LITERATURE REVIEW ON PROFESSIONAL DEVELOPMENT

A research assistant was employed at CSU to extract and review appropriate publications that address professional development in early childhood specifically and in education contexts more generally. A discussion of the key findings of this review highlighting key themes was presented in this review of the literature. This information was used to inform the design of the focus group and case study interviews as well as the overall research analysis.

*“The challenge of professional development is to provide people with the means and the incentive and time to ask why am I doing this and can I do it better.”* (Member of leadership team, as cited in Owen, 2005)

The literature search was initially focused on recent Australian research into experiences of, and attitudes towards, professional development in early childhood education, and its impact upon participants and student learning outcomes.

Several limitations immediately became evident, the most obvious being a scarcity of material relating specifically to early childhood education in Australia. The search was extended to include primary and secondary education sectors, and moved offshore to New Zealand, USA, Europe and even Uganda. Despite a conscious effort to use the most current material, the timeframe of the literature review ranges from 1993 to 2006.

### **What is professional development?**

Vonk (1995, as cited in Baptiste and Sheerer, 1997) defines professional development as “the outcome of an ongoing experiential learning process, in a given context, directed at acquiring coherent whole of knowledge, insights, attitudes, and a repertoire of actions a teacher needs as a basis for his/her everyday practicing of the profession”.

The National Association for the Education of Young Children (NAEYC) position statement “A conceptual framework for early childhood professional development” posits that effective professional development should be an ongoing process, grounded in a sound theoretical/philosophical base, and should respond to participants’ individual backgrounds, experiences and context of their role. Further, there should be clear linkages between theory and practice, providers should possess appropriate knowledge and experience, and the professional development programs should adopt an active, hands-on, interactive approach. Effective professional development should contribute to the self-esteem of participants, providing them with opportunities for application and reflection, and ideally they should be

involved in the planning and design of the programs. These principles are echoed, to varying degrees, throughout the reviewed literature (hereinafter referred to as *the texts*).

Early Childhood Australia (ECA), the peak national association for early childhood, states that it “recognises that one of the most effective ways of ensuring the establishment and maintenance of high quality programs for young children and their families is to provide high quality pre-service training programs as well as ongoing opportunities for personal and professional development for all personnel involved in the early childhood field. In addition, ECA regards professional development as “a continual lifelong process and hence recommends the provision of dynamic initial and ongoing training programs for *all* concerned with young children.” In order to support the professional development of early childhood personnel, ECA has put forward the following principles:

1. *The provision of in-service training should be incorporated into childcare regulations and all relevant awards.*
2. *Professional development and training of early childhood personnel needs to be available at various levels and provide opportunities for personnel to have access to an ongoing career path.*
3. *A coordinated and integrated approach between all training, in-service and higher education providers is essential to ensure the most effective staff development.*
4. *Similarities and differences in professional development and training needs of early childhood personnel must be catered for.*
5. *Recognition of relevant in-service training and professional development needs to be negotiated in order for personnel to gain credit/status towards qualifications through a variety of pathways.*
6. *Training programs need to include a variety of formats: Accredited courses, non-accredited courses and informal sessions.*
7. *Content of training programs should:*
  - *include knowledge, skills and attitudes required by those training to work or working in the range of early childhood programs (refer to policy on Essential Components).*
  - *reflect the needs of qualified and unqualified staff, paid staff and volunteers (including management committees, parents, community groups, gardeners, cooks).*
  - *provide for an expanded knowledge base and skill development for all early childhood personnel for working with children from a non-English speaking background, Aboriginal and Torres Strait Islander children and children with disabilities which includes issues relating to gender and class and other areas of inequity and bias.*
  - *be accessible to remote and isolated groups.*
8. *Training and professional development programs should provide opportunities for:*
  - *collaborative critical analysis.*
  - *learning about current trends and issues.*
  - *enhancing knowledge and understanding of cognitive, emotional, physical, spiritual and moral development of the children.*
  - *expanding awareness and understanding of the physical, socio-economic and cultural environment as these relate to the overall development of children.*
  - *ways of addressing the needs of families with young children in a complex and changing multicultural society.*
  - *establishing support and professional networks.*
  - *enhancing interpersonal relationships between team members, parents, other early childhood programs, the community, management committees, licensing and funding bodies.*

- *personal development.*
- *early childhood personnel to have access to a career path.*

(Early Childhood Australia, 2007)

### **Why is professional development important?**

Policies such as those elucidated above underscore the relationship between effective professional development and the quality of care and education offered to children. This nexus is further supported by principle 7.4 of the Quality Improvement and Accreditation System (QIAS) implemented by the Federal Government. Principle 7.4 calls for management of long day care services to “provide professional development opportunities for all staff.” And further that “staff knowledge and skills should be challenged and extended on a regular basis through a diverse range of professional development” (NCAC p.40).

One dominant feature of the texts is the recurrent theme of the rapidly changing nature of early childhood education. Ongoing professional development is seen by many as essential if children’s services practitioners are to keep abreast of change and provide quality education to their students. As Rinaldi (2004, as cited in Moss, 2004) states:

*Personal and professional development, like education, should not be seen as static or unchangeable qualities, achieved once and for all, but rather as a process, an ongoing path that we follow from birth throughout our lives, now more than ever.*

In his policy briefing on early childhood for UNESCO, Moss (2004) stresses that there is a growing awareness of the need for professional development due to current discourses around changing demands in education, and the concept of lifelong learning. He believes that “the concept of the worker as co-constructing learner and researcher opens up new, complex and exciting possibilities”.

Literature suggests that positive change within organisations is more likely to occur when individuals: “receive ongoing staff development over an extended period of time; are involved in assessing their own learning; have opportunities to apply their new knowledge and skills in work settings; and have a trusted ‘other’ to discuss their developing practice” (Nolan, Raban and Waniganayake, 2005). In arguing for a learner centred and targeted professional development for children’s services practitioners, Raban, Waniganayake, Nolan, Ure, Brown and Deans (2007) devised a theoretically grounded professional development framework based on self-assessment and guided reflection with an experienced mentor.

Change is also occurring in other educational sectors, notably in the area of Information and Communication Technology (ICT). Teachers need to acquire ICT skills, often in isolation, and then learn how to apply and teach these skills in the classroom (Kachelhoffer & Mackey 2003).

Another prominent discourse within the texts concerns the impact of teachers’ professional development upon the learning outcomes of their students. This is an area rich in research opportunities, as one of the roles of student learning outcomes is as a measurement tool of the success – or lack thereof – of professional development programs. In addition, there is a strong suggestion throughout the texts that quality care and education are directly linked to staff qualifications: that is, settings with larger numbers of qualified staff produce higher levels of quality care and student learning outcomes (Sylva, Melhuish, Sammons, Siraj-Blatchford, Taggart, & Elliot, 2004).

It is important to note here that ECA urge *all* staff be provided with professional development opportunities; this view is shared by the NAEYC (2003) when they urge that “all staff – paraprofessionals as well as teachers and administrators – need access to professional

development and to professional time and opportunities for collaboration that enable them to develop, select, implement, and engage in an ongoing critique of curriculum and assessment practices that meet young children’s learning and developmental needs.”

In a comprehensive New Zealand study, Mitchell and Cubey (2003) provide a valuable set of criteria in their table of characteristics of effective professional development linked to enhanced pedagogy and children’s learning in early childhood.

**Table 4**  
***Characteristics of effective professional development linked to enhanced pedagogy and children’s learning in early childhood education settings***

|  |  |
|--|--|
| <p><b>The professional development incorporates participants’ own aspirations, skills, knowledge and understanding into the learning context</b></p> | <p>The professional development takes on board participants’ own aspirations, skills, knowledge, and understanding, and recognises the context for learning. This is a starting point: the programmes introduce new ideas and provide opportunity for participants to question their experiences and views, and not simply validate them.</p>  |
| <p><b>The professional development provides theoretical and content knowledge and information about alternative practices</b></p>                    | <p>Theoretical and content knowledge related to effective pedagogy is provided. This may be generic or content specific, such as generic areas of co-constructing learning, scaffolding, learning dispositions as outcomes of Te Whāriki, and specific areas such as early literacy, mathematical and scientific understanding, creativity. Content knowledge is integrated with pedagogical knowledge. The theoretical and content knowledge expands participants’ knowledge base. Information and knowledge about alternative practices are provided.</p>              |
| <p><b>Participants are involved in investigating pedagogy within their own early childhood settings</b></p>  | <p>The programme involves participants investigating real life examples of pedagogy within their own settings. Investigative methods, such as action research, are useful. Investigation by participants in issues within their own setting (e.g. interactions and behaviour) encourages work on issues that are important to participants and that make a difference to their own pedagogical practice. An external professional development adviser or researcher engages in the investigation.</p>  |
| <p><b>Participants analyse data from their own settings. Revelation of discrepant data is a mechanism to invoke revised understanding</b></p>        | <p>A key process in contributing to revision of assumptions and understanding is “creating surprise through exposure to discrepant data” from the participant’s own early childhood service. Understandable data that reveals “pedagogy in action” and others’ views is helpful in these investigations. Useful approaches to data collection include collection and analysis of video and audio-tape recordings, observations, surveys of others’ views, and assessments of learning. The professional development programme supports data collection and analysis.</p> |

|  |  |
|--|--|
| <p><b>Professional development supports educational practice that is inclusive of diverse children, families and whānau</b></p>        | <p>Critical reflection involves teachers/educators in investigating and challenging their assumptions. This in turn encourages insights and shifts in thinking. This is particularly valuable in challenging deficit views associated with ethnicity, socio-economic status, child's age, parental knowledge, and gender. Some conditions that encourage critical reflection: 1) collaboration with others and being exposed to their views. These views include views of colleagues, professional development advisers, parents, and children; 2) using deeper or different theoretical understanding; 3) teachers/educators thinking about their own thinking, e.g. through use of journals and diaries.</p> |
| <p><b>The professional development helps participants to change educational practice, beliefs, understanding, and/or attitudes</b></p> | <p>Professional development is linked to tangible changes in pedagogical interactions and this in turn is associated with children's learning in early childhood settings. The professional development helps participants to change educational practice, beliefs, understanding, and/or attitudes. Participants are encouraged to investigate ideas and practices that stand in the way of an equitable society. Participants may become aware of ways in which they disempower or limit groups or individuals.</p>  |
| <p><b>The professional development helps participants to gain awareness of their own thinking, actions, and influence</b></p>          | <p>The professional development assists participants to gain greater awareness and insight into themselves, and a stronger appreciation of the power of their role as educators.</p>   |

Source: Mitchell, L. and Cubey, P. (2003) *Characteristics of effective professional development linked to enhanced pedagogy and children's learning in early childhood settings: Best evidence synthesis*. Wellington: Ministry of Education.

### Key Themes

Several distinct trends and themes emerged from the literature review:

- The success of professional development: research studies which illustrate the positive impact of professional development upon care and education.
- Context and relevance: the necessity of recognising the context in which the professional development occurs, and its relevance to participants.
- Trained and untrained staff: the link between staff knowledge and quality care and education, and the need for all staff to undertake professional development.

- Online/virtual professional development, and Information and Communication Technology: the trend towards computer-based professional development, and the necessity for teachers to be adept in the application and instruction of ITC.
- Mentoring: due to the increasing complexity of teaching, mentoring is being incorporated into professional development, both formally and informally, resulting in ongoing benefits to both mentors and mentees.
- Networking, collaboration and collegiality: the opportunity to formulate and share knowledge with others, both during and after professional development programs.
- The construction of knowledge through action research, the project approach, and reflective practice: three approaches that have been effectively applied to professional development programs.
- Leadership: the qualities needed for effective leadership in all sectors of education, and the urgent need for professional development in the area of leadership in early childhood education.

### **The success of professional development**

The most significant trend amongst the texts is that of the successful, positive impact of professional development upon participants, their students and families, colleagues, and the wider educational and social community. Inclusion of all results is beyond the scope of this report, however some notable examples are included below.

1. Earnest (2004) *Longitudinal action research study of early childhood institute in Uganda from viewpoint of author as Principal.*

At the school level, there was increased teacher interaction, cohesiveness, collaboration and self-efficacy. At the classroom teacher level, there was development of student-centred classrooms, cooperative learning, learning centres, team teaching, student displays, and increased use of local resources. At the student level, there was an overall improvement in literacy and numeracy, a sevenfold increase in enrolments, and students appeared happy, responsive, energetic and possessing high levels of self-esteem.

2. Gaffney, M. (2003). *An evaluation of Ministry of Education Funded Early Childhood Education Professional development programmes: Report to the Ministry of Education.*

This study on the impact of professional development on early childhood centres indicated that for the majority of services, professional development had been successful in helping them implement and sustain changes in practice. A number of factors were identified as contributing to the success of professional development. These factors lay in three different areas: the providers of professional development (effective facilitation; good relationships with participants; and a secure learning environment); the focus of professional development (tailored to the centre's needs and goals, whilst also bringing an outsiders perspective); and at the centre level (the enthusiasm of staff and the supportive leadership).

3. Kibble and Ceccanti (2002) *Action learning program – Transforming relationships with parents.*

Enthusiasm of participants has resulted in revitalised teaching and approach to parents, resulting in positive relationships. As a result of completing the program, some participants have been invited to attend local government forums; others have been selected to participate in a research project based in New Zealand. Participants claim they now feel supported, challenged and encouraged. Over 50% of participants have introduced changes to their teaching practice based on the professional development program.

4. Lewis and Milton (2005) *Attitudes of teachers towards gifted children in a Montessori setting*.

Although teachers' positive attitudes towards gifted students did not change during the course of the program, their classroom practice became more positive after professional development, resulting in increased learning outcomes for the students.

5. McRae, Ainsworth, Groves, Rowland & Zbar (2002) *National mapping of professional development undertaken by primary and secondary teachers in order to inform DETYA about trends and developments*.

Almost 60% of teachers surveyed indicated that professional development had a "very high priority" in their working lives. There was a fairly strong belief that their professional practice had changed as a result of professional development.

6. Noe (2005) *Comparison of mainstream professional development environments and content to The Literacy Caravan, a unique mobile facility*

In a direct comparison of the effect of the physical environment upon participants in professional development programs, two groups attended identical programs in quite different environments. Group 1, who attended the program in a community centre conference room, had lower attendance rates and more late arrivals. Group 2, who attended the same program in The Literacy Caravan, a purpose-built mobile teaching facility, had higher attendance rates and were punctual. Both groups showed an appreciation of Latino resources, and provided positive feedback about the program. However, Group 2 made more comments about the setting, noting that it served as a model for their own practice.

7. Yates (2004) *Teacher renewal in use of ICT in teaching of mathematics*

Results display a significant positive change in attitudes towards, confidence in, and use of ICT in teaching. The author asserts that appropriate professional development can provide the impetus and imperative for teacher renewal and change.

### **Context and relevance**

There is a call for providers of professional development to take into account – and include in the planning process – the participants, their backgrounds, experiences and context of their role (NAEYC, 1993; Mitchell et al., 2003). Involvement in the planning of professional development produces ownership of the learning, which in turn results in participants who are more likely to make positive changes to their teaching practice due to their feelings of empowerment. As Fleet & Patterson (2001) state, networking and concentric circles of opportunity to work together are more effective than unrelated in-service sessions; staff ownership of ideas are more powerful than the transmission of knowledge.

Effective educators recognise the diversity of their students, so it follows that providers of professional development must recognise the diversity of those who participate in their programs. According to Phelps, Graham & Kerr (2004), the most effective professional development is that which allows diverse participants to learn at a level and stage of readiness appropriate for them. In a study about mentoring leadership skills in experienced early childhood teachers, Couse & Russo (2006) recommend that field-based professional development, such as the community projects undertaken by the study's participants, is needed in order to develop leadership skills in early childhood. Early Childhood Australia (2007) support this in their recognition of a need for a variety of formats of professional development, including formal and informal programs.

Owen (2005) explores the theory of situativity, that is, learning occurring in a particular social environment. In a study of teachers' perceptions of their professional growth in schools that are recognised as leaders in professional development and student learning outcomes, it was found that a trend exists towards schools as learning communities, or communities of practice. All schools in the study had to be creative in finding time for professional development, and some strategies included restructuring their teaching day, and forming learning teams. In an evaluation of early childhood professional development programmes in New Zealand, Gaffney (2003) identified: looking at service needs; keeping the service focused; and supporting service goals; as three of the five most important provider based contributors to successful professional development. Both these studies underscore the importance of understanding the teaching context and the goals of the service as well as the goals and learning styles of individual participants.

Noe (2004) describes a highly successful professional development program in a unique environment in a study of The Literacy Caravan, a purpose-built mobile learning centre which travels throughout Connecticut providing valuable on-site sessions to early childhood workers. There was overwhelming acceptance of The Literacy Caravan as a valuable learning environment; participants experienced feelings of excitement and relaxation when on board, and they felt valued as they realised the setting had been specifically created for them. The trainer/presenter also felt more comfortable due to on-board resources and the flexible nature of teaching. Noe (2004) suggests that, because adults construct knowledge through interaction with their environments, an environment where they feel valued and comfortable will naturally result in more valuable learning.

### **Rural and remote areas**

This aspect of professional development deserves attention, due to the lack of awareness and possible misconceptions associated with education in remote areas of Australia. In some cases, particularly in rural and remote areas, one-size-fits-all professional development is neither appropriate nor effective (McKenzie, 2004; Robert, 2000; McCormack et al., 2004).

Robert (2000) questions the appropriateness and value of dominant models of professional development for children's services practitioners in rural areas, and raises this essential question: does such professional development position rural practitioners as needy, disadvantaged, deficit and powerless? Robert believes that rural practitioners tend to identify themselves, and are treated by others, as "victims of isolation". Their capacity to control their own professional development is constrained due to distance, time, cost, and lack of casual staff. Despite positive responses from participants in their professional development programs, Robert found that the programs had negligible impact on their teaching practice.

Equally disturbing is the revelation that participants displayed no reduction in feelings of isolation or perceived professional development barriers after completion of the programs. The implications are that more research is needed into alternative models of professional development that are context-sensitive and address issues of professional identity and rurality.

In a study of early career primary teachers in public schools located in Central Queensland, Motley, Rossi & King (2005) state that teachers in remote/rural areas are expected to implement contemporary educational trends and teach within specialist areas, yet professional development is not possible due to the constraints mentioned above, ie, time, distance and cost. Added to these constraints is the unavailability of replacement teachers.

The Human Rights and Equal Opportunity Commission (HREOC, 2007) supports these findings by observing that lack of professional development is an important concern to primary school teachers in rural/remote areas, as it inhibits career advancement and promotional opportunities, pedagogical practice and requirements for specialist knowledge.

The texts provide many recommendations regarding professional development in rural/remote areas, but few answers. One possible model in the early childhood sector is that of mobile programs such as that provided by The Literacy Caravan (Noe, 2005). Due to its mobile nature and small group sizes, teacher release is not an issue: the program travels to the participants, and staff are able to “cover” for each other during training.

#### **Trained and untrained staff**

Research is needed in the area of professional development of untrained and paraprofessional, early childhood staff in Australia as there is a disappointing lack of material available. One question raised in the New Zealand Ministry of Education study (2001) was whether - and, if so, why - home-based care services and casual education and care centres have more difficulty in engaging effectively with the current professional development programs.

As mentioned earlier, professional organisations such as ECA strongly support professional development for *all* early childhood staff. The benefits of such training are amplified in the study by Henderson, Meier & Perry (2004) where research was undertaken by trained and untrained early childhood staff, with children and their families participating as co-researchers. The result was that consequent knowledge and ideas were shared and owned by all participants; and staff were able to validate and affirm their professional development and improve their practice.

As Sylva (2004) explains, settings with staff possessing higher qualifications, especially those settings with a good proportion of trained teachers, demonstrate higher quality care and education, and students who make more progress. This is a convincing argument for untrained staff to gain access to professional development, a view which is supported by Brownlee, Berthelsen, Irving, Boulton-Lewis & McCrindle (2000), who stress that informed knowledge is essential for effective practice. Their study of the constructivist approach to teacher education found that naïve beliefs must be integrated with informed knowledge gained from training and ongoing professional development.

#### **Online/Virtual Professional Development, Information and Communication Technology**

There is a noticeable trend towards online, computer-based, “virtual” professional development. This is a logical progression due to technology being inherent in our home, work, school and social environments. Teachers are faced with the added pressure that their students often possess more technological skills than they do.

In a study into online professional development commissioned by the New Zealand Ministry of Education, Kachelhoffer & Mackey (2003) identify a need for professional development in primary and secondary education sectors, with a focus on Information and Communication Technology (ICT) action research in the classroom, which would enable teachers to meet the National ICT Strategy criteria. Results of the study show that teachers became familiar with literature in their chosen research area, and gained more knowledge regarding global ICT issues in education. The study indicates that online professional development can successfully support and guide teachers as action researchers.

Generally, the texts revealed successful outcomes from this form of professional development amongst primary and secondary teachers. For example, Yates (2004) reported a significant positive change in attitudes, confidence, and use of ICT among teachers after they completed a five-month program designed to foster renewal in the use of ICT in maths teaching. Maths was specifically chosen because of a perceived lack of teachers' ICT confidence and knowledge. In a study by Phelps et al. (2004) participants used self-paced print, CD and website resources plus online communication to great effect, largely because they were able to work at their own individual pace and level. Motley et al. (2005) found that teachers in remote areas are willing to seek new ways to access professional development opportunities, including an online or "virtual" professional development centre. The onus for creating and maintaining such centres must be on educational and government bureaucracies. There is agreement amongst the texts that ICT professional development is a major priority due to rapid technological change currently occurring in Australia, and indeed the world.

A study by Hoban & Herrington (2004) demonstrates what happens when adequate infrastructure isn't available to support teachers. A website specifically created for small-group, collaborative, online action learning was hardly used by participants. This was largely due to practical considerations of time, workload and other priorities; participants cited barriers such as working in isolation, access to computers, cessation of regular team meetings, and other school priorities. The results of this study are valuable, because they explain why the program didn't work and what is needed to make it work. Websites such as this can be effective if time and training are provided to its users, because it acts as a repository of teaching strategies and gives teachers a real purpose for reflecting, testing and sharing their strategies and experience. Schools need to provide learning opportunities for their staff as well as their students, and this highlights the importance of effective management and leadership in education.

### **Mentoring**

One form of professional development is mentoring, either incorporated into formal programs, or applied in work settings on a more informal basis. Mentoring appears to be successful, especially for early childhood teachers in the "survival stage" (first year or two) of their career (Baptiste and Sheerer, 1997).

In the study by Yates (2004), professional development in the use of ICT in mathematics teaching resulted in valuable collegiality and cooperation amongst all participants, including teachers and project coordinators. Similarly, after completing a 15-week mentoring professional development course (Cummins, 2004), both mentors and mentees achieved very positive results. In a study of first-year primary and secondary teachers by McCormack, Gore & Thomas (2004), participants chose a mentor/supervisor, and indicated that mentors must be positive and knowledgeable for the relationship to be successful. The study also found that mentoring was more successful among primary sector participants.

Mentoring is not always successful, as was evident in an observational case study by McCloughan (2004) to identify the experiences, perceptions and attitudes to mentoring in one NSW public primary school. Results indicate that before mentoring can become part of a school's culture, the stakeholders – leaders, mentors, mentees and colleagues - must develop a “shared, systemic understanding of the term”. The seven teachers in McCloughan's (2004) research had different prior experiences of mentoring, which shaped their beliefs about, and attitudes towards mentoring. In light of these differences, it would be problematic to find a shared understanding of the concept of mentoring, and this would impact upon any attempt to establish a culture of mentoring.

A small study by Nolan, Raban and Waniganayake (2005) however, showed that a guided self reflection process, supported by more experienced mentors, could be highly successful in challenging and extending the pedagogical practices of early childhood staff, by facilitating ongoing reflection.

### **Networking, collaboration and collegiality**

Educators in all sectors are aware of the beneficial effects of networking and collegiality, and in early childhood especially, there is a strong emphasis on collaborative practice. It is pleasing to note, therefore, that one of the trends arising from the texts is the increased opportunity for participants to form and extend upon networks, and to work collaboratively with colleagues, both during professional development and also in their respective settings.

This trend is reflected in studies by McKenzie (2004), where collegiality was found to be an essential aspect of professional development for study participants; Kibble & Ceccanti (2002), where participants contributed to a newsletter which was circulated to colleagues who were unable to attend the program; and Yates (2004), where valuable collegiality and cooperation arose amongst all pairs of teachers, project coordinators and mentors involved, and the teachers' work was legitimised through conference presentations, written reports and a published CD.

Owen (2005) notes that in primary school participants, the focus was on collaborative, informal learning, while amongst secondary school participants, the strongest collegiality occurred in faculties and learning teams. This is supported by McCormack et al. (2004) who found that support from colleagues was more valued by secondary school teachers. The participants in this study, first-year practitioners, urged school leaders to encourage a collaborative school culture, and stated that they actively sought to establish a network of peers, ie other first-year teachers. Collegial networks, both formal and informal, were highly regarded, as the participants recognised that learning occurs through the sharing of reflection and experiences.

### **The construction of knowledge through action research, the project approach, and reflective practice**

There is strong evidence throughout the texts that learning strategies such as action research, the project approach, and reflective practice are effective in the professional development process. Brownlee et al. (2000) believe that professional development should encourage learners to actively reflect upon and construct new beliefs based on personal and professional knowledge. Rinaldi (2004, as cited in Moss, 2004) eloquently states that “personal and professional development and education are something we construct ourselves in relation with others, based on values that are chosen, shared, and constructed together. It means living in a permanent state of research.” It is suggested by Catapano (2005) that, because the early childhood field experiences high staff turnover, professional development must be motivational and meaningful. One strategy is to introduce the project approach as a catalyst for teacher development.

McCormack et al. (2004) note a shift from the in-service, expert-tuition, deficit model of professional development to that of teachers as active learners who shape their own professional growth through reflective participation in both programs and practices. The benefits of action learning include ownership by participants in a collaborative environment, provision of experiential learning, creative problem-solving, acquisition of relevant knowledge, and co-learner group support (Hoban & Herrington, 2004). In a study by Yates (2004) there was a significant positive change in attitudes amongst participants in the use of ICT; teachers were provided with opportunities to explore, experiment, develop and practise new skills, resulting in renewal and change in terms of their classroom practice.

During pre-service training, students are instructed in the area of reflective practice, and strongly urged to adopt the practice once they begin teaching. As is often the case, however, reality can be different. For example, in a study by Phelps et al. (2004) some participants found reflective practice to be challenging, while others found it liberating. McKenzie (2004) insists that participants need adequate time between completing professional development programs, and implementation of the program, for discussion, reflection and planning.

### **Leadership**

Due to the current shortage of qualified leaders in the early childhood field, it was not surprising to see a repeated call for relevant professional development programs throughout the texts. What also became evident were well-considered opinions, by participants and authors, about the qualities needed for effective leadership in early childhood, primary and secondary education sectors.

In her insightful study into the perceived research needs of Australian early childhood professionals, Flear (2002) found that advocacy leadership is urgently needed to promote the status of the early childhood profession in Australia. Respondents noted the invisibility of early childhood professionals in decision-making positions in tertiary education and government sectors, which resulted in limited opportunities for involvement in policy development. Conversely, early childhood leadership scored at the bottom end of the scale of perceived research needs of respondents. Perhaps this is an indication of too many priorities in their work environments.

According to Fleet & Patterson (2001), early childhood directors play a significant role in the professional development of their staff: they should value learners' perceptions and knowledge, build on the personal motivation and professional affirmation of participants, and focus on relevant and substantive content which will engage learners. Couse & Russo (2006) see an obvious need for more qualified leaders to match the growth of the early childhood sector, and further believe that field-based professional development is needed to develop leadership and advocacy skills. Nupponen (2006) supports this view, stating that adequate training is essential as most leaders are forced to learn "on-the-job", and professional development should be tailored to meet various stages of the teacher's development.

In her fascinating study of an early childhood setting in Uganda, Earnest (2004) reflects upon her success at the school principal level over four years. Achievements and perceived essential qualities of leadership included: clear vision, leading by personal example, development of school induction and appraisal policy for new teachers, policy and procedures manual, school development plan, and the gaining of invaluable experience about grief, trauma, human rights violations and resilience. As if she weren't busy enough, she also provided the impetus for her staff to participate in cyclic action research, develop a framework for school effectiveness and improvement, on-the-job training, workshops, peer-coaching, mentoring, leader support, and regular feedback to all staff. All of this was achieved in the context of Uganda's turbulent and

violent recent history, current HIV-AIDS crisis and poverty, and a rapidly expanding education system.

In the primary and secondary sectors, participants in the study by McKenzie (2004) saw one role of school principal as being the facilitator of effective communication about professional development to the rest of the school staff; it was suggested this could occur via classroom visits and displays, not just through brief reports in staff meetings. The participants in a study by Owen (2005) state that it is essential that the school principal/leader is supportive of individual professional development in terms of funding and teaching release, and urge leaders to remain focused and undertake effective planning.

McKenzie (2004) makes the important point that principals should pay particular attention to the pre-professional development attitude/s of teachers, as some staff may resent or resist being forced to attend professional development programs. McCormack et al. (2004) suggest that it is the responsibility of school principals to arrange for teaching release for first-year teachers to undertake professional development, eg, 80% teaching load and 20% professional development; principals should also allocate less difficult classes to new staff. Given the realities of most school settings, particularly in the current public education sector, it is suggested that principals would have to advocate quite strongly to higher educational powers to implement these suggestions.

### **Conclusion**

Professional development is encouraged and supported by early childhood professional bodies nationally and internationally, and various government bureaucracies. However, it is evident that more planning and infrastructure is needed, particularly in rural and remote areas of Australia, and in the use of ICT. Ongoing professional development is essential due to the rapidly changing face of early childhood care and education, and the increased pressure to provide quality care and education in all sectors. Professional development opportunities should be made available to all staff, as research has convincingly proved that higher levels of knowledge possessed by staff results in higher levels of quality care and student learning outcomes.

The research shows that, generally speaking, teachers do change their practice as a result of undertaking professional development programs, which results in an increased level in the quality of care and education provided to their students. Professional development takes many forms, such as mentoring, action research, reflective practice, in-service, field-based, online/virtual programs, and the undertaking of formal qualifications. In addition, professional development may be designed in different ways. It may take the form of formal study programs in which individual staff engage in order to obtain qualifications; or as Gaffney (2003) identifies, it might take the form of individual whole centre development; clustered whole centre development; networking; workshops and seminars; and general professional and advisory support. Whatever their format, professional development programs should be context-specific and relevant to those who access it, with opportunities for participants to be involved in the planning and conduct of the programs where possible. Networking and concentric circles of opportunity to work together are more effective than unrelated in-service sessions; staff ownership of ideas is more powerful than the transmission of knowledge (Fleet & Patterson, 2001).

Results of research into teachers working in rural and remote areas of Australia indicate that many barriers exist which prevent them from participating in professional development programs, including time, cost and the lack of replacement teachers. The important question was raised as to whether existing dominant models of professional development position rural practitioners as needy, disadvantaged, deficit and powerless.

Because technology has become so inherent in home, social and work environments, teachers have to become skilled and confident in the application and instruction of Information and Communication Technology (ICT). Computer-based professional development programs are becoming more frequent, but there is a certain irony in that participants need to possess ICT skills *before* they can successfully use such programs.

Mentoring has proved to be a successful form of professional development, resulting in positive outcomes for those involved, especially beginning teachers. For this strategy to be successful, however, mentors must possess relevant knowledge and positive attitudes, and mentees must be receptive and share a similar understanding of the concept of mentoring to that held by their mentor. There is a strong emphasis in early childhood education on collaborative practice, and the texts reveal that participants found the opportunities for sharing of experiences and joint construction of knowledge extremely valuable, both during and after professional development activities. Action research, the project approach and reflective practice are evident in the texts as successful strategies in professional development. There is a move towards a more context-specific, relevant and empowering model of professional development, where participants are involved in the planning of programs and take control or ownership of their own learning.

Whilst the texts highlight the need for strong leadership in the early childhood sector, they also recognise that opportunities for professional development in this area are limited. Many participants in the research express awareness of the qualities needed in good leaders; for example, someone who is aware of their staff's individual professional development needs, who then goes on to facilitate attendance, and endorses the learning by arranging for the participant to share their experiences with colleagues.

In conclusion, most of the texts revealed positive outcomes in terms of attitudes towards, and experiences of, those involved in professional development. Indications are that most participants change their teaching practice as a result of professional development, and this of course has a positive effect on student learning outcomes and the quality of care and education. The literature search has shown that educational practitioners, their students and families, colleagues, and the wider community, all stand to benefit from ongoing, appropriate, meaningful and well-supported professional development programs.

### 2.3 FINDINGS FROM STATE/TERRITORY PSC NEEDS ANALYSIS REPORTS

The Inclusion and Professional Support Program (IPSP) is a national initiative originally funded by the former Department of Families, Community Services and Indigenous Affairs (FACCSIA). With the reorganisation of departments, the PSCs are now funded by the Department of Education, Employment and Workplace Relations (DEEWR). It supports childcare services so they can provide high-quality childcare. All Australian Government approved childcare services are eligible for this support regardless of care type or location. This program is designed to deliver a coordinated approach to supporting children's services. It features a two-tiered brokerage approach, with the introduction of state/territory based Professional Support Co-ordinators (PSCs) and Professional Support Service Providers (PSSPs). As part of this role, each of the state and territory Professional Support Co-ordination Units (PSCs) are required to undertake an annual state/territory-wide professional support needs analysis.

Subsequently, each PSC is required to develop a Professional Support Service Delivery Implementation Plan that reflects both the outcomes of their state/territory needs analysis and the professional support national priorities determined by FACSIA on an annual basis.

The following discussion summarises the major findings from the various state and territory needs analysis measures undertaken during 2006-2007. In this report the discussion relates principally to data collected from centre based long day care centres and focuses on information that informs the research questions that are central to this research project. In particular the discussion focuses on findings relating to the perceived values of professional development and support and the range of measures identified by the PSC Alliance agencies that were found to be effective in supporting childcare centre practitioners across Australia.

### **The value of professional development and support**

The state and territory needs analysis reports did not directly explore children's services practitioners' perceptions of the value of professional development and support provided through the surveys and focus groups conducted by the PSCs. However, the findings of these needs analysis studies do provide indirect commentary that reflects current perceptions of childcare practitioners about the value of professional development. The current workforce skills shortage and difficulties in recruiting and retaining qualified staff somewhat frame the landscape of childcare services nationally. This shortage was considered a major factor impacting on the provision of high quality care and hence has significant implications for professional support responses. As the Victorian report notes, issues such as "insufficient suitably qualified staff, staff who have qualifications in childcare but are not highly skilled and high worker turnover were all identified as contributing to an overall skills shortage in the sector" (CCCVIC, 2006, p.7). Similarly, the Northern Territory report cited issues with the recruitment of qualified staff as one of the most significant challenges to providing high quality childcare services in the Territory. "Lack of qualified staff, high staff turnover ...and transient staff – low wages and recognition are major factors" (PSCNT, 2007, p.15.) In addition the Queensland report highlights the shortage of qualified relief staff to ensure quality standards of childcare delivery can be maintained during regular staff absences.

Most PSCs reported similar concerns about the systemic structural constraints that underpin the quality of childcare programs across Australia. The needs analysis reports highlighted the need for ongoing professional development to cater for this constantly changing workforce. In Western Australia, one of the consequences of high staff turnover meant that "the impact of training was compromised" (PSCWA, 2007, p.15) as opportunities for follow up were limited by staff moving on. The current expansion of the sector as demonstrated by the growth rate of childcare centres in Adelaide further increases the demand for professional development and support: "There have been 25 new centres opening in Adelaide per year so there must be a lot of staff including directors who haven't been through the process or had any QIAS training" (PSCSA, 2007, p. 7). These two factors may also help explain the frequency of requests for training in everyday concerns such as behaviour guidance, working with families and program development.

Related to this pattern were concerns about the experience and skill level of staff employed in leadership positions in children's services. This concern highlighted the need for further support and development in business management and leadership. Most PSCs referred to this as a pressing need requiring urgent attention. Key themes evident in the data include; "the need for building the management and leadership capacity of services, support in nurturing a sense of confidence and professionalism, support in responding to Quality Assurance requirements and opportunities for exploring new theories and practice frameworks" (PSCVIC, 2006, p.). The types of training that managers requested indicated a need for support for both new and

experienced directors/managers; skills in operating a small business and provision of industrial relations advice were highlighted (PSC SA, 2007). A significant proportion of managers identified the need for “urgent skills or information” to carry out their job (PSC TAS, 2006). Issues relating to team building and communication were also common across the needs analysis reports, highlighting the sectors need for specialist professional development that moves beyond the traditional areas of education and care to those building skills in business planning, organisational change and mentoring.

In relation to the professional development needs of staff working directly with children, four major themes emerged. These were:

- Guiding children’s behaviour.
- Programming and curriculum development.
- Working with families and encouraging their participation.
- Support for mandatory requirements including Quality Assurance.

In each state and territory, the PSCs found that guiding children’s behaviour was a high priority for staff professional development. Within this, staff indicated a need for professional support to assist them in the supervision of children, managing challenging behaviours and working with diverse family expectations. Programming and Curriculum also featured strongly. In particular the need for professional support for staff to interpret and work effectively with current and emerging theories on how young children learn and develop. This is an area that has experienced significant changes over the last decade along with increased accountability through both national quality assurance systems and some state/territory based regulatory requirements. Accordingly, the need for on-going professional support to keep the childcare workforce up to date with latest child development theories and practice frameworks emerged as a key theme across the nation.

Also significant in the findings of the needs analysis reports was the need for staff to be more confident and skilled in working with a range of families and expectations. Themes relating to complex social pressures on families, working effectively with families to include children with additional needs and responding to the expectations and demands of parents as consumers were all raised as areas where staff felt they needed professional support. An increasingly diverse population along with significant structural changes to family life and childcare provision have perhaps contributed to this being highlighted as an area of particular need for childcare practitioners at this time.

While the mandatory requirements under which children’s services are licensed varied significantly across the states/territories, it was clear that staff capacity to meet these mandatory requirements are a significant component of the professional development of children’s services practitioners across Australia. This participation included regular updates in First Aid and Cardio-Pulmonary Resuscitation, Food Safety, Fire and Emergency Evacuation and Occupational Health and Safety. Participation in training to better understand the requirements of both regulations and quality assurance processes also featured strongly as a priority for childcare centre staff. When taken together, the results of these needs analysis studies suggest that the requests for sessions on mandatory requirements tend to dominate the professional development needs of children’s services practitioners across Australia.

### **Range of measures that are effective in supporting childcare centres**

The state and territory needs analysis reports also revealed that a diverse range of professional development and support strategies were being implemented across the country. There is evidence that considerable effort is made by the PSC Alliance agencies to address the complexities of delivering professional support to the childcare sector. Strategies adopted by them range from conferences, practitioner enquiry groups, seminars, training calendars and lending libraries to telephone support, the production of newsletters, fact sheets and on-line training packages. Of all of the strategies mentioned, most staff indicated a preference for small group, face-to-face, interactive sessions to address specific professional development needs. These might include workshop or demonstrations held on-site at a service. While there was recognition that different content could be delivered through different strategies, there was a strong preference for customised training that addressed local issues and targeted the specific needs of a particular service. The high cost of travel along with difficulties in finding suitable relief staff to enable staff to participate in off-site professional development may contribute to this preference.

Barriers that inhibit practitioner participation in professional development also featured throughout the needs analysis reports. Training offered outside of normal working hours was identified as being problematic. "Work conditions and wages are low ...training out of hours is inconvenient" (PSC NT, 2007, p.10) but equally services experienced difficulties in accessing relief staff and covering the costs of staff who were attending training or networking meetings during work hours. Issues of accessing training presented considerable challenges to practitioners in rural and remote locations. In particular, the high cost of travel to access appropriate training was often a major barrier for small centres with limited budgets. Participants from remote areas also indicated a preference for trainers visiting their centres (PSCNT, 2007, p.6) and greater use of web-based and on-line training. The response to training using information technology varied across the country. Practitioners in some locations were not enthusiastic about online learning (PSC Tas, 2006), however others suggested the usefulness of access to a range of resources and training possibilities that web-based professional support could provide. Again it was practitioners in rural and remote areas who had to travel significant distances to attend face-to-face training sessions who most often suggested on-line learning. In addition these people suggested that enhanced access to library and resource catalogues might be possible through web-based systems. Concerns about the limited availability and access to computers in services for staff to use for professional development purposes was often cited as one reason that an over-reliance on computer based professional development may be limiting.

Professional isolation was another common theme noted across the needs analysis reports. Practitioners in the Australian Capital Territory noted a desire to have greater access to networks and presenters beyond their immediate location while Tasmanian practitioners were keen to develop the capacity of local staff to share experiences and knowledge within their communities. Networking and interest groups were also often mentioned as useful strategies to overcome professional isolation. There was some indication that staff want training that targets their level of experience and knowledge base - that is "tailored to different levels of experience" (PSC Qld, 2007) and in NSW there were "...some concerns expressed that relevant professional support for staff with considerable experience was currently limited" (PSC NSW, 2007). Printed resource material such as professional journals, newsletter and fact sheets were also cited as useful professional support tools along with the use of mobile libraries and resource units.

In summary, the state and territory needs analysis undertaken by the PSCs indicted a clear need for on-going and targeted professional development of children's services practitioners to support both the mandated requirements of the children's services workforce and also to support the changing and increasingly demanding and accountable nature of the work of children's services practitioners. The reports highlight the complexity of children's services practitioners' professional development needs and suggest that these needs are best addressed through professional supports that are customised and targeted to the specific needs of services. These reports also affirmed that significant barriers exist that prevent the full participation of staff in regular professional development. These barriers include the cost of professional development sessions, accessibility of training sessions due to travel and time constraints and the difficulties of motivating staff to attend professional development outside of work hours. The needs analysis reports indicate that deeper analysis of the conditions and constraints that childcare practitioners experience may help to better understand how professional development and support might further contribute to high quality outcomes for children and families participating in childcare.

## CHAPTER 3

### APPROACH TO THE STUDY

This research is a mixed-modal study that relied on three methods of data collection: a national online survey questionnaire; focus groups held in each state/territory and individual interviews conducted with a variety of childcare practitioners associated with sixteen childcare centres, which were considered as case studies. These processes yielded a rich database consisting of a mix of quantitative and qualitative data. In analysing the data, computerised software packages of SPSS and NVivo were used to collate and assess quantitative and qualitative data respectively. In this chapter, we present information pertaining to the research design including the methods and instruments used to collect data, sample of participants and response rates derived at the end of the data collection period as well as the processes and packages deployed in data collation and analysis. We conclude with an overview of potential limitations of this research.

#### 3.1 RESEARCH METHODS AND INSTRUMENTS

The research was undertaken in three phases, beginning with a review of the broader national context, then moving to a survey of practitioner perceptions and then drilling down deeper with an exploration of issues in professional development through focus groups and case studies of childcare centres located in each state/territory in Australia.

##### **Phase 1: National context**

The current context of professional development and support within the early childhood field was explored broadly through an analysis of existing literature and quantitative data sources. This analysis is presented in Chapter 2 of this report and was used initially to strengthen and guide the design and direction of the next two phases.

##### **Phase 2: Practitioner perceptions**

In this phase, the primary purpose was to capture current contexts of professional development and support as perceived by Australian directors/managers of childcare centres. Data was collected for this purpose through a dedicated online survey questionnaire housed at [ecpd.websurvey.net.au/](http://ecpd.websurvey.net.au/). Access to this website was facilitated through a letter of invitation mailed out by the PSC Alliance agency in each state/territory, to all childcare centres registered for receipt of Australian Government's Child Care Benefit funding.

##### **Phase 3: Focus groups and case studies**

During this phase, in order to explore the experiences of PD&S in more depth, members of the Research Team travelled to each state/territory to conduct focus groups with childcare centre directors/managers and visit a selected sample of childcare centres who were committed to professional development and support, to conduct individual interviews with centre directors/managers as well as other staff, parents and community representatives associated with these centres. It is important to note that the case study visits occurred at two different time-periods, based on funding availability for the project as follows: round one visits were undertaken during July-August 2007 and round two visits took place during January-February 2008.

Specific details about each of the research strategies that were deployed in this study are provided next.

### **The online survey**

An online survey was selected as an efficient means of reaching a large number of people in the target population of childcare centre directors/managers. The questions were designed for two purposes:

- To provide information on the participants and determine the representativeness of the information provided;
- To address key aims of the project: how directors/managers view the value of professional support, the relationship between professional development and support and quality outcomes, and the range of professional development measures that are effective in supporting childcare centres to implement improvements/changes to early childhood policy and practice.

Potential participants for the study consisted of directors/managers of long day childcare centres in receipt of funding under the Australian Government Child Care Benefit scheme (n= 5047). Each of these centres were informed about the study and invited to participate in the on-line survey by the PSC Alliance agency in each state/territory, using mailed and emailed forms of communication. Alerts to directors/centre managers were also circulated via e-lists, including the ECA newsletter. The website was open for an extended period, May 8<sup>th</sup> to July 13<sup>th</sup> to enhance the rate of participation by childcare centres throughout Australia. Potential participants were asked to log-on to a secure website, where they could read about the purpose of the study, eligibility of participants, and the types of information they were asked to provide. The full set of questions used in the online survey is attached as Appendix 1 as provided for participants as a downloadable pdf document.

Consisting of 26 questions, the online survey questionnaire comprised five sections:

- Questions 1 through 9 asked for basic information about the Centre Context, including location, organisational/management structure, number of staff, licensed capacity for different ages of children, and usage, in total and for children with diverse needs.
- Questions 10 through 13 asked the director/manager to provide information on his/her role, qualifications, experience, and current study.
- Questions 14 through 20 asked for information about the director/managers' experience or and views about professional development. A combination of quantitative (rated scales) and qualitative (text boxes) formats was used to collect as full a picture as possible.
- Questions 21 through 23 asked about the policies and practices of the centre that facilitated professional development. The focus here was on arrangements for budgeting, funding, availability, and information sharing.
- Questions 24 through 26 asked directors/managers to identify the types of professional development that the director/manager and centre staff had participated in the period January 2006 to March 2007.

Although the bulk of the online survey consisted of items requiring one response (see examples in Appendix 1, Questions 1a, 10, 19) there was ample opportunity for participants to record comments about their views or the centre, or to expand on their answers. These responses were taken into consideration during the data analysis.

### Focus groups and case studies

During 2007, two members of the Research Team conducted focus groups and case study interviews over a 1-2 day visit to each state/territory (see Table 5: state/territory responsibilities). Focus Group interviews were typically conducted over a two hour period, using a set of 8 questions which had been pre-tested with a pilot group of centre directors/managers in Sydney during May. Feedback from this pilot was used to modify the focus group questions and discussed with the PSCA Reference Group during the June teleconference. A set of questions was also developed for use with those participating in the case-study interviews. Based on feedback received from centre directors/managers, separate interview questions were designed for the directors/managers, other childcare centre staff and parent/community participants. The set of questions that were used in both focus groups and in case study interviews have been placed in Appendices 2 and 3 of this report. The focus groups enabled centre directors/managers to expand and clarify their perspectives about professional development experiences within a face-to-face forum with their peers.

**Table 5:**  
**State/Territory visits by the Research Team**

|  | NSW       | ACT       | VIC      | QLD       | NT          | WA        | SA        | TAS        |
|--|-----------|-----------|----------|-----------|-------------|-----------|-----------|------------|
| Team Leader*<br>(July-August<br>2007)  | MQ<br>CSU | CSU<br>MQ | MQ<br>MQ | CSU<br>MQ | MQ<br>CSU   | CSU<br>MQ | MQ<br>CSU | CSU<br>CSU |
| Case study<br>visits Jan –<br>Feb 2008 | CSU       | MQ        | CSU      | MQ        | MQ &<br>CSU | MQ        | CSU       | MQ         |

**Notes:** \*Denotes responsibility for contact with local PSC Alliance representative, case study centre, recording and transcribing focus group and interview data.

As indicated earlier, visits to individual centres to undertake case study interviews occurred at two different times, and this pattern is reflected in [Table 5](#). Unlike in 2007, during 2008, apart from NSW and NT where centres visited were located in a rural community, in this round, six centres were visited by only one member of the Research Team. Safety considerations and time constraints of travel necessitated the use of two researchers during the rural visits.

The case study interviews enabled us to document and discuss centre policies and practices on PD&S. These discussions enhanced our understanding of the complexities between continuing PD&S and its relationship to quality outcomes in day-to-day practice, and enabled us to identify successful PD&S strategies available to centre staff. In this way, the Research Team was able to supplement the broader national picture that was painted through data collected from the online survey by drilling down to explore achievements at the level of individual centres. The case studies are of particular importance because they included the voices of both centre directors/managers as well as owner-operators and other childcare centre staff, parents and community representatives involved in childcare centre activities. In a small way, this methodology enabled us to broaden the type of participants who contributed to this research by including the voices of non-directors/managers.

### 3.2 SAMPLE OF PARTICIPANTS AND RESPONSE RATES

This research was essentially targeted to childcare centre directors/managers. Accordingly, participation in the on-line survey and the focus groups was restricted to childcare centre directors/managers. Whilst clarifying the processes used in ascertaining participants for the study, we also specify the size of final sample of participants involved in relation to the three data collection methods deployed in this study: online survey, focus groups and case study interviews.

### Online survey sample

At the end of the survey period, a total of 570 'hits' were made on the online survey website. An additional 4 survey questionnaires were received in print form and entered manually. In order to ensure that the data were 'clean' the following checks were used in an initial examination of the responses. Entries that fell under the following four categories were deleted:

- entries with no information other than a postcode
- repeat entries; these were identified for a small number of cases
- services that did not offer centre-based childcare; i.e., Family Day Care only
- services that only offered Outside School Hours Care or Vacation care

*Rate of Response:* Table 6 summarises the response to the on-line survey, the number of potential participants for each state/territory, and the rate of response for each state/territory. The potential sample size for each state/territory (Column 1) was based on the number of centres (*N*) who were notified about the study by the PSC Alliance and invited to participate. The actual number of participants for each of the states/territories (*n*) is given in Column 2. The response rate for each state/territory and the total sample are presented in Column 3 expressed as a percent, calculated by dividing *n* for each state/territory by the corresponding *N*. The overall rate of return achieved a healthy 10.6%, which is considered good for on-line surveys; however, figures for the state/territory figures indicate that response rates varied significantly by locations. The smaller states tended to have a higher rate of response to the survey (e.g. 44.4% in Tasmania, 22.5% in South Australia); whereas larger states had a lower rate (e.g. 7.7% in Victoria, 8.1% in NSW).

**Table 6**  
On-line survey participants by State/Territory

| State/<br>Territory | Potential<br>Sample<br><i>N</i> | Actual On-<br>line Sample<br><i>N</i> | Percent<br>Return <i>n</i> by<br>Potential <i>N</i> | Percent of<br>On-line<br>Sample<br><i>n</i> / 534 | Potential<br>Percent of<br>Sample<br><i>N</i> / 5047 |
|---------------------|---------------------------------|---------------------------------------|---|---|--|
| NSW                 | 2050                            | 166                                   | 8.1%  | 31.1%   | 40.6%  |
| ACT                 | 80                              | 14                                    | 17.5%   | 2.6%  | 1.6%   |
| VIC                 | 1085                            | 84                                    | 7.7%  | 15.7%   | 21.5%  |
| QLD                 | 930                             | 102                                   | 11.0%   | 19.1%   | 18.4%  |
| NT                  | 61                              | 14                                    | 23.0%   | 2.6%  | 1.2%   |
| WA                  | 453                             | 43                                    | 9.5%  | 8.1%  | 9.0%   |
| SA                  | 280                             | 63                                    | 22.5%   | 11.8%   | 5.5%   |
| TAS                 | 108                             | 48                                    | 44.4%   | 9.0%  | 2.1%   |
| <b>Total</b>        | <b>5047</b>                     | <b>534</b>                            | <b>10.6%</b>  | <b>100%</b>                                       | <b>100%</b>  |
| Missing             |                                 | 1                                     |   |   |  |

*Representativeness:* Columns 4 and 5 of Table 6 present the actual and potential representation of Long Day Care directors/managers. Column 5 expresses the potential population for each state/territory as a percent of the total potential population (*N* / 5047), and Column 4 presents the actual sample for each state/territory as a percent of the actual total (*n* / 534). A comparison of figures for Column 4 and 5 shows that the survey provided a nationally representative sample of services. For most of the States/Territories, the percent of the actual sample was reasonably similar to the potential percent of the total sample; e.g. NSW: 31.1% vs. 40.6%; VIC: 15.7% vs. 21.5%; QLD: 19.1% vs. 18.4%; WA: 8.1% vs. 9.0%; ACT: 2.6% vs. 1.6%; NT: 2.6% vs. 1.2%. However for two States, SA and Tasmania, the percent of the actual sample was twice that of the potential sample: SA: 11.8% vs. 5.5%; Tasmania: 9.0% vs. 2.1%.

The participants were also representative of services located in areas of diverse population density, as summarised in Table 8 (page 41). An analysis of postcodes indicated that over half (54%) of the participants lived in metropolitan areas. About one-quarter of participants (23.2%) lived in inner regional areas. The remaining quarter lived in outer regional areas (14.8%), remote areas (2.4%), or very remote areas (2.6%).

### **Focus group and case study sample**

In the first instance, the sample of case study and focus group participants were recruited through self-nomination by those who participated in the online survey questionnaire. That is, upon completing the online survey questionnaire, these participants were invited to volunteer themselves for a follow up activity through either participating in a focus group and/or by nominating their centres to be a case study in our research. Directors/managers/owner-operators who were interested in these activities indicated their interest by supplying their name, the centre name and contact details through the sign off page provided at the end of the online survey.

Online survey participants were under no obligation to participate in these two activities; their participation was strictly voluntary and by self-nomination. It was also explained that nomination did not guarantee participation as the final sample selection was contingent upon a variety of factors including financial and time constraints of this research. Our aim was to select a broad-based sample in terms of basic demographic features such as centre size, location, management structure, and nature of professional development activities being undertaken by childcare centre practitioners. The independent agency who managed the online survey on behalf of the Research Team, extracted the contact details and provided regular updates of volunteers which were then collated as a total on a state/territory basis as presented on [Table 7](#).

[Table 7](#) shows that approximately 19% of the online participants (n=103), representing every state/territory other than the ACT, volunteered to be involved in focus groups and/or case studies. The majority of these participants (i.e. n=90 or 87% of all volunteers) were keen to be involved in a focus group, and only 52 centres expressed an interest in nominating their centre to be a case study. This pattern did not present any difficulties for the Research Team as we needed more participants for the focus groups because we had estimated that each of these discussions would be based on a maximum number of ten centre directors/managers being present. The lack of any volunteers from the ACT however presented a dilemma and participants for the focus group and the case study conducted in Canberra were subsequently identified with the assistance of the local PSCA representative working with the Research Team.

Upon receipt of the list of volunteers the Research Team assessed the suitability of each volunteer centre by looking at their basic demographic characteristics and professional development activities as specified in the online survey entries. Subsequently, the Research Team members allocated to each state/territory contacted the relevant PSCA representative to discuss the feasibility of gaining access to the centres in their own state/territory. In some instances, as in the case of the ACT, the local PSCA representative extended invitations to local childcare networks to ascertain further volunteers for this research.

**Table 7:**  
Potential participants for focus groups and case studies in each State/Territory

| State/<br>Territory | Number of<br>online<br>participants | No. of<br>volunteers for<br>focus groups | No of<br>volunteers for<br>case studies | Total<br>volunteers per<br>State/Territory | Proportion of<br>volunteers per<br>State/ Territory |
|---------------------|-------------------------------------|--|---|--|---|
| NSW                 | 166                                 | 24                                       | 15                                      | 27   | 16%   |
| ACT                 | 14                                  | 0  | 0                                       | 0  | 0   |
| VIC                 | 84                                  | 13                                       | 7                                       | 14   | 17%   |
| QLD                 | 102                                 | 12                                       | 9                                       | 17   | 17%   |
| NT                  | 14                                  | 3  | 2                                       | 4  | 29%   |
| WA                  | 43                                  | 10                                       | 4                                       | 11   | 26%   |
| SA                  | 63                                  | 13                                       | 7                                       | 14   | 22%   |
| TAS                 | 48                                  | 15                                       | 8                                       | 16   | 33%   |
| total               | 534                                 | 90                                       | 52                                      | 103  | 19%   |

Having come to an agreement with an appropriate list of participants to include in focus group and case study centres, and in keeping with the research ethics protocols of the two universities, the Research Team prepared appropriate documentation including letters of invitation and consent forms to be sent to focus group and case study participants to secure their involvement in these activities. These documents are attached as Appendices to this report. In each state/territory, the responsibility for making the final arrangements for the focus groups was handled by the local PSC Alliance representative. Their knowledge and local expertise was also necessary in making the final selection of a suitable case study centre in each state/territory which emerged from those who had self-nominated for these activities through the online survey. Subsequently, Research Team members coordinated the arrangements for the case study interviews by liaising directly with the selected childcare centre directors/managers. Similar procedures were applied in selecting and visiting the eight centres that were added as case study centres this year.

### 3.3 DATA TREATMENT AND APPROACH TO ANALYSIS

In each of the Performance Reports submitted during May, August and October 2007, the Research Team reported on separate data sets as they became available over the data collection period from May to August. In this final report, we provide a compilation of findings based on the total data set of this study, and collected during both 2007 and 2008. Our primary aim is to address the three key research objectives of this study in a coherent and informative way to advance policy and practice in the field. For ease of analysis and discussion, we have framed the three objectives as research questions and evidence relating to each of these are presented in chapters 5, 6 and 7 respectively.

#### RESEARCH QUESTION NO 1:

- How do childcare centre directors/managers view the **value of professional support** including training for their staff and explain their **understanding of the relationship between professional development and quality outcomes**?

#### RESEARCH QUESTION NO 2:

- What are the **range of measures** that are effective in supporting childcare centres to implement improvements/changes to early childhood policy and practice?

#### RESEARCH QUESTION NO 3:

- What are the possible **links between participation in professional development strategies and achieving quality outcomes** through exploring particular areas of interest?

We used both quantitative and qualitative data to address these three research questions. In our presentation of results in Chapters 4 and 5 the source of the data as per the online survey, focus groups and case study interviews is acknowledged as appropriate. In this discussion, we have arranged the quantitative data as frequencies and percentages under appropriate variables derived from the survey. Likewise, using the transcripts of the focus group discussions and case study interviews, qualitative information have been organised under thematic nodes emerging from the data collected. In both instances, we have attempted to paint a national picture of relevant trends and patterns. State/territory themes are also noted where appropriate. However, it is important to keep in mind that due to the relatively small sample of individuals that participated in the focus groups and case studies, the nature and type of comments made by these participants are more illustrative than representative of personnel involved in childcare centres around Australia. Within these constraints however, the data collected from those who contributed to this study offer some rich insights into current policy and practice on professional development and support currently available to childcare centre staff across Australia.

The quantitative data, collected through the online survey, was processed through SPSS software. The external agency that was contracted to launch and manage the running of the online survey, collated the data using the agreed coding system embedded within the survey instrument. The raw data was then put through SPSS software to generate frequency tables and this data was then sent to the Research Team for further processing and analysis as appropriate. In Chapter 4, we begin presenting the data obtained through the online survey by documenting the demographical characteristics of those who completed the survey and reflecting on the operational context of managing childcare centres in Australia.

Qualitative data from the survey questions were downloaded into excel files and converted to word documents prior to being imported into NVivo7. NVivo 7 is a qualitative software program designed to assist with qualitative research and analysis. This program is focused and ordered for data handling and processing (St John & Johnson, 2000). It supports validity and rigor through a strong audit trail. The nature of the program allows for flexibility in both the management and analysis of text-based data.

NVivo uses the following terms (Richards, 2002):

- Nodes – nodes store the index categories constructed by the researcher. Data is coded at the node which stores the reference to the text.
- Tree nodes are the nodes which become the organised categories; they are arranged into a hierarchical structure.

The data for the text based answers generated through open-ended questions on the survey were also collated and sent to the Research Team as Excel spreadsheets. These were subsequently imported as cases into NVivo and assigned the following attributes; state/territory; postcode and licensed places. Coding was carried out to identify themes and trends within the data.

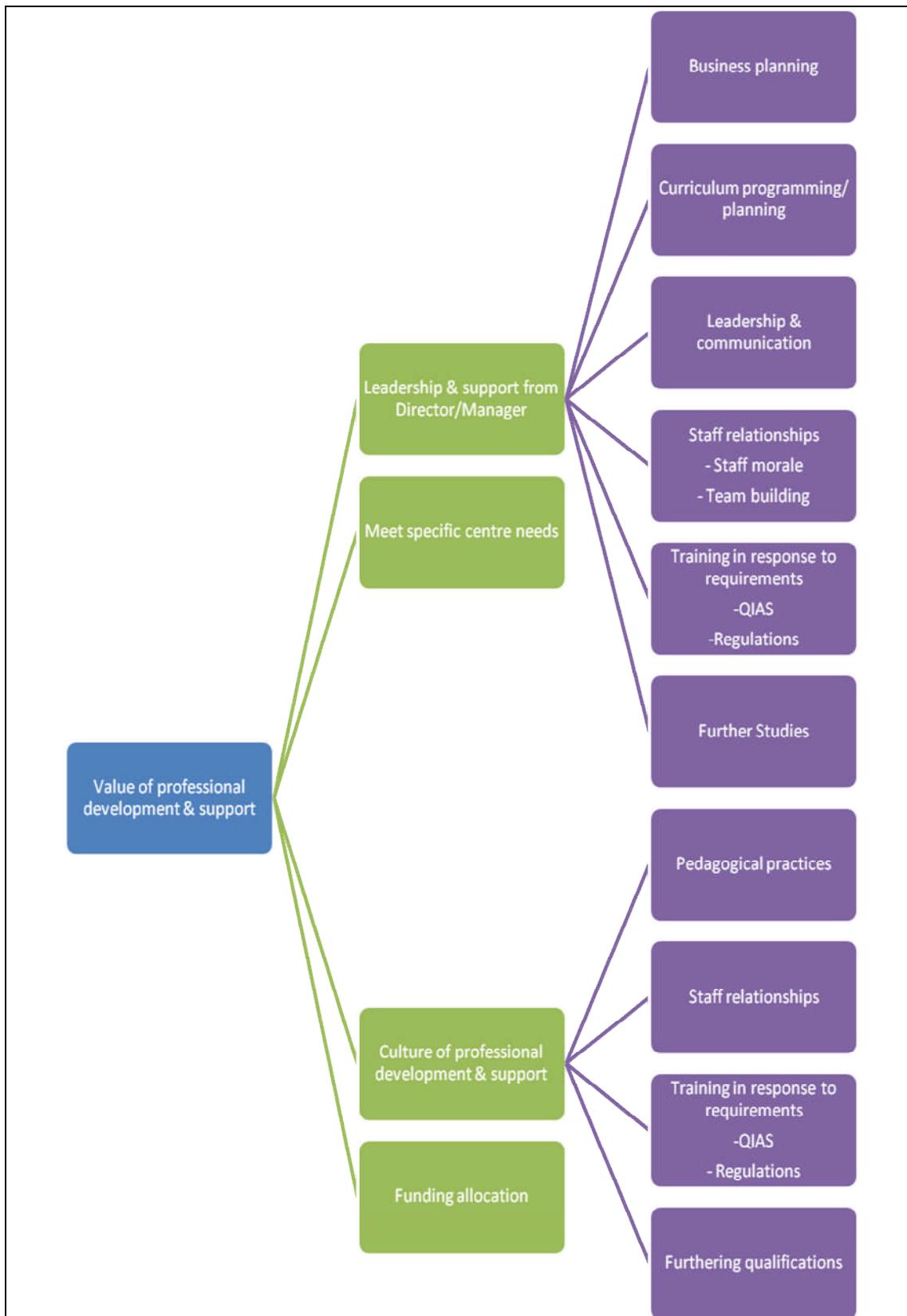
During our field visits, both focus group discussions and case study interviews were captured on digital recorders and were later fully transcribed as word files. These transcripts were subsequently imported into NVivo software for the purposes of coding and analysis under recurrent themes and patterns that reflected national as well as state/territory perspectives on professional development and support activities of childcare centre staff around Australia.

As a first step in managing the processes of collation and analysis of the focus group and case study data efficiently the following attributes were assigned to each transcript:

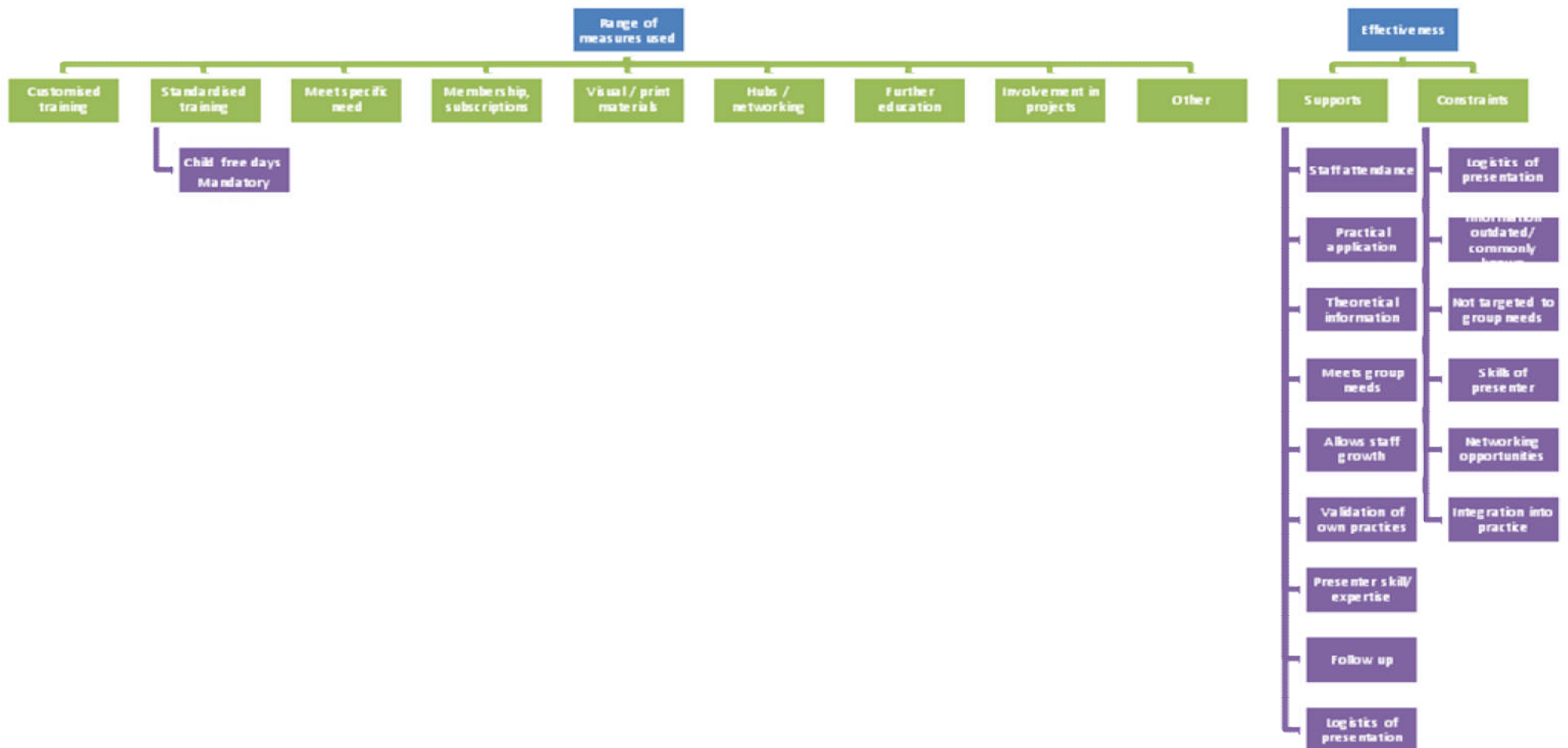
- Participant involvement – either in a focus group or a case study interview
- State/territory location of the focus group or case study site
- Participant description as per director/manager/owner-operator, other children's services practitioners (this category consisted of those who held teacher qualifications (BEd), diploma training; Certificate III, untrained, cook), parent committee member being those who were representatives of a centre's Management Committee; a parent, who was not a member of the Management Committee, and other (this category included a Local Government liaison person).

This data from the focus groups and case studies was then read through the lenses of the three major objectives of this research noted earlier, and our initial observations resulted in categorising the data under several nodes. Qualitative findings from the survey, focus groups and case studies were revisited to address a holistic picture in relation to the research questions. Nodes representative of the three research questions are depicted in Figures 1 to 3 following.

**Figure 1:**  
Perceived value of professional development and support



**Figure 2:**  
Range of professional development and support measures used



**Figure 3:**  
**Links between professional development and support and quality outcomes**



Each of the three diagrams presented above, may act as a point of reference, particularly in guiding the reading of the discussion presented in the two results chapters that follow.

### 3.4 POTENTIAL LIMITATIONS OF THE RESEARCH DESIGN AND SAMPLE

The focus of the research is on the receivers of childcare professional development and support – primarily centre directors/managers and to a lesser extent centre staff and parent users of childcare centres.

The results from the web-survey provide a very useful national overview of professional development and support in long day care. Participants were drawn from all states/territories and diverse locations including metropolitan, regional, remote and very remote areas of Australia. The perspectives of 535 centre directors/managers who participated in the on-line survey are complemented and extended by state/territory case studies, which involved 90 childcare centre staff and parent representatives, and focus group discussions conducted with 61 centre directors/managers. Together, these diverse methods of consulting with childcare centre stakeholders allow us to report the views of 686 participants located Australia wide.

Parents and staff participated in the study through 1:1 interviews held at the 16 child care centres, which are described as case-study centres. The perceptions of these participants are best described as opportunistic, and cannot be used to generalise the perceptions of parents and childcare centre staff from a broader context. This data did however reinforce the importance of considering professional development and support activities available to childcare centre staff from the perspectives of parents and diverse centre staff. When considered in total, we are confident that the sampling frames we have employed for this research have generated a sample that is representative of a diversity of views and experiences of those attached to long day childcare centres across Australia.

It is useful to consider the overall rate of response the online survey (10.6%) to in relation to other research studies that have sought to gather data through a national survey of long day care centres. Two recent Australian studies provide a useful comparison. It is our view that the results of the on-line survey in the PSCA study compare favourably with both of these studies.

1. Rush, E. (2006). Childcare quality in Australia. Discussion Paper Number 84. Sydney: The Australian Institute.

This study sought to survey the views of childcare staff. A random sampling technique was used to identify 482 childcare centres, being 10% of the total number of centres offering long day care in late 2005. Questionnaires were mailed to each centre, with a follow-up telephone call to check if these had arrived and to ascertain the degree of interest in the study (73% were either positive or neutral). Rate of return by staff was 15%, being 578 valid questionnaires from a potential sample of 3,856 that were mailed out. Rate of return for centres was 45%, being 217 participants from a total of 482. However, Rush notes that this represented an overall sample of less than “5% of long day care centres Australia-wide” and “1% of long day care staff Australia-wide” (p. 21).

The Rush study shows a similar bias noted in the response to the PSC *Practice Potentials* survey towards participation by directors/managers working in not-for-profit services. Rush also reports rates of return from three types of centres - community-based, independent private, and corporate chain. The highest response was from community-based centres (66%), with considerably lower rates of return from independent private (43%) and corporate chain centres (30%). The final sample was therefore over-represented by community-based (43% in the sample vs. 36% nationally) and under-represented by corporate chains (18% in the sample vs. 23% nationally).

Participants in the Rush study, like those in the PSC *Practice Potentials* survey, tended to be more experienced directors/managers. This is summarized in the following quote: “with respect to years of experience working in childcare, our respondents are substantially more experienced than the general population of Australian long day care workers” (Rush, 2006, p. 26), with 70% working for three or more years.

2. Tayler, C. (2006). A review of the approach to setting national standards and assuring the quality of care in Australian childcare services. Brisbane: Queensland University of Technology.

This study targeted the full range of stakeholders involved in childcare services, including staff, parents, and representatives of other groups. The consultation process included a web-based (or mail-out) survey which targeted 270 stakeholders and 500 service providers. A total of 225 responses were received (29%), of which half were entered on-line. This included 108 from long day care (14% of the possible responses). However, approximately 20% of the respondents were parents suggesting that the response rate from staff was closer to 11% of the potential sample. In this study no breakdown was given of the distribution across community-based, independent private, or corporate chain centres; nor was there any information on staff experience.

In sum, there are obvious limitations that result from any study that struggles to obtain a high rate of participation and this is particularly the case when participation is strictly voluntary. It is, however, important to keep in mind that the actual number of long day care centre directors/managers who completed our survey (N = 535) represents over 10% of a national pool of potential participants drawn from every state and territory. In fact, we have been successful in attracting a larger sample of long day care centre directors than either Rush (N = 217 centres, less than 5% of potential centres) or Tayler (N = 108 centres). Accordingly, we

believe that in terms of the size of the sample, and the range of participants included, findings from this research may be considered worthy of public debate and discussion.

Further, we suggest that if one applies Sergiovanni's hierarchy of management practice (1984 cited in Ebbeck & Waniganayake, 2003) to reflecting on how well centre directors/managers have responded to our online survey, it can be shown that participation in an online questionnaire attached to a research study such as ours falls within the higher levels of advocacy and community outreach work undertaken by managers/directors. These are functions/roles typically performed by experienced directors/managers who are competent and confident in their role of managing the day-to-day work of centres.

Indeed those who completed our on-line survey were experienced staff, as were those who participated in the Rush study. Rush attributes this to "the fact that staff who have a long term commitment to childcare as a profession are those who are more likely to complete and return a voluntary questionnaire" (p. 26). Given the complexities of demands on contemporary childcare centre directors/managers, it is therefore not surprising that those with less experience may have opted to ranking participation in a voluntary research study as a low priority in their day-to-day work.

We also note that the research design did not specifically set out to explore the perspectives of professional development providers – especially those who are responsible for facilitating the learning at the coalface, either within individual centres or as groups of practitioners drawn from a variety of centres and/or services (such as long day care, family day care, in-home care etc). Findings obtained however, do reflect the existence of a variety of providers, operating as individual consultants, not-for-profit agencies (such as the PSC Alliance representatives) and in-house training units established within large early childhood employer organisations including corporate childcare chains and large community based organisations such as KU Children's Services in New South Wales and Crèche and Kindergarten Association in Queensland. The approach to funding and managing professional development programs run by these organisers fell outside the brief of this research study. Nevertheless, it would be fair to say that the efficacy of the training programs is also contingent on the characteristics of the training providers.

We emphasise that the extent to which the effectiveness of professional development delivered by various providers is not easily measured, but warrants further investigation. In this regard, we also note that the literature search undertaken for this study did not uncover any indices of measuring the impact of professional development on achieving quality outcomes for young children in early childhood settings. This is a separate matter from assessing the impact on children's services practitioners themselves in relation to gains in knowledge acquisition and/or changes in practice. In this study, we have relied primarily on documenting the perceptions of childcare centre directors/managers. Moreover, neither the online survey nor the focus group data allow us to extract sufficient clarity in relation to individual achievements though the potential gains achievable at a centre level as reflected in the sixteen case studies included in this research. Overall, without baseline data and a longitudinal time-line for data collection, the establishment of measurable outcomes of the impact of PD&S is difficult to assess.

## CHAPTER 4

### CHARACTERISTICS OF PARTICIPATING CHILDCARE CENTRES AND CENTRE PERSONNEL

In this chapter we describe the characteristics of the sample of participants who contributed to the data collection of this research. As discussed in the preceding chapter, three methods comprising an online survey questionnaire, focus groups and case studies were used. The online survey requested participating directors/managers to indicate their background characteristics in terms of qualifications and experience in early childhood, along with information pertaining to the organisational contexts of the centres where they worked. For the participants in the focus groups and case study interviews, as a part of the research protocols approved by the Universities, to preserve confidentiality, personal professional information was not requested as a condition of participating in focus groups. Some limited data on participants' qualifications were collected from case study centres but this information is insufficient for the purposes of drawing out strong associations between various factors that contribute to childcare staff involvement in PD&S. We begin this chapter by providing contextual information about the organisational settings of the childcare centres that participated in this study.

#### 4.1 ORGANISATIONAL CONTEXTS OF THE STUDY CENTRES

This research was based in long day care centres located throughout Australia. To a large extent the broader organisational features of these centres including their location, licensing capacity, staff numbers and management structures responsible for centre governance, can influence the nature of access to and utilisation of PD&S opportunities. In this section, we present data about the childcare centres that participated in the online survey and the case study interviews. We begin by presenting information captured through centres who participated in the online survey. Next, we describe the organisational features of the sixteen centres that participated in the case study interviews.

##### a) ONLINE SURVEY CENTRES

The online survey enabled centre directors/managers to provide details including the centre license capacity, management structure, number of child enrolments categorised under various age groups, enrolment numbers for children with diverse backgrounds and needs, and number of staff. Data taken from the online survey under each of these items are presented in turn.

##### Centre Location:

Centre location by state/territory and population density of the geographical area are summarised in the following two tables presented next.

**Table 8:**  
**On-line Survey Sample by Areas of Australian Population Density**

|                           | Sample<br><i>N</i> | Percent of Sample |
|---------------------------|--------------------|-------------------|
| Major Cities of Australia | 289                | 54.0%             |
| Inner Regional Australia  | 124                | 23.2%             |
| Outer Regional Australia  | 79                 | 14.8%             |
| Remote Australia          | 13                 | 2.4%              |
| Very Remote Australia     | 14                 | 2.6%              |
| <b>Total</b>              | <b>535</b>         | <b>100%</b>       |

Findings show that, in addition to being representative of the population of childcare centres across the states/territories of Australia (presented and discussed in Chapter 3); the online survey participants were also representative of services located in areas of diverse population density. Of the 530 centres in the study that were able to be coded to geographical area, over half (55.7%) were located in metropolitan areas, about one-quarter (23.9%) were in inner regional areas, and the remaining quarter were located in outer regional areas (15.1%), remote areas (2.5%), or very remote areas (2.8%), as shown in [Table 9](#). This table provides a more detailed breakdown of centre locations, summarising the locations of the 530 centres in the study that were coded to geographical area for each state/territory.

**Table 9**  
State/Territory Location by Areas of Australian Population Density

| State/<br>Territory | State/<br>Territory<br>sample<br>n | Major<br>city<br>n (%) | Inner regional<br>n (%) | Outer<br>regional<br>n (%) | Remote<br>n (%) | Very<br>remote<br>n (%) |
|---------------------|------------------------------------|------------------------|-------------------------|----------------------------|-----------------|-------------------------|
| NSW                 | 165                                | 113<br>(68.5%)         | 32<br>(19.4%)           | 19<br>(11.5%)              | 1<br>(0.6%)     | -                       |
| ACT                 | 14                                 | 11<br>(92.9%)          | 1<br>(7.1%)             | -                          | -               | -                       |
| VIC                 | 83                                 | 65<br>(78.3%)          | 17<br>(20.5%)           | 1<br>(1.2%)                | -               | -                       |
| QLD                 | 100                                | 41<br>(41.0%)          | 31<br>(31.0%)           | 21<br>(21.0%)              | 1<br>(1.0%)     | 6<br>(6.0%)             |
| NT                  | 14                                 | -                      | -                       | 12<br>(85.7%)              | 1<br>(7.1%)     | 1<br>(7.1%)             |
| WA                  | 43                                 | 21<br>(48.8%)          | 5<br>(11.6%)            | 9<br>(20.9%)               | 3<br>(7.0%)     | 5<br>(11.6%)            |
| SA                  | 63                                 | 42<br>(66.7%)          | 11<br>(17.5%)           | 5<br>(7.9%)                | 3<br>(4.8%)     | 2<br>(3.2%)             |
| TAS                 | 48                                 | -                      | 30<br>(62.5%)           | 13<br>(27.1%)              | 4<br>(8.3%)     | 1<br>(2.1%)             |
| TOTAL               | 530                                | 295<br>(55.7%)         | 127<br>(23.9%)          | 80<br>(15.1%)              | 13<br>(2.5%)    | 15<br>(2.8%)            |

### Licensed Capacity

Of the Directors/Managers who participated in the online survey, 534 provided information on their centres licensing capacity. The numbers of licensed places per centre ranged from 5 to 161. All participating centres provided care for children aged 5 years and under. Of these, 195 (36.5%) also provided care for school-age children (OOSHC). Centres providing places for OOSHC were amongst the largest, e.g. eight centres were licensed for 100 to 161 children. Some of the centres for children under 5 years also held a licence for 100 children or more enrolments in any one day.

Licensing details for centres with and without OOSHC are summarised in [Table 10](#). There appeared to be minimal difference between the numbers of children licensed for each of the birth to 5 years age groups. The larger overall capacity in centres with OOSHC (Mean number of children = 57.13; Standard Deviation (SD) = 23.12) compared to centres without OOSHC (Mean number of children = 52.44; Standard Deviation (SD) = 19.04) was therefore likely due to the additional numbers of school-age children.

**Table 10**  
**Participating Centres with/without OOSHC by Number and Ages of Children**

|              | Centres with OOSHC |       |                     | Centres without OOSHC |       |                    |
|--------------|--------------------|-------|---------------------|-----------------------|-------|--------------------|
|              | Mean               | SD    | Min - Max<br>Number | Mean                  | SD    | Min- Max<br>Number |
| All children | 57.13              | 23.12 |                     | 52.44                 | 19.04 |                    |
| under 1 year | 5.27               | 3.89  | 0 - 25              | 5.24                  | 3.51  | 0 – 22             |
| 1 year       | 7.27               | 5.21  | 0 - 52              | 7.26                  | 4.93  | 0 – 33             |
| 2 years      | 11.04              | 6.92  | 0 - 54              | 11.58                 | 6.90  | 0 – 44             |
| 3 years      | 13.15              | 7.96  | 0 - 70              | 13.49                 | 7.83  | 0 – 58             |
| 4 years      | 14.26              | 7.86  | 0 - 58              | 14.92                 | 8.18  | 0 – 58             |
| 5 years      | 12.61              | 9.12  | 0 - 58              | 11.76                 | 9.52  | 0 – 58             |
| over 5 years | 9.80               | 13.30 | 0 - 90              |                       |       |                    |

Note: SD = Standard Deviation

### Usage: Attendance and Diversity of Children

The actual number of children enrolled in a period of one week gave an indication of the usage of the centre. Information on weekly usage was provided for 492 centres. For these centres, weekly enrolments ranged from 5 to 430. As noted for licensed capacity, numbers tended to be slightly higher for centres offering care for school-age children (mean = 115.00; maximum = 430) and lower for centres caring for children aged 5 and under (mean = 107.25; maximum = 375).

For the purpose of later analysis of centre usage, quartiles were formed to represent centres with small (5 to 64 children/week), medium (65 to 91 children/week), large (91 to 125 children/week), and very large (126 to 430 children/week) enrolments. Each group comprised 25% of the total number of centres

Centres also provided information on the number of children attending each week who were from a culturally and linguistically diverse (CALD) background, an Aboriginal or Torres Strait Islander (background, or who were receiving federal government funding under the inclusion support program. Details are provided in [Table 11](#).

**Table 11**  
**Participating Centres by Numbers of Children with Diverse Backgrounds and Needs**

|   | Mean<br>Number | SD    | Min – Max<br>Number |
|---|----------------|-------|---------------------|
| Number of children attending each week from a CALD family background                                    | 11.91          | 15.76 | 0 – 127             |
| Number of children attending each week from an Aboriginal and Torres Straits Islander family background | 2.55           | 6.59  | 0 – 70              |
| Number of children attending each week who receive federal funding under the inclusion support program  | 1.66           | 7.38  | 0 – 120             |

### Centre Staffing

Directors/managers were asked to report the average number of adults, in paid positions, including ancillary staff, who were typically working at the centre when most children have arrived. Figures were available for 498 of the participating centres. The number of paid staff ranged from to 2 to 40, with an average of 10.51, and SD = 4.89.

### Centre Management Structures:

For the purposes of this study, the overall childcare centre management structures were

classified as either 'not-for-profit centre' or 'for profit centre'. Of the 535 directors who completed the survey, all but one provided information about management context of the centre. Almost two-thirds of directors (65.0%; n = 348) identified the centre as 'not for profit', with most of these being stand-alone centres (20.0%) or centres managed by an umbrella organisation (13.5%), such as KU Children's services, or local government (13.5%). Just over one-third of centres (35%; n = 186) were identified as 'for profit', with most being stand-alone centres (20.2%). The results are summarised in Table 12.

**Table 12**  
**Participating Centres by Management Context**

|                       | Number | Percent |
|-----------------------|--------|---------|
| NOT FOR PROFIT        | 348    | 65.0%   |
| Stand-alone centre    | 107    | 20.0%   |
| Umbrella organisation | 72     | 13.5%   |
| Local government      | 71     | 13.3%   |
| University or TAFE    | 15     | 2.8%    |
| MACS                  | 3      | 0.6%    |
| Work-based            | 25     | 4.7%    |
| Other                 | 9      | 1.7%    |
| Missing subcategory   | 46     |         |
| FOR PROFIT            | 187    | 35.0%   |
| Stand-alone centre    | 108    | 20.2%   |
| Group of < 5 centres  | 41     | 7.7%    |
| Chain or Corporation  | 26     | 4.9%    |
| Work-based            | 6      | 1.1%    |
| Other                 | 5      | 0.9%    |
| Missing subcategory   | 1      |         |

The proportion of for profit centres (35%) is substantially less than would be expected in a nationally representative sample. However, as noted in Chapters 2 and 3, a lower participation rate by for-profit services is a common finding in Australian research. In Chapter 2 (Tables 2 and 3), we note that in the Longitudinal Study of Australian Children the numbers of participating teachers/carers in for profit centres was just over half (52.3%) for the 4 to 5-year-old children but only 39.7% for the infant cohort. In Chapter 3 we refer to research by Rush (2006) which reports a 68% response rate for not-for-profit services and a much lower rate for for-profit centres (43% to 30%)

#### **b) CASE STUDY CENTRES**

As noted previously, 16 long day childcare centres with a strong commitment to PD&S were included as case study centres in this research. For ease of reference, it could be said that there were 8 centres each that may be deemed community based not-for-profit and 8 that were private-for-profit centres. Given below is more specific information pertaining to their location, and management structures.

#### **Centre Location**

The majority of the case study centres were located in a major capital city. These consisted of Sydney (n=1), Canberra (n=2), Victoria (n=1), Adelaide (n=1), and Darwin (n=1). Another four centres were in inner regional areas close to the state capitals in Victoria, WA and Tasmania. Two other centres, were located further afield, in outer regional areas and these were a centre

in NSW, Queensland and Northern Territory. The three remaining centres were located in remote /rural towns, which served as regional hubs for rural communities in WA, NT and NSW. The following table has been drawn from data extracted from the Australian Bureau of Statistics, 2006 Census QuickStats (available on-line: [www.censusdata.gov.au](http://www.censusdata.gov.au)) for each of the case study localities. The information contained within the table provides a snapshot of both total population and Aboriginal and Torres Straits Islander population, population of children aged 0-14 years, birthplace and employment status. These statistics when contextualised provide an overall picture of the many communities that were visited during the data gathering process. They can be used to contribute to the overall picture of the community in which the participants live and work. For example the total Indigenous population of Australia is 2.3% so when we look at Centres 5, 7, 15 and 16 we can see that they have very large Indigenous populations Likewise Centres 3, 9 and 14 have large populations who have been born overseas. The extent to which these centres are being utilised by children and families representative of their local community populations was difficult to assess, and fell outside the project brief. However some participants interviewed referred to the impact of the centre's location and its population characteristics when discussing their PD&S experiences, and these comments are highlighted as appropriate throughout this report.

**Table 13:**  
**Contextual information about the case study centres from the ABS**

| Centre | Area           | Total population | Aboriginal & Islander population | Children 0-14 years | Born in Australia | Born overseas | Employed | Unemployed |
|--------|----------------|------------------|----------------------------------|---------------------|-------------------|---------------|----------|------------|
| 1      | Inner Regional | 8,538            | 3.10%                            | 21.90%              | 80.10%            | 15.70%        | 4,088    | 5.00%      |
| 2      | Outer Regional | 2,244            | 2.60%                            | 23.80%              | 85.20%            | 8.40%         | 1,013    | 7.00%      |
| 3      | City           | 16,660           | 1.00%                            | 5.80%               | 53.80%            | 33.70%        | 8,414    | 7.90%      |
| 4      | Inner Regional | 23,052           | 1.40%                            | 18.80%              | 73.80%            | 20.90%        | 11,104   | 6.70%      |
| 5      | Remote         | 3,550            | 12.10%                           | 23.90%              | 86.00%            | 5.90%         | 1,650    | 3.10%      |
| 6      | Inner Regional | 7,793            | 0.70%                            | 19.70%              | 68.20%            | 27.10%        | 3,828    | 2.50%      |
| 7      | Remote         | 5,681            | 19.10%                           | 24.20%              | 75.50%            | 15.60%        | 2,691    | 2.80%      |
| 8      | Outer Regional | 1,420            | 2.40%                            | 21.40%              | 73.50%            | 22.80%        | 842      | 6.20%      |
| 9      | City           | 5,550            | 0.50%                            | 6.00%               | 21.30%            | 47.20%        | 2,449    | 9.30%      |
| 10     | Rural          | 9,955            | 4.90%                            | 19.70%              | 89.20%            | 4.70%         | 3,988    | 8.30%      |
| 11     | City           | 22,061           | 0.70%                            | 16.10%              | 66.50%            | 26.70%        | 11,960   | 4.50%      |
| 12     | City           | 7,869            | 1.70%                            | 25.60%              | 76.70%            | 19.10%        | 4,467    | 3.00%      |
| 13     | City           | 22,061           | 0.70%                            | 16.10%              | 66.50%            | 26.70%        | 11,960   | 4.50%      |
| 14     | Inner Regional | 16,280           | 0.20%                            | 15.90%              | 55.00%            | 38.50%        | 8,302    | 5.10%      |
| 15     | City           | 66,291           | 9.40%                            | 20.10%              | 68.50%            | 21.40%        | 36,389   | 3.50%      |
| 16     | Remote         | 8,194            | 24.20%                           | 27.50%              | 77.80%            | 9.40%         | 3,804    | 4.70%      |

Source: Australian Bureau of Statistics, 2006 QuickStats ([www.censusdata.abs.gov.au](http://www.censusdata.abs.gov.au))

### Management Structures

The majority of these centres (n=12) were stand-alone centres which were either managed by a community-based parent committee on a not-for-profit basis, or run by an owner-operator as private-for-profit small business enterprise. The biggest of these centres was a privately owned centre run by a family which held four centre licences with two in each location with a capacity

for 170 children. This sample of case study centres included one corporate centre, and one not-for-profit centre that was a part of a large non-government organisation. One centre was also classified as a work-based centre as a major company sponsored it. When taken as a whole group of centres, the sixteen case studies reflect a strong commitment to PD&S. They demonstrated their capacities for upholding quality outcomes through PD&S strategies in diverse and innovative ways as will be shown in the chapters that follow.

## 4.2 CHARACTERISTICS OF ONLINE SURVEY PARTICIPANTS

Of the 535 directors/managers who completed the on-line survey, 501 provided information about their position. Most participants (61.7%;  $n = 309$ ) identified themselves as a “director/manager who coordinates the day-to-day centre management”. One third (33.3%;  $n = 167$ ) identified as a “director/teacher with mixed responsibilities for management and contact with children”. A small number (1.4%;  $n = 7$ ) identified as an “owner-operator not involved in day-to-day centre management”. “Other” was selected by 18 participants (3.5%), some of whom identified themselves as acting directors or managers for more than one centre. The ‘other’ categories included participants who named their position but did not specify their role.

### Qualifications

The survey design allowed participants to report all relevant post-secondary qualifications in early childhood that they had completed. Of the 496 participants who responded to this question, the majority ( $n = 336$ ) had one qualification. Of the rest, 103 participants had two qualifications, 45 had three, 11 had four, and 1 had five.

Information on completed qualifications were grouped and recoded to identify one qualification (the highest level) per participant, for use in future analyses. Postgraduate qualifications included three types of degrees: Doctorate (PhD or EdD), Masters, and Graduate Diploma or Post-Graduate Certificate.

**Table 14**  
Online Survey Directors/ Managers’ Qualifications

|              |                           | Number with EC qualifications | Percentage with EC qualifications |
|--------------|---------------------------|-------------------------------|-----------------------------------|
| 1            | Postgraduate              | 47                            | 9.8%                              |
| 2            | Bachelor degree           | 153                           | 31.8%                             |
| 3            | Advanced Diploma          | 85                            | 17.7%                             |
| 4            | Diploma                   | 182                           | 37.8%                             |
| 5            | Certificate               | 14                            | 2.9%                              |
|              | Total                     | 481                           | 100%                              |
|              | Other qualifications only | 15                            |                                   |
|              | Missing                   | 39                            |                                   |
| <b>Total</b> |                           | <b>535</b>                    |                                   |

In addition, one-quarter of the participants were completing further study ( $N = 108$ ). Most of these were early childhood related: 10 were enrolled in post-graduate degrees, 32 were enrolled in a Bachelor degree, 24 were completing an Advanced Diploma, 14 were completing a Diploma or Associate Diploma, and 14 were doing Certificate level qualifications. A further 14 were studying in another profession.

### Experience

Participants were asked to report their years of experience in the early childhood field. Data were provided by 500 participants. Years of experience ranged from less than 4 years to over

25 years. The majority (80.4%) of directors/managers had over 10 years experience in the field.

**Table 15:**  
**Online Survey Directors/ Managers' Experience in EC**

| Experience   |                    | Number     | Percent |
|--------------|--------------------|------------|---------|
| 6            | more than 25 years | 65         | 13.0%   |
| 5            | 21 - 26 years      | 59         | 11.8%   |
| 4            | 16 - 20 years      | 121        | 24.2%   |
| 3            | 11 - 15 years      | 152        | 30.4%   |
| 2            | 5 - 10 years       | 88         | 17.6%   |
| 1            | Less than 4 years  | 15         | 3.0%    |
| Total        |                    | 500        | 100%    |
| Missing      |                    | 35         |         |
| <b>Total</b> |                    | <b>535</b> |         |

### 4.3 CHARACTERISTICS OF FOCUS GROUP AND CASE STUDY PARTICIPANTS

The focus group participants were limited to those who were childcare centre directors/managers. In contrast, case study participants consisted of a variety of personnel: including centre directors/managers/owner-operators as well as other centre staff, parents and community members who were knowledgeable about the centre's professional development policies and/or practices and were interested in speaking about these through an individual interview with the Research Team. The final sample of those who participated in the focus groups and case study interviews in each state/territory is presented in Table 16.

**Table 16:**  
**Focus Group and Case Study Participants for each State/Territory of Australia**

| State/<br>Territory | Number of<br>FOCUS GROUP<br>participants | Number of<br>CASE STUDY<br>participants | Total FG & CS participants per<br>State/Territory |
|---------------------|--|---|---|
| QLD                 | 7  | 13                                      | 20  |
| NSW (m)             | 6  | 6                                       | 12  |
| NSW (r)             | 5  | 6                                       | 11  |
| WA (m)              | 7  | 6                                       | 13  |
| WA (r)              | NA                                       | 4                                       | 4   |
| SA                  | 8  | 9                                       | 17  |
| NT (m)              | 6  | 5                                       | 11  |
| NT (r)              | NA                                       | 5                                       | 5   |
| VIC                 | 7  | 13                                      | 20  |
| ACT                 | 8  | 12                                      | 20  |
| TAS                 | 7  | 10                                      | 17  |
| <b>Total</b>        | <b>61</b>                                | <b>89</b>                               | <b>150</b>  |

**Notes:** NSW (m) = metropolitan focus group; NSW (r)= rural focus group

As indicated in Table 16, individuals who contributed through focus groups (n=61) and case study interviews (n=89) yielded a total of 150 individual participants. On average, at each state/territory focus group, there were 7 participants, though the actual size of each focus group ranged between 5 to 8 participants as indicated above. At each of the sixteen case study centres, the Research Team interviewed around 4-7 individuals. These participants performed a variety of roles associated with the case study centres, including being the director/manager/owner-operator or other childcare work or participation in the centre's

management.

Detailed information about the range of individuals who participated in the case study interviews is presented on [Table 17](#).

**Table 17**  
**Roles of Case Study Participants for each State/Territory of Australia**

| State/<br>Territory | Centre<br>Director<br>/Manager/Owner | Parents  | Community<br>Reps / non<br>contact staff | Teacher  | Team<br>Leader | Other<br>CC<br>worker | Total<br>interviews |
|---------------------|--------------------------------------|----------|--|----------|----------------|-----------------------|---------------------|
| TAS                 | 3                                    | nil      | Nil                                      | nil      | 2              | 5                     | 10                  |
| SA                  | 2                                    | 1        | 1 cook                                   | 2        | 1              | 2                     | 9                   |
| WA                  | 2                                    | 1        | Nil                                      | nil      | 1              | 6                     | 10                  |
| QLD                 | 5                                    | 2        | Nil                                      | nil      | 4              | 2                     | 13                  |
| NSW                 | 2                                    | 1        | 1 cook                                   | 2        | 1              | 5                     | 12                  |
| ACT                 | 2                                    | 1        | 1 Treasurer                              | 2        | 4              | 2                     | 12                  |
| VIC                 | 2                                    | 1        | 1 Local Gvt<br>Rep                       | 2        | 3              | 4                     | 13                  |
| NT                  | 2                                    | nil      | Nil                                      | 1        | 3              | 4                     | 10                  |
| <b>Total</b>        | <b>20</b>                            | <b>7</b> | <b>4</b>                                 | <b>9</b> | <b>19</b>      | <b>30</b>             | <b>89</b>           |
|                     | 22%                                  | 8%       | 4%                                       | 10%      | 21%            | 34%                   |                     |

**Table Notes:**

- **Centre Director/ Manager / Owner:** these individuals managed the day-to-day work of the centres, working full-time or part-time.
- **Teachers** are those with University degrees in early childhood teacher education and do not include those performing director/manager roles.
- **Team/Group Leaders** are those who were responsible for a particular group of children and typically held a VET qualification equivalent to AQF Level 5 or a Diploma or Advanced Diploma in Children’s Services.
- **Other Childcare Workers** are either those without any ECE qualifications, or are currently enrolled in or have completed a Certificate III program.
- **Community Reps / Non-Contact staff:** includes ancillary staff such as a cook and any community members who did not work at or have a child enrolled at these centres.

As indicated in [Table 17](#), on average there were approximately 11 participants from each state/territory who were interviewed as individuals by the Research Team members. Of these, the bulk of the case study interviews were carried out with general childcare centre staff and we aimed to ascertain a variety of views on PD&S from those who had been working in early childhood services for short (less than 12 months) or long periods, including some who had been working in children’s services for more than 10 years. It is worth noting that some individuals who occupied the centre director/manager/owner-operator positions, also held teacher qualifications but are not included in the teacher column in [Table 17](#) to reduce confusion with separation according to job responsibilities. More specific commentary about their qualifications is presented in [Table 18](#).

Likewise, we note that the inclusion of personnel who did not work directly with children consisting of parents (n=7), cooks and community representatives (n=4), and accounted for 12% of the case study interview participants. The Research Team welcomed this possibility as it enabled us to present some alternative voices in the discussion of PD&S practice and policy.

Finally, it is also important to keep in mind that the case study participants reflect an opportunistic sample, and in no way can be regarded as representative of all those who are working in long day childcare centres in Australia. These case study centres do however enable us to uncover patterns of PD&S policies and practices that operate at a centre level. Individual centre narratives can thereby assist us in presenting recommendations to enhance future practice and policy in PD&S for childcare centre personnel.

**Table 18**  
Case Study Centre participants' qualifications

|                                 | QLD | NSW | WA | SA | NT | VIC | ACT | TAS | TOTAL |
|---------------------------------|-----|-----|----|----|----|-----|-----|-----|-------|
| Early Childhood Bachelor Degree | 1   | 5   | 0  | 2  | 0  | 2   | 2   | 0   | 12    |
| Advanced Diploma**              | 3   | 2   | 0  | 1  | 0  | 2   | 0   | 2   | 10    |
| Diploma                         | 6   | 2   | 5  | 2  | 4  | 4   | 4   | 3   | 30    |
| Certificate III                 | 3   | 2   | 6  | 3  | 5  | 2   | 4   | 1   | 26    |
| NO QUALIFICATIONS in EC         | 0   | 2   | 2  | 1  | 2  | 1   | 2   | 1   | 11    |
| Currently enrolled in EC course |     |     |    |    |    |     |     |     |       |
| • Degree                        | 4   | 1   | 0  | 0  | 2  | 0   | 0   | 0   | 7     |
| • Diploma                       | 1   | 0   | 3  | 0  | 0  | 2   | 3   | 0   | 9     |
| • Cert. III                     | 1   | 0   | 1  | 1  | 2  | 0   | 1   | 0   | 6     |
| Other non-EC qualifications *   | 0   | 2   | 0  | 2  | 4  | 2   | 2   | 0   | 12    |

**Notes:**

- Other non-EC qualifications include: Diploma in Agriculture (2), Diploma in Business (2), Nursing qualification (4), Certificate IV - Workplace Assessment & Training (2), BSc, Masters (non EC), Overseas degree in Social Sciences; BA, Bachelor of Music, Bachelor of Primary Teaching.
- Advanced Diplomas also include Mothercraft Nursing qualifications held by Victorian and Tasmanian children's services practitioners.

**Case study centre profiles:** These stories capture the richness of the PD&S experiences from a centre based perspective, and enhance the overall depth of the findings of this research. The Research Team notes that the narratives that were prepared for each of the 16 case study centres will be incorporated into the reporting of this study in some way in the future.

## CHAPTER 5

### RESPONDING TO RESEARCH QUESTION 1: VALUE OF PROFESSIONAL DEVELOPMENT AND SUPPORT

The first research question that is the focus of the findings collated in this chapter is as follows:

- **How do childcare centre directors/managers view the value of professional support including training for their staff and explain their understanding of the relationship between professional development and quality outcomes?**

This study was shaped around capturing the perceptions about PD&S as articulated by childcare centre directors/managers. It is assumed that the directors/managers were reporting their perceptions primarily in relation to PD&S experiences of their current centres as a whole. Accordingly, the focus of this chapter is to document the perceived value of PD&S by centre directors/managers in relation to factors including attendance patterns and centre policies and practices on PD&S. Findings based on specific attitudinal data reflecting perceived values about PD&S are also documented in this chapter. In this presentation, as appropriate, we have integrated findings on the basis of the three methodologies we used for data collection consisting of the on-line survey, focus groups and 1:1 interviews with case study centre personnel.

#### 5.1 ATTENDANCE PATTERNS AT PD&S

In the online survey, centre directors/managers were asked to estimate the number of hours that they had attended PD&S activities in the 15 months from January 2006 to March 2007, the period just before the survey commencement date. Results are presented in [Table 19](#).

Of the 484 participants who provided responses to this question, nearly half had attended more than 25 hours of professional development and support (5 or more days). The other half of the sample showed a wide variation in the amount of professional development and support accessed, ranging from none (1.4%) to 3 days (15.7%).

**Table 19:**  
**Participating Directors/Centre Managers' Attendance at PD&S**

| Amount of PD attended in the past 15 months |                                      | Number of Directors/Managers<br><i>N</i> | Percent of Directors/Managers<br>% |
|---|--------------------------------------|--|------------------------------------|
| 1   | Nil                                  | 7  | 1.4%                               |
| 2   | 1 to 6 hours (1 day)                 | 40                                       | 8.3%                               |
| 3   | 7 to 12 hours (2 days)               | 68                                       | 14.0%                              |
| 4   | 13 to 18 hours (3 days)              | 76                                       | 15.7%                              |
| 5   | 19 to 24 hours (4 days)              | 63                                       | 13.0%                              |
| 6   | More than 25 hours (5 or more days). | 230                                      | 47.5%                              |
| Total                                       |                                      | 484                                      | 100%                               |
| Missing                                     |                                      | 51                                       |                                    |
| Total                                       |                                      | 535                                      |                                    |

The proportion of directors/managers attending 5 or more days of PD in the survey sample is high when compared with the figures reported by teachers and carers participating in the Longitudinal Study of Australian Children (see Chapter 2: 47.5% vs. 26.3% for teachers of 4-5 year olds, 23.7% for carers of infants). This may be due to the longer period of time (15 months for the present study vs. 12 months for LSAC), the currency of the project (2007 vs. 2004) and greater attention that has been given to the provision of professional development, and the nature of the sample (self-selected vs. requested participation). As noted in Chapter 3, a voluntary sample is more likely to already have a specific interest in professional development.

In order to further describe these data, analyses were conducted to assess the degree of variation in director/manager's attendance at professional development activities by centre location, organisational context, management context, and participants' level of qualifications and years of EC experience. Comparison of means, chi-squared tests, and correlations were used for these analyses.

Results of the analyses of the online survey data on PD&S attendance patterns showed that:

- There was little effect of centre location (state/territory or geographical location) on hours of PD attended.
- Directors/managers working in centres licensed for smaller numbers of children tended to report lower levels of attendance at PD compared to those working in centres with a medium capacity
- Directors/managers working in 'not-for-profit' services reported attending more PD than their colleagues in 'for profit' centres. Chi-squared analysis suggested that this was due to a higher proportion of directors/managers in 'not-for-profit' services attending more than 25 hours of PD: 51% compared to 41% for directors/managers in 'for profit' services. We note that this finding is similar to the results identified in Chapter 2 for the Longitudinal Study of Australian Children.
- Directors/managers experience and qualifications were associated with hours of PD attended; more experienced and more qualified staff tended to attend more hours of PD.

## 5.2 CENTRE POLICIES ON FUNDING PD&S

We begin the discussion on centre policies on funding PD&S by documenting the findings captured through three specific questions in the online survey. Directors/managers completing the online survey were invited to provide information about the budgetary arrangements for staff PD&S at their centres and to estimate the proportion of annual expenditure that would typically be allocated for these activities. Of the 457 directors/managers who provided data for this question, 406 (88.8%) said that their centre had an annual allocation of funds for professional development and support. A smaller number of participants ( $n = 278$ ) were able to provide an estimate of the proportion of the annual budget that was spent on professional development and support. Most of these centres spent less than 5% of the annual budget on professional development and support. Details are summarised in [Table 20](#).

**Table 20**  
**Annual Budgetary Allocation for Professional Development & Support**

|                                     | Number of centres | Percent |
|-------------------------------------|-------------------|---------|
| No funds allocated to PD in budget  | 51                | 11.2%   |
| Funds allocated to PD in budget     | 406               | 88.8%   |
| More than 16% of annual expenditure | 16                | 3.9%    |
| Between 11 and 15%                  | 45                | 11.1%   |
| Between 6 and 10%                   | 86                | 21.2%   |
| Less than 5%                        | 131               | 32.3%   |
| no access to that information       | 100               | 24.6%   |
| Not applicable                      | 28                | 6.9%    |

Directors/managers were asked to indicate the main reason for allocation of funding for professional development and support. Four options were provided for directors/managers to choose from, with a further option to give “other” reasons. Responses were available for 448 centres, as presented in [Table 21](#). The most common reason was to address/achieve individual staff members’ goals (38.2%). Centre based reasons were also common, totally 44.9% of reasons: “working towards the centre’s vision or mission statement” (22.1%) and “meeting the centre’s accreditation and licensing needs” (22.8%).

**Table 21**  
**Basis for Allocation of Funding for Professional Development and Support**

| At my centre, allocation of funding for professional development activities is based on: | Number of centres | Percent |
|--|-------------------|---------|
| Individual staff goals   | 171               | 38.2%   |
| Our centre's vision/mission statements   | 99                | 22.1%   |
| Meeting our centre's accreditation and licensing needs                                   | 102               | 22.8%   |
| Funding obligations  | 18                | 4.0%    |
| Other  | 58                | 12.9%   |
| Total  | 448               | 100%    |
| Missing  | 87                |         |
| Total  | 535               |         |

To further investigate the financial arrangements for professional development and support, directors/managers were asked to indicate the extent to which payment for professional development and support was met by the staff member or the centre. Results set out in [Table 22](#) showed that the most common arrangement was for payment to be fully met by the centre (77.3%). About one-quarter (27.2%) of centres sometimes or regularly used shared payment arrangements between the centre and the staff member.

**Table 22**  
**Payment Arrangements for Professional Development & Support**

|   | Never<br>1   | Rarely<br>2 | Sometimes<br>3 | Regularly<br>4 | N   |
|---|--------------|-------------|----------------|----------------|-----|
| Payment arrangements are:                 |              |             |                |                |     |
| a) paid in full by staff member           | 274<br>60.0% | 85<br>18.6% | 61<br>13.3%    | 37<br>8.1%     | 457 |
| b) shared between staff member and centre | 231<br>53.0% | 86<br>19.7% | 97<br>22.2%    | 22<br>5.0%     | 436 |
| c) paid in full by centre                 | 14<br>3.1%   | 17<br>3.7%  | 73<br>15.9%    | 354<br>77.3%   | 458 |

Directors/managers were asked to report on the promotion, sharing and availability of professional development and support and further study in early childhood. Results, set out in Table 23, showed that 82.6% of centres regularly encouraged staff to upgrade or obtain an early childhood qualification. Funding of professional development and support for regular relief staff was less commonly available. Regular funding was only available in 29.1% of centres. The most common response was 'sometimes' (40.4%). In terms of communicating the information provided by professional development and support activities, most centres (77%) and a formal policy for participants to share this information with other staff.

**Table 23**  
**Promotion of Professional Development and Support**

| Promotion of PD by:                                  | Never<br>1  | Rarely<br>2 | Sometimes<br>3 | Regularly<br>4 | N   |
|--|-------------|-------------|----------------|----------------|-----|
| d) staff encouraged to obtain/upgrade qualifications | 4<br>.9%    | 11<br>2.5%  | 63<br>14.1%    | 370<br>82.6%   | 448 |
| f) regular relief funded to attend PD                | 62<br>13.9% | 74<br>16.6% | 180<br>40.4%   | 130<br>29.1%   | 446 |
| g) formal process for sharing PD information         | 5<br>1.1%   | 8<br>1.8%   | 90<br>19.8%    | 352<br>77.4%   | 455 |

This section based on the online survey has identified the following key findings:

- Most centres (89%) had funds allocated for PD&S. When directors/managers were able to provide an estimate of the proportion of the annual budget that was spent on PD&S most agreed that this was less than 5%.
- 60% of directors/managers said that allocation of funds for PD&S was in line with broad goals for the centre, such as meeting the vision/mission statement or individual staff goals.
- The centre often covered the cost of attending PD&S, although there were also examples of staff paying for their PD&S in full or the costs were shared between the centre and the individual staff member. In about two-thirds (60%) of centres, regular relief staff were also funded to attend PD&S by the centre.

- The vast majority of centres (97%) have a formal process whereby staff attending professional development shared their experiences with other staff.
- Most centres (83%) also had a policy of encouraging staff to obtain or upgrade their qualifications.

Those who participated in the focus groups and case study interviews were also asked to comment about how they made arrangements for PD&S experiences at their own centres. The analysis of this node shows that the availability and access to adequate funding through the centre was a strong determinant of staff participation in professional development and support. All centres, which participated in this research, identified some means of supporting staff to attend PD&S.

Various focus group and case study participants spoke of the importance of PD&S as being a significant budget item. The approach to funding staff PD&S was quite variable. In a number of participating centres, management accepted full responsibility for the costs of PD&S.

*I know that XXX (owner) puts aside \$1,500 per employee, and now she's got 10 staff. So she places a real big importance on it, and as a result of that they can use that money towards any courses that they like to do, per year, to advance their knowledge and skills. And it's all going on their personal CVs. But I think as a result, they all stay with her because she does professionally develop them really diligently and she puts that money aside for them (Case Study WA).*

*You know, there is a big difference coming here [to work] and they said, you know, "Just tell us what you want to go to" and I was just like "Ah! Can I really?" Big difference. (Case Study SA)*

*XXX (owner) pays for all our training. They pay for us to go to all our workshops, and I feel probably they feel that it's in their best interests to keep their staff informed and up to date. (Case Study QLD).*

*No, XXX (owner) will pay for the training. Like tonight we've got a staff meeting so I'll finish at 5.30 and I'll be here until 7, and that time will be paid. Which is fantastic, because it's a long day when you've then got another half an hour to travel to get home after that. I appreciate that because I know some places you just attend them and that's it. (Case Study NT)*

In many cases shared responsibility arrangements were agreed to where the centre met part of the costs and staff the remainder. There were many variations to this arrangement and staff shared mixed emotions about the fairness of these arrangements. Remuneration was offered in one or more ways, as a combination of the following strategies, depending on the centre's policies:

- Payment of cost of attendance including registration, travel and accommodation as appropriate
- Payment towards further education courses
- Provision of overtime or time off in lieu
- Payment for relief staff to cover regular staff absence

These perspectives are reflected in the following quotations:

*We [management] pay for the course, and they do it in their own time because they know they need it as part of skills here in childcare. (Case Study NT)*

*...we go in the centre's time. So X XX [director/manager] hires relief to cover us because we'll be only 4 hours. (Case Study NT)*

*We get it all in lieu. I went to a 4 hour one on Saturday morning and I got 4 hours of overtime. We're very lucky. A lot of them don't like ... we've got another 2 coming up that XXX (director) tries to organise – team ones – but they can only be after work in our own time which is met with a little bit more resistance than the day time ones.(Case Study NSW)*

*It's only just recently been brought in that the committee will pay for half. Some have been free. (Case Study QLD)*

*The only thing I had to pay for I think was my First Aid but that's because it's something you need for childcare. But other than that she [management] pays for everything. (Case Study NT)*

*I would expect that staff does some professional development in their time as part of growth, so I pay for the course but if they go – that's something that's their contribution to their future development and their future career plan. If it's something I'm sending them to, to do with a performance issue, then generally we have to pay for it. (Case Study VIC)*

*The way we get around our staff having to do two in-service, we just pay them another half an hour a week and then that covers their in-services and their staff meetings and their accreditation meetings and things like that. One of the staff members came up with the idea and we went, 'Brilliant! OK, no excuse to miss them now.' We're very lucky. It's give and take with the staff. (Case Study WA)*

*We encourage staff, if they can, to go on their days off, and then we reimburse them for their time. They pay for the course, which is tax deductible for them, and then we pay them for their time. So they're not really losing out anything by trying to go in their work hours. We've worked out for us, we really can't have any more than one person at a time off the floor on the day, because it just makes it too difficult for relief. (Case Study TAS)*

On a few occasions participants reported having to meet the full costs of PD&S themselves. While many staff expressed an acceptance of this situation, the response of some participants highlights a resentment and dissatisfaction with this situation.

*I did my own menu planning certificate. XXX (employer) said I had to have a Menu Planning Certificate. So I had to go and find a course and pay for that, which I think was wrong. I think if they wanted me to have that certificate they should have provided the course and they should have paid for it. But I had to go and pay. (Case Study NSW)*

*...but some of them [courses] are too expensive. You really have to weigh up - whether you've worked all week to pay for it. (Case Study TAS)*

*There's lots I'd love to do. There was the Reggio Emilia one I wanted to do, but it was \$500, and I just couldn't do it. I was really quite upset that I couldn't do it, because it was a weekend and it's something that I'm really interested in. But financially it's a fair amount to pay. (Case study TAS)*

Staff in one state had managed to use Australian Workplace Agreements in a favourable way to incorporate significant professional development allocations.

*That was what we put in our agreements, that 99% of the training the centre pays for and you get released off the floor. If you're doing it after hours, that they're going to be paid at overtime rates for that or regular rates for it, and what we said is that if you do training during the day the pays for it and you get time off the floor. If it's something that the has identified as you need to do, like, for instance we've got a new cook who just did the nutrition training and that was one of the things she had to do, and it was only offered or she chose to do it out of hours, mainly so that I didn't have to cook during the day, so she got paid in overtime rates for doing that because it was a course that I had said to her 'You need to do this', but there are some things, mostly like conference things, like the conference of a hundred or so dollars that I can't afford for everyone to go to, but that if people want to go to it they can have time in leave to go to it. So that's what we've put in place and people are happy with that. (Focus Group TAS)*

One director/manager from WA identified alternative strategies which could be used to fund professional development. She highlighted grants that they had sought and other measures taken to pay for training opportunities to be available in her remote town.

*They have a community chest which ... and you can apply, and we've applied twice now, the first time they gave us \$1000 because the 's looking at setting up after school care next door and they gave us \$1000 worth of ... for a shortcut. But when we went back to them again for the second time for the [name of consultant], the funding for that, then we've spent our money and ... but they were very generous, very generous (Focus Group WA).*

What is clear from these examples is that attitudes and commitment to the provision of PD&S vary considerably among participating centres. It is interesting to capture the views of leaders, managers and centre owners who often act as the gatekeepers of professional development. Among those who invest heavily in PD&S for their staff is a strong view that the investment is returned to them through low staff turnover, higher quality outcomes for children and a more satisfied and fulfilled workforce.

*With our budget, we've allocated certain amounts per staff member as well, but if it comes down to a circumstance where an individual comes with a certain interest in a session, it really comes back that we want value for our money as well, so they need to be working at the professional standard that whatever the outcome of that session is going to be reflected in their day to day activities but also that they'll actually do a presentation that can share that information. (Case Study TAS)*

*I'm one of those people who don't really work with budgets, because I think that if you can keep your centre full, you will find that there'll be enough money, or enough in the budget, to be able to provide all the other things that you need. We do have a business manager. So the business manager does keep me on track to a certain degree. I do not expect staff, in any way, to buy anything. Not even if they need to make something in the room. They need to bring me the*

receipts and I'll pay for it, because they don't earn enough for them to do that. even our workshops. We do not expect the girls to pay for workshops. It's all in our budget. And you can definitely do it, but you have to keep your centres full. So to be able to keep your centres full you must have good trained staff. So therefore workshops are an incentive for us to keep our centres full, because it then becomes profitable for us to have them going to workshops. So in the end, it's a means to an end. (Case Study QLD)

It's returned to me as long as they stay in this centre. I don't have a lot of turnover.... I've got my own budget. And I still make money. I think maybe I could make \$11,000 more profit, but why? At the end of the day what's \$11,000. I want to stand by something high quality and if I want to feel all those things, to me that's what I have to go through, and the expense in order to be that. You can't just try to be high quality if you're not prepared to go through the expense and to educate your staff. And what do I ask for in return? By paying their professional development? Is that they attend it and they use it. So I'll pay for it – only their commitment. And if they're not willing to commit to it, then I'm not willing to employ them. And that's the basis of your work I find. (Case Study WA)

It cost us a fortune, but it was probably the best spent money, to be honest. It probably cost us more than \$10,000 altogether to do it [practitioner enquiry project] by the time we paid for the actual doing of it, the staff having time off the floor. We then had an evening where we invited parents to see what we'd all done, and to celebrate for the staff, to say, 'Look what you've done'. Each centre – it probably cost about \$10,000 each, so it's a lot of money. But it was really worthwhile. (Case Study ACT)

### 5.3 BELIEFS ABOUT THE PERCEIVED VALUE OF PD&S

All three data collection instruments, the online survey, focus groups and case study interviews, contained specific questions aimed at ascertaining participants' perceptions about the value of PD&S experiences. The specific question on the online survey relating to the value of PD&S required centre directors/managers to rate the beliefs in terms of the statement "At this centre, ongoing professional development of staff is fundamental to maintaining service quality". The 5-point scale provided, ranged from 1 = 'strongly agree' to 5 = 'strongly disagree'. Results presented in [Table 24](#) show the number and percent of directors/managers who selected each level of rating and the average (Mean) rating for the whole sample. Note that a lower mean score indicates a more positive rating.

**Table 24:**  
Directors/Managers' Ratings of Links between PD&S and Quality Outcomes

|   | Strongly agree | Agree | Neither agree nor disagree | Disagree | Strongly disagree | N   | Mean rating | SD  |
|---|----------------|-------|----------------------------|----------|-------------------|-----|-------------|-----|
|   | 1              | 2     | 3                          | 4        | 5                 |     |             |     |
| Ongoing PD at this centre is fundamental to service quality | 235            | 176   | 18                         | 2        | 1                 | 432 | 1.52        | .62 |
|   | 54.4%          | 40.7% | 4.2%                       | .5%      | .2%               |     |             |     |

Results showed that the majority of directors/managers were very positive about the fundamental importance of professional development and support for maintaining service quality (95% agreed or strongly agreed). These figures are reflected in lower mean score: 1.52 (SD = .62).

### ***Within-group differences***

Comparative analyses were conducted in order to ascertain any differences in directors/managers' ratings by location (state/territory and population density), organisational context (centre capacity and usage), management context ('not-for-profit' vs. 'for profit'), and participants' level of qualifications and years of early childhood experience. Results of these analyses showed no difference in ratings.

During the focus groups and case study centre interviews, the Research Team asked participants a range of questions with a view to seek participants' beliefs about the significance of PD&S, for themselves as well as their staff. Taking this data as a whole, we have been able to identify three broad categories that reflect participants' perceptions about the value of PD&S as per a) *Leadership and support from the director/manager*, b) *PD&S as a way of meeting specific needs of the centre* and c) *PD&S creating an organisational culture*. Data collated under each of these three nodes are explored in turn.

### ***Leadership and support from the director/manager***

This node was reinforced by the value directors/managers placed on their personal professional development and purposes they explained for their attendance. Directors/managers spoke of their passion for lifelong learning including the importance of considering their own professional development. Words which reflected their interests in continuing learning included '*passion*', '*motivation*', '*growth*' and '*role model*'. Directors/managers spoke of the need to keep up to date and the importance of keeping abreast of changes within the early childhood sector.

Directors/managers discussed their approach to professional development and support for their staff, both as individuals and as a team of staff working together at one centre. They flagged the need for performance appraisal systems as a means of identifying individual staff needs. They identified that staff should also be able to satisfy individual interests as well as the centre's needs through PD&S opportunities.

*We do what we call 'Performance Evaluation Review'. As part of that, each staff member identifies their training needs and then their PD needs for the year. (Focus Group ACT)*

*We do 6-monthly appraisals and part of that is a question about 'what in-services or what extra training would you like to do?' (Case Study NSW)*

*It's based on individual needs. So quite often we get the information sent to us and then we evaluate if we need to get these people to our centre so everyone can attend, or if there's one staff member in particular that really needs that specific. (Case Study QLD)*

*Basically it [planning for PD&S] starts with staff development meetings, which we hold in January, February, every year. And that sort of kicks off the year on a really positive note. So it's an opportunity for the staff to meet with me for an hour or so, confidentially, and we go through a set of questions that give an opportunity to do a self-evaluation on themselves. And I evaluate their work performance as well. And we get together and we look at similarities, differences, and we work towards any goals that may need to be achieved.*

*And they're also recognised for their positive work, their high quality work, contributing to the centre. And they talk about things they would like to achieve for their rooms. Things that can make their workplace a better workplace. Any policies or procedures or routines they'd like to see improved, and then they give me feedback on how they think it can be improved. And one of questions is specifically about staff professional development. So any information that I've received and sourced on any training that is available through out the year. They sit down with me and we look at what they would like to enrol in, and the reasons why. (Case Study QLD)*

Among other strategies employed was self selection of PD&S by staff according to the individual interests.

*...people might have particular interests that they could follow up on and inspire the rest of the staff team by their practice – so I really value that. (Focus Group SA)*

*XXX (training provider) send out a flyer with all the courses that are on for the next three months and at a staff meeting we had it around and then we choose what interests us, what we think would be good... and then we choose and we enrol.(Case Study TAS)*

*Basically XXX (director) just puts a lot of things on the table in the staffroom, because that's where everyone has their morning tea, afternoon teas, and if they're there for lunch, lunch as well. And when people see something that they're interested in, they can go see XXX (director), and if she only gets one or two people interested she'll just send those people individually. If she sees that, you know, there's five to ten of us interested, she'll try to get them to come out here for one of our staff meetings. (Case Study VIC)*

*At the beginning of this year we got handed a mailing training calendar and that goes through the whole year, and you basically just have to go through and choose a few courses that suits you, that suits your room, if you need anything to work on. Like I needed to work on observation, so XXX (director) allowed me to go on an Observations training course. (Case Study WA)*

Management Committee members and owner-operators of childcare centres who were interviewed discussed their role and the role of the director/manager in relation to PD&S. Many of these participants believed that the director/manager was pivotal in supporting staff to enhance their knowledge base.

*Within the last couple of years we've made decisions regarding the funding – what we fund and what we don't, and encouraging them. Last year, when I was involved with the Exec. Committee, staff put in if they're going to do extra courses, any sort of professional development, they have to put in as to why they want to do it and then we have to accept. (Case Study VIC)*

*XXX (director] certainly does do a lot of encouraging of them to further their studies to become qualified. (Case Study ACT)*

*I know that XXX [director] is very clear on identifying and encouraging professional development amongst the staff team, especially because a lot of them are quite young and even though they're qualified, they don't have a lot of experience as yet, which is great, and given the longevity that I've had with the , I can see the difference that that focus makes in terms of their general interest in their job, their focus, their commitment, they know why they're*

*here, they know they can progress, they know that there's stuff to aim for in the future. It gives them a lot of direction and focus I think. (Case Study SA)*

Comments made by childcare centre staff also showed that they valued their director/manager/owner-operator offering opportunities for PD&S and that centre management took into account staff needs and interests in allocating appropriate resources.

*[Director/Manager's] sort of way of thinking is the more that can go, the more sort of beneficial it is because then you can just take it on board yourself without having it second-hand being said to you. And in saying that, say you go to a particular thing and say, 'I really enjoyed that. I really want to extend on that', [director] might then go, 'You know what?' We've got also in the staffroom, there's a catalogue from the [name of training provider] throughout the whole year of what training is available. We look through that and say, 'Oh, I'd really like to do that and I think that would be beneficial'. So you go to [director/manager] and she will organise the time off for you. ... It's never 'No, you can't go', it's just very...there's the support. It's very supportive. (Case Study SA)*

*[Director/Manager] likes us to do a certain amount of training – a minimum of two throughout the year. She puts up calendars that get sent to the centre. The workshop calendar's in the staff room – we write our names on them if we want to go and also let [her] know, or she often comes us and says, which happened on Wednesday, 'There's a Communicating with Parents workshop I've put you into, if you want to go and do that.' (Case Study ACT)*

*If I saw something I wanted to do I'll go to her and if we had the staff to cover me being away she would definitely push me to go. (Case Study WA)*

*I think because it's such a good centre that it puts an impact on the children and there's just so much going into the centre, like resources, training. She [owne r/manager] looks after us and that makes us enjoy being here I think. And just a whole appreciation. I think that's what every worker needs to keep going, basically. To have that appreciation saying, 'Oh, I am doing a good job'. You've got some centres out there they are .... You do your job and that's it, whereas here we do get that encouragement, and if we do something good it's always acknowledged. It just makes you feel good about your job and that you know you're doing the right thing and doing a really good job (Case Study WA).*

Interestingly, remotely located participants involved in further education spoke of the role their director/manager played in supporting their enrolment in credentialed studies through a University or TAFE college. QLD and WA directors/managers identified how they organised times after hours for groups of employees who were studying for a formal qualification, to get together for study purposes.

*I think study nights help. Because otherwise you sit at home and find other things to do instead of doing study. But if you have it here you've got to sit down and do it and if you get stuck you can ask the others. (Case Study QLD)*

*With my trainees, the only way you really get them motivated is when they've got the study time is to put a couple on at the same time and I sit there with them. Because you haven't got your local TAFE here, but a teacher that*

*teaches them are 4 or 5 hours away and they won't get on the phone and phone them up. So they rely on me. (Case Study QLD)*

The director/manager in WA also explained that she played the role of a mentor/tutor for staff doing formal training as there was limited access to support from the training provider where the courses originated. As these comments were made outside the recorded interview, and noted in our field notes, no direct quotations are available.

Ancillary staff, such as the cook in a case study centre, also identified support from the director/manager. The following comment demonstrates how one such staff member saw all the staff were valued and valued equally in relation to professional development and support:

*She is always encouraging and sending us to courses to better ourselves. She discusses with staff about what's interesting to go to and helps us to work out which ones to go to. (Case Study SA)*

### **Meet specific centre needs**

This second node was defined in terms of directors/managers organising professional development and support as a result of having individual children at their centres with specific needs which current staff were unable to meet sufficiently. Professional development activities may have also been arranged due to factors such as changes in legislation, emergence of new approaches/information/research of particular relevance to a centre's program, and/or evolving needs of children and families being served at a centre.

*We also look at, in our service, the needs of our families and our children before we look at what sort of training we want to implement in our service. We have a number of children that have addition needs, so we will actually source the various organisations (Focus Group WA)*

*I think it's also about matching the training for what's current ... we have a child who's not treated well in the family, a lot of behaviour issues, so we accessed some training about dealing with children (Focus Group QLD)*

### **Create a culture of professional development and support**

This node was defined in terms of factors that influenced staff' perceptions about the importance of professional development and support within their centres. Findings show that directors/managers/owner-operators were pivotal in developing and nurturing a culture of valuing professional development and support. Comments made by staff in remote areas and smaller states, who spoke of travelling long distances to attend conferences and in-services also reflected the presence of a professional development culture within a centre. They described professional development and support as part of the ongoing happenings at their centres and links to quality practice.

*At staff meetings. On our agenda there's a training topic, and we bring up all the training that we've been to, and have been spoken to about. (Case Study VIC)*

*We have staff meetings, I think every 2 months that go over what's been happening in those months. What needs to be changed, improved on, and then if everything's going OK it's just to let everybody know it's going OK. (Case Study NT)*

*We have a lot of meetings between rooms. We're just really good on relationships here. So a lot of it's very informal. We've actually got to be a bit more diligent in writing things down that we talk on and agree on with staff.*

*We really support each other here. (Case Study NSW)*

*I find this place really interesting. I can't put my finger on what it is, but there's a really good atmosphere here of encouraging people's ideas, even though everybody's got a very strong personality,...with strong opinions, they still respect each others ideas and try things out and listen to the ideas of people (Case Study NSW).*

Management Committee members who were interviewed at case study centres also described how they used PD&S as a means to attract and retain suitable staff to their centre.

*... if we are looking for new staff, it's a good enticement to new staff because presumably there are lot of services where it isn't perhaps as much of a focus, it would perhaps help raise the profile of the industry given that it's not very well paid, it's relatively low-profile, people know it's hard work for not a lot of return, that's a selling point for us – we can say – and we've used that in ads recently and we've noticed the difference in the response that we've had. It specifically mentioned the phrase professional development and people have expressly asked "What do you mean by that, what are you offering?", so that has really grabbed their attention, it's been very interesting. (Case Study SA)*

*As I've said before, from a management committee point of view, we support professional development and I think it's in two ways. One – to support the development so that the childcare workers are providing greater quality of care to the children, so there's a benefit on outcome there, but it's also, in part, used as reward in the way of retaining our staff as well, by giving them opportunities to develop and understand what's happening in a childcare sense, and their own personal development. (Case Study ACT)*

## 5.4 PD&S PRIORITIES

The online survey questionnaire was also used to capture the perceptions of directors/managers about the priority topics for PD&S for childcare centre personnel. This data was collated through two specific questions: one asked the directors/managers to nominate their personal priorities for further learning, and the other asked that they record their beliefs about the most important area for PD&S for their centre staff team as a whole. Participants were able to write these answers using their own words, and for ease of analysis the Research Team, coded these responses using a variety of nodes reflecting the key themes that emerged from these data. Firstly, we present the coding scheme applied to the directors/managers priorities, and the key findings that emerged. A similar discussion is then presented in relation to the priorities of the centre staff team as a whole.

### a) Coding scheme applied to centre directors/managers' priorities for PD&S

- i. Curriculum programming and planning
- ii. Business management
- iii. Leadership and communication
- iv. Staff relationships
  - Staff morale
  - Team building
- v. Training in response to legislative requirements
  - QIAS
  - Regulations
- vi. Further studies

The number of references coded to each node under each state/territory, and the total for the whole sample, are identified in [Table 25](#). The total scores in the final column reflect the level of interest in particular topics/issues as identified by centre directors/managers. However it is important to remember that these counts or total numbers provided in [Table 25](#) do not necessarily reflect the priority status accorded to these topics/issues. That is, participants were not asked to rank their priorities; but simply asked to list three priority topics/issues for PD&S. The total scores therefore reflect the frequency of how many centre directors/managers referred to these topics/issues as an area of high interest. The listing of the coding schedule we used also does not reflect any ranking or prioritising of these topics/issues.

**Table 25**  
**Priorities for PD&S for Directors/Managers by State/Territory**

| Priority                              | NSW | TAS | SA | QLD | WA | NT | ACT | VIC | Total |
|---------------------------------------|-----|-----|----|-----|----|----|-----|-----|-------|
| Curriculum, programming, and planning | 59  | 11  | 22 | 26  | 11 | 2  | 8   | 26  | 165   |
| Business Management                   | 35  | 20  | 17 | 18  | 7  | 5  | 1   | 20  | 123   |
| Leadership & communication            | 26  | 9   | 20 | 21  | 13 | 2  | 2   | 22  | 115   |
| Team building                         | 35  | 8   | 14 | 26  | 6  | 3  | 1   | 19  | 112   |
| Staff morale                          | 5   | 1   | 4  | 10  | 0  | 1  | 0   | 8   | 29    |
| QIAS                                  | 24  | 7   | 4  | 13  | 7  | 2  | 1   | 7   | 65    |
| Regulations                           | 19  | 10  | 2  | 17  | 5  | 2  | 2   | 10  | 67    |
| Further studies                       | 3   | 1   | 2  | 1   | 1  | 0  | 1   | 3   | 12    |

As can be seen from [Table 25](#), aspects that could be broadly categorised as curriculum, programming and planning yielded the highest number of counts, with 165 directors/managers listing this as a priority for themselves. In particular, respondents want to be kept abreast of changes and innovation in curriculum so that they are better able to demonstrate leadership and support their staff in innovative approaches to curriculum. Curriculum related topics were also mentioned as an area of high priority for centre staff as will be indicated in [Table 26](#). The second most identified areas were business management (n=123) and leadership (n=115). When taken together, these comprise the second most frequently identified category as a priority for directors/managers. Approximately 132 respondents also identified the need for on-going access to PD&S based on legislative compliance requirements, particularly in relation to licensing regulations (n=67) and the QIAS (n=65). Issues concerned with staff relationships, particularly in relation to team building (n=112) and staff morale (n=29) were also frequently mentioned by these respondents as a priority for their own PD&S. When combined, these categories indicate team leadership as a key priority for directors/managers. Within these categories directors/managers mentioned time management, conflict resolution, communication and professional development most frequently. Only 12 of these centre directors/managers referred to further studies as a priority for their PD&S.

Each of the identified nodes/sub-nodes are described in more detail in the following sections. Although the Research Team can identify each original quote by the state/territory location of the participant, topics were very similar across the different states/territories. For this reason, in our reporting, the state/territory identifiers are not listed except for areas that were likely to be state/territory specific.

***i. Curriculum, programming and planning***

Professional support and development in this node were identified in terms of directors keeping abreast of current practices and also provision of information which promoted “higher order thinking”. This could be directly related to their understanding of the link between professional

development and quality outcomes. Emergent curriculum professional development and support was consistently identified as an area of need. Because of the differences in state/territory curriculum documents, state/territory identifiers are included in the following examples.

|   |  |
|---|--|
| <i>The Emergent curriculum and current programming styles (NSW)</i>   | <i>Research in early childhood and the application of research to practice (NSW)</i>     |
| <i>Keeping abreast of changes in Curriculum development (ACT)</i>   | <i>Developing thinking dispositions in children (ACT)</i>                                |
| <i>Inclusion environments and planning research (ACT)</i>   | <i>Keeping up to date with the latest in childcare practices (VIC)</i>                   |
| <i>Some psychology and ongoing child development and research (VIC)</i>   | <i>Ensuring best practise in all areas &amp; innovative ideas with programming (QLD)</i> |
| <i>Meeting best practices for children (QLD)</i>  | <i>Current research - innovative ideas (NT)</i>  |
| <i>Effective delivery of up to date information and changes to staff to inspire them with this so they will be active to follow through with these changes (NT)</i> | <i>Behaviour management (WA)</i>   |
| <i>Developing children's self esteem (WA)</i>   | <i>Including children with cultural diverse backgrounds into childcare (WA)</i>          |
| <i>Relationship based curriculum training (SA)</i>  | <i>Children's programming and development (SA)</i>                                       |
| <i>Outdoor Learning Environments (TAS)</i>  | <i>Reggio Emilia Philosophy and Practices (TAS)</i>                                      |
|   | <i>Current Best Practice for children/ Centre, current child development (TAS)</i>       |

**ii. Business management**

This node identified areas of administrative tasks and efficiency of centre operations. Centre directors also identified the need for skills in marketing. The following statements were coded to this node:

|   |  |
|---|--|
| <i>Marketing</i>  | <i>Time management</i>   |
| <i>Financial and business management</i>  | <i>Time management to allow me more 1:1 time with my staff to support them.</i>                                  |
| <i>To better run the Childcare Centre, to make it more efficient</i>  | <i>Financial and HR management for myself as a director.</i>   |
| <i>Administration<br/>Management, planning for future changes to a range of requirements<br/>CCMS Regulations</i> | <i>Finances<br/>Increasing understanding of the direct relationship between costs and budget/ fees/ expenses</i> |
| <i>Accounting, governance, Work Choices</i>   | <i>Middle management in Local Government.</i>  |

*Managerial skills/ recruitment/ legalities*

*Website development*

**iii. Leadership and communication**

Respondents across all states/territories identified *leadership* as a key need for professional development and support. Directors/managers identified communication as a component of leadership that was an important choice of professional development for themselves. Communication processes were determined in terms of leadership and with particular groups ie; culturally and linguistically diverse families, working with committees, working with 'difficult' families and working with staff. Responses identified needs for training such as:

*Working effectively with committees*

*Interpersonal skills*

*Networking as a form of communication - forming hubs to support communication processes amongst professionals*

*Being involved as professional local hub group co-ordinator*

*Leadership training course*

*Mentoring*

*Leadership*

*Conflict resolution*

*Effective communication*

**iv. Staff relationships**

Two areas were identified under this sub section: staff morale and team building.

- Staff morale: This node recorded directors/managers' perceptions of the need for professional development and support related to staff morale. Statements highlighted the importance of staff health and potential of quality outcomes associated with this. Responses in this area highlighted the following:

*Managing staff burnout and stress.  
How to lift morale in large teams and trying to keep as many people as possible happy.*

*Juggling front line management and staff expectations.  
Effective delivery of up to date information and changes to staff to inspire them with this so they will be active to follow through with these changes.*

*Staff commitment.*

*Motivating staff.*

- Team building: NSW, VIC and QLD recorded the most responses to be coded to this node. Whilst there was some overlay with communication processes and staff morale, directors identified the following across all states:

*Team building*

*Dealing with staff issues*

*Supporting and encouraging staff*

*Team development*

*Mentoring staff*

*Workplace culture.*

**v. Training in response to legislative requirements**

This node housed two specific nodes – QIAS and Regulations.

- QIAS: All responses coded to this node identified that QIAS training was important in terms of processes for and keeping abreast of changes in the process.
- Regulations: All states/territories also identified that regulations as a part of professional development and support was imperative. States/territories all referred to need for training in the areas of QH&S, policies and procedures, updating on changes to regulations, child protection, compliance and current changes to childcare benefit.

**vi. Further studies**

Directors also identified professional development and support which was pertinent to themselves and further training. There were responses coded to this node across states/territories, with no response being recorded for NT. Of particular interest was the request from directors for Certificate IV training, Workplace assessor, with five responses being coded to this type of training.

**b) Coding scheme applied to centre staff priorities for PD&S**

Directors/managers were asked to identify the types of professional development and support which were key priorities for staff in their centres. Findings taken from the survey were categorised under the following four sub nodes described below.

- i. Pedagogical Practices
  - Behaviour management
  - Curriculum programming and planning
  - Working with families
- ii. Staff relationships
  - Team building
  - Staff morale
- iii. Training in response to legislative requirements
  - QIAS
  - Regulations
- iv. Further studies

The number of references coded to each node under each state/territory, and the totals for the whole sample, are identified in Table 26. As explained when describing the findings in relation to PD&S priorities for centre directors/managers, the total scores identified in Table 26 also reflect the frequency of how many centre directors/managers referred to these topics/issues as an area of high interest for PD&S for their staff. The above coding schedule we used in classifying these responses from the online survey also does not reflect any ranking or prioritising of these topics/issues for childcare centre staff.

**Table 26**  
**Priorities for Professional Development for Centre Staff by State/Territory**

| Priority                             | NSW | ACT | VIC | QLD | NT | WA | SA | TAS | Total |
|--------------------------------------|-----|-----|-----|-----|----|----|----|-----|-------|
| Behaviour management                 | 25  | 0   | 15  | 29  | 3  | 9  | 6  | 6   | 93    |
| Curriculum, programming and planning | 99  | 5   | 55  | 58  | 7  | 22 | 39 | 26  | 311   |
| Working with families                | 8   | 1   | 8   | 7   | 1  | 0  | 5  | 3   | 33    |
| Team building                        | 31  | 6   | 21  | 17  | 3  | 13 | 17 | 9   | 117   |
| Staff morale                         | 3   | 1   | 2   | 5   | 0  | 0  | 0  | 0   | 11    |
| QIAS                                 | 18  | 1   | 3   | 9   | 2  | 8  | 3  | 5   | 49    |
| Regulations                          | 14  | 0   | 5   | 10  | 2  | 3  | 7  | 4   | 45    |
| Further qualifications               | 0   | 1   | 3   | 2   | 1  | 0  | 1  | 1   | 9     |

The coding schedule that emerged from the responses that related to PD&S priorities for childcare centre staff was more wide-ranging and encapsulated three sub-areas and therefore was pooled together under a broader category label of Pedagogical Practices. Within comments that were categorised under this node, frequently noticeable were topics in the areas of behaviour management (n=93), curriculum, programming and planning (n=311), and working with families (n=33). The area of curriculum, programming and planning was the most popular topic/issue area identified as a priority for PD&S for centre staff. Within this area directors/managers most often mentioned the need for PD&S in the areas of curriculum innovation and keeping abreast with changes in pedagogical approaches. Comments included references to emergent curriculum, learning stories and pedagogical documentation / portfolios. There was significant variation in the identification of topics within this category reflecting local priorities and curriculum trends in different jurisdictions. In addition to these general identifications, respondents also mentioned the need for specific PD&S applying to these approaches with infants and toddlers and children with additional needs.

The second most frequently identified area was Staff Relations, in particular issues concerned with team building (n=117) and staff morale (n=11), giving a total of 128 identifications. It is worth noting that staff relations fall under the larger umbrella of management and leadership concerns identified as an area of priority for directors/managers as indicated previously in relation to Table 25. Another area that was frequently identified as a priority for centre staff comprise of training in response to legislative requirements (n=94) including specific comments related to the QIAS (n=45) and Regulations (n=49). Only 9 directors/managers referred to further qualifications as a possible priority for their centre staff PD&S needs.

To provide specific examples of how respondents identified priorities for centre staff, we also use qualitative data for each of the identified nodes/sub-nodes. As noted before, although the original quotes can be identified by the state/territory location of the participant, topics were very similar across the different states/territories. For this reason, state/territory identifiers are not listed except for areas that were likely to be state/territory specific.

#### ***i. Pedagogical practices***

This node was broken down further to represent three areas of daily practice – behaviour management, curriculum, programming, planning, and working with families.

- ***Behaviour management:*** All states/territories, except the ACT, had at least one response that was coded to the area of behaviour management as a professional development requirement. All respondents used the following terminology:

*Behaviour management*

*Behaviour guidance for children with challenging behaviours*

*Behaviour management techniques and skills*

*Positive guidance*

*Behavioural Management - But not the same courses that have been presented year after year*

*Need hands on strategies for staff to implement to see results*

- Curriculum, programming and planning: Responses coded to this node were not dissimilar to those requested by directors/managers for themselves. Again there was an emphasis on emergent curriculum across states/territories and for information pertaining to Reggio Emilia principles. There were also requests for specific areas of special need, training focused at under twos and uses of technology as part of the programming process. Commonly coded responses from all States/Territories included the following:

*Programming*

*Outdoor environment*

*Attachment theory and primary care giving*

*Emergent curriculum*

*Documentation of children's learning*

Responses coded to these nodes which were less common were:

*Managing stress...children (ACT)*

*Sexual development (WA)*

*The use of natural materials (VIC)*

*Presentation of materials so that it is inviting and appealing (VIC)*

*Te Whariki (VIC)*

*Heuristic Play (SA)*

- Working with families: Whilst the numbers of responses coded to this node were not as extensive as the previous two nodes, all states except WA recorded a response in this area. In NSW only, PD&S needs in this area extended beyond working with families to include components of social work for families in difficult circumstances. Four of the eight NSW responses coded to this node reflected this type of need. Comments included:

*Assisting children in stressful situations e.g. family break-up*

*Discussing with families concerns that staff may have with children in their care*

*Dealing with difficult families*

*Developing skills that assist in the understanding of child development and the identification of children with additional needs and the services available to the families that can help the child achieve positive outcomes*

The remainder of coded responses related specifically to working in partnership with families and ensuring their involvement in the centre. NSW noted the need for training which involved working with families from CALD backgrounds. QLD identified training for communication with diverse family needs. This matter was not acknowledged by any other responses.

*Integrating CALD families into our services (NSW)*

*Guiding and learning how to support children and families from diverse life experiences (QLD)*

**ii Staff relationships:** This node was broken down further to represent two areas– team building and staff morale.

- Team building: All states/territories recorded responses coded to the node. Directors/managers identified this as one of the most important areas for staff professional development and support. Common topics across all States were:

*Conflict resolution*  
*Communication*  
*Organisational skills*  
*Team building*  
*Professionalism*

Responses which fell outside the above topics were:

*Staff professionalism (QLD)*  
*To have the confidence to make decisions on their own and to take pride in their room environment (TAS)*  
*Developing thinking dispositions (ACT)*

Another set of responses identified leadership skills for staff. These were coded to five of the 17 responses in SA, were identified once in WA, and identified in VIC as:

*Leadership skills in qualified staff*  
*Supervision*

- Staff morale: The following states/territories recorded responses coded to this node: NSW, ACT, VIC and QLD. Their responses particularly related to:

*Motivation*  
*Inspiring staff*  
*Encouraging personal growth and development*  
*Keeping enthusiasm active*

**ii. Training in response to legislative requirements**

QIAS and training related to regulations was identified for staff; however, the number of responses recorded for these nodes was less than that recorded for directors/managers' needs in this area. For QIAS, 49 entries were made for staff, compared to 65 for directors/managers; or regulations 45 entries were made for staff needs, compared to 67 for directors/managers.

- QIAS: All states/territories identified *accreditation*. In addition to were the following:

*Accreditation. We have many recent graduates and trainees who are nervous about Accreditation. (NSW)*  
*Support with QA in terms of feeling confident that by doing the best for children they will be dealing with the programming demands of Accreditation. (QLD)*  
*Successful during self-study and validation. (TAS)*  
*Understanding the role of Accreditation in childcare. (WA)*

- *Regulations:* ACT did not record any responses coded to this node. Responses coded to this node were identified as

*First Aid,*  
*Food handling and nutrition, child protection*  
*OH & S*

**iii. Further studies**

There were only nine responses coded to this node. NSW and WA did not record responses at this node. Directors/managers used the following words in this area:

*Upgrading qualifications*  
*Completing qualifications*  
*Extending qualifications*

**Responding to Research Question No. 1 – Summary of Key themes:**

Key themes that have emerged from the data presented in this chapter include

- Financial assistance to attend PD&S is highly valued and ensures childcare centre staff can be expected to share information received with other staff at their centres through a variety of ways.
- The perceived value of PD&S is dependent upon the leadership shown by the child care centre's director/manager/owner-operator. Those who access PD&S for themselves are more likely to value this for their centre staff.
- A culture of PD&S is created and maintained by the director/manager through staff appraisals, access to ongoing development and support information as well as encouragement to attend.
- PD&S is valued for a variety of purposes - as a direct response to an identified need of the centre/children and/or staff; to inquire into new information and to keep abreast of evolving knowledge base within early childhood.
- The most frequently identified priority topics/issues for PD&S focused on curriculum, programming and planning.
- In addition, business management, leadership and communication and staff relations were identified specifically as priority areas for PD&S for directors/managers of childcare centres.
- Likewise, pedagogical practices, including innovations in curriculum planning and programming, behaviour management, working with families and team building were also frequently identified as priority areas for PD&S for childcare centre staff.
- There is also considerable variation in the patterns of childcare centre staff attendance at PD&S. There is evidence that most childcare centres who participated in this study would have supported the equivalence of five days of PD&S per year per practitioner.

## CHAPTER 6

### RESPONDING TO RESEARCH QUESTION 2: RANGE OF PROFESSIONAL DEVELOPMENT AND SUPPORT EXPERIENCES

This chapter describes the findings of this study in relation to second research question:

- **What are the range of measures that are effective in supporting childcare centres to implement improvements/changes to early childhood policy and practice?**

The focus for this second research question is the nature and types of PD&S experiences accessed and available to childcare centre personnel throughout Australia. Examination of the data collated by the Research Team indicated that findings could be explored in terms of onsite PD&S experiences located within centres and those which occurred off-site in settings away from individual centres. As presented in previous chapters, although the data extracted from the online survey, focus groups and case study interviews are integrated within each section, the source of the data is identified to ensure clarity and facilitate interpretation of a complex and varied data set.

#### 6.1 CUSTOMISED PD&S EXPERIENCES WITHIN CENTRES

Collation of the online survey data shows that a total of 413 directors/managers provided information on these on-site PD&S experiences. To simplify the data analysis, professional development topics that were covered during these customised on-site PD&S opportunities were categorised under three broad areas as follows:

- a) pedagogical practices,
- b) training in response to compliance requirements, and
- c) management and leadership.

Each area was defined by a number of subheadings, and examples within each subheading, to enable accurate coding. Professional development categories and subcategories are summarised, with examples on [Table 27](#) that follows.

Results showed that the PD&S topics under the broad area of 'training in response to compliance requirements' were offered by most centres ( $n = 397$ ). PD&S in the area of 'pedagogical practices' was also offered by a majority of centres ( $n = 296$ ). Topics in the area of 'management and leadership' were provided by a smaller number of centres ( $n = 161$ ).

**Table 27:**  
**Categorisation of online survey data on on-site PD training**

| PD Area  | PD Subheadings   |
|--|--|
| a) Pedagogical practices                           | Behaviour guidance<br>e.g. behaviour management, bullying, biting  |
|  | Programming and Planning<br>e.g., emergent curriculum, project approach, documentation, learning stories, portfolios |
|  | Transition to school   |
|  | Curriculum<br>e.g. music, movement, outdoor environments, science, Leap into language, Brain gym                     |
|  | Visits to other services   |
|  | Diversity and Inclusion<br>e.g. Aboriginal childcare, speech, Aspergers, Auslan                                      |
|  | Families<br>e.g. communication with parents, working in partnership  |
|  | Child development<br>e.g. understanding attachment   |
|  |  |
| b) Training in response to compliance requirements | Health<br>e.g. asthma, diabetes, hygiene, allergies, Safe sleep, infection control, otitis media, immunisation       |
|  | OH&S<br>e.g. manual handling, staff immunisation, back care  |
|  | First aid ,<br>e.g. CPR, epi-pen, anaphylaxis  |
|  | Quality Assurance and Accreditation.<br>e.g. CCQA, NCAC, quality improvement   |
|  | Child protection<br>e.g. mandatory reporting, protective care  |
|  | Road Safety  |
|  | Regulations<br>e.g. duty of care, regulations, risk management, code of conduct                                      |
|  | Fire Training<br>e.g. emergency evacuation, use of fire extinguishers  |
|  | Food Safety and Nutrition<br>e.g. diet intervention, food handling   |
|  |  |
| 3. Management and leadership                       | Team Work<br>e.g. staff motivation, communication training, team unity, personality profiles, conflict resolution    |
|  | Staff Induction  |
|  | Organisational management & professionalism<br>e.g. Policy development, team goal setting, business planning, budget |
|  | Superannuation   |
|  | Computers/IT   |
|  | Leadership and Mentoring   |

On-site centre professional development strategies were summarised for the three types of provisions (staff meetings, child free days, mandatory training sessions) and the three areas of PD&S listed above (pedagogical practices, leadership and management, training in response to requirements). Data presented in Table 28 (Columns 1, 4, 7) give the total number of centres that provided each type of provision for the three areas of PD&S. Results show that staff meetings were the most typical form of on-site provision of PD&S and were used to provide all types of PD&S: 277 directors/managers reported that staff meetings were used to provide PD&S in the area of pedagogical practices, 318 used staff meeting to provide training in response to mandatory requirements, and 137 used staff meetings for PD&S in the areas of management and leadership. Child free days were less common, but again were used to provide all types of PD&S: 75 for pedagogical practices, 61 for training in response to requirements, and 37 for management and leadership. Mandatory training sessions, on the other hand, were typically targeted to ‘training in response to requirements’ ( $n = 322$ ) and did not provide content related to pedagogy ( $n = 15$ ) or management ( $n = 16$ ).

**Table 28**  
**Areas of Professional Development undertaken through Staff Meetings,  
 Child Free Days and Mandatory Training**

|                    | Pedagogical Practices |                     |       | Training in Response to Compliance Requirements |                     |        | Management and Leadership |                     |       |
|--------------------|-----------------------|---------------------|-------|---|---------------------|--------|---------------------------|---------------------|-------|
|                    | Number of centres     | Number of PD topics |       | Number of centres                               | Number of PD topics |        | Number of centres         | Number of PD topics |       |
|                    |                       | Mean                | range |   | Mean                | Range  |                           | Mean                | Range |
| Staff Meeting      | 277                   | 2.13                | 1 - 8 | 318   | 2.48                | 1 - 8  | 137                       | 1.35                | 1 - 4 |
| Child Free Day     | 75                    | 1.63                | 1 - 5 | 61  | 1.31                | 1 - 4  | 37                        | 1.32                | 1 - 5 |
| Mandatory Training | 15                    | 1.27                | 1 - 2 | 322   | 2.26                | 1 - 8  | 16                        | 1.00                | 1     |
| Total              | 296                   | 2.47                | 1 - 8 | 397   | 4.02                | 1 - 15 | 161                       | 1.55                | 1 - 6 |

Figures presented in Table 28 also show information on the number of topics provided for each area of PD&S and each type of provision (staff meetings, child-free days, mandatory training). Columns 2, 5, 8 show the average (Mean) number of PD&S topics, and Columns 3, 6, 9, show the range in minimum and maximum number of PD topics provided.

Overall results, set out in the Total row, indicate, on average that most on-site PD&S focused on topics related to ‘training in response to compliance requirements’ (mean = 4.02 topics) with a range from 1 to 15 topics being covered in the previous 15 months. Pedagogical practices, in comparison, achieved an average of 2.47 PD&S topics, ranging from 1 to a maximum number of 8 topics over the same time period. The least attention was given to management and leadership, with an average of 1.55 PD&S topics and a range from 1 to 6. Another way of describing these data is by comparing the proportion of topics reported for each of the three areas of PD&S. Summing the average number of topics for each area gives a total of 8.04 topics ( $2.47 + 4.02 + 1.55$ ). Of these, half ( $4.02 = 50\%$ ) were accounted for by ‘training in response to compliance requirements’; 30.7% (2.47) were in the area of pedagogical practices, and 19.3% (1.55) addressed issues of management and leadership.

Focus group participants from every state/territory recorded a reference to customised training. Comments about customised training were also recorded at case studies centres across the country. Overall, it was clear that there was strong support for customised training, and this was explained in terms of reasons such as:

- Training can occur at times when all staff can be in attendance
- The presenter can be strategically chosen
- Content of training can be negotiated and specifically targeted.

Customised training was used extensively where director/managers identified a specific centre need. In this way directors/managers/owner-operators felt that all staff could hear the same information and 'be on the same page'. The benefits of this team approach to PD&S was often cited and more successful in responding to particular issues at the centre than was standardised training.

*Because we had one child in particular who was biting a lot, and because the other carers might come into the room, I had to go through if a bite happens when they've gone to the toilet or something and they're relieving, what to do. So then xxx, when I asked to do a thing on it, she said they actually had a whole group one, so to benefit everyone we're going to do that. I think she's invited the parents as well, because it's quite stressful for the parents of the child who's biting because the other ones were being bitten. (Case Study WA)*

*They've got different life skills but I've actually got an individual coming down now to interpret all that training to put it into a relevant scenario. So they're in that room with that group of children and they take a totally different perspective to it now, that that support is actually relevant to them, and having someone come into the workplace made a difference. (Focus Group TAS)*

*We had training a couple of years ago on professional boundaries, because we had a lot of families coming in whose children - who might have been victims of domestic violence or their children were at risk - well they were, all these families were officially classified as "At risk" - and so I thought it was really good and really helped the centre and everything. (Focus Group SA)*

*It's sort of a holistic approach, rather than two people knowing all this new information and then trying to use it, with everyone going, "What are you talking about?" Not understanding where you're coming from. Whereas if everybody does it together you're all learning the same thing, you can all bring it back to your staff meetings, sit down, "Ok, how can we incorporate this into our everyday programs or everyday policies," sort of thing. (Case Study NSW)*

*For instance, I'm thinking of children with special needs particularly, they might not have had a child with a particular need before. They learnt about it in their training, but it's gone on the backburner, so you need to get a specialist in to reiterate the needs and the kinds of things that are going to be needed. That kind of support for staff, and further development as well. Just to re-track on some things that you might have learnt before but haven't been using. (Case Study ACT)*

*Sometimes when there's issues with children - there might be a bit of abuse or something in the home and stuff - so we use local people to come in and do stress release, and ways to deal with that. (Case Study QLD)*

*Well, in a nutshell, out of control children. Children dealing with chaotic families, and bringing that whole situation to childcare - violence, extreme violence, hurting other children, hurting other staff members - nobody hurting themselves yet. And staff - three Work Cover claims - so we had to get people out there, teaching them how to deal with this stuff - because it's not just one child we're talking about, it's several. So we've had the mandatory*

*notification, people off doing sign language, doing Certificate IV in Workplace Training. (Focus Group SA)*

*We've done a lot. We've done Makaton. We've had issues with behaviour so we got someone in to come and talk to us about that. And we had one on abuse, so we know the different types of abuse. We just had one, which was a really good one, on Jolly Phonics – bringing that into our centre. So hopefully that will do good. I've been to a xxx (training provider) one and a multi-cultural one. OH&S we do every year, just to keep us all up. (Case Study WA)*

Customised training was also mentioned by focus group and case study participants as a strategy for those in rural and remote locations. It was often seen as more cost effective to bring a speaker to a community rather than meet the expense of several staff travelling long distances.

*We do on-site training because I'm a trainer. Because I've got a team in xxx (capital city), we are implementing emerging curriculum, which is a bit new up here and it's like programming outside the box. So we do Saturday morning workshops where everyone comes in and we work on web development. (Focus Group NT)*

*Two of the girls went to this conference down in XXX (Capital City) 2 years ago now, and they came back and their comment was 'we need to get her up here so we can all see ...', so I said 'okay, lets do that' and we spent our year's training budget... We managed to get funding to cover it, so that was good ...XXX (Local Business Development Commission) will cover the cost of training for things to come to XXX (Regional Town), one of the conditions was that we had to invite other services, so ... and we had already involved them as it's part of the conditions of the training because they're a regional funding body, but they won't give you a cent to go somewhere else, and part of their reasoning behind it is that if we bring that person into XXX (Regional Town), then that's an airfare, that's accommodation, that's meals in town, and also it's that person going back and saying 'I went to XXX (Regional Town) and this was really good. (Case Study WA)*

Other childcare centre staff also noted the value of professional development which was customised to meet their specific needs. One participant commented on the collegiality of on-site, customised training as follows:

*And that's why it's good when we have the in-services here, because it's more relaxing. We can all sit down on the floor with a tea and there's someone out the front talking, and we all know each other, so it's more relaxed and more personal. (Case Study NSW)*

*To be able to involve all the staff we've had consultants come in to us so that allows everybody to have input and contribute where it's been topics or areas that we've all agreed on that we would like to find out more about. (Focus Group WA)*

Customised training was also identified as an important strategy in order to promote a significant change or an innovation into the centre. There were several examples given in the Case Studies. One ACT Case Study Centre undertook a Practitioner Enquiry Project with two other centres in Canberra. This group of centres contracted academics from a University to guide them through 12 months of action research focussing on centre based projects.

*When I first got there I had no idea what it was all about. It was on a Saturday...and I was just 'What am I doing here on a Saturday?' So I got there and we started talking about how we could work as a group and as a centre, how we can benefit ourselves and the children in a more productive way. So we needed to find a question on how we wanted to improve our centre, and that question was 'How could we improve quality interactions?' I think. It's been over a year now. (Case Study ACT)*

*And I think because it was such a long process, and you were focusing on one point through the whole thing, you were able to really think about what you were doing. Whereas those one day, sit down in a room, someone writes up on a board – you're not really getting the same thing out of it because it's like sitting in a classroom at school and someone saying, 'This is what you have to do'. You're not really getting hands-on with it. (Case Study ACT)*

There were several other examples where directors/managers/owner-operators sought innovative approaches to their centre's desires to grow and develop as learning organisations.

*We've had this team mapping day now, and there's a big report coming back on it... each person does a questionnaire and then it shows you their traits and then it's got the wheel of what a perfect team is. Well they've worked out we have got one person from every peg on that wheel, so the report's going to come back and it's going to have who that person is and how to interact with them so that it's an effective communication. So that opened up a fair few people's eyes and they thought, 'Maybe she's not just being rude. Maybe she doesn't like personal contact or maybe she doesn't like this'. So that team development we had. (Focus Group, NT)*

*As part of our professional development, we're involved in projects – for example a couple of things either through the XXX (Training Provider) or XXX (State Education Department), we had a leadership development practitioner research project, we found that one really useful as well. You get networking out of that too, you've got to link in... (Focus Group SA)*

*So I think we've started to think outside the square and not just go with the standard training. A staff member and I are off to a conference in Tasmania tomorrow, because that's going to be interesting. It's going to be something different that we haven't done before. Yes, it was expensive, but if that's the only thing that we decide to do all year, I think it will be worth it, rather than six or seven small workshops that are just the same thing again and again. (Focus Group NSW)*

*Oh and I take the staff on visits. Last year that was my focus, my first year here. The centre had a very sterile environment. There was too many limitations on what they could put up on walls, they weren't allow to hang things from ceilings, they weren't allowed fabric snatch on materials etcetera, etcetera, etcetera. So I've taken them... to xxx (training provider). I've taken them to xxx (training provider). They had a twilight evening and I took a whole staff, and we have a progressive dinner. (Case Study VIC)*

## 6.2 STANDARDISED PD&S EXPERIENCES

Two themes emerged under the node of standardised PD&S strategies as follows:

- Standardised training on mandated compliance topics
- Standardised training for general content

Both types of standardised training sessions featured as a popular form of planned PD&S accessed by childcare centre personnel who participated in this research. In the discussion that follows, we present findings about centre staff perceptions of the effectiveness of this type of standardised PD&S experiences.

### **Standardised training on mandated compliance topics:**

These PD&S sessions are available to assist childcare staff to meet centre compliance standards. That is, childcare centre staff must regularly update their skills and knowledge by participating in specific training courses covering compliance requirements. This type of PD&S related to health and safety requirements in particular and to a lesser extent, training to support staff in compliance with centre licensing or quality assurance measures.

At the beginning of this chapter, we presented data taken from the online survey pertaining to onsite training that covered compliance based topics. In terms of brevity and clarity, this data are not repeated here; instead we present below, comments made by focus group and case study interview participants. Responses coded to this node were identified particularly in relation to requirements covered by state/territory legislation. Topics covered in standardised training sessions included first aid, occupational health and safety, anaphylaxis, epi-pen and fire awareness. Comments from participants that reflect these perspectives are included below:

*We do industry required training – so we've done most recently, things like mandatory reporting, and the girls that require it are doing first aid, and that's being paid for by [organisation], and they actually require us to go to those. (Focus Group NSW)*

*Individual people may have person priorities over first aid, but the priority for the organisation is that that person goes and does first aid, because it's about compliance as opposed to something that they would like to do. (Focus Group NSW)*

*Asthma training. Asthma NT come out and do training say every year or every 18 months depending on your staff turnover. So they teach you why asthma occurs, what relievers you're supposed to use, and that you have an asthma plan in place for children that are asthmatic, or that you have an action plan if any child suddenly develops what you think could be asthma. (Focus Group NT)*

When the data from all three sources – online survey, focus group and case study interviews are taken together, it was easy to see that there was a great deal of time and money spent on engagement in compliance based PD&S.

### **Standardised training for general content:**

These PD&S sessions are usually offered by a training provider as an annual training calendar where sessions are designed as generic training to cover a broad topic of relevance or interest to early childhood professionals. There were mixed views expressed about the effectiveness of standardised content covered in these training sessions. While many viewed the opportunity to meet with other childcare staff at a standardised session as useful, there was concern

expressed about the impact that attendance at a standardised session might have for the centre.

*I don't know. Maybe it was... what can you really get out of two hours? Some are really good, and they are beneficial, but there's nothing that's really stuck out to me.*

*We did one on program planning and it just went right over my head. I couldn't understand the way they wanted a program. It was totally new curriculum and it just went right over my head. And I was like, 'Oh, I'm just going to stay with the one I'm doing. I think I'm fine with that.' And it was because there wasn't enough time to actually go back and follow up on what we were learning. I just kicked it to the side (Case Study ACT)*

The value of standardise PD&S sessions to introduce new ideas and expose staff to the ideas and experiences of other centres was seen as one of the greatest advantages of this type of training. While some staff reflected that they at times felt intimidated in a room of unfamiliar people, others saw this as an opportunity to build their professional capacity.

*I don't really feel comfortable doing that [speaking in a large group], but I don't want people to think either that I don't know what's going on.. Whereas I think sometimes when I'm with the people here, because they know what I'm like too, they'll just take charge and they'll just do it. I still have my opinions, but when I'm with other people I think I make more of an effort so they don't think that I'm just sitting there letting them do it all.(Case Study NSW)*

*We need someone with a bit of inspiration that can get people motivated into opening their mouths and taking the chance and saying whatever and not feeling silly about it. I know for the younger ones it's all about, 'I don't really know and I'm not going to say that, he'll think I'm stupid'. But once they get going they've got good ideas. They just need to be encouraged. (Case Study NT)*

*It's great because you get to meet people from other centres too, And often I've found, in some of the courses I've done, that people are not really very happy where they are but, they sort of feel a bit stuck too, and I sort of ... Yeah, and it's good time to just catch up, touch-base and get other ideas too, from other people. So yeah \*\*\**

*XXX (Training Provider) do really good ones. They always get a really big turnout and they have really good speakers. You walk away and you're motivated. (Case Study QLD)*

*That last workshop also made me feel really proud of our centre because a lot of the problems and things that she was going through, we had already mastered and we were getting that support from XXX (director). So even though we might have not taken anything away on paper, we still walked away and were like, 'Wow, how lucky. (Case Study QLD)*

One director/manager spoke of identifying training needs for the staff and then forwarding the list to the local training organisation to ensure that these topics/issues were included in the calendar for the year.

*At staff meetings I've sort of said, 'Okay what sort of training do you want us to look at this year?' And then they'll do a list up of what they would like to have and then we go through that list, and I think we have sent information off*

*to [training organisation], you know, to say this is the sort of training we want to be remembered. They've linked in with us and said, 'Right. There's someone coming up to the coast...' (Focus Group TAS)*

Some staff involved in the case studies highlighted their interest in standardised training in the following ways:

*...portfolio planning, basically to get more of a grasp on parent participation – how we can include parents. I did a music and relaxation workshop – meditation and yoga type stuff – which was something that I'd never really touched on before and I really wanted to include in my program. (Case Study VIC)*

*the in-services that I get sent to. It's good to go back to that academic side of things and refresh and revise and reflect on what you're doing, because you can get so into the everyday kind of daily events, that you forget to stop and actually look, 'Where am I going? Where do I want to go?' So I have a really wide base. I'm kind of lucky. (Case Study NSW)*

*We take anything that we can get, being rural and remote. With XXX this year's probably been one of the best for getting in-services, from what we've had for quite a long time. I also use local people for support for the staff. (Case Study QLD).*

Focus groups and case study participants often mentioned that standardised training was not always the best way to address staff needs for PD&S. Many directors/managers sought alternatives to standardised training sessions. Of particular note, some directors/managers felt that customised sessions were an alternative way of extending the knowledge and/or overcoming the constraints of participating in standardised PD&S experiences. The following comments capture some of the innovative approaches to customised PD&S.

*At our centre we tend not to go to workshops that are held, because I've got a lot of very experienced staff and I've also got some newly ... going through the training, and I find the ones that have experience, the titles that are offered, they think it's, 'Rehash, rehash. We've been there.' I've had one person say to me, 'If I couldn't do that I shouldn't be working where I am. I shouldn't have the position I've got.' And then the younger ones that are just training, they're already covering those topics in their training. So again, it's re-doing. So what I've been doing is spending my training dollars in looking for the gaps in their day-to-day work, where I'm seeing they're falling down on something or not carrying out things quite the way we've said they should be, and then I'm organising workshops...outlining myself the training I want to do. That's how I tend to do my training – I look at where I can see the gaps (Focus Group ACT)*

*Just how you learn different things, new strategies, and especially when they're customised because then you actually learn as a whole centre, and developing new ways of doing it. Whereas if one person goes and they come back with new ideas but the sort of fade because you haven't had the same training as they did. Whereas everyone just jumps in like, 'Oh, we can change this and we can do that', and 'That's great.' (Case Study WA)*

### 6.3 OTHER PD&S STRATEGIES USED WITHIN CENTRES

In addition to PD&S sessions centred around a specific topic, centres also used a variety of other on-site strategies to facilitate and enhance PD&S experiences of childcare centre staff. This data have been categorised and include:

- visual/print resources
- membership and subscriptions
- mentoring by centre directors/managers

#### **Visual/print resources:**

Childcare centres used **printed/visual materials** (such as journals, online resources and DVDs) as a way of supporting staff' professional learning. Responses covered under this node included aspects such as the following:

- Processes for informing and enticing staff to attend professional development training.
- Up to date information for browsing during breaks and available to take home for further reading (support to studies).
- Email lists which provide current activity in the field.
- A means of providing training either online or via DVDs.
- A method for sharing professional development support to parents.

Directors/managers in remote locations identified the internet as a valuable source of information.

*For us, being so far away, you struggle with being able to have people come up and talk to staff, so I get our girls to do a lot of the on-line training. (Focus Group WA)*

Other comments included:

*I download all the XXX (name of website) articles. They get downloaded onto the home page on the computer so the staff can access them whenever they need to. (Focus Group ACT)*

*Email, fax, phone. A lot of it's done by email and out of hours because you don't really have a lot of time at work. And sometimes if the staff are struggling in an area too, the internet is really handy. We get resources from the internet. (Case Study QLD)*

*...we use the internet a lot to access information but not so much to exchange information with people at the moment. I've got some networks internationally with some of the people in New Zealand, so we email... (Case Study SA)*

*For us, being so far away, you struggle with being able to have people come up and talk to staff, so I get our girls to do a lot of the on-line training. (Focus Group WA)*

*Off the internet, Autism SA have some good tips for a child that I've got with speech and language delay, but a lot of the symptoms are the same so they have some good advice. I just go online and have a look at what they've got to offer. (Case Study SA)*

During visits to the case study centres that participated in this research, we saw a wide variety of printed materials within easy access to staff and families, particularly at the entrance to centres and within staff rooms. These materials are often purchased and made available to staff by centre management, and used by staff in different ways, as reflected in the following comments:

*I read about food and nutritional needs for children. I tend to go for life style and food magazines – that's about real every day living. I enjoy collecting recipes and finding out what works with children – its no use cooking nutritious food unless you know how to present it to children. (Case Study SA)*

*We actually have a couple of sellers of educational books that come round to the centre, or equipment, that come round to the centre – in fact we had one yesterday – who will then set up in our staff room. I will tell the staff that we may have two or three hundred dollars to spend, would you all like to choose something. They will then bring it to me before we buy it. We will see whether or not we've got it at the other centre, and make sure that there's a variety of resources that we are bringing into the centre. That works pretty well with resourcing. (Case Study QLD)*

One of the centre directors/managers used printed materials in a more directive way to facilitate reflective practice as she explains in the following excerpt:

*I've brought some books out for them to look at different set ups and environments ...common books that people use, like Just Imagine and all that. And first comment ... and I put a sheet with it to say "let's ... can I have some feedback please?" and the first comment was, "Well I'd like to see what these look like with children in the equation." That was from XXX (staff member), at first, and the feedback is not only necessarily to give me feedback, but for them to reflect on what they think of what they see in these books. Then one of the young girls came and said to me, "Oh, I'm going to try one of your ideas," from one of these books, that I left out here. I said, "Oh yeah. What are you trying?" and she said "Ah, for messy play, for sensory play I'm going to put flour in a tub." And I sort of thought, ah, do I dig myself holes or what? I said, "Oh what made you choose that?" "Oh it just looked nice. Something different, a different feel." I said, "Ok. Have you thought about the implications of using food in your program?" "But it was one of your books." (Both laughs.) Ah, you know, slap in the face with a dead fish there. (Interviewer laughs.) I said well, "Ok." I said, "I put the books up there to give you ideas and to think about them, it doesn't mean you uncritically accept everything you see." And then I got, "Does that mean you don't want me to use it?" I said, "Well, I'd like you to think about it." "All right I won't use it then." And these have been repeated conversations and it would be the scenarios often, in my first six months or so here. (Case Study VIC)*

The above example illustrates the importance of not only providing access to appropriate resources, but also the critical role qualified and experienced practitioners play in mentoring others to maximise staff learning potential in different ways. XXX (name), an on-line training resource has been offered at no costs to services in Northern Territory, Western Australia and

Tasmania in an attempt to increase access in these states/territories to on-line PD&S opportunities as reflected in the following comments:

*And now we've got XXX (name) on-line training. It hasn't really been taken up much. We've only really just got set up with the laptop with the internet connection on it now. So maybe staff might start to take it up... I think the biggest thing is the unknown. You've never done any training on the computer, and they're probably not very confident or computer literate either. Not confident enough to use this equipment, which is really very easy. Even though it's been around for almost a year, people still are hesitant to use that method because even the other participants – you could tell they were a bit hesitant to answer. I hope it does take off because the presenters certainly knew what they were doing. (Case Study TAS)*

While internet based PD&S was often referred to by participants, the up-take by centre staff and consequent effectiveness of the training for those in the case studies was not widespread. Many participants observed that lack of familiarity with on-line training, current skill and confidence levels of staff were significant barriers to their successful use of this medium as a PD&S strategy.

#### **Membership and subscriptions:**

Coding to this node was only recorded to the responses of centre directors/managers. They identified the importance of membership of organisations such as Early Childhood Australia (ECA) as being beneficial to other staff as well as themselves. Gaining access to professional resources such as associated journals and magazines produced by these organisations, are discussed further in the next node.

*For me and my staff? There's lots. We also have access to the XXX (resource provider), we're members there, the XXX (name) magazine that comes out. Also XXX (training provider) which we're members of, and we draw on them so that we can get advice and information about administrative, workplace relations-type information. (Focus Group SA)*

*We have an ECA State body - Early Childhood Australia and Tasmania branch - which would be our director network for Tasmania. (Focus Group TAS)*

*For myself, I use our CSO, our Child Services Officer ... she's been absolutely brilliant... and really good support, the Children's Services Support Unit in Perth, which is like a government funded ... when I first took on the director's position they were a really good support, and we pay membership to them and we have access to ... development and those sorts of things; conferences. (Focus Group WA)*

*Leadership things I find very rewarding. Not so much 'staff handling', but ideas to develop them and staff meetings and things like that. I like to keep abreast of what's happening. I'm [involved in] ECA ACT Branch. (Case Study ACT)*

It is also important to note here that there was a specific question on the online survey which invited participants to record centre practice in relation to obtaining membership of professional organisations and/or payment of subscriptions to professional journals that were made available to centre staff. Of the 387 directors/managers who responded to the question about

memberships to professional organisations, 339 (87.6%) indicated that their centre was a member. A similarly high proportion of centres subscribed to professional journals (87.9%).

**Mentoring by centre directors/managers:**

It was particularly clear from the case-study interviews that centre directors/managers as well as some other senior staff played an important role in mentoring those less experienced and qualified. As previously reported, it was the centre directors/managers who stayed back after hours to run informal study groups for those staff currently enrolled in further studies. This work was undertaken without additional payment, but was of great importance in enabling those undertaking further studies to complete their study requirements as reflected in the following comments.

*Sometimes when people push you to go to something, you do really want to be there. I think that's probably very important. But then also, when someone encourages you to go, for example your director ... might say, 'Why don't you do this one?' or 'What do you think about one?' Sometimes that's a really good encouragement because it helps you say, 'OK, maybe I need to work on that', or whatever. (Case Study NSW)*

*I very much believe that PD builds on what we already know and that the knowledge jumps around, so even though it might not seem particularly useful today, it might be valuable ten years down the track. What it's given me is the ability to reflect on what's happening rather than to just make snap judgements about people and about what's going on and about where we're going to go. I think also my experience with professional development is that things take a long time to turn around, and the PD that I value for my staff team now is that stuff that has a component around critical reflection and thinking about their practices and thinking about theory, and how those two relate. (Focus Group SA)*

*I know XXX (director) particularly, she's a great leader, and she's always looking for new moving forward stuff, and I think that she will always be on top of things and likes to be. But she seems to get all her staff on with it. They all just, 'Yes, yes! Let's do this!' That's one thing I've found, that they're really close and they seem to really take changes enthusiastically and they've got a good bond. It's nice because you know that there's no tension, bringing your kids in. (Case Study WA)*

*XXX (Name) is the best director we've had at this centre. She's responsible for our training. I trust her to do her job and support us. You can go and talk to her and she gets you to think about what you want and helps us to choose what's good for us. (Case Study SA)*

In addition to these formal sessions, more highly qualified practitioners in a centre appear to play an important role in the PD&S of other staff. They both inspire others to participate in PD&S and provide a role model and mentoring relationship. It is interesting to observe through the case study and focus group comments that where highly qualified practitioners (University Qualified Teachers) are employed at a centre they are often a source of rich advice and information for less experienced staff dealing with the complexities of childcare. It is perhaps noteworthy that topics like behaviour management, programming and working with children with additional needs (in particular language disorders) are often requested by services with less qualified staff. Where highly qualified mentors are present these topics may be less requested.

*Over the last 18 months most of the professional development came about when one staff member attended a State-funded 4-day session on emergent curriculum and came back so inspired she took this on board and not only instigated it in my service, but became almost like the trainer in our local network, and ended up running her own sessions in the local council. It's really changed the way quite a few centres in the area do their program planning (Focus Group VIC)*

*I think it can be things like if one of the staff members in the 3-5s is really excited about a project she's been doing with the children, she's chatting to one of the 0-3 staff about it – I think that's professional development support because they're talking to one another. It doesn't have to be that you go to a professional training course or an outside body. It can be just the discussions we have in staff meetings or discussions you may have with parents. (Focus Group NSW)*

*Some services have created positions of an early childhood support specialist for that organisation or for that centre. So they put their resources in to that person, almost like being a constant coaching mentor type of person to different meetings and different teams. Even in the rural or remote areas, I mean, even in Hobart or a bigger area, it comes down to qualification capacity of the service. A lot of the time the training is required because of the lack of qualified individuals or those that are acting while still training. That's why a lot of the training has to keep continuing. (Focus Group TAS)*

*Yes. There's a lot of support from the directors in that area, in particular. Both our directors are very good. They're always available to discuss things with and as a support. (Case Study TAS)*

*I tend to lean on others ... With XXX (Preschool Teacher) for example, she's got years and years more experience than me. In the short time I've been here I have learnt on her. (Case Study QLD)*

## 6.4 BROADER INVOLVEMENTS IN PD&S EXPERIENCES

Using the data collected from all sources included in this study, we have identified five nodes that reflect involvement with external agencies and/or forums in relation to childcare centre staff PD&S experiences:

- Conference attendance
- Hubs and networking
- Further education
- Involvement in projects
- Other

In this section, we have retained the names and labels used by the participants to refer to various events/organisations/individuals so as to retain the meaning of the descriptions provided and to illustrate the breath of items/places that they referred to in their responses.

### **Conference attendance:**

On the basis of those who completed this section of the online survey, it appears that over half the directors/managers said that their centre supported staff to **attend conferences**. That is, of the 374 directors/managers who answered this question, 234 (62.6%) said 'yes'. Where

conferences were attended, directors/managers were asked to provide further details. These included:

- state/territory conferences, such as the QLD Child Care Conference, NT Children's Conference, CCSA conference, KPV early child conference, Department of Human Services conference (Vic), DECS Conference – birth to 3 symposium (SA), and ECA State conference (NSW);
- national conferences, such as the Together in Partnership ECA conference, NACBCS, ARECE conference – Monash University, NCAC, and
- international conferences such as the New Zealand Learning Stories conference, the World Forum in Malaysia conference on children's rights.

Details were also given in terms of the conference provider, which included service provider, such as Darebin Children's Services conference, KU Children's Services Annual Seminar, the Annual TAFE Children's Centres' Conference; training organisations such as Lady Gowrie Child Centres in each capital city, and various universities; and specialist organisations, such as the Gifted and Talented Association - Nurturing young minds conference, BPW Australia, Queen Elizabeth Centre conference.

In other cases, conferences were identified by their title, for example, Climate for change, Stepping Out – Sociocultural Approaches to ECE; Staying healthy and sane in the workplace; Let's be proactive – staff and team management, Hands up for Tasmanian children, or by the name of the presenter, for example, Fraser Mustard, Ferres Laevers, Kent Hoffman – Attachment, Behaviour Management - Louise Porter. Most participants listed conferences by the topic area, for example, the Pikler Approach, sexualities in early childhood, new racism conference, art in early childhood conference, children's health, emergent curriculum, food handling, playground safety, brain development, etc.

Focus group and case study participants also referred to conference attendance as another form of PD&S identified in this research.

*Conferences are something we try to encourage and involve our staff in. I took three staff members to the last ECA conference to the eastern States. When we came back we had our own mini conference so they could shared that with other staff members. (Focus Group WA)*

*Yes, we went to Tasmania for the Reggio Emilia conference. It was very, very, very interesting and inspiring. (Case Study ACT)*

*I went on a course in Melbourne, and that went for four days and I went with two other staff members from XXX (centre), and it was absolutely the best thing I've ever been to. (Case Study ACT)*

*The PSC [professional support coordinators] Muster [statewide conference for children's services staff] was fantastic on the weekend. It was a great bonding session for all the various PSNs [professional support networks] that were there. And I think that we had a great... the keynote speaker was XXX. She was spectacular. Great child advocacy. And I think that that particular one we got, we really learnt that we need to listen to each other and listen to the children and accept their views...But the whole of the PSN together was spectacular. And they got value because it was a beautiful venue. Again, the food, which is very important to early childhood workers, was very good. And it was such a great bonding session. We found that even in our PSN we found things out about each other that we didn't know. And the stories that*

*everybody had. We often forget how everybody has a story, and how important their stories are. And to hear the stories outside of the time when we're rushing around to get PSN meetings over with, and we've got this to organise. We had time to sit and talk. (Case Study QLD)*

*I [Local Govt Children's Service Liaison Officer] work with a team to provide a conference once a year which goes for a week – morning, afternoon and evening. It's open to family day care, long day care, occasional care, kindergartens and out of school hours and holiday programs. So basically a team of us get together, we ask for ideas, we come up with a theme, then we organise sessions... This year we ran 15 sessions. Some of them are fairly serious sessions, some are a bit more light-hearted. At our dinner we usually focus on a culture that is in our municipality and then organise food, a display, and an activity. We make that more a chance for people to network. We also do something we call centre visits, which is something I learnt about in my days of teaching. We choose three centres on one morning and three centres on another morning and we take a dozen people, three different vehicles starting in different places, and go to the centres, get a bit of info, have a look at what they're doing. So it's another opportunity for people to see practice in action. They are always booked out. It's probably important to say there, that we used to run a lot of sessions at night – this is only our third year doing the conference – but this has been far more successful than running evening sessions 6-8.30pm. Staff are more motivated, they don't cancel, it's working so much better. (Case Study VIC)*

Further, a director/manager discussed the use of creative incentives for staff to gain access to unique professional development opportunities such as an international conference. She explained this strategy as follows:

*The staff had an opportunity [to attend a conference]; one staff member went to the childcare world forum in Malaysia, and that sort of thing, and what happened was the staff were given the opportunity to earn tickets and that sort of thing, and that was from attending staff meetings or they might have done an extra shift, so they got rewarded in ticket systems and all their names went in a hat and one lucky person got to go. (Focus Group TAS)*

### **Hubs and networking:**

Local hubs and networking opportunities were identified as a measure of professional support nationally. Hubs offered opportunities for early childhood professionals to gather (this included gathering with other community service agencies) on a regular basis. Networking was seen to be beneficial with both formal and informal opportunities discussed. Comments related to networking and hubs were wide ranging and included the following:

*We network a lot with them [local Directors' Group], and we also network with others in Canberra. If I hear of something that's happening around the place, we're keen to find out about it. (Case Study ACT)*

*I think the other things that we rely on a lot are local networks. So we have a local Child Protection Interest Group which meets monthly, so our organisation is involved in that. (Focus Group NSW)*

*One of the networks we go to is our local CSAs have quarterly meetings for Authorised Supervisors in the XXX area. They usually have a training component to those. They'll bring a local organisation like Brighter Futures or some new initiative that's coming through in, but it's also really direct. So*

*they'll say, 'OK, compliance visits – these are the issues we're coming up with'. So it's very, very black and white, but they're meetings that we go to pretty religiously because it's very important. (Focus Group NSW)*

*I've also utilised the local kindergarten teacher to come over and do a workshop. Really it's a network in town. Like with XXX too (training provider). They'll come over and give them support. (Case Study QLD)*

*And sometimes it's those local...those networks that actually are set up of people of the same relevant experience. You might have carers working the floor in certain s that have an understanding being led by someone that may have directed smaller services being linked together and things like that. (Focus Group TAS)*

*When we went there [Reggio Conference, Melbourne] we discovered that there were about five centres from the ACT, so we are getting together every couple of months to, more than anything, help each other with documentation and 'What are you doing?' and just get some feedback, which is really good. Since we went there we've done that two or three times. The last time we got together we talked about this year we're going to go to the art gallery and make an exhibition of the children's work. So that's pretty good. The centres here are getting together and sharing and having feedback. That will help each other learn from everybody else's experience. (Case Study ACT)*

*We also have a fairly strong network of coordinators within the City of xxx – there's probably 15 of us – and we're community based, not for profit centre, who meet every month. Last year we had a fairly organised person, not myself but we've all been part of this, and we organised a calendar for the upcoming 18 months that covered everything that we needed for accreditation, so that each wasn't trying to replicate what the down the road might have done, so we slotted in first aid or CPR or asthma. (Focus Group VIC)*

*I'm part of a network at the moment and we are trying to change the Certificate III because the way they've done it, you've got a qualified that runs a room, and then you've got the girls that work under the qualified, that's meant to be the support system. Now... We have licensing rules that we have to go by. And we've got national accreditation that we go by. Cert III covers nothing about national accreditation. So how are we supposed to train our staff up and uphold the qualified when they don't know anything about those quality areas. It doesn't make sense. So I feel it's my job – which should be really the government's job – to say, no, those girls need to know first of all what is national accreditation, why they're there, what are the quality areas, and they should be able to link the policies to quality areas- they need to know why they need to uphold this policy. (Case Study WA)*

Centre staff also noted the importance of networking and hub involvement:

*We've also got a child from a refugee status so there's a place, I think its Stars for trauma victims, we have contact with them. There's also many hub groups that we've attended. (Case Study SA)*

*Okay; here we have what they call a 'hub' group, and we quite often get newsletters from other s that get groups together and there's lots of different types of valuable training like learning stories. (Case Study SA)*

The following comment illustrates an informal networking opportunity:

*I've got quite a few friends that work in other childcare centres, so I network with them – have discussions with them. My flatmate's also a teacher, so I talk to her a lot as well. (Case Study ACT)*

Study nights initiated by a centre director/manager/owner-operator was also used as a strategy of support for promoting professional growth:

*Yes I think study nights help. Because otherwise you sit at home and find other things to do instead of doing study. But if you have it here you've got to sit down and do it and if you get stuck you can ask the others. (Case Study QLD)*

#### **Further education:**

Participants saw further education as an important component of PD&S.

*...and we have staff doing degrees, staff doing traineeships. (Focus Group NSW)*

*We also have trainees so we support our staff to get their certificates or even their diplomas as well, they study by correspondence so that's another development. (Focus Group SA)*

*That's right. Everyone is given the opportunity to train from their Cert III right through to university level, and that's all part of it. That comes within management so everyone's got that opportunity. (Focus Group TAS)*

In relation to childcare centre staff currently enrolled in Certificate III study courses, there were a number of concerns identified by numerous participants regarding the nature of support being offered by the training providers, particularly in the case of childcare centre staff living in remote areas.

*It's a bit hard because we don't have a lecturer here, so it's harder because XXX (Lecturer) doesn't come up here very often, so like if you get stuck it's just harder to get into contact with him. (Case Study SA)*

*The training sessions have been very good except for the [training institution] support. That's a big downfall. But the people we've had into the centres and done training have been really, really good. Very helpful. Quite patient to talk to you if you don't understand something. (Case Study WA)*

*I find you've really got to sit and read the books to them. What they do too, is they take the short cuts. They don't even bother looking at the workbooks. They go straight to the assignment and go from one staff to another to get the answers. So I've actually got to pull staff up on giving them the answers because they're not actually learning. (Case Study QLD)*

#### **Involvement in projects:**

In six responses coded to this node, participants referred to their involvement in research related projects as a source of PD&S. They saw it as an opportunity to support the field, hear the latest information about practices and increase staff knowledge and skills in various aspects of children's services. Participants' comments about research studies included the following:

*...we had a leadership development one, we did a practitioner research project, we found that one really useful as well ... Because you get networking*

*out of that too, if you've got to link in and you've got to do some report writing, it covers a whole range of things. (Focus Group SA)*

*I also have in the back of my mind what I want to achieve for the year. Every year since I've been here we've had an action research project so I've also got that in the back of my head, this is going to be a focus and how can we... (Focus Group SA)*

*...we're now just working on a really good project with the [training organisation] which we're all really looking forward to. It's going to be a 12 month training and mentoring program where they send trainers up and I think that's going to be a real turning point and something that we're all really looking forward to. (Focus group WA)*

*I did the PEPACT [Practitioner Enquiry Project, ACT] with the centre... I find I learn so much more from watching than I do from a book. And I learnt so much from that project. It was crazy. I didn't expect to learn as much as I did. So my speech [at the celebration of our achievement] was talking about what I learnt and that even as a junior I was given the opportunity to put my views across. Because I think there was that conception that because you weren't higher up you weren't going to be given the opportunity to say what you had to say. But that wasn't the case at all. (Case Study ACT)*

#### **Other:**

There were other measures which were included by participants in this study. The following responses show how some directors/managers identified the potential of parents to assist with PD&S.

*We also draw upon our parent body, so several of our parents are lawyers, accountants, and human resource officers, so I've actually used them because we have a lot of staff changes, I've used them to give me advice about all the changes to the workplace relations laws and things like that. So for me, for PD, that's really useful because I've learnt lots. (Focus Group SA)*

*Also harness the skills of professional parents; we had physiotherapists, occupational therapists. A lady came in to do sessions with us, so it's looking at what you have within that. (Focus Group TAS)*

One director/manager also identified the potential of staff within the centre to provide professional development for colleagues:

*We also do on-site professional development where we have one staff member who has an area of interest or expertise to actually support another staff member who wants to develop in those areas. (Focus Group WA)*

Further to participants identifying the measures they access for PD&S, factors associated with constraints and supports for professional development impacted on choice of the measure selected. These are explored below.

## **6.5 FACTORS INFLUENCING PARTICIPATION IN AND EFFECTIVENESS OF PD&S**

Further to identifying the measures or strategies they accessed for PD&S, participants were also invited to comment about the 'most useful' and 'least useful' aspects in terms of assessing the value of the impact of their participation in PD&S on their centres. The text-based qualitative responses recorded by centre directors/managers in their own words to these online survey

questions were analysed through NVivo's system of emergent themes. Asking participants to rate a range of identified barriers to participation in PD&S and to also consider the effectiveness of the programs they had accessed, extended this information.

These mixed sources of information are presented in terms of the following sub-headings:

- Most useful aspects of PD&S
- Least useful aspects of PD&S
- Barriers to participation in professional development
- Effectiveness of PD&S programs

### **Most useful aspects of PD&S:**

The on-line survey provided further information on the measures that contribute to effective PD&S through directors/managers' descriptions of the 'most useful' aspects of PD&S programs that they or their staff had attended during the past 15 months. These are presented as under the overarching node 'supports'. A total of 428 responses were provided. These were coded under three main nodes:

- Attendance of staff teams
- Content of presentation
  - a) provision of up-to-date information
  - b) practical application
  - c) theoretical information
  - d) meets needs of the group
  - e) allows for staff growth
  - f) opportunities for discussion and networking
  - g) validation of own practices
  - h) presenter skill and expertise
  - i) follow-up resources and support
- Logistics for attending training.

Data in relation to each of these three nodes are presented in detail.

### **Attendance of staff teams:**

Coding at this node recognised the importance of staff teams attending PD training which is customised to their needs. NSW recorded the most number of respondents identifying this as useful for professional development, but all states/territories mentioned this as an important support. The following comments illustrate and explain this view:

Child protection - all staff participated as a team. Great to have a knowledge of the important topic and the professional development day provided a thorough evidence of this.

Most useful when more than one staff member can go - for discussion and later referral & encouragement of each other. However due to cost and difficulties getting relief staff this is rarely possible unless training held on weekends, which is less appealing.

Training that was conducted on the premises with all of the staff in attendance. As a team we were able to share ideas and experiences that were relevant.

Whole staff retreat - sharing a professional development day provided the opportunity to build our relationships and to discuss the presentations and future planning. On return to work everyone had a similar focus and common experiences to reflect on together.

We attended the TAFE conference in April we started with breakfast together and staff from different rooms attended the same work shops by lunch time the bonding and discussions were very healthy and beneficial we have a child with autism at the centre.

Good to experience PD as a group and share ideas.

Centre based in-services as it provides opportunities for all staff to discuss ideas and experiences.

Professional development was based on who we could access to come to the centre to stretch our thinking as a whole group.

Team training is the most useful as all staff can then have input at the same time & learn information together.

Mandated notification - entire team training. I believe training has the greatest impact when the team trains as a group.

Training as a team.

Centre organised private presenter to run team building done has full team -excellent. Gave people an understanding of dealing with different personalities.

### **Content of presentations:**

A large number of entries were coded under this node, which was further broken down into the following areas: a) Provision of up to date information which was new and challenging; b) practical application; c) theoretical application d) meets needs of group e) allows for staff growth; f) Opportunities for discussion and networking; g) validation of own practices; h) Presenter skill and expertise; i) follow up resources and support. Each of these areas is discussed and illustrated in detail.

#### *a) Provision of up to date information which was new and challenging:*

All respondents across each of the States/Territories agreed that this was extremely valuable and conversely seen as constraints. Examples are presented below, using a selection of notable responses for each state/territory:

NSW

*New approaches to programming and planning with children under 3 years.*

*Up to date information*

*Getting another side to look at, fresh points of view, new updated information/techniques*

*New and creative ideas i.e. teaching yoga to children - an interest of some of our staff who are now implementing daily*

*Up to date knowledge about best practice. Knowledge about new resources*

VIC

*Giving some ideas about new methods of planning i.e. learning about use of photos and learning stories and portfolios, learning about reasons for challenging behaviours*

QLD

*Regulation updates/amendments (DOCs) - it is useful to be getting the most update information 'from the horse's mouth.'*

*New Ideas. Better understanding of legislative/quality requirements.*

*It helped us gain new insights on how to manage some difficult behaviours and not get stressed out.*

*Building on and improving our knowledge.*

*The new knowledge and teambuilding*

*Digital photography - a new way of providing feedback to parents about their child's activities and involving parents in the program. Creative play - new and innovative ideas to include in the program*

*Asthma management-useful because it highlighted the need for vigilance with this disease and spoke against complacency. It was interactive and easy to understand.*

NT

*New and improved ideas, different ideas of tackling situations*

WA

*Reggio Emilia training - refocusing on children's needs, new approach to programming methods, provide ongoing opportunities for staff to refocus on attitudes towards children and their learning. Stress and Early Childhood - focusing on ensuring our centre and children are relaxed and unstressed thus promoting a better learning environment. Makaton - alternatives methods of communicating with children - providing opportunities for all children to learn*

SA

*For staff to be able to gain knowledge from another source outside the centre and meet with other professionals*

*Upskilling staff of their knowledge of learning stories, children's development and environments. Revisiting areas such as Asthma Training and First Aid - always good to have refresher courses and receive up to date information.*

TAS

*Exposure to new ideas and rehashed theories. Being re-enthused by being exposed to the professionalism of the field*

*Finding out industry trends, knowledge on changes to QIAS practices.*

*Gaining extended or new knowledge*

Directors/managers also wrote about the practical and theoretical applications of this new knowledge. These are explained further as:

b) Practical application:

A large number of references to practical application were coded to this node ( $n = 72$ ). Practical application proved to be a considerable determinant of useful professional development, as seen in the following comments. The absence of practical application was also identified in the following section as a constraint to professional development.

NSW

*Practical, innovative and new things to include into our daily practice*

*Strategies and outsource of knowledge were gained that could be used in our service on day to day basis.*

*Practical information and links to professional reading.*

*Practical and easy to implement*

*Practical courses - we can take away and implement ideas at the centre*

*Sessions that provided concrete steps that staff could take away and trial such as programming workshops helping the improve computer literacy and techniques useful.*

*Training with XXX(Training provider) on challenging behaviour. It is practical, build up staff confident to deal with challenging behaviour.*

QLD

*An on-site workshop where everyone had been given a subject and had to present 5 new experiences on that topic for everyone to use.*

*Specific techniques learnt for particular problems such as Autism.*

*Day to day strategies to assist in providing quality outcomes with programming - such as story telling and being effective and also music not just singing with the children.*

*Refining current practises. Providing new ideas for inclusion into the daily running of the centre.*

*Different ideas to include in program and varying styles.*

*The latest ones from [the training organisation] have been cost effective and very informative- lots of the suggestions we have given from staff have been taken up by the local network which is great and appreciated by staff.*

WA

*Attended a workshop on sensory processing that was exceptional. Came away from the workshop with very usable tools to apply to children.*

*Protective behaviours -gives a program that we can take back to the centre and use.*

SA

*The workshops that give hands on activities to demonstrate the usefulness/ compatibility/ significance.*

c) Theoretical information:

Participants also acknowledged the importance of theory to support new learning.

NSW

*Practical application of theory. i.e. how can we do that in our service within our framework*

QLD

*Relating research into practice.*

*Information related to research i.e. Brain development (XXX expert)*

d) Meets needs of group:

Only a small number of participants (n=6) identified this as being useful for professional development, but conversely, it was noted (see previous section) as a factor that constrains successful professional development. States which mentioned the appropriateness of the training for the group of staff at a centre were NSW and VIC. Comments included:

*Practical evidence based training which caters to all levels of ability. (NSW)*

*Better that they chose a category that suits them as well as the work they do. (VIC)*

e) Allows for staff growth:

Directors highlighted the importance of personal and staff growth as part of useful professional development exercises – this particularly reinforced team building. Statements included:

QLD

*Inspiring, team building*

*...further development of staff*

*Program development - making us think about the experiences offered and why we offer them (meaningful to the children)*

*Recognition for staff by certificates*

*The new knowledge and teambuilding*

*Very inspiring. Staff implemented changes into the program very easily and effectively from workshops held by XXX(Training providers).*

VIC

*Curriculum/program development sessions have directly influenced and changed the practices of staff re program planning and documentation*

NT

*Team building identifying individual personalities and how these impact on the team and how we solve issues.*

*Information received that led to changes in practice and policy*

*Child Care Practitioner Inquiry which was an initiative of DECS and was facilitated by XXX(Training provider) because it was done as a Centre so we are on the learning journey together and are able to support one another along the way.*

*Good to experience PD as a group and share ideas.*

TAS

*The most visible differences after attendance at training are: inspiration, motivation, the provision of links to other organisations and sources of information. Provision of onsite assessment and follow up as well as getting current information.*

f) Opportunities for discussion and networking:

This was another factor which was identified as a characteristic of useful professional development. Opportunities for speaking with colleagues from within the field and relevant community contacts as part of a workshop or as a stand-alone PD&S activity, allowed for discussion of current practices and potential for sourcing new ideas and practices.

*Visiting another centre - getting real ideas*

*Networking with professional peers*

*Contact with peers and other professionals from local services eg school staff, early intervention, health professionals, exchange of ideas.*

TAS

*Different approaches and sharing ideas with other services*

*Group brainstorming, gaining others opinions*

*Networking amongst the industry*

SA

*Opportunity to discuss, reflect and present experiences from Action Research.*

*Opportunities to hear from peers, collaborative discussions, professional speakers*

*Group Work and discussion. Information sharing*

*Learning about new early childhood development principles*

QLD

*Sharing ideas with other staff who are using and had sound knowledge of the information they are sharing*

*Group work. You find out what other people are doing at other centres which may have the same problems as you or they did have the same problem but they solved the problem. Brainstorming - 10 ideas are better than 1.*

WA

*Networking sessions- Keeping abreast of changes to the industry*

NT

*Networking*

ACT

*Networking opportunities with staff at other centres. Being able to bounce ideas off people from other centres.*

*Getting some perspective of what is happening in other centres. Picking up new ways of doing what we have been doing.*

*Exposure to networking latest info, being able to support families at risk*

VIC

*Getting support from other peers in the early childhood sector*

*Looking at other centres and how they provide experiences*

*Spending time with other staff from different centres, ways to brainstorm, going to look at other services, local meetings in the area. All provide a way of opening your horizons.*

g) Validation of own practices:

Part of the appeal of networking with colleagues within PD&S activities and with visits to centres enables staff to validate their own practices and feel confident that what they were doing in their centre was worthwhile.

VIC

*Encouragement to implement new ideas and reaffirmation that the staff practices are current and high quality*

*Reassurance that our centre is doing the right things*

WA

*Last development presentation we attend backed up everything we do staff walked away feeling satisfied with all decision making.*

h) Presenter skill and expertise:

The manner in which the presenter was familiar with their information, organised and able to articulate were identified as key to useful PD&S.

NSW

*Being able to have a dialogue with the trainer, challenging their ideas to assist in implementing them into your own setting*

QLD

*Speakers who could relate to the needs of the audience. Speakers who were animated and simplistic in their message or training technique. Speakers who motivated a notion of change and "can do" belief.*

i) Follow up resources & support:

Participants in all states/territories except ACT and WA acknowledged the value of receiving information or resources which could be taken back to their centre and shared with other staff. Directors also valued follow up support as part of the workshop

NSW

*Most useful activity is where I can buy a DVD or a reference book and then present to my staff at a time that suits us .e.g. manual handling. Activities with the option of buying CDs of useful songs were provided at courses to focus on developing*

VIC

*In-service was followed up with visit from professional to help implement ideas from in-service into rooms.*

**Logistics for attending professional development opportunities:**

Directors/managers identified characteristics which they believed impacted on the usefulness of professional development prior to attendance. This included: timing of training, location for travelling and replacement staff. Across all states/territories, directors/managers mentioned the benefits of customised training which was held in centres on weekends/ after hours (staff meetings) which reduced training associated costs and provided an opportunity for all staff to attend.

TAS

*The significant positive aspect has been the accessibility of training. We finally have training providers willing to come to the regional areas to deliver sessions. We have had numerous sessions on the implementation of new programming strategies.*

SA

*Done after hours - not losing staff off the floor.  
Being able to attend training online.*

NT

*The hours for PD were out of working hours. This meant it was less disruptive for Centre operations. Timing was helpful (Lunch time short updates through [particular community group]).*

### Least useful aspects of PD&S:

The on-line survey also provided directors/managers' comments of the 'least useful' aspects of PD&S experiences that they or their staff had attended during the past 15 months covered in this study. These data captured from 304 centres, are presented under two overarching nodes labelled and described in turn as follows:

- i. Logistics for attending training
- ii. Presentation of information
  - a) information is outdated or commonly known
  - b) not targeted to group needs
  - c) skills of the presenter
  - d) time for networking
  - e) process of integrating into current practices

### Logistics of attending training:

This was defined as a constraint to attendance at PD&S activities. This node includes issues such as cost of training, time of training and travel. Logistics of attending training was acknowledged by all States, particularly in relation to travel for those from rural and remote services.

#### NSW

*Travel and distance from our service/town, most courses are not available in our area or they are at times were possibly only one staff member could attend due to the time/day.*

*The Central West does not have access to major forums and we are limited to the in-services we can attend.*

*Expensive or unrealistic in our service due to lack of funds/time etc*

*Makaton workshops -- the child moved to special school by the time staff had access to training*

*Because we are rural and remote there is less opportunity to attend professional development in our area, most courses are at least 2-3 hours drive away (one way).*

#### ACT

*Financial constraints.*

#### VIC

*Location of in-service. Cost!!!!*

*Staff work long days so the timing of training is important. Staff a reluctant after hours. They do like to attend as a team so that ideas are easier to implement.*

*Finding appropriate time to send them.*

#### QLD

*At present it is difficult financially and time management wise for me to access any Professional Development that is too far away from the Centre and/or after hours.*

*Location - travel expenses too high to take more than 1 or two staff e.g. Brisbane overnight etc.  
Timing - too short notice - staff already have commitments.*

*Difficult to find funds for replacing staff and not enough courses in our local area as we are close to major city so often 3-4 hours of travel is included as well.*

NT

*We cannot access training other than what we can find in town now, as changes to system do not allow our Professional support to visit us anymore which tends to make us feel even more remote. We draw training from in-services in staff meetings*

*Short notice was given with only a few of the activities offered. Couldn't send as many staff as we would have liked. Although not a major impact.*

WA

*Remote area and restrictions on available training in area*

*All of the staff should have the opportunity to undertake training during work hours but this is prevented due to insufficient staff.*

*Many of the sessions booked are cancelled due to insufficient numbers.*

SA

*If staff have to travel for training the time and cost is the most prohibitive.*

*The least useful were trainings that were undertaken off site. These trainings can only be attended by a small number of people due to costs associated with travel etc.*

TAS

*The cost in bringing all sessions to the regional area to enable staff access as many don't drive if they do they don't drive outside the area distance to travel to Hobart after a full days work etc.*

*Often it is difficult to release staff to attend workshops and conferences. Equally it is difficult to release for study leave particularly when the staff member is qualified and hard to replace. It would be great to have the whole centre attend certain professional development activities together however we are restricted by budget to do this as it would need to occur on a weekend.*

### **Presentation of information:**

Examination of this data set led to the categorisation of these responses under 5 sub-headings identified earlier. These results are presented next.

#### *a) Information is outdated or commonly known:*

There was a concern across all states/territories that some presentations were outdated and that information provided was readily known and did not move beyond the basics. Directors identified frustration with attendance at these sessions particularly due to overcoming the previously identified logistics to get staff to attend. There was also a strong resistance to 'wasting' resources to attend mandatory training which was repetitive. Directors also identified the difficulty of finding PD&S which was particularly relevant for qualified staff or targeted to the needs of children under two years. Comments included:

NSW

*[the training organisation] in-services on programming. Staff are finding that the presentations are very similar and are not meeting our current practices.*

*Not learning anything new - not to mention the fact that as an industry we focus on one thing i.e. multi-culturalism is diversity (what happened to ability and family variations).*

*Curriculum based discussions are the same - one way trends until something new comes along.*

*Focusing entirely on what the regulations say keeping things at the most basic level.*

ACT

*Many of my staff have been in Childcare for many years and they often find that the material presented does not offer them anything new and often does not meet their expectations. This often puts them off attending in-servicing opportunities.*

VIC

*Accreditation has meant that we spend our limited resources for in-service training largely on things like food handling, Epipen training, asthma friendly, first aid for all and not as much on things we would love to do.*

*Planning for outdoor environment - because it was repetitive to what was presented last year.*

*Music and movement - as staff have different ways of implementing this in their programs and we didn't learn anything we weren't already doing.*

*For experienced staff most professional development sessions don't provide new information*

*Same old information that staff who have been in centres for years have heard before.*

*My staff have commented on not enough focus on the younger children and babies and not being provided with strategies.*

QLD

*Behaviour management - it has been the same information for many years and all staff have attended professional development in this area*

*Regurgitation of current theories and practices.*

*Repeated issues with no real new outcomes / strategies that are already being enforced or implemented previously.*

NT

*Not challenging – repetition.*

WA

*Repetitive work shops in the same areas.*

SA

*Sometimes feeling as though you're teaching the session rather than gaining from it.*

*Courses which are run by peers and who have the same knowledge and skills – they may be great presenters but not have new info.*

TAS

*Some training experienced have left staff feeling that they already knew the material.*

*Information not always as updated as had hoped. Not a lot of new ideas for qualified staff.*

**b) Not targeted to group needs:**

Respondents identified that some of the professional support which was being offered did not meet the needs of the group being presented to. The information may not have been aimed at a level suitable to the group or it may be that the diversity of staff training and qualifications in the presentation made it difficult for each participant to gain from the information provided. Comments included:

*Being pitched to the lowest common denominator. (VIC)*

*Most training delivered is generic and not Centre based. Even training delivered specifically for our centre by the [the training organisation] was still generic and not really specific to our centre's needs. (WA)*

*Focusing entirely on what the regulations say keeping things at the most basic level.*

*Not aimed at vertically grouped childcare centres. (SA)*

c) Skills of the presenter:

This was also an important node for understanding why PD&S may not be considered useful. The skills of the presenter in terms of their use of props, efficiency and depth of understanding of the topic they are presenting greatly contributes to how useful PD&S is. All States/Territories except NT acknowledged this area.

NSW

*Presenters who are not organised/arrive late.*

*Trainers who tend to get carried away with personal story examples.*

*Being exposed to uncritiqued ideas that perpetuate current practices.*

*They have all been useful but it's frustrating when the presenters are not very personable and not as knowledgeable in their topics as they perhaps could be.*

*Workshops that aren't led by professionals - or when original leader is away and a 'stand in' who doesn't really know topic presents.... staff can see through this and are disappointed (and I think it reflects badly on the organisation)*

*When people talk about a different topic then what you are really there for.*

ACT

*Nutrition in childcare. This should have been a worthwhile training session but the presenter was poorly prepared and did not tell us anything that we didn't already know.*

VIC

*Presentations that were hurried and seemed to be "from the book" worth little time to talk about how the information could be applied in real life situations.*

QLD

*When you turn up to a workshop that sounds interesting and the presenter doesn't know what they're talking about or has no depth to the topic.*

*In general not covering the topic effectively enough and running out of time with presenting the topic.*

*Sometimes sessions are poorly organised and therefore there is a lot of "wasted" time which is frustrating when the sessions are occurring in staff's own time.*

*Presenters who were out of touch with life at the coal face in a centre environment. Presenters who were too theoretic and not able to motivate best practice strategies using realistic and achievable examples. Presenters who were boring and unanimated.*

WA

*Aboriginal child rearing insights - although this is an extremely important part of our service due to the area we are in, the training was not delivered effectively for our staff needs*

*Attended a workshop at the local conference in XXX (place) being conducted by a student under her lecturer's supervision. Was a waste of my time. Too many sweeping generalisations and not enough concrete information.*

SA

*Training that does not challenge or stimulate staff.*

*Very bias - community versus private.*

*SACSA training - session was too general - nobody came away thinking that they had learnt something new.*

TAS

*Sitting and listening to someone talk at you*

*Disorganised or cancelled training sessions. Workshops that advertise one thing and then deliver another*

d) Time for networking:

Directors felt that PD&S opportunities were not valuable if they did not provide opportunities for staff to network with others attending the session.

*Not getting feedback from other centre directors, staff about issues in the wider community. Not accessing other Early Childhood Professionals to share ideas problem solving etc. (QLD)*

*Lack of Networking Opportunity. (SA)*

e) Process for integration into centre practices:

Directors/managers highlighted challenges with converting PD&S activities into centre practices. They cited staff issues (when only one staff person attends and the interest and enthusiasm is not shared, or the staff person is not able to effectively articulate the possibilities from the training), time issues for centre staff to reflect on and make changes. These were all issues associated with determining whether an activity was not entirely useful. Comments included:

NSW

*Going to courses where the staff hears all about the things they should do despite them never having the time to do all these things.*

*Some staff are hesitant to share their learning in any depth with other staff. They make notes available to staff but it is up to staff to take an interest in their learning and this is not always taken up.*

*Some staff do go but never try new things toward their job. For these individuals above in-services are least useful but others they are useful.*

*Those attended by staff who do not yet have the depth of understanding skills and knowledge to understand the information presented. Thus it is rare for changes in practice to result.*

*Staff do not retain as much information as would be useful and need help to relay the information gleaned on courses back to their colleagues at staff meetings etc.*

*With staff attending alone or in small groups the impact does not appear to be the same as the whole group experience.*

QLD

Some staff struggle with being consistent with implementing aspects of training.

When all staff cannot attend it is difficult to share the knowledge and enthusiasm.

TAS

Time to share the training with other staff.

Not being able to send enough staff to training to then enthuse and introduce change to rooms - one person can't do it all by themselves in most cases.

Impact on staffing back at the centre not always able to release as many staff as would like to attend.

Staff not having initiative or time to develop and implement effective resources.

NT

Information given to some staff not passed on to others. Not enough follow up because of busy work schedule.

## 6.6 BARRIERS TO PARTICIPATION IN PD&S EXPERIENCES

As part of the on-line survey, directors/managers were asked to consider barriers to participation in PD&S, for themselves and their staff.

A list of eight barriers were presented, and directors/managers were required to rate each barrier on a 5-point rating scale where 1 = 'never difficult' to 5 = 'regularly difficult' to describe the extent to which each had caused concerns or difficulty for the staff at their centres. Results for each statement are presented as frequencies for each level of rating and as mean scores for each item in Table 30 Lower scores indicate more positive (less of a barrier) ratings. For ease of reference, these barriers have been collated under four sub-headings: I) External barriers, II) Centre Management barriers, and III) Staff barriers. The quantitative data resulting from this question are presented in [Table 29](#).

**Table 29**  
as/Managers' Ratings of Barriers to PD&S experiences

| Barriers to PD                                  | Never difficult | Rarely difficult | Sometimes difficult | Often difficult | Regularly difficult | N   | Mean rating | SD   |
|---|-----------------|------------------|---------------------|-----------------|---------------------|-----|-------------|------|
|   | 1               | 2                | 3                   | 4               | 5                   |     |             |      |
| <b>I) External barriers</b>                     |                 |                  |                     |                 |                     |     |             |      |
| a) cost of PD                                   | 20              | 100              | 216                 | 84              | 49                  | 469 | 3.09        | .99  |
|   | 4.3%            | 21.3%            | 46.1%               | 17.9%           | 10.4%               |     |             |      |
| b) relevance of PD                              | 33              | 145              | 204                 | 56              | 18                  | 456 | 2.74        | .91  |
|   | 7.2%            | 31.8%            | 44.7%               | 12.3%           | 3.9%                |     |             |      |
| c) location – too far, transport difficulties   | 35              | 93               | 189                 | 83              | 66                  | 466 | 3.11        | 1.11 |
|   | 7.5%            | 20.0%            | 40.6%               | 17.8%           | 14.2%               |     |             |      |
| d) lack of sufficient places for staff          | 53              | 238              | 121                 | 25              | 23                  | 460 | 2.41        | .94  |
|   | 11.5%           | 51.7%            | 26.3%               | 5.4%            | 5.0%                |     |             |      |
| <b>II) Management Barriers</b>                  |                 |                  |                     |                 |                     |     |             |      |
| e) cost of relief staff to replace staff for PD | 15              | 62               | 141                 | 130             | 115                 | 463 | 3.58        | 1.10 |
|   | 3.2%            | 13.4%            | 30.5%               | 28.1%           | 24.8%               |     |             |      |

|   |             |             |              |              |              |     |      |      |
|---|-------------|-------------|--------------|--------------|--------------|-----|------|------|
| f) lack of relief staff to replace staff for PD | 9<br>1.9%   | 57<br>12.3% | 132<br>28.4% | 131<br>28.2% | 135<br>29.1% | 464 | 3.70 | 1.08 |
| <b>III) Staff-related Barriers</b>              |             |             |              |              |              |     |      |      |
| g) timing – after hours, school holidays        | 9<br>1.9%   | 81<br>17.5% | 220<br>47.4% | 99<br>21.3%  | 55<br>11.9%  | 464 | 3.24 | .94  |
| h) family commitments of staff                  | 8<br>1.7%   | 61<br>13.1% | 219<br>47.2% | 122<br>26.3% | 54<br>11.6%  | 464 | 3.33 | .91  |
| i) other reasons                                | 34<br>15.0% | 37<br>16.3% | 81<br>35.7%  | 37<br>16.3%  | 38<br>16.7%  | 227 | 3.04 | 1.27 |

Apart from two external barriers, (b) relevance of PD&S and (d) availability of places for staff, the mean rating for most items was over 3 (sometimes difficult) on the 1 to 5-point scale. It appears from these data that the experience of the majority of directors/managers was that these common barriers ‘sometimes’, ‘often’, or ‘regularly’ caused difficulty for staff to attend PD&S. The most problematic areas related to the availability ( $M = 3.70$ ;  $SD = 1.08$ ) and cost ( $M = 3.58$ ;  $SD = 1.10$ ) of employing relief staff to replace staff attending PD&S.

*Within-group differences:* These data were then analysed to assess whether director/manager’s ratings of the difficulties for staff to attend PD&S varied by state/territory locations, organisational context, including capacity, usage, and ‘not-for-profit’ vs. ‘for profit’ status of the centre, and participants’ level of qualifications and years of early childhood experience. Comparison of means, chi-squared, and correlation tests were used for these analyses.

Results of these analyses showed that:

- Significant differences in directors/managers’ ratings found for the states/territories. This was most evident in the item relating to availability of relief staff. The most difficulty was reported in WA ( $M = 4.30$ ;  $SD = .88$ ) and QLD ( $M = 4.01$ ;  $SD = .97$ ). Lower levels of difficulty were reported for NSW ( $M = 3.38$ ;  $SD = 1.19$ ) and VIC ( $M = 3.46$ ;  $SD = .90$ ). States also differed the level of difficulty reported for staff’ family commitments, being highest for QLD ( $M = 3.71$ ;  $SD = .90$ ) and lowest for Tasmania ( $M = 2.93$ ;  $SD = .82$ ) and VIC ( $M = 3.10$ ;  $SD = .65$ ).
- Directors/managers working in ‘not-for-profit’ services reported significantly lower levels of difficulty than directors/managers working in ‘for profit’ services for three items: (d) cost of relief staff ( $M = 3.75$  vs.  $M = 3.50$ ); (e) availability of relief staff ( $M = 3.90$  vs.  $M = 3.61$ ); and (g) timing of PD&S ( $M = 3.38$  vs.  $M = 3.17$ ).
- There was little effect of centre capacity or usage on directors/managers perceptions of difficulty in staff attending PD&S, apart from centres with lower weekly enrolments tended to report higher levels of difficulty associated with (a) the cost of PD&S ( $M = 3.37$ ) compared to centres with medium or large enrolments ( $M_s = 2.98$  and  $2.94$ , respectively).

Director/Manager experience and qualifications were not related to perceived levels of difficulty in staff attending PD&S, apart from a weak correlation between qualifications and difficulties in attracting relief staff ( $r = .13$ ,  $P < .001$ ). Less qualified staff reported greater difficulty in finding relief staff

## 6.7 PERCEIVED EFFECTIVENESS OF PD&S EXPERIENCES

Two sources of information provided by the on-line survey are drawn on to assess centre directors/managers perceptions of the effectiveness of the professional development programs they or their staff had attended, both outside and within the centre. These are

presented as follows:

- Effectiveness of PD&S in general
- Effectiveness of PD&S accessed on-site

**Effectiveness of PD&S in general:**

The questionnaire provided a series of statements for directors/managers to respond to in regard to the provision and effectiveness of existing programs in relation to their own experiences.

A 5-point rating scale was used, where 1 = 'strongly agree' and 5 = 'strongly disagree'. Five statements were related to provisions for PD&S and the extent to which these suited the needs of the centre. Results for each statement are presented as frequencies for each level of rating and as mean scores for each item in Table 30. Note that lower scores indicate more positive ratings.

About two-thirds of directors/managers agreed or strongly agreed that PD&S programs they were able to access were culturally appropriate (16.3%, 52.6%) and provided a range of topics (11.2%, 51.1%). However, less than half felt that PD&S programs were targeted to meet identified local needs (6.4% strongly agreed, 37.1% agreed). Low levels of agreement were also evident for statements focussing on practical features of PD&S; that is, being cost effective (3.5% strongly agreed, 40.4% agreed), and easily accessed (6.3% strongly agreed, 43.3% agreed). Lower levels of agreement were further indicated by ratings that were, on average, higher for local relevance, M = 2.81 (SD = 1.00) and cost/accessibility: M = 2.86 (SD = .99), M = 2.88 (SD = 1.15), and lower means scores for cultural and varied content M = 2.26 (SD = .89), M = 2.47 (SD = .97).

**Table 30**  
**Directors/ Managers' Ratings of Effectiveness and Provision of PD&S**

| Existing programs in my State/Territory        | Strongly agree | Agree        | Neither agree nor disagree | Disagree     | Strongly disagree | N   | Mean rating | SD   |
|--|----------------|--------------|----------------------------|--------------|-------------------|-----|-------------|------|
|  | 1              | 2            | 3                          | 4            | 5                 |     |             |      |
| c) are culturally appropriate                  | 76<br>16.3%    | 245<br>52.6% | 98<br>21.0%                | 40<br>8.6%   | 7<br>1.5%         | 466 | 2.26        | .89  |
| d) provide a range of topics that meet needs   | 50<br>11.2%    | 228<br>51.1% | 87<br>19.5%                | 69<br>15.5%  | 12<br>2.7%        | 446 | 2.47        | .97  |
| e) are targeted to meet identified local needs | 29<br>6.4%     | 169<br>37.1% | 135<br>29.7%               | 102<br>22.4% | 20<br>4.4%        | 455 | 2.81        | 1.00 |
| f) are cost effective                          | 16<br>3.5%     | 182<br>40.4% | 125<br>27.7%               | 105<br>23.3% | 23<br>5.1%        | 451 | 2.86        | .98  |
| g) are easily accessed                         | 29<br>6.3%     | 200<br>43.3% | 77<br>16.7%                | 109<br>23.6% | 47<br>10.2%       | 462 | 2.88        | 1.15 |

*Within-group differences*

Comparative analyses were conducted for each statement to ascertain any differences in directors/managers' ratings by state/territory location, organisational context, management

context, and level of qualifications and years of EC experience. Results showed that there was little effect of location or other factors on ratings of PD effectiveness and provision.

**Effectiveness of PD&S accessed on-site:**

As reported in Chapter 5, directors/managers who completed the on-line survey were also asked to identify on-site PD&S that had been provided for staff through staff meetings, child free days, and mandatory training. A total of 413 directors/managers provided this information. Responses were classified under three broad topic areas: pedagogical practice, training in response to requirements, and management and leadership.

Directors/managers were asked to rate the impact of these on-site PD topics on service operations, using a 3-point scale, where 1 = high impact, 2 = medium impact, and 3 = low impact. Due to the complexity of the data (e.g. some services identified one PD topic whereas others identified many different topics), analyses were restricted to directors/managers' ratings for the first topic area they recorded. Results presented in Table 31 gives the proportion of directors/managers who rated the topic as having a 'high impact' for each type of PD&S provision: staff meeting, child free day, and mandatory training, and for each area of PD&S: pedagogical practice, training in response to requirements, and management and leadership.

**Table 31:**  
**Percent of PD&S Rated as High Impact undertaken through Staff Meetings, Child Free Days and Mandatory Training**

|                    | Pedagogical Practices |       | Training in Response to Requirements |       | Management and Leadership |       |
|--------------------|-----------------------|-------|--------------------------------------|-------|---------------------------|-------|
|                    | N                     | %     | N                                    | %     | N                         | %     |
| Staff Meeting      | 63                    | 52.1% | 110                                  | 56.1% | 25                        | 56.8% |
| Child Free Day     | 36                    | 67.9% | 26                                   | 76.5% | 11                        | 68.8% |
| Mandatory Training |                       |       | 211                                  | 68.5% | n/a                       |       |

Results were remarkably consistent across the three areas of professional development. For example, each column in row 1 (staff meetings) has a similar percentage of directors/managers rating the topic as having a high impact on quality: pedagogical practices (52.1%), training in response to requirements (56.1%), and management and leadership (56.8%).

On the other hand, ratings differed by type of provision. This can be seen by comparing the figures for row 1 and row 2. PD&S provided in staff meetings (row 1) was rated as having a high impact by just over half of directors/managers (52.1% to 56.8%). In comparison, PD&S provided as part of a child free day (row 2) was rated as having a high impact by over two-thirds of directors/managers (67.9% to 76.5%). Mandatory training was also rated as having a high impact by over two-thirds of directors/managers (68.5%).

## Responding to Research Question No. 2 – Summary of Key Themes:

This Chapter has identified the following key themes:

- Customised training which meets specific centre needs is highly valued as a means for ensuring all staff at the childcare centre access the same information.
- On-site provision of PD&S through child free days and staff meetings were identified as good opportunities for this to be enacted. Child free days when the centre was closed for children were seen as one of the most effective means of provisioning PD&S.
- Standardised training is valued particularly for industry required training and for centre staff to be introduced to new concepts or information.
- Participants value resources and access to support as a follow up after the attendance at PD&S experiences.
- Highly qualified staff (in particular, university qualified teachers) provide an important mentoring and coaching role to less experienced and qualified staff.
- Hubs and networking arrangements are seen as opportunities to provide planned and unplanned PD&S.
- Effective directors/managers/owner-operators seek out PD&S opportunities beyond standardised and customised training which they believe will be of benefit to staff and the centre. These included research projects, conferences and government initiatives established in local communities.
- The two overarching constraints to participation in PD&S were particularly related to standardised training; staff logistics in attending and factors associated with the quality of the presentations.
- Funding for PD&S and the availability of relief staff were continuously cited as an important component of the logistics for directors/managers to support staff gain access to PD&S.

## CHAPTER 7

### RESPONDING TO RESEARCH QUESTION 3: LINKS BETWEEN PROFESSIONAL DEVELOPMENT AND SUPPORT AND QUALITY OUTCOMES

The purpose of this final results chapter is to document data in relation to the third research question:

- **What are the possible links between participation in professional development strategies and achieving quality outcomes through exploring particular areas of interest?**

This research questions proved to be the most challenging one in terms of the participants' capacity to articulate their understanding about possible connectivities between participation in PD&S and its impact on centre's work with children and families. Given the short-time lines of the project overall, it was not possible to establish base-line data against which we could assess measurable changes in either participants' attitudes or practices achieved during the period of this study. Instead, we have relied on the participants' perceptions about past experiences in PD&S and the impact any resulting understandings have had on their current work. The findings that are presented in this chapter are largely qualitative by nature and have been derived primarily from the focus groups and case study interviews. A small amount of quantitative data based on a single specific question on perceived links between PD&S and quality outcomes taken from the online survey are presented first. We then move onto present qualitative data derived from the focus groups and case studies which cover relevant issues in more depth, including noticeable changes in practice as explained by various childcare personnel, including centre directors/managers/owner-operators as well as parents and community representatives.

#### 7.1 RATING OF PERCEIVED LINKS BETWEEN PD&S AND QUALITY OUTCOMES BY CHILDCARE CENTRE DIRECTORS/MANAGERS

Two items were included in the on-line survey that canvassed directors/managers views about the effectiveness of PD&S activities for achieving and maintaining quality in relation to their own experiences at their own centre. A 5-point scale was provided, ranged from 1 = 'strongly agree' to 5 = 'strongly disagree'. Results for each statement are presented as frequencies for each level of rating and as mean scores for each item in [Table 32](#). Lower scores indicate more positive ratings.

Results indicated that the majority of directors/managers were very positive about the links between professional development and quality outcomes (89% agreed or strongly agreed) and the fundamental importance of PD&S for maintaining service quality (95% agreed or strongly agreed). These figures are reflected in a lower average score for each question: mean = 1.74 (SD = .72) and mean = 1.52 (SD = .62), respectively.

**Table 32 :**  
**Directors/Managers' Ratings of Links between PD&S and Quality Outcomes**

|  | Strongly agree | Agree        | Neither agree nor disagree | Disagree   | Strongly disagree | N   | Mean rating | SD  |
|--|----------------|--------------|----------------------------|------------|-------------------|-----|-------------|-----|
| Ongoing PD at this centre              | 1              | 2            | 3                          | 4          | 5                 |     |             |     |
| a) has clear links to quality outcomes | 185<br>39.1%   | 237<br>50.1% | 40<br>8.5%                 | 10<br>2.1% | 1<br>0.2%         | 473 | 1.74        | .72 |
| b) is fundamental to service quality   | 235<br>54.4%   | 176<br>40.7% | 18<br>4.2%                 | 2<br>0.5%  | 1<br>0.2%         | 432 | 1.52        | .62 |

#### *Within-group differences*

Comparative analyses were conducted in order to ascertain any differences in directors/managers' ratings by state/territory locations, geographical area, management structures, including the centre's licensed capacity, usage, 'not-for-profit' vs. 'for profit' status of the centre, and participants' level of qualifications and years of experience in children's services. Results of these analyses showed that:

- There was little effect of state/territory location on directors/managers' ratings of PD&S effectiveness.
- There were no links between centre management structures and participants' views about effectiveness and provision, apart from the finding that directors/managers working in 'not-for-profit' centres gave more positive ratings ( $M = 1.68$ ;  $SD = .69$ ) for the links between ongoing PD&S and quality outcomes than directors/managers working in 'for profit' centres ( $M = 1.86$ ;  $SD = .76$ ).
- Directors/managers with more years of experience in early childhood services tended to give more positive ratings for the links between ongoing PD&S and quality outcomes, as shown by a weak correlation between experience and rating ( $r = .17$ ,  $p < .001$ ).

## **7.2 FACTORS INFLUENCING CONNECTIVITY BETWEEN PD&S AND QUALITY OUTCOMES**

Further to the online survey, the focus groups and case study interviews led to the identification of connectivities between participation in PD&S and achieving quality outcomes. Participants in the case studies and focus groups identified three key themes that were used as the basis for coding this question:

- a) Support in implementation;
- b) Staff commitment; and
- c) Noticeable changes to practice.

Staff commitment to participate in PD&S was seen as a significant factor in determining the success of their involvement in professional development opportunities. Participants noted motivation to attend PD sessions along with a range of barriers to accessing PD&S as key to the success of their involvement. The support of management was also identified as a

significant factor in influencing how successfully PD opportunities would be translated into better outcomes for children. In particular financial supports and the leader's commitment to PD&S were both considered to be important factors in staff participation. Most noticeable changes in practice as a result of participation in PD&S was seen when leaders were actively involved in the decision making about staff participation in PD&S. This was most noticeable in the area of customised training sessions where specific centre needs or interests were addressed.

**a) Support in implementation**

A significant factor in determining links between noticeable changes to practices (deemed to be quality at centre level) was the support that was available for implementation of the change. This included ongoing discussion amongst staff, resource availability and the opportunity for further training where needed.

*...what the staff are encouraged to do at monthly staff meetings, is to actually share what they're learning, share any distinctions they've got, so that that professional discussion is commonplace in the culture to raise the standard continually. (Focus Group NSW)*

*There's no point in going and finding out about this fantastic new planning method if you come back and go, 'I want to implement it,' and it's going to cost \$100 for the books. So before they go to it, I try to make sure we have the money to actually back up the ideas. Or that there is a bit of a \$100 slush money that, 'I saw this great idea about frogs.' 'Well knick down the shop and buy a few.' Because there's no point in learning something if you can't come back and do it. They get frustrated and the training's lost if you don't back it up. (Focus Group VIC)*

*We always come back to a staff meeting and talk about what we've learnt, or what could be implemented into the if we want to implement a new idea into the , and decide as a staff that, 'Yes, we're going to do that,' or, 'No, we don't think that was good.' (Case Study VIC)*

Management Committee members and Owner/Operators of for-profit centres who participated in the case study interviews saw their role was in offering staff support by ensuring appropriate funding was made available through the centre budget.

*Being on the management committee, one of the things that we've done as part of setting up the collective agreement is we've put in there a budget or a target for the service to operate. There are two services that we operate with the management committee – but I'll talk in the context of the one [the case study is being conducted in]. There's a \$4,000 budget that we put in there to put towards staff development, and then what happens is the director puts forward to the committee a program of staff development for the year and reports on that as we go through the year.*

*We also have, through the Workplace Agreements that we've established in the centre, a key cornerstone of that is that AWA is also to support that person in their professional development. And again, we have a budget that we provide for, to make available for them to further their professional development. So they're two of the ways that I know about the professional development. And I guess the final thing is the centre has a staff development day which is child-free and it's the day before the long weekend in June each year. So that's where they have a program and actually get away and do some staff development. (Case Study ACT)*

The approach to funding staff PD&S was mixed throughout the responses given by participants in the focus groups and case studies. Centres take a varied approach from the centre management taking full responsibility for the costs of training through to staff personally meeting all of the costs involved. In many cases shared responsibility was agreed to where the centre met part of the costs and staff member the remainder. There were many variations to this arrangement and staff shared mixed emotions about the fairness of these arrangements

*We pay all their training fees and they're paid for attending, whether it's night time or on the weekend, or if they go away from the centre and it's outside their work hour (Focus Group ACT)*

*So every year we would spend .... I think that even our workshops. We do not expect the girls to pay for workshops. It's all in our budget. And you can definitely do it, but you have to keep your centres full. So to be able to keep your centres full you must have good trained staff. So therefore workshops are an incentive for us to keep our centres full, because it then becomes profitable for us to have them going to workshops. So in the end, it's a means to an end. (Case study QLD)*

*But \$1,500 for ten staff – that's \$15,000 that she puts aside every year just for training. But it shows. It really does show. And I think as a leader too, if you're prepared to put that money back into your staff, your staff will respect you and give more back, and hang around. She she's not educating the staff and then they're going – they're staying. (Case Study WA).*

*XXX (director) and the management committee – we're really lucky here because they see it as a very important thing, ongoing learning and to go and follow things up if you want to chase things further. So we're very lucky that we have the opportunity, because I know a lot of centres don't... It's viewed as very important, which is good. (Case Study NSW)*

In centres where less financial support was available to fund their participation in PD&S, staff noted this as a significant barrier to their involvement.

*...but some of them [courses] are too expensive. You really have to weigh up - whether you've worked all week to pay for it. (Case Study TAS)*

*There's lots I'd love to do. There was the Reggio Emilia one I wanted to do, but it was \$500, and I just couldn't do it. I was really quite upset that I couldn't do it, because it was a weekend and it's something that I'm really interested in. But financially it's a fair amount to pay. (Case study TAS)*

*I just wish a lot more centres supported their workers a lot more, because they'd get more out of them at the end of the day. Because if you keep your worker happy and productive... If they ask to do a training session... Like so many centres I've worked at where they'd be like, 'Oh no, you can't leave work during this time to do that work. No. You're at work. (Case Study WA)*

### **b) Staff commitment**

This node was defined as coding which described staff commitment to follow through and maintain the change which had been identified as part of professional development.

*The kindergarten teacher had gone to an in-service last year and they touched on that (portfolios). She came to us and spoke to us about it.. One of the other*

girls was a bit hesitant. She said, 'Oh no, I don't want to change the way I program.' But I said, 'Wow, that sounds great! Photos! I'm such a visual person.' I've done photography too, so I loved the idea. At the beginning of the year I started doing it before I'd gone to the in-service, but when I went to the in-service I learnt how to do it properly. (Case Study VIC)

Just the fact that we're given the opportunity to do it and it gives us a new lease on life. We're doing this every day, day in day out, and I love my job, but you get stuck in a rut doing the same old things every day. When you go to a workshop and professional development, it gives me new ideas and gives me that extra little push just to continue on with it. It's good that way (Focus Group ACT).

The Caring for Babies was good for me in that, I've worked with babies a fair bit when I was at the other centres, that was kind of my preference I suppose, in a way, and it was really good to go back to it because I'd been to university and there's all this theoretical stuff and they really don't focus that much on babies. It was just nice to go back and say, 'OK this is the current research and theory about babies and this is what some places are doing'. It just sort of inspired me a little bit. It reminded me of what I had done in the past and reminded me of things that I could encourage here and it got me going a bit. (Case Study NSW)

When you're in the industry for as long as I've been, it can get a little bit stale and it becomes a little bit too easy. So this is a new challenge for me now and it's exciting. It's motivated me. Change can be motivating. (Case Study VIC)

Staff commitment also translated into ownership.

This thing was, here's something [learning stories] that's really creative and here's a way that you're going to grab hold of your parents and they're just going to be so interested, and the children are going to love them, but it's up to you to how you make it. Make it yours, and I think that was – that's the key – it's ours. Every probably, if they do learning stories, probably does them slightly differently, but the motivation about learning stories in my service like nothing else. (Focus Group SA)

Representatives of centre management committees and the other parent participant interviewed, did not record any responses to this node. They did however, identify noticeable changes in centre practice which they were aware of, and these are explored in the following node.

### **c) Noticeable changes to practice**

During focus group discussions and case study interviews, participants described the changes they implemented due to skills and knowledge acquired through PD&S experiences and how they felt the impacts were noticeable in their centres. Interestingly, it can be concluded that PD&S which is practical and carried out within individual centres proves to be more valuable in terms of providing visible changes to practice. For example, the director/manager of the Case Study centre in the ACT described how the introduction of technology into the rooms along with a supporting workshop has resulted in key changes to staff practices at her centre.

I think they've got more creative in what they do. I was in there a few minutes ago, and XXX (Staff Member) had the children ... they were reading stories ... and she was filming them reading stories and then playing it back to them, so that they could see themselves reading stories. It's giving the child more idea of what they're doing, and to be able to see themselves doing things. As I

*said, we've got some children in there with speech issues. We can actually hear it and outside we can sit down and look at it and think, 'OK, what's triggering that?' And behaviour wise too. We've got children with behaviour issues. We film it and then we can look at it later and say, 'OK, this is what's triggering this behaviour', and we can pick things up, hopefully. We don't always. It's just been such a great tool.*

The next example also shows the value of PD&S experiences which resulted in changes to the way staff approached each other.

*There was one that we did, probably about three years ago, which was called Knowing Yourself and Others. ...we did a repeat of it about two or three months ago... But it was great, because every single staff member came, so there was about 16 or 17 of us by the time you include all the part-timers. And she did it in a very physical way. So she divided people into different parts of the room. She showed the different personality types and all that kind of thing. And it was really interesting and it really showed – because we had grown so much as a team just in physical numbers, and because we are really close and that whole thing about what's appropriate, what's not appropriate, what do you leave at home, what do you leave at work, that kind of thing – it was really nice to find out ... because I'm very much a really direct personality type and so's one of the other staff ... and we were the only two like that. And that became so apparent when she divided us off into different parts of the room. And we all just laughed because we could really see what it all meant and how reflective and how true it was. So I think that, for us, made a huge difference in how we worked as a team. Because then one of the girls actually typed it all up and we have it in the staff room now – we've redone it this year – about how to approach one another in conflict situations and how **not** to approach one another. (Case Study NSW)*

The following comment from a participant in the Tasmanian Focus Group shows how required training can be more meaningful for staff and can lead to changes in practice.

*We had a manual handling session that we actually got an OT in and who went room by room and dealt with the specific room issues in the room with a specific child. That was the case with some of them, there was a specific child that people needed advice on how to do that and stuff. We had a previous manual handling and we've had one since. That was a bit different and that one where the girls got time in the room with the person dealing with their specific concerns, so they're working best out of one that was done by [training organisation] and one that was done as a kind of talk and tell training. People got to ask questions but they weren't in the so it got through that that one obviously was the best and made the most difference to the way people actually worked.*

This anecdote was followed by another participant from the same Focus Group who agreed with the value of onsite centre based professional development.

*I've always thought the practical works a lot better when people go into workshops than the sitting down and looking at the board, type thing. I've always noticed that my staff gets more out of the practical work. My chef went and did the diversity in the cooking and she came back and actually practised for us what she had made in the course, as well as one of my group leaders sent me a programming session and she said it was a lot of hands on, and I could see her implementing stuff she had done into her programs. Whereas the others- I don't know- maybe they see it and learn it for that session and*

*don't go back and implement it so much. Whereas the hands-on gives them the confidence in being able to do that. They did a music and movement session and I've seen that reflect back onto the program, as well as different story telling techniques and that sort of thing.*

Participants also commented that most noticeable change in practice occurred when PD&S was on-going and involved follow-up.

*I guess the biggest ongoing professional development we've done as a whole centre is the programming side of things, where we swapped from the boxes into an emergent curriculum combined socio-cultural curriculum, but we mould it into our own that doesn't fit under any banner. That's made a massive difference in the way we do things and the way we present what we do to the parents, and that's probably been going on for over three years now. We're gradually changing it and implementing new things. So that's probably one of the biggest things ...and that's changed **everything** that we do. (Focus Group SA).*

The director/manager from the Case Study centre in Victoria also recognised the importance of achieving changes in staff attitudes to effect changes in professional practice, and this perspective is captured in the following comments:

*I went and did a course with ... a training organisation. They ran a workshop on promoting a positive culture. I was so impressed that I sent all my team leaders and the coordinators group ran it as well... the staff came back buzzing about it, and because it was a team leader of each of the rooms, they bounced off one another and it really changed their attitudes of the way they think, behave, their attitudes towards people, if you promote a positive culture you're going to get that positive culture back. And that had more of a difference than any childcare training I've every given. I really think that's where a lot of my energies have gone – into attitude. You can go to training until the cows come home, but it's always attitude that you manage in performance. It's usually not skill. My staff learns skills quite well.*

Similarly, the director from the ACT Case study noted how PD&S increased her staff confidence to critique ideas presented in a session.

*For me, I like to have feedback from staff. I love having professional conversations with staff. And when they go off to a course and come back enthusiastic and can verbalise what they saw and what they thought would work, what they thought wouldn't work, and some of the critiques too... So professional conversations where you can sit down and discuss theories. We were talking about something the other day – it was after the Pikler seminar – and one of the staff that went came back and said she saw a lot of good in it, but there were bits that weren't. And another staff member said, 'Oh, but that's because we have always looked at Vygotsky's ideas.' So it was good to see that professional conversation happening in a staff meeting where I could sit back and say, 'Wow, it got through to them. They can critically analyse what they're learning.' They're not just going along and saying, 'Oh yes, we'll do that', or 'I don't like that idea'. They could critically analyse why they didn't like it. It thought that was great for diploma level staff and Certificate III level staff to have those ideas and to be able to verbalise it.*

Directors offered their views of the types of professional development that resulted in significant change in practice. While individual learning styles were acknowledged, participants overwhelmingly supported PD&S that was practical, hand-on and visually oriented.

*...in fact it was someone from XXX University. She had all these films of childcare centres in Scandinavia – how the children wear special rubber suits when they go outside in the snow, how the rooms were set up. I think it was a video. It took you for walk around other countries' childcare centres and what they did and how they coped. Not a lot of talking, but a lot of visual. The staff went back, and for weeks after they were moving furniture around and setting up environments and getting their writing corners colour coded. It really inspired great things, and it would have to be the most memorable professional development I've seen. With the greatest impact. I know it doesn't sound much, but that proved to me that people are into visual. (Focus Group ACT)*

Comments made by parents reflected mixed responses in identifying training and the link to noticeable changes in practice.

*I don't witness very much, because I'm only here at the beginning and end of the day, not when they're doing activities, but I hear talk amongst staff and at the committee level about what things are being learnt about. I don't witness them in practice, but it seems to me that there is a lot of conversation about both how children learn and developments in understanding how children learn, and different approaches. And it's not just through in-service. [the director/manager] goes and visits other centres and sees how they do what they do and brings that back to here. I've heard her talking about that with staff and at the committee meeting. But specifically ... I probably have, I've just got to go through my files... (Case Study NSW)*

*In the parent comments they'll say, 'The place is looking great. You can tell people are happy because it's ...' Parents know when the staff are happy and they've implemented something that they're proud of.*

*Oh it's fantastic [staff participation in PD&S]. It's made a huge difference. It's helped my son's development in his language area. And also it's helped his nutrition by encouraging him to eat fruit, which is always handy. And has made me feel more confident as a parent too, to approach them knowing that they've attended these workshops and they have the knowledge to help me. (Case Study QLD)*

*I guess what sort of education they had, but also in terms of what they give the parents. I struggled to find one that I was happy with until I came here. And straight away I saw the philosophy up on the door I walked through. The newsletters, in terms of educating us with things as well as the education the staff was having – it was really a selling point to me as to why I came here...When I talk to them about things, it just seems like they've got really good, clear answers about things. And if they don't know they'll always say to me, 'I'm not sure but I'll get back to you'. It really instils a lot of confidence in the parents. (Case Study WA)*

The parent representative of the Management Committee from the ACT Case Study described changes she had noted as a result of “program flow” achieved between a number of the staff who had attended training and this had been followed with involvement with local support hubs.

*This year especially, there's been the new reporting of the progress of the children. There's the new little books that are at the front of the rooms. That's*

*quite new. A lot more is being done on the computer and they're taking photos for the files that they write on the children. I think there has been quite a bit of change.[Interviewer: What do you think that change has meant for you as a parent?] It means that I can see a lot more of what's going on with my child. There was that from the committee, that we were pushing that two or three years ago. We felt that other than the day book of what your child had done, which was two lines ... unless you had time to have a formal conversation with them, you didn't really know what was going on until possibly the end of the year when you get a bit of a scrap book of what they had done for the year. That has been really good. (Case Study, ACT).*

Staff level of confidence as professionals was also noted as one of the noticeable changes as a result of participation in PD&S.

*I feel a lot more confident in my work, and I can explain why we're doing things. It just makes me feel a lot more at ease and can speak to the parents. ... I feel more at home here. There's nothing worse than being at a place that you don't feel comfortable in. I know that a lot of people say, 'That's not development', but it is. Because you've developed your understanding of so many things in the workplace that you feel that this is where you're supposed to be – I can do it. (Case Study WA)*

*Because things change around and you really need to know, and because we are looking after children so things that do change, that could jeopardise a child, could have been easily fixed by being up to date, with reading a paragraph or something. And you feel better that you're knowing... And it keeps you in touch with what you're doing. You're not just going to work and coming home. I suppose you become a professional, you're not just a childcare worker. Because I think childcare workers are just, 'Oh, you just play. You just sit in the sandpit', sort of thing. I don't think a lot of people realise what we have to do. So doing these development things makes you feel that you are ... Because you are an early learning teacher really. (Case Study WA)*

Of significance within this node was the reality that noticeable change in practice is severely impacted by staff turnover. Investment in staff through PD&S who then leave the centre was seen as an on-going frustration by many centre directors/managers and owners.

*Yes. Some practices you are talking about the next month or the next six months, but because of the turnover in early childhood, that has a huge affect on how long these stay current and useful or how long the practice in that room...if the staff teams change from year to year, sometimes the teams (indecipherable). It's pretty hard to be consistent, really, when I look at the amount of money that I've invested into professional development over the last five years, whilst I can see there's been a lot of progression and a lot of change and a lot of mindset change, they just want their value for money. There are not consistently any outcomes realistically. I'm still spending, and one of those little factors of change where a staff member goes on maternity leave or dynamics change, and you've got to start again. Like, it's quicker because you're not starting right back from base line. (Focus Group, TAS)*

*Yes. But that's just the way it goes. Yes, there are times when you get really depressed about that sort of thing, but you just can't think about it too much...Yes, that is frustrating, but then I guess it's a donation you make to the industry hopefully. (Case Study ACT)*

*It's returned to me as long as they stay in this centre. I don't have a lot of turnover, but in case they want to move into a different area. They're all going to become mums one day as well, if they're not already, and they can use that knowledge... take for the rest of their lives. It's not just \$950 worth. It's for so many more abilities to do other things as well. So I think it's really important to set that up. (Case Study WA)*

### **Responding to Research Question #3. Summary of Key Themes:**

The following key findings are suggested by the data:

- Directors/managers were able to identify relationships between PD&S experiences and quality outcomes. It appears that childcare centres who invested more heavily in PD&S through leadership and financial support found it easier to identify specific quality outcomes.
- Changes to practice as a result of PD&S experiences are more likely to occur when there is ongoing support, post attendance.
- Changes to practice were more likely to also occur when all the practitioners employed at the same centre were committed to the change; that is, ownership of learning resulted in noticeable change.
- Growth in staff professional confidence and satisfaction in their work was a noticeable outcome of participation in PD&S.
- Childcare centre practitioners appeared to show a preference for hands-on, practical and visually based PD&S experiences and also reported that these types of experiences were more likely to result in noticeable changes of practice.

## CHAPTER 8

### DISCUSSION & RECOMMENDATIONS

#### 8.1 PREAMBLE

This research presents one of the first attempts to consider the current contexts of Professional Development and Support (PD&S) available in Australia for children's services practitioners working within childcare centres from a national perspective. Throughout this study, there was clear acknowledgement by the directors/managers/owner-operators, childcare centre staff, and other people who contributed to this study, about the value and importance of PD&S in delivering high quality services for young children and their families. Participants' perceptions reflected a positive attitude towards PD&S, based on the belief that such involvement had a constructive impact on both practitioners and the centres. However, the absence of an explicit and comprehensive national policy framework that can drive the provisioning and resourcing of PD&S at all levels of government policy - at national, state/territory and local, is a major challenge for the children's services sector.

According to the OECD's assessment of professional development and in-service training available to the early childhood sector "staff in childcare, in particular, face many practical challenges to accessing in-service training, e.g. to obtain release time with pay to attend courses." (Tayler, 2006: 216). In recommending that "in-service training is linked to career progression and to obtaining further qualifications" (ibid), the report highlights some strategies currently in use in several OECD countries as follows:

- in Belgium, Italy and Hungary – practitioners are encouraged to use non-contact time to undertake professional development;
- in Korea – funding of staff development is defined as a statutory obligation of local authorities; and
- in Hungary – state funded professional development is made available, with individual practitioners obligated to make use of at least 120 hours over seven years.

(Tayler, 2006: 168)

Within this context, it is important to consider the OECD's assessment of Australia's in-service policy orientation: "There is neither a statutory requirement to fund a minimum level of staff development nor recommendations regarding annual hours of in-service training." (Tayler, 2006: 270) Accordingly, it was concluded, "that comprehensive in-service training at a range of levels for staff in this sector is a necessity." (Tayler, 2006: 272) In fact, early childhood teachers in prior to school settings are out of step with State-employed school teachers who have access to systematic PD&S that is funded by government. For instance, the use of compulsory pupil-free days built into the annual state/territory school calendar reflects the government's valuing of the essential link between professional development and school education. Such recognition is long overdue for those who are employed within children's services including childcare centres.

As seen through the eyes of childcare centre directors/managers/owner-operators, this research has presented findings in relation to the following:

- definition and approaches to PD&S;
- experience of PD&S by childcare centre staff, including the consideration of access and availability issues as well as best practice examples identified in this research; and

- achievement of quality outcomes for children realised through childcare centre staff involvement in PD&S.

Each of these aspects is discussed next, with the aim of presenting recommendations for framing policy, program solutions and further research on PD&S for childcare centre personnel in Australia.

## 8.2 DEFINITION AND VALUE OF PD&S

As discussed in Chapter 2 of this report, it was difficult to ascertain a comprehensive definition of what is meant and understood by PD&S through a review of relevant literature. In much of the published literature scanned for this research, there was an assumption of common understanding but this was not fully articulated by the authors of the publications reviewed in this report. When we turned our attention to Australian childcare policy, it was once again difficult to locate a well articulated policy based definition of the concept of 'PD&S' that applied to children's services practitioners. For instance, under the National Childcare Accreditation Council's guidelines, under Principle 7.4 for long day care centres, it was stated that "management provides professional development opportunities for all staff" (Australian Government, 2005). The accompanying notes state that "updating and maintaining staff knowledge is a joint responsibility of staff and management" and a range of strategies or methods that could be used to access PD&S are listed for consideration by centres (ibid). Whilst such lists of strategies are common place in the literature, conceptual clarity in terms of what is meant by PD&S require further scrutiny to effect policy directives which are relevant and meaningful for childcare centre staff.

During focus group discussions used in this research, participants were actively engaged in explaining what they understood in terms of 'Professional Development and Support'. These discussions suggest that there is broad agreement about these concepts amongst Australian childcare centre directors/managers. Overall, 'professional development' was perceived as continuous learning that enabled practitioners to affirm existing understandings as well as acquire new skills and knowledge and thereby remain up-to-date with evolving developments in the field. Many participants associated professional development with personal growth, noting that participation in any form of training or further education can enhance one's ability "to perform the duties of your position" (Focus Group ACT). Another director described PD&S as "anything that will improve service delivery to the families and children that we are contracted to provide the service for. So it is about continual improvement" (Focus Group WA). Others referred to childcare practitioners' interest in enhancing their own professional/personal development through training as a sign of "pride in your profession" (Focus Group WA) and/or a way of raising the status of the whole profession through an active demonstration of their interest in learning and renewing their professional knowledge base (Focus Group SA). It is also important to note that participants acknowledged the importance of inclusiveness in offering PD&S opportunities to ALL childcare centre staff including cooks and administrative/clerical workers. At the focus group in Victoria for example, one director referred to "a cooks' day" which targeted professional development to those employed as cooks in childcare centres located within a particular local region.

Likewise, focus group participants approached the definition of 'professional support' in three ways. Firstly, the notion of support was often associated with systematic support offered through various resource and advisory agencies or individuals occupying positions such as the federally funded Inclusion Support Facilitators (ISFs) or Children's Services Resource and Development Officers (CSRDOs) funded by local government in Victoria. Secondly, there was consistent reference to professional organisations, networks or hubs as a source of support.

Available within local communities, these fora facilitated interactions amongst childcare personnel employed at similar positions (such as directors or preschool teachers) or in similar types of services (such as LDC centres sponsored by the same local council or an employer group) or brought together childcare practitioners with others with similar interests within a local region; and this was particularly pertinent for those working in rural and geographically isolated communities. Thirdly, 'support' was described in terms of gaining access to resources (such as newsletters, journals and online materials) as well as opportunities for debriefing, sharing, encouraging, inspiring and mentoring those with similar interests. These sentiments are captured in the following comments made by one centre director in NSW as follows: "So, to me, support is really about those networks and those community organisations and individuals you can use for emotional support - a safe avenue for venting."

These findings highlight the complexities of the layered and contextual nature of meanings associated with children's services practitioners' perceptions and understandings about the definition and significance of PD&S available to childcare centre staff. Accordingly, in designing policy directives and programmatic solutions to deliver appropriate PD&S experiences, the PSC Alliance agencies must continue to be cognisant of local contextual forces at play in each state/territory.

There is also continuing tension in trying to explain the association between credentialed study courses leading to a degree or diploma or a VET qualification, and other professional development experiences that do not lead to a certified qualification in the same way. In presenting the data we have derived from this study, we have included both credentialed study courses and other professional experiences in our definition and approaches to PD&S. However, we believe that credentialed study courses undertaken over a period of time leading to a substantive early childhood qualification such as a degree or diploma must be treated differently to all other informal or mandated professional development options as discussed in this report. This separation is necessary in order to maintain the professional status of children's services practitioners that is derived through sustained participation in credentialed programs like a Bachelor Degree in Early Childhood.

In general, planned professional experiences provided as PD&S supplement credentialed early childhood study undertaken through the successful completion of certificate/diploma or degree courses. Traditionally, when planning for career advancement, it was relatively easy to observe linear progression from an initial qualification obtained through a pre-service diploma or degree course, to in-service training undertaken after gaining employment in the sector. This picture has become somewhat murky because of the availability of multiple pathways into credentialed early childhood courses offered through Universities, TAFE Colleges and other RTOs. For instance, one-quarter of the directors/managers who completed the online survey indicated that they were engaged in some form of further study whilst being employed in a childcare centre. Likewise, 21 case study interview participants (accounting for 27% of staff interviewed from these centres) were also enrolled in further studies doing either a degree (n= 7), a diploma (n= 9) or a Certificate III (n=5). This pattern of engagement in part-time credentialed study courses is not unusual given the flexible modes of training made available through distance education packages undertaken by children's services practitioners who are employed on a part-time or casual basis in various types of children's services.

The complexity of the professional development context within the Early Childhood sector is exacerbated by the shortage of qualified childcare staff with either degree or diploma qualification who seek to take up employment in childcare centres. It is also important to keep in mind that there is a trend towards increasing the number of centre-based policies covered by mandatory requirements. This trend can thereby place greater demands on centre staff to

undertake appropriate PD&S to respond effectively to these compliance obligations. As such, there is a strong imperative to encourage untrained/unqualified staff to participate in at least some type of PD&S through workshops and seminars to acquire basic early childhood education skills mandated under legislative requirements governing children's services around Australia. Participation in PD&S however does not necessarily guarantee access to recognised qualifications in early childhood for unqualified staff or those wanting to extend their professional qualifications through further study.

The complexities of understanding the differences between content covered by different sessions/courses/providers and working out the logistics of attending various PD&S options described in this research can also influence practitioner decision-making and participation patterns. That is, whilst many universities and other Registered Training Organisers share responsibility for early childhood degree and/or diploma courses, some private training providers also offer in-house training at certificate and diploma levels to the childcare staff they employ. There was a strong sense that most participants in this research did not necessarily perceive enrolment in credentialed study courses as 'professional development'. Instead, enrolment in these courses was regarded as 'something else/extra' undertaken by individual practitioners seeking to improve their conditions of employment and career prospects.

There is a persuasive body of research literature which demonstrates correlation between formally qualified staff and high quality service provision in children's services (Tayler, 2006). Staff qualifications have been consistently identified as the one of the key variables that can significantly influence the delivery of excellent quality outcomes for children in childcare settings. Accordingly, we believe that it is essential that childcare centre staff' participation in PD&S that leads to a recognised early childhood qualification such as a degree or diploma must be strongly encouraged at all times. It is also possible that the TAFE colleges and universities, for instance, can work collaboratively to identify synergies that facilitate better articulation between the different levels of knowledge and skill development promoted through their formal courses. It is clear that Australia needs a highly skilled childcare workforce to deliver excellent quality children's services to young children and families living in this country. In keeping with this belief we recommend

- That the PSC Alliance promotes the importance of incorporating continuous learning through PD&S experiences within the development of a comprehensive Early Childhood Workforce Strategy for Australia. **(Recommendation #1)**

Notwithstanding, we argue that it is also essential to provide childcare staff with a variety of PD&S options as a necessary condition of employment, with the aim of enhancing the professional growth of practitioners as well as service quality for children and families who utilise these centres. In keeping with the principle of 'life long learning', the Early Childhood Australia's policy on Professional Development recognises that PD&S experiences should be continuous, coordinated, collaborative, and delivered in a variety of formats. Moreover, this document encapsulates the spirit and purpose of having a national policy statement on PD&S for Australia's early childhood workforce, and therefore recommend

- That Early Childhood Australia's policy on professional development is used as a reference point to stimulate dialogue with key stakeholders to establish a national policy statement on PD&S for Australia's children's services practitioners. **(Recommendation #2)**

We believe that the development of a comprehensive national policy framework for PD&S for early childhood personnel is a shared responsibility between governments, employers and training providers. Government involvement in shaping this national policy on PD&S framework is essential to maximise the benefits realised through public funding allocated to children's services. That is, there is consistent research evidence which demonstrates that quality outcomes derived through participation in childcare centres are strongly correlated with having a highly skilled workforce. High turnover rates of childcare staff are in turn linked with poor salaries and low public status, and these concerns can be at least partially ameliorated through the provisioning of relevant PD&S experiences including access to credentialed study courses. Accordingly we recommend

- That the PSC Alliance advises the Australian Government of the importance of developing a national system for articulating early childhood professional qualifications between the Vocational Education & Training (VET) sector and the Higher Education sector for use by children's services practitioners any where in Australia. **(Recommendation #3)**

It is also clear that appropriate strategies for funding and resourcing are essential to ensure adequate uptake of PD&S opportunities. In this research, there was evidence that some centres were strategically making budget allocations for their staff PD&S and innovative methods of locating appropriate funding were explained by directors/managers/owner-operators of case study centres. Almost half of all the directors/managers who participated in the online survey reported that they had attended more than 25 hours (or 5 or more days per year) of professional development during the 15 months from January 2006 to March 2007, the data collection period nominated for this study. Comments made by focus group participants also indicated that numerous centres considered at least 2 to 3 days of annual professional development per staff member as a basic expectation or necessity of professional renewal. In seeking some level of equivalence with school teachers, it is recommended

- That the PSC Alliance engages in dialogue with key stakeholders, including government and employers, to establish a national minimum standard of 5 days per year of planned PD&S for each children's services practitioner employed in a prior to school setting. **(Recommendation #4)**

### **8.3 PARTICIPATION, EFFECTIVENESS & RESOURCING PD&S MEASURES**

Our findings suggest that the nature and types of PD&S that were being accessed in each state/territory were to a large extent similar. The list of "learning styles" in the needs analysis surveys used by the PSCs also reflect the range of delivery mechanisms used by various PD&S providers when devising their annual PD&S calendars. Access to high quality information and resources - to both motivate and educate childcare staff, was also recognised as an important dimension of staff participation in PD&S. Participants in various focus groups mentioned a range of professional journals, magazines and newsletters that they found useful in promoting discussion among childcare centre staff and providing resources for use at staff meetings.

In this research we have also identified a range of barriers to accessing appropriate PD&S by childcare centre staff throughout Australia. Availability of relief staff was one of the most significant barriers, especially for centres located in WA, NT and QLD. Other impediments identified during focus group discussions include factors such as geographical isolation, cost of registration, accommodation and travel as well as timing of training delivery (especially at evening or weekends during non-work hours). One example of a solution to these barriers has been realised in Victoria where a local City Council runs a Children's Services Conference

Week. In this way the local council is able to provide accessible and affordable professional development that is targeted to the needs of children's services in that community. Participants reported that the festive atmosphere that accompanies the Children's Services Conference Week was very effective in promoting the value of childcare within the community as well as enhancing the professional capacity and public status of local childcare centre staff.

Customised professional development can assist in targeting training content to meet the needs of individual practitioners as well as a centre's overall goals in service provision. In this way, customised training can facilitate a sense of ownership, particularly when realising observable changes in professional practice and effective outcomes for children and their families. Such an approach to PD&S can also facilitate the creation of learning communities within childcare centres. This outcome augurs well in terms of building a centre's capacity for sustained quality improvement over time. On the other hand, participants also emphasised the value of networking by attending generic or mandated training sessions and local hub meetings which brought children's services practitioners into contact with other professionals, especially those representing allied health, school education and welfare services. When taken together, given the diversity of experience and expertise of childcare centre staff throughout Australia, it is recommended

- That each PSC maintains a mix of PD&S approaches and increases its capacity to provide customised PD&S as requested by centres either on an individual centre basis or as a collective within a region/neighbourhood, with an emphasis on capacity building at the centre level. **(Recommendation #5)**

This perspective is also in keeping with the growing preference of childcare centres to request more localised PD&S offered within centres or local communities, and the need for follow up work to facilitate the effective transfer of learning into everyday practice and policy within centres. Moreover, having developed tools and methodologies to assist in the identification of PD&S at the centre level, the PSC Alliance agencies can also offer to play a more active role within centres by

- a) supporting centres to identify staff PD&S needs;
- b) working with centres to align staff PD&S needs with the centre's mission and business plans;
- c) assisting centres to implement the most useful learning strategies to enhance skill development in-house and externally; and
- d) supporting centres to monitor and evaluate the impact of learning derived through staff participation in PD&S on child and family involvement in childcare.

We note that there will be considerable variations in the way centres will commission the PSC Alliance agencies in each state/territory to assist them identify and implement centre specific PD&S strategies/plans over a given period. Priorities identified through centre based needs assessments can in turn be incorporated into the PSC Alliance annual PD&S plans. Given the diversity and complexity of factors that can either facilitate or hinder childcare centre staff participation in PD&S, it is also recommended

- That the PSC Alliance designs and develops a broad range of professional tools and strategies to assist childcare centres to assess, identify, implement and evaluate the PD&S needs of their staff in strategic ways, meaningful and relevant to local contexts.

**(Recommendation #6)**

There also appears to be a relatively low level of participation in the state/territory wide annual needs analysis surveys undertaken by each PSC Alliance agency. Much of the richer planning data appears to have been derived through face-to-face interactions at focus groups, hub meetings or centre visits undertaken by PSC Alliance staff as noted in the needs analysis reports. Accordingly, we present the following two recommendations for consideration:

- That in developing their annual PD&S priorities, each PSC maintains a continuous and consultative approach when undertaking their state/territory needs analysis dialogues so as to ensure responsiveness to changing demands of children's services.  
(Recommendation #7)
- That the PSC Alliance collates and analyses the state/territory PD&S needs analysis data from a national perspective, to inform and effect national policy change as appropriate.  
(Recommendation #8)

Through systematic documentation and assessment of conversations with children's services practitioners in the field, appropriately targeted PD&S can be achieved. This is particularly important in being able to deliver more options and choice for childcare centre staff working in rural and remote regions. To enable practitioners to make appropriate selections to match their current and growing professional development needs and interests, it is further recommended

- That advertising/promotional material about planned PD&S opportunities delivered by each PSC, carry explicit information about the target audience in relation to the experience level and the role/position (such as centre director, teacher, cook, and assistant) of children's services practitioners who may consider attending these sessions.  
(Recommendation #9)

In relation to determining the specific training content or focus for PD&S, priorities identified by directors/managers can vary according to the methods, tools or techniques used by centres. As it was not required to stipulate exactly how directors/managers identified PD&S needs for themselves or their staff, it is difficult to analyse the veracity of the results yielded through our online survey. However, there is some level of general agreement between the findings of this research and trends identified in the various PSC led needs analysis studies, that there is a continuing demand for PD&S in five broad categories: guiding children's behaviours, programming and curriculum development, working with diverse families, meeting mandatory requirements including quality accreditation, and business management and leadership. Closer scrutiny of these major themes also indicates that there is a need for childcare centre staff to have access to regular up-dates in these key areas to keep them abreast of changes in the field. These opportunities for PD&S not only relate to legislative and policy changes but can also promote innovation and best practice. This was a strong theme particularly in the area of curriculum development where staff across all jurisdictions demonstrated a desire to be up-to-date with current theoretical approaches and practices in early childhood curriculum. In particular there is a need for specific PD&S on applying these approaches with infants and toddlers as well as children with additional needs.

- That each PSC continues to offer childcare centre staff PD&S opportunities to keep up-to-date with innovation and change within the early childhood sector.  
(Recommendation #10)

Overall, the vast majority of the online participants identified curriculum/program based topics as the single most important areas of PD&S required by both directors/managers as well as

other childcare centre staff. Focus on business management and leadership was identified primarily as a priority for centre directors/managers. As with curriculum and programming, PD&S that dealt with team building and staff morale were concerns that were of importance to ALL childcare centre staff. During focus groups and case study interviews also, participants tended to focus more on management/leadership topics such as team building, which benefited all staff, not just those occupying management/leadership roles.

On the one hand, there is compelling evidence from this research that denotes the significant role played by centre directors/managers/owner-operators in mentoring and nurturing centre staff in a variety of ways. This includes key roles in the identification and alignment of their staff PD&S needs with the centre's mission/business plans; as well as encouragement and practical support provided in undertaking credentialed studies after hours. However, there appears to be limited systematic PD&S strategies that support experienced directors/managers to sustain and advance their own leadership potentialities. Accordingly, we recommend

- That the PSC Alliance seeks government funding to establish a national mentoring initiative to support those currently working in senior management and leadership positions in children's services. **(Recommendation #11)**

On the other hand, there is also evidence emanating from the literature reviewed that leadership skills tend to be learnt-on-the-job. As reflected in the findings of this research, such as an approach to leadership learning may be a manifestation of limited availability of university based qualifications with a specialisation on management and leadership relevant for children's services practitioners. Today's directors/managers of childcare centres face numerous challenges in developing and running centres that can deliver high quality children's services. It is clear that these practitioners require appropriate preparation to perform their responsibilities as centre directors/managers. Based on our experiences of designing early childhood degree programs, it is our belief that the acquisition of business management and leadership understandings is more suitable as a postgraduate qualification for those with field experience. By advancing the knowledge base of experienced and/or aspirational children's services practitioners, local capacity that can sustain high quality children's services can be enhanced. We also believe the following recommendation can sit comfortably within the Australian Government's interest in establishing a national Early Childhood Workforce Strategy. Accordingly it is recommended

- That the PSC Alliance urges the Australian government to facilitate the development of appropriate postgraduate courses to enhance business management and leadership qualifications of children's services practitioners as a part of the National Early Childhood Workforce Strategy. **(Recommendation #12)**

The PSC Alliance can also use its existing networks throughout Australia to make a significant contribution to the children's services sector by strengthening the possibilities of reconceptualizing early childhood leadership to match contemporary advancements in the field. These discussions may include those within the early childhood profession and others in related fields such as health, welfare and business studies, as much can be derived through cross-disciplinary knowledge transfers. By way of enhancing this work, it is further recommended

- That the PSC Alliance seeks government support and resources to undertake a national research initiative to investigate leadership and business management concerns that impact on capacity building within childcare centres around Australia. **(Recommendation #13)**

## 8.4 QUALITY OUTCOMES REALISED THROUGH PD&S

As noted in the OECD's recent report on early childhood education and care (Tayler, 2007), and in keeping with international best practice, in order to ensure that PD&S provisioning is promulgated as a statutory obligation of children's services management, we recommend

- That the PSC Alliance advises the Australian Government of the importance of ensuring that PD&S opportunities for all children's services practitioners is an essential component of any national system of quality assurance for children's services.

**(Recommendation #14)**

The findings of this research show that there are numerous strategies or methodologies being used by childcare centres to support staff engagement in study courses leading to the achievement of recognised early childhood qualifications in their state/territory legislation. These include the provision of non-financial incentives such as public acknowledgement/recognition of successful course completions, as well as funding assistance by way of interest free loans to subsidise the cost of enrolment in a diploma or degree; and the availability of study leave to attend lectures, complete assignments and exams. A particularly impressive example of management assistance was seen in one of the case study centres where support for professional development was negotiated through workplace agreements which enabled staff to have study leave and funding to attend conferences. This type of formal commitment towards staff from centre management gives a clear indication of the perceived importance of PD&S in achieving high quality outcomes in early childhood service provision. A comprehensive list of best practice strategies used by centres to enable enrolment and completion of formally accredited studies could be extracted from this research and circulated through newsletters and websites so that other childcare centres could benefit by either adopting or adapting these strategies to suit their local contexts. Accordingly, it is recommended

- That the PSC Alliance utilises the data from this study to collate and disseminate a range of best practice PD&S strategies used by childcare centres to encourage participation in continuous PD&S, including upgrading of qualifications through diploma and degree based studies in early childhood.

**(Recommendation #15)**

We note that many directors/managers/owner-operators who participated in this research expressed concerns about the poor quality of some of the accredited childcare courses being utilised as distance education packages by centre staff they employed. Lack of follow up support and resources for those living and working in remote regions were a particular concern. As one of the directors in WA explained, there was little or no motivation to do anything other than "the barest minimum of what they can do to get a pass..." and another added that "it didn't teach them anything actually" (*Focus Group WA*). Interviews conducted with participants associated with case study centres also clearly indicated that the role played by centre directors/managers/owner-operators in mentoring their staff who were engaged in study at a TAFE college or a university, was crucial in sustaining commitment and meeting the requirements of employing qualified early childhood staff under state/territory regulations. Most of these directors/managers/owner-operators were particularly concerned about sustaining the motivation of young, inexperienced centre staff enrolled in Certificate III programs. We believe that training providers must also uphold their responsibilities in supporting their students and therefore recommend

- That the PSC Alliance seeks to develop guidelines that can be used as benchmark criteria to facilitate the effective delivery of various PD&S experiences, including the participation in Certificate III programs by children's services practitioners located in rural and remote areas. **(Recommendation #16)**

Each PSC Alliance agency utilizes a variety of methods including the provision of professional advice, flexible training options, resources and referrals to other agencies across all children's services. It is also noted that the PSC Alliances agencies are required to have a state/territory based toll-free telephone help-line and a web site with an email contact for practitioners seeking professional support and advice. Although in our field-based discussions, participants referred informally to computer based professional support services provided by the PSC Alliance agencies, the extent to which the current telephone help-lines and websites were effective in addressing practitioner demands was not a primary focus of this research. It appears however, that childcare centre staff in remote and rural locations in particular may benefit through access to technology based professional support options such as the availability of self-guided learning packages and email self-help groups that communicate regularly online. Others also indicated cost savings that could be achieved through online training for commonly mandated aspects of service provision such as child protection, first-aid, and other health and safety regulations relevant to both children and staff working in children's services. This suggestion may be operationalised through a three-part recommendation:

- That each PSC identifies mandatory training aspects covering children's services provision within their state/territory;
- That collectively, the PSC Alliance collaborates to develop these aspects/areas into PD&S packages for use by children's services practitioners; and
- That steps be identified to systematically evaluate the use and effectiveness of these PD&S packages over time. **(Recommendation #17)**

Comments made by participants in some states/territories suggest that there was a preference for attracting trainers from outside their home region/state/territory. The multi-disciplinary nature of children's services also promotes collaboration with professionals in other disciplines. In this regard, it may be opportunistic to systematically collate and reflect on presenters who are currently available and accessed at the state/territory level. Accordingly, it is recommended

- That each PSC continues to broaden the range and diversity of PD&S service providers used as presenters, within each state/territory as well as across Australia more broadly, as appropriate. **(Recommendation #18)**

The importance of adopting a planned approach to PD&S within childcare centres as educational organisations, as well as by individual practitioners committed to lifelong learning, is well recognised. In our research, many focus group and case study participants however struggled to articulate examples of effectiveness of PD&S in terms of realising quality outcomes at their centres. This may suggest that childcare centre staff may benefit from having mentoring support to explore sustainable change in practice in strategic ways, both as centres and as children's services practitioners, by learning how to assess baseline professional needs and reflect upon the effectiveness of learning after engagement in professional development. Those who are contracted to implement PD&S presentations can play a key role in guiding these learning processes but they too require adequate preparation to undertake this work. By way of enhancing the overall quality and effectiveness of the PD&S experiences provided by the PSCs, it is also recommended

- That each PSC continues to support the regular presenters of PD&S within their state/territory to perform their role in mentoring children's services practitioners and in evaluating the effectiveness of the PD&S they have presented. **Recommendation #19)**

Following an assessment of recent research on professional development, Raban, Waniganayake, Nolan, Ure, Brown and Deans (2007: 4) found that a greater chance of positive change within an organisation is possible when individuals

- receive ongoing staff development over an extended period of time
- are involved in assessing their own learning
- have opportunities to apply their new knowledge and skills in work settings
- have a trusted 'other' to discuss their developing practice.

On the one hand, this assessment reflects the importance of adopting a long term strategic perspective in promoting PD&S for childcare centre staff. On the other hand, these comments also strengthen the findings of this research where childcare centre directors/managers emphasised the value of participation in professional organisations, networks and local hubs which brought about regular contact between children's services practitioners. These opportunities were perceived essential in terms of being supportive forums for professional collegiality and information exchange. We draw attention to innovative ways of using networking opportunities discussed during focus groups in a number of States/Territories including WA, SA, QLD and NSW where childcare centre staff engaged in practitioner research through a local network. In NSW for instance, one such research group has been active for about 10 years, and was described by one of the participants as follows:

*The main aim is to look into different philosophies and they bring together documentation they've done, with stuff that has happened at their centre and bring it in and everyone can talk about it and share their ideas. So it's not just learning about a topic, but sharing what you've got and developing that.*

Participants in a number of states/territories also referred to involvement in major government initiatives such as Communities for Children and Brighter Futures Program, as being highly effective in updating knowledge and awareness of research, as well as building connections with other professionals in education, health and welfare. Accordingly, these networks not only add value to local communities by building social capital, they also have the potential to enhance the long term development of leadership potential of childcare centre personnel. In building on these achievements in a systematic way and thereby enhancing further quality outcomes for those working with young children and their families, it is recommended

- That the PSC Alliance seeks government funding to sponsor research on innovations in PD&S on related matters such as:
  - Enhancement of pedagogical practice, business management and leadership potentialities of children's services practitioners achieved through their involvement in major government initiatives established within local communities;
  - Investigation of workforce participation capacities of specific groups of children's services practitioners including family day care providers, in-home carers, outside school hours care providers, male practitioners, those from Indigenous backgrounds, and those with overseas qualifications.

**(Recommendation #20)**

The absence of focus on specific sectors and particular groups of childcare centre staff (on the basis of culture and gender etc) is not addressed in our report. It only focussed on the broader context. However, research shows that professional development and support – in terms of access and usage in particular, can vary according to service type as well as individual staff demographics. Accordingly, this recommendation is aimed at highlighting the need for specificity in future research on professional development and support.

## 8.4 CONCLUSION

The PSC Alliance is well placed to provide leadership in a variety of ways by initiating appropriate policy and program development aimed at enhancing PD&S opportunities available to children's services practitioners throughout Australia. The early childhood sector in Australia is currently undergoing considerable growth and change. In promoting excellent outcomes for young children, governments must pay greater attention to the provisioning of professional development and support for children's services practitioners as an essential condition of funding these services. This research provides a sound platform to effect evidence based policy. By using these research findings and associated recommendations, the PSC Alliance can make a major contribution to effect change within the Australian government's reformulation of the national early childhood agenda.

The unique role each PSC performs within their own state/territory as well as collaborative work undertaken as a national alliance, affords them community credibility in voicing their perspectives on the provisioning of PD&S for children's services practitioners throughout Australia. Adequate resourcing and continuous evaluation of this work can, in turn, contribute significantly towards the realisation of sustainable improvements in provisioning children's services achieved through capacity building at the centre level. Through this work, the PSC Alliance can also influence the enhancement of the professional status and public confidence in children's services practitioners and their capacity to optimise children's potentialities during early childhood.

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In Chapter 2 of this report, for the purposes of discussing the findings ascertained through our reading of the PSC Alliance agencies' Needs Analysis reports, we have used a reader friendly reference list in which the various needs analysis reports and the authors of each report have been attributed to the relevant PSC Alliance agency in each state/territory. The full titles and author details are listed below.

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- PSCNSW - Children's Services Central. (2007). Professional support needs analysis.
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## LIST OF APPENDICES

### **APPENDIX 1: Information brief/Letters to participants**

- Appendix 1a:  
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- Appendix 1b:  
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- Appendix 1c:  
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- Appendix 1d:  
Information brief/letter of invitation to a Director who expressed an interest by nominating their centre to be a case study.
- Appendix 1e:  
Information brief/Letter of invitation to centre staff, parents and community stakeholders about participating in a case study interview
- Appendix 1f:  
Information brief/Letter of invitation to centre directors who expressed an interest in participating in a focus group (this document was slightly modified by individual PSCA representatives and/or attached to a separate letter from their organizations before being sent to participants. This was necessary because of variations in the support arrangements being made at each state/territory.
- Appendix 1g:  
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## APPENDIX 1a

### Information brief and letter of invitation about the online survey

**Practice Potentials: Impact of Participation in Professional Support Activities  
on Quality in Child Care Centres**

You are invited to participate in a national research study contracted by The Professional Support Coordinators Alliance (PSC Alliance) to explore professional development opportunities available to child care centre staff. The purpose of the study is to investigate current perceptions of directors/managers about the impact of professional development support activities on quality outcomes for children and their families using centre based child care.

The Institute of Early Childhood, Macquarie University in partnership with Charles Sturt University, is conducting this study. The Chief Investigators are:

- Associate Professor Manjula Waniganayake (Macquarie University)  
Phone: 02 9850 9825 email: [manjula.waniganayake@mq.edu.au](mailto:manjula.waniganayake@mq.edu.au)
- Dr Linda Harrison (Charles Sturt University)  
Phone: 02 6338 4872 email: [lharrison@csu.edu.au](mailto:lharrison@csu.edu.au)

If you decide to participate, there are two phases you can be involved in:

#### 1. Online survey

Log onto [www.ecpd.websurvey.net.au](http://www.ecpd.websurvey.net.au).

Specific instructions about how to complete the on-line survey are provided on this site. You can start by printing a copy of the questionnaire to get a sense of the questions being asked of you.

The online survey consists 24 questions and should take about 20-30 minutes to complete. You can leave the survey at any time and return to it using the username and password allocated to you when you commenced the survey. Please make a note of these details and keep it in a safe place for use if required. The survey will be open for access **between 7 to 25 May only**.

If you experience any technical difficulties in completing the survey, please contact: [support@websurvey.com.au](mailto:support@websurvey.com.au) Phone: 03 9340 9001.

Please note that the identity of online participants will remain anonymous. Every precaution will be taken to securely store your data when it is entered.

#### 2. Focus groups and case studies

Having completed the on-line survey, you may be interested in participating in one or two of the follow-up activities in this research study. First, as a child care centre director/manager, you may volunteer yourself to participate in your state/territory focus group of directors/managers for a 2 hour round-table discussion on professional development matters.

Second, you may nominate your centre to be one of the case studies that demonstrate effectiveness of child care professional development. You can nominate up to six personnel from your centre or key community representatives who are able to comment on professional development experiences of your centre, for a 1:1 interview with a member of the Research Team. Opportunity will be available to discuss and document successful policies and practices that have led to the achievement of positive outcomes for children, families and staff at their centre. These successes must be directly linked to staff participation in professional development during the past 15 months (January 2006 – March 2007). Our aim is to learn about the impact of professional development within individual centres.

During June to July this year, two members of the Research Team will travel to each state/territory to conduct the focus groups and 1:1 interviews with individual personnel at specific centres. Arrangements for these activities will be made during May, when the final sample of directors and centres who will be included in these two activities are established. Specific information about the location, date and time of these activities will be arranged in discussion with the participants. We hope that there will be some funding support to enable staff to participate in these follow-up activities.

More information about the focus groups and the case studies, can also be obtained from the local PSC Alliance member in your state/territory as follows:

- ACT
- NSW
- Vic
- SA
- Tasmania
- WA
- NT
- Queensland

Any information or personal details gathered in the course of the study are confidential. No individual will be identified in any publication of the results. If you decide to participate, you are free to withdraw from further participation in the research at any time without having to give a reason and without consequence.

This letter has been sent through the PSC Alliance on behalf of the researchers. Centre details have not been disclosed to the research team.

An overview of findings will be made available to the PSC Alliance for circulation to the child care centres they support.

The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

We hope that you will collaborate with us in documenting the nature and effectiveness of professional development opportunities available to childcare centre staff. The results will be of much importance to all of us concerned with planning and achieving high quality children's services in this country. An information brief about this study is attached and provides more details about what is expected of you and your centre.

Many thanks for your support and assistance with this research.

Yours sincerely

**A/Professor Manjula Waniganayake**  
Macquarie University

**Dr Linda Harrison**  
Charles Sturt University

**Research Team Leaders**

## APPENDIX 1b

### Instructions at the gateway to the website

At the point of entry to the website, each participant will be asked the following two questions to ensure eligibility to participate in this research.

**Practice Potentials: Impact of Participation in Professional Support Activities  
on Quality in Child Care Centres**

Thank you for your interest in participating in this online survey of professional development in child care.

Please note that participation is restricted to services that are registered to receive Child Care Benefit funding from the Australian government. Please confirm your eligibility by answering the following question:

Is your long day care child care centre registered to receive Child Care Benefit funding from the Australian government?

YES

NO

If you answered "NO" to this question please do not complete any further questions. If you answered "YES", please take a few minutes to read the instructions for completing this survey by double clicking on the hotlink.

There are 24 questions in the first part of the survey questionnaire, which will take approximately 20 minutes to complete. Following this, there are two tables for you to complete, based on the professional activities that you and your staff have undertaken over the past 15 months (January 2006-April 2007). We suggest that you refer to records you may have kept for Quality Assurance, licensing, or the child Care census, to aid you in completing this section.

Please note that it is not necessary to complete the survey in one go; you can log off and re-open the site at a later time. You can leave the survey at any time and return to it using the username and password allocated to you when you commenced the survey. Please make a note of these details and keep it in a safe place for use if required.

The questions are designed to give a snapshot of your centre's involvement in professional development. Therefore please give us your 'best estimate/guess' for each question without worrying about the accuracy of each number/comments you provide.

In order to gather comprehensive national information about the participation of child care centre staff in professional development activities it will be most effective if there is a high percentage of completed surveys. This is your opportunity to have your say on designing and delivering effective professional development that will make a difference for children, parents and staff in your communities.

This online survey questionnaire is divided into four sections as follows.

- Section 1 includes 8 questions that asks you to provide broad information about the centre (ONE only) that you are currently working in as the Manager/Director.
- Section 2 includes 10 questions that asks for information about you and your views and experiences as the director/manager of that centre.

- Section 3 includes 5 questions that ask about funding, uptake of professional development, and effectiveness of these programs, in general.
- Section 4 asks you to provide more detailed information about the professional development activities that are provided by the centre or have been accessed by staff over the past 15 months (January 2006 – April 2007).

Please complete ALL items in sections 1, 2 and 3 of the survey, and complete section 4 to the best of your ability. Then submit the completed survey.

An overview of findings will be made available to the PSC Alliance for circulation to the child care centres they support.

Thank you for your cooperation in this important project.

**A/Professor Manjula Waniganayake**

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**Research Team Leaders**

The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 02 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

## APPENDIX 1c

**Practice Potentials: Impact of Participation in Professional Support Activities  
on Quality in Child Care Centres (HE25 May 2007: R05219)**

### Section 1: CENTRE CONTEXT

- 1) a) The state/territory where my centre is located: (Please select one only.)  
 NSW     ACT     VIC     QLD     NT     WA     SA     TAS
- b) Postcode for my centre location suburb/city/town: \_\_\_\_\_
- 2) The organisational context of my centre's management can be best described under the following categories (Please tick the appropriate boxes)

**Not-for-profit centre**

- stand-alone centre
- part of a large (umbrella) organisation
- Local government sponsored centre
- Sponsored by university or TAFE
- Multi-functional Aboriginal Children's Service (MACS)
- Work-based child care centre

**For-profit centre**

- stand-alone centre
- part of a group of less than 5 centres
- part of a chain or corporation of more than 5 centres
- Work-based child care centre

**Other** (Please specify) \_\_\_\_\_

- 3) **Under my centre licence**, the total number of children who can attend the centre on any day is \_\_\_\_\_ Please specify the number of children under each age group. Please note that this question will appear in a different format on the online survey, but the question is the same.

| Under 1 year | 1 year | 2 years | 3 years | 4 years | 5 years | Over 5 yrs |
|--------------|--------|---------|---------|---------|---------|------------|
|              |        |         |         |         |         |            |

- 4) On any **one day**, the average number of children that attend my centre is \_\_\_\_\_
- 5) In total, the **actual** number of children enrolled in a period of one week at my centre is \_\_\_\_\_
- 6) During each week, how many children attending the centre are from a **culturally and linguistically diverse (CALD)** family background? \_\_\_\_\_
- 7) During each week, how many children attending the centre are from an **Aboriginal or Torres Straits Islander (ABORIGINAL AND TORRES STRAITS ISLANDER)** family background \_\_\_\_\_
- 8) During each week, how many children attending the centre currently receive federal government funding under the **inclusion support program** \_\_\_\_\_
- 9) On average, the number of **adults, in paid positions** who are typically working at my centre when most children have arrived for the day is \_\_\_\_\_  
 (Please include ancillary staff such as cooks and regular relief workers in this total.)

**Section 2: DIRECTOR ORIENTATION**

- 10) The best way to describe my role at this centre is:
- Owner operator not involved in day-to-day centre management
  - Director /Manager who co-ordinates day-to-day centre management
  - Director/Teacher: Mixed responsibilities for management and contact with children
  - Other (Please identify position title and brief description of key functions)

Position: \_\_\_\_\_

Key functions: \_\_\_\_\_

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- 11) Post-secondary qualifications in early childhood that I have completed consist of:
- PhD or an EdD
  - Masters degree
  - Graduate Diploma or Post-Graduate Certificate
  - Bachelor Degree (including Honours)
  - Advanced Diploma
  - Diploma or Associate Diploma
  - Certificate level qualification from a TAFE or Vocational training agency
  - Other qualifications from another profession/field (Please specify)
- 

- 12) I am currently studying for an early childhood qualification that will expand my skills and knowledge in early childhood education and care:
- NOT APPLICABLE
  - PhD or an EdD
  - Masters degree
  - Graduate Diploma or Post-Graduate Certificate
  - Bachelor Degree (including Honours)
  - Advanced Diploma
  - Diploma or Associate Diploma
  - Certificate level qualification from a TAFE or Vocational training agency
  - Other qualifications from another profession (Please specify)
- 

- 13) My experience in the early childhood field consists of
- more than 25 years
  - 21 – 25 years
  - 16 – 20 years
  - 11 – 15 years
  - 5 – 10 years
  - less than 4 years

14) In the last 15 months (January 2006 to March 2007), the best estimate of the number of hours that I have attended professional development activities (e.g. in-service programs, child-free days, seminars, workshops, conferences and short courses.) Base your estimate on hours of attendance, with one day of participation equal to 6 hours. (please select one.)

- Nil
- 1 to 6 hours (1 day)
- 7 to 12 hours (2 days)
- 13 to 18 hours (3 days)
- 19 to 24 hours (4 days)
- More than 25 hours (5 or more days)

15. The most important area for professional development **for me** at present is:

---

16. In general, I would rate the effectiveness of the professional development activities that I have attended in changing or improving the centre's policies and practices as being

- VERY effective
- SOMEWHAT effective
- NEITHER effective nor ineffective
- INEFFECTIVE

17. At present, the most important area for professional development for **my centre staff team** is :

---

18. Thinking about the Professional Development activities that my staff and I have attended during the past 15 months, the most useful and least useful aspects were as follows: (Please describe these and give your reasons why these professional development activities were either useful or not in terms of the impact on your service operations.)

**Most useful aspects:**

**Least useful aspects:**

19. We are interested in your views about professional development, as you have experienced this at your centre. Please indicate the extent to which you agree or disagree with the following statements by selecting one number or NA for each item given below.

1 = **STRONGLY AGREE**                      2 = **AGREE**            3 = **NEITHER AGREE NOR DISAGREE**  
 4 = **DISAGREE**                              5 = **STRONGLY DISAGREE**

**NA = NOT APPLICABLE**

(Please use Not Applicable if you are unaware of existing professional development activities in your state/territory or are unable to answer any of the questions.)

Please note that this question will appear in a different format on the online survey, but the questions are the same.

|  |              |
|--|--------------|
| a) At this centre there are clear links between ongoing professional development and quality outcomes for children and their families.   | 1 2 3 4 5 NA |
| b) At this centre, ongoing professional development of staff is fundamental to maintaining service quality.  | 1 2 3 4 5 NA |
| c) In my experience, existing professional development programs in my state/territory <b>are culturally appropriate</b> to meet the needs of children & families using our centre. | 1 2 3 4 5 NA |
| d) In my experience existing professional development programs in my state/territory provide <b>a range of topics</b> that meet the needs of our centre.                           | 1 2 3 4 5 NA |
| e) In my experience existing professional development programs in my state/territory are <b>targeted to meet identified local needs</b> within individual centres.                 | 1 2 3 4 5 NA |
| f) In my experience existing professional development programs in my state/territory are <b>cost effective</b> .   | 1 2 3 4 5 NA |
| g) In my experience existing professional development programs in my state/territory are <b>easily accessed</b> .  | 1 2 3 4 5 NA |
| h) I have an extensive knowledge about the professional development activities provided by the Professional Support Coordinators (PSC) Agency * in my local area.                  | 1 2 3 4 5 NA |

For more information about the **PSC agency** in each state/territory, please look for the "Professional Support Coordinators" within the Child Care Inclusion and Professional Support Program, under the Department of Families, Community Services and Indigenous Affairs website at the following URL: [www.facsia.gov.au/](http://www.facsia.gov.au/)

20. We are interested in **the barriers** that may make it difficult for you and your staff to attend professional development activities. Please indicate the extent of difficulty the following factors have caused concern for the staff at your centre.

- 1 = NEVER DIFFICULT                      2 = RARELY DIFFICULT  
 3 = SOMETIMES DIFFICULT              4 = OFTEN DIFFICULT  
 5 = REGULARLY DIFFICULT

Please note that this question will appear in a different format on the online survey, but the questions are the same.

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| a) cost of professional development activities                                      | 1 | 2 | 3 | 4 | 5 |
| b) relevance of professional development for this centre                            | 1 | 2 | 3 | 4 | 5 |
| c) location of PD programs – too far and/or difficulties with transport and parking | 1 | 2 | 3 | 4 | 5 |
| d) cost of relief staff to replace staff attending PD                               | 1 | 2 | 3 | 4 | 5 |
| e) Lack of relief staff to replace staff attending PD training                      | 1 | 2 | 3 | 4 | 5 |
| f) Lack of sufficient places for my staff to attend the PD sessions                 | 1 | 2 | 3 | 4 | 5 |
| g) timing of PD (eg, after hours, school holidays etc)                              | 1 | 2 | 3 | 4 | 5 |
| h) Family commitments of staff  | 1 | 2 | 3 | 4 | 5 |
| i) Other reasons (please describe)  | 1 | 2 | 3 | 4 | 5 |

Please comment: \_\_\_\_\_

### Section 3: CENTRE POLICIES & PRACTICES ON PROFESSIONAL DEVELOPMENT

21. a) In my centre's annual budget, funds are usually allocated for staff professional development activities:       YES    NO

b) If "yes" please indicate, what proportion of your **annual centre expenditure** would you typically allocate for staff professional development activities each year?

- More than 16%  
 Between 11 to 15%  
 Between 6 to 10%  
 Less than 5%  
 DON'T have access to that information

Please comment:

\_\_\_\_\_

\_\_\_\_\_

22. At my centre, **allocation of funding** for professional development activities is based on

- Individual staff goals
  - Our centre's vision/mission statements
  - Meeting our centre's accreditation and licensing needs
  - Funding obligations
  - Other (please describe)
- 

23. The following questions ask you to report on centre policies and practices that apply to professional development and the uptake of professional development by staff currently working in your centre. Please read these statements and indicate your opinion by selecting one number for each item that reflect the following rating scheme.

**1 = NEVER      2 = RARELY      3 = SOMETIMES      4 = REGULARLY      5 = DON'T KNOW**

Please note that this question will appear in a different format on the online survey, but the questions are the same.

At my centre:

|  |                   |
|--|-------------------|
| a) the cost of attending professional development activities is <b>paid in full by the staff member</b> attending the training | 1   2   3   4   5 |
| b) the cost of attending professional development activities is <b>shared</b> between the staff member & the centre            | 1   2   3   4   5 |
| c) the cost of attending professional development activities is <b>paid in full by the Centre</b>                              | 1   2   3   4   5 |
| d) staff are actively encouraged to obtain or upgrade an early childhood qualification   | 1   2   3   4   5 |
| e) regular relief staff are funded to attend professional development activities   | 1   2   3   4   5 |
| f) when staff attend professional development, there is a formal process for sharing this information with other staff:        | 1   2   3   4   5 |

**Thank you for your assistance thus far. We value your participation and perspectives.**

24. Please add any comments you wish to make that explain your answers or give us additional information about professional development activities at your centre.

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**Section 4: PROFESSIONAL DEVELOPMENT ACTIVITIES COMPLETED BY STAFF**

In this section we invite you to provide as much information as possible about the types of professional development (PD) that you and your staff team have participated in over the last 15 months (January 2006 to March 2007).

Please provide your best estimates to give a general picture of your centre's professional development activity. We suggest that you refer to records you may have kept for Quality Assurance, Licensing or the Child Care Census. Absolute accuracy is not as important as capturing general trends and your perceptions of the impact of these experiences on your service operations. You may also limit your staff list to those who are currently employed at your centre.

Please note that this question will appear in a different format on the online survey, but the questions are the same.

25. At my centre, staff have participated in the following professional development activities **as a staff team** all together.

| In-House PD activities   | Topics covered | Approx no of hours of PD for each category as listed | Please rate the impact of each activity to your service operations HIGH /MED/ LOW |
|--|----------------|--|---|
| Staff meeting with PD component  |                |  |   |
| Child free day with PD component   |                |  |   |
| Mandatory training session (Eg. Fire safety, first aid, child protection etc.) |                |  |   |
| Other: (Please provide details)  |                |  |   |

Please indicate if other professional development activities are made available to your staff team.

|   |     |    |
|---|-----|----|
| Subscriptions to professional journals  | YES | NO |
| Membership to professional organisations  | YES | NO |
| Conference or seminar attendance (If "yes", please indicate main theme of conference or seminar.) | YES | NO |
| Other activities: (please provide details)  |     |    |

26. Please use the following table to list other professional development activities undertaken by **individual staff** at your centre. Do not include items listed under question 25 above. Please rate your perception of the overall impact of these activities on your centre operations. . In each case, your **best estimate** is sufficient to provide an overall snapshot of professional development activities undertaken by your staff.

Please note that this question will appear in a different format on the online survey, but the questions are the same

| Staff member | Qualifications<br>select from the following:<br>1 = Early Childhood Degree<br>2 = EC Diploma<br>3 = EC Associate Diploma<br>4 = EC Certificate<br>5 = No EC qualifications | Topics covered | Approx no of hours of PD | Please rate the impact of each activity to your service: operations<br>H = HIGH<br>M = MEDIUM<br>L = LOW | Please indicate if this PD was mandated by government legislation or regulations?<br>M = mandated<br>NM = Not mandated |
|--------------|--|----------------|--------------------------|--|--|
| 1.self       |  |                |                          |  |  |
| 2. MW        |  |                |                          |  |  |
| 3. LH etc    |  |                |                          |  |  |
| 4.           |  |                |                          |  |  |
| 5.           |  |                |                          |  |  |
| 6.           |  |                |                          |  |  |
| 7.           |  |                |                          |  |  |
| 8.           |  |                |                          |  |  |
| 9.           |  |                |                          |  |  |
| 10.          |  |                |                          |  |  |
| 11.          |  |                |                          |  |  |
| 12.          |  |                |                          |  |  |

THANK YOU

**Invitation to participate in follow up activities:**

**Practice Potentials: Impact of Participation in Professional Support Activities  
on Quality in Child Care Centres**

Thank you for completing the online survey. You are now invited to participate in one or two types of follow up activities. First, as a centre director/manager, you may volunteer yourself to participate in your **state/territory focus group** of directors/managers. Second, you may nominate your centre to be one of the **case studies** that can highlight the effectiveness of child care professional development by describing your experiences in more detail. These centres can nominate up to six personnel from your centre for a 1:1 interview with a member of the Research Team to discuss and document successful policies and practices that have led to the achievement of positive outcomes for children, families and staff at your centre. These successes must be directly linked to staff' participation in professional development activities.

If you are interested in participating in either a focus group and/or case study, please complete the following details. If you are not interested in participating further, thank you for your time in completing the survey your input is appreciated.

Please be assured that your contact information will not be used to link you back to your online survey responses. This information will be used only for the purposes of identifying a sample of participants for the follow up activities and used when contacting centres to make arrangements for the state/territory visits by the Research Team.

I am interested in participating in a **FOCUS GROUP**.

- YES  
 NO

I'm interested in nominating my centre to be one of the **CASE STUDY CENTRES**.

- YES  
 NO

If you selected "NO" to either of the above questions, we thank you again for completing the survey; your input in this regard is much appreciated.

If you said "YES" to either of the above questions, please provide your contact details:

- Centre director's name: \_\_\_\_\_
- Centre location: \_\_\_\_\_ state/territory
- E-mail address: \_\_\_\_\_
- Telephone: \_\_\_\_\_

Please note that a random selection process will be used to select directors and centres who will be included in the final sample of participants across Australia. After we make that selection, a member of the Research Team will be in contact with these centres to discuss the details of date/time/venue of involvement further. If you do not hear from the Research Team about this by the end of June, please assume that your centre has not been selected for these activities. Your interest in nominating your centre for this work, is however much appreciated.

## APPENDIX 1d

### Information brief/letter of invitation to a Director who expressed an interest by nominating her Centre to be a case study



#### Practice Potentials: Impact of Participation in Professional Support Activities on Quality in Child Care Centres

Dear Colleague

Thank you for nominating your centre to be a case study in the national research study contracted by The Professional Support Coordinators Alliance (PSC Alliance) to explore professional development opportunities available to child care centre staff. The purpose of the study is to investigate current perceptions of directors/managers about the impact of professional development support activities on quality outcomes for children and their families using centre based child care.

The Institute of Early Childhood, Macquarie University in partnership with Charles Sturt University, is conducting this study. The Chief Investigators are:

- o Associate Professor Manjula Waniganayake (Macquarie University)  
Phone: 02 9850 9825 email: [manjula.waniganayake@mq.edu.au](mailto:manjula.waniganayake@mq.edu.au)
- o Dr Linda Harrison (Charles Sturt University)  
Phone: 02 6338 4872 email: [lharrison@csu.edu.au](mailto:lharrison@csu.edu.au)

These interviews will be held on ..... (date and time) at .....  
(location). Each interview will take approximately 30 minutes and will be conducted by one of the Research Team members.

In addition to yourself, we are interested in hearing from a variety of people associated with your centre in this case study. Our aim is to learn about the impact of professional development within individual centres from a variety of perspectives. Accordingly, we invite ALL parents, centre staff and community stakeholders who are aware of your staff professional development activities to participate in a case study interview. To assist us in obtaining consent, could you please circulate the attached information brief to ALL parents, centre staff and community stakeholders as appropriate as a matter of some urgency. Your assistance in this regards is gratefully accepted by the Research Team. These interviews are voluntary and as the number of participants that can be interviewed is limited, the Research team may draw names out of a hat to decide the final number of interviewees per centre.

The interview will be audio taped to ensure your views and ideas are heard and acknowledged. The audio tape will only be listened to by the Research Team and will be erased once the information has been transcribed. Individual participants will have an opportunity to read over their interview and make any amendments as necessary. An overview of findings will be made available to the PSC Alliance for circulation to the child care centres they support.

If you are currently enrolled as a student in any study program at either Macquarie University or Charles Sturt University, please be assured that your involvement in this study will not be linked with your academic studies at one of our universities. Any information or personal details gathered in the course of this research are confidential. No individual will be identified in any publication of the results. If you decide

to participate, you are free to withdraw from further participation in the research at any time without having to give a reason and without consequence.

The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research Ref HE25MAY2007 – R05219). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 02 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

We hope that you will collaborate with us in documenting the nature and effectiveness of professional development opportunities available to childcare centre staff. The results will be of much importance to all of us concerned with planning and achieving high quality children's services in this country. An information brief about this study is attached and provides more details about what is expected of you and your centre.

Many thanks for your support and assistance with this research.

Yours sincerely

**A/Professor Manjula Waniganayake**  
Macquarie University

**Research Team Leaders**

**Dr Linda Harrison**  
Charles Sturt University

## APPENDIX 1e:

### Information brief/Letter of invitation to centre staff, parents and community stakeholders about participating in a case study interview



#### Practice Potentials: Impact of Participation in Professional Support Activities on Quality in Child Care Centres

#### Dear colleagues and parents

..... (insert name), the Centre Director of ..... (insert name of centre) has nominated the centre to be a case study in the national research study contracted by The Professional Support Coordinators Alliance (PSC Alliance). The purpose of the study is to investigate current perceptions of directors/managers about the impact of professional development support activities on quality outcomes for children and their families using centre based child care.

The Institute of Early Childhood, Macquarie University in partnership with Charles Sturt University, is conducting this study. The Chief Investigators are:

- o Associate Professor Manjula Waniganayake (Macquarie University)  
Phone: 02 9850 9825 email: [manjula.waniganayake@mq.edu.au](mailto:manjula.waniganayake@mq.edu.au)
  
- o Dr Linda Harrison (Charles Sturt University)  
Phone: 02 6338 4872 email: [lharrison@csu.edu.au](mailto:lharrison@csu.edu.au)

As a part of this study, we are keen to hear from a wide variety of individuals associated with this centre as either staff, parents or community stakeholders so as to obtain a range of perspectives on professional development matters concerning child care centre staff. During July/August the Research Team members will be visiting each state/territory to conduct interviews with people such as yourself and we would like to hear from you if you are interested in participating in one of these interviews.

These interviews will be held during July/August at a mutually convenient location. Each interview will take approximately 30 minutes and will be conducted by one of the Research Team members. Could you please confirm your availability to participate in this interview by completing the attached Consent Form and returning it to the Centre Director by ..... (insert date).

In addition to the Centre Director, we are interested in hearing from a variety of people associated with your centre in this case study. Our aim is to learn about the impact of professional development within individual centres from a variety of perspectives. Accordingly, we invite ALL parents, centre staff and community stakeholders who are aware of your staff professional development activities to participate in a case study interview. These interviews are voluntary and as the number of participants that can be interviewed is limited, the Research team may draw names out of a hat to decide the final number of interviewees per centre. If you do not hear from the Research Team about this by the end of July, please assume that you have not been selected for these activities. Your interest in nominating yourself an interview is, however much appreciated.

The interview will be audio taped to ensure your views and ideas are heard and acknowledged. The audio tape will only be listened to by the Research Team and will be erased once the information has been transcribed. You will have an opportunity to read over the interview and make any amendments

you feel necessary. An overview of findings will be made available to the PSC Alliance for circulation to the child care centres they support. You may request to see this information through the Centre Director.

If you are currently enrolled as a student in any study program at either Macquarie University or Charles Sturt University, please be assured that your involvement in this study will not be linked with your academic studies at one of our universities. Any information or personal details gathered in the course of this research are confidential. No individual will be identified in any publication of the results. If you decide to participate, you are free to withdraw from further participation in the research at any time without having to give a reason and without consequence.

The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research Ref HE25MAY2007 – R05219). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 02 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

We hope that you will collaborate with us in documenting the nature and effectiveness of professional development opportunities available to childcare centre staff. The results will be of much importance to all of us concerned with planning and achieving high quality children's services in this country. An information brief about this study is attached and provides more details about what is expected of you and your centre.

Many thanks for your support and assistance with this research.

Yours sincerely

**A/Professor Manjula Waniganayake**  
Macquarie University

**Dr Linda Harrison**  
Charles Sturt University

**Research Team Leaders**

## APPENDIX 1f:

### Information brief/Letter of invitation to Focus Group Participants



#### Practice Potentials: Impact of Participation in Professional Support Activities on Quality in Child Care Centres

Dear Colleague

Congratulations, you have been selected as one of the child care centre directors who has been invited to participate in your state/territory Directors Focus Group to be held on ..... (insert date and time) at ..... (insert location). The focus group will take approximately 2 hours, and lunch/refreshments will be provided at the venue. The list of questions that will be used to facilitate this discussion is attached for your convenience. Could you please confirm your availability to participate in this focus group by completing the attached Consent Form and returning it to the Research Team by ..... (insert date) in the reply paid envelope provided.

The Institute of Early Childhood, Macquarie University in partnership with Charles Sturt University, is conducting this study. The purpose of the study is to investigate current perceptions of directors/managers about the impact of professional development support activities on quality outcomes for children and their families using centre based child care. The Chief Investigators are:

- Associate Professor Manjula Waniganayake (Macquarie University)  
Phone: 02 9850 9825 email: [manjula.waniganayake@mq.edu.au](mailto:manjula.waniganayake@mq.edu.au)
- Dr Linda Harrison (Charles Sturt University)  
Phone: 02 6338 4872 email: [lharrison@csu.edu.au](mailto:lharrison@csu.edu.au)

The focus group will be audio taped to ensure all participants views and ideas are heard and acknowledged. The audio tape will only be listened to by the Research Team conducting the focus group and will be erased once the information has been transcribed.

If you are currently enrolled as a student in any study program at either Macquarie University or Charles Sturt University, please be assured that your involvement in this study will not be linked with your academic studies at one of our universities. Any information or personal details gathered in the course of this research are confidential. No individual will be identified in any publication of the results. If you decide to participate, you are free to withdraw from further participation in the research at any time without having to give a reason and without consequence.

An overview of findings will be made available to the PSC Alliance for circulation to the child care centres they support. The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 02 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

We appreciate that you will collaborate with us in documenting the nature and effectiveness of professional development opportunities available to childcare centre staff. The results will be of much importance to all of us concerned with planning and achieving high quality children's services in this country. An information brief about this study is attached and provides more details about what is expected of you and your centre.

Many thanks for your support and assistance with this research.

**A/Professor Manjula Waniganayake**  
Macquarie University

**Dr Linda Harrison**  
Charles Sturt University

**Research Team Leaders**

## APPENDIX 1g:

### Additional information brief/letter to those who participated in a case study interview



#### Practice Potentials: Impact of Participation in Professional Support Activities on Quality in Child Care Centres

Dear colleague or parent

Thank you for taking the time to do a case study interview during our recent visit to your Centre in July/August. On the basis of the interviews recorded at your Centre, the Research Team has prepared a case-study narrative reflecting on your Centre's professional development and support activities as discussed with us. We are keen to publish your Centre's story so that others may learn from your Centre's experiences.

At the time when the interviews were being conducted, we had not planned to identify Centres nor the individuals who participated in these case study interviews. However, we now believe that your achievements are worthy of public acknowledgement and celebration. Accordingly, we are seeking your consent in disclosing the following information in the final report and any other publications that result from this research study. These details consist of the Centre's name and state/territory location as well as the Director's full-name. Additional staff, parents and community members who participated in these interviews will NOT be directly identified as can be seen from the attached draft we have sent with this email. In the draft that is being sent to you, we have used pseudonyms to illustrate this pattern.

Should you wish to discuss this matter further with the Research Team members, please feel free to contact those who visited your centre and/or the Research Team Leaders. Our email addresses are supplied below.

|  |   |
|--|---|
| Manjula Waniganayake<br>(Research Team leader) | <a href="mailto:Manjula.Waniganayake@mq.edu.au">Manjula.Waniganayake@mq.edu.au</a><br>(Phone: 02 9850 9825) |
| Linda Harrison<br>(Research Team leader)       | <a href="mailto:LHarrison@csu.edu.au">LHarrison@csu.edu.au</a><br>(Phone: 02 6338 4872)                     |
| Sandra Cheeseman                               | <a href="mailto:sandra.cheeseman@mq.edu.au">sandra.cheeseman@mq.edu.au</a>                                  |
| Katey DeGioia                                  | <a href="mailto:Katey.DeGioia@aces.mq.edu.au">Katey.DeGioia@aces.mq.edu.au</a>                              |
| Carol Burgess                                  | <a href="mailto:cburgess@csu.edu.au">cburgess@csu.edu.au</a>  |
| Fran Press                                     | <a href="mailto:fpress@csu.edu.au">fpress@csu.edu.au</a>  |

If you are happy to give us your consent to proceed with the Centre's profile being identified, could you please sign the attached consent form and return it to the Centre Director, as a matter of some urgency? We hope that you will collaborate with us in celebrating your Centre's achievements in professional development and support opportunities available to childcare centre staff. Our sincere thanks once again for your continuing support for this research study.

Yours sincerely

**A/Professor Manjula Waniganayake**  
Macquarie University

**Dr Linda Harrison**  
Charles Sturt University

**Research Team Leaders**

## APPENDIX 2: CONSENT FORMS

### Appendix 2a: Consent Form for ALL Case Study participants



**Practice Potentials: Impact of Participation in Professional Support Activities  
on Quality in Child Care Centres**

I, .....  
have read (*or, where appropriate, have had read to me*) and understand the information above and any questions I have asked have been answered to my satisfaction. I agree to participate in the **case study** interview, knowing that I can withdraw from further participation in the research at any time without consequence. I have been given a copy of this form to keep.

Participant's Name: \_\_\_\_\_  
(block letters)

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_

Investigator's Name: \_\_\_\_\_  
(block letters)

Investigator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research Ref HE25MAY2007 – R05219). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

## APPENDIX 2b:

### Consent form for FOCUS GROUP participants



#### Practice Potentials: Impact of Participation in Professional Support Activities on Quality in Child Care Centres

I, \_\_\_\_\_ (insert participant's name) have read (*or, where appropriate, have had read to me*) and understand the information above and any questions I have asked have been answered to my satisfaction. I agree to participate in the **focus group**, knowing that I can withdraw from further participation in the research at any time without consequence. I have been given a copy of this form to keep.

Participant's Name: \_\_\_\_\_  
(block letters)

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Investigator's Name: \_\_\_\_\_  
(block letters)

Investigator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 02 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

## Appendix 2c:

### Additional Consent Form No. 2 for All Case Study Participants



**Practice Potentials: Impact of Participation in Professional Support Activities  
on Quality in Child Care Centres**

I, ..... have read and understand the information supplied by the Research Team and any questions I have asked have been answered to my satisfaction. I agree to allow the Research Team to publish the case study narrative story of my Centre's Professional Development and Support activities as indicated in the information brief/letter given to me.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_

Investigator's Name: \_\_\_\_\_  
(block letters)

Investigator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The ethical aspects of this study have been approved by the Macquarie University Ethics Review Committee (Human Research Ref HE25MAY2007 – R05219). If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Ethics Review Committee through its Secretary (telephone 9850 7854; email [ethics@mq.edu.au](mailto:ethics@mq.edu.au)). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

## APPENDIX 3: SCHEDULE OF QUESTIONS

### Appendix 3a: Focus Group Questions

|   |
|---|
| <p>Practice Potentials: Impact of Participation in Professional Support Activities<br/>on Quality in Child Care Centres</p> |
|---|

- 1) Tell us about the types of professional development and support that staff in your centre have been involved in.
- 2) What do the words 'professional development and support' mean to you?
- 3) Can you tell us how you identify or determine the professional development experiences that the staff at your centre undertake?
- 4) If the centre has training needs that cannot be met through advertised training programs, what do you do?
- 5) Are you able to identify a professional development activity or support that resulted in a significant/noticeable/ improvement in centre /room practices?
  - a) Why do you think this professional development was effective?
  - b) How do you know if professional development / support has been successful?
  - c) Do you use any particular method to measure the effectiveness of learning receive from professional development?
- 6) When is professional development a waste of time?
- 7) Is it possible to identify a common training experience where participants had different results?
- 8) If there were no constraints (eg. Time, funds, staffing etc) what changes would you make to the existing professional development or support activities available in your state/territory?

## APPENDIX 3b:

### Questions used during 1:1 interviews at CASE STUDY CENTRES

|   |
|---|
| <p>Practice Potentials: Impact of Participation in Professional Support Activities<br/>on Quality in Child Care Centres</p> |
|---|

#### ***DIRECTOR/MANAGER interview questions***

- 1) What is your qualification (if any)?
- 2) If you worked with a regular group of children, what is the age group with whom you work?
- 3) How long have you worked at this centre?
- 4) What types of professional development and support do you draw upon for yourself and the centre? (Note: "support" might need explanation as per local networks; e-groups; newsletters; telephone advice etc)
  - Probe point: Are parents invited to attend pd activities or use pd resources?
- 5) How does professional development get organised?  
Probe points:
  - How does the information about PD opportunities get known?
  - How are decisions made about who goes /how often etc?
  - Do staff go as a group / individually (rationale)?
  - Who covers the cost?
- 6) Can you talk about the difference it has made a) to your practice, b) to your centre and c) to the children and families at this Centre?
- 7) What makes professional development and support successful / work for you? (Focus on the way it is presented / delivered / followed up)
- 8) What do you value about professional development and support?
- 9) Are there any other comments you would like to add?
  - Probe points: what improvements could be made, barriers to access or implementation of ideas from PD, what would you like to see more of etc

**Other CHILD CARE CENTRE STAFF interview questions**

**Staff #:** ..... **POSITION:** .....

1. What is your qualification (if any)?
2. What is the age group with whom you work?
3. How long have you worked in this centre/service?
4. What types of professional development and support do you draw upon? (Note "support" might need explanation (local networks; e-groups; newsletters; telephone advice etc))
5. How does professional development get organised?  
Probe points:
  - How does the information about PD opportunities get known?
  - How are decisions made about who goes /how often etc?
  - Do staff go as a group / individually (rationale)?
  - Who covers the cost?
6. Can you talk about the difference it has made a) to your practice?  
b) to your centre? and, c) to children and /or families at this centre?  
Probe points:
  - Have the changes been long lasting?
  - How is new information shared and implemented within the service
7. What makes professional development and support successful / work for you? (Focus on the way it is presented / delivered / followed up)
8. What do you value about professional development and support?
9. Are there any other comments you would like to add?  
(Probe points: what improvements could be made, barriers to access or implementation of ideas from PD, what would you like to see more of etc)

***PARENT interview questions***

1. How do you know about the professional development and support that is available for staff at this centre?  
(newsletters, notice boards, documentation, daily conversations)
2. Can you talk about any changes in practice that you think have resulted from professional development?
3. What are your views of professional development for child care staff?

***Committee member/ Community representative interview questions***

1. How do you know about the professional development and support that is available for staff at this centre? (ie, correspondence, committee meetings, staff requests)
2. Can you talk about any changes in practice that you think have resulted from professional development?
3. What are your views of professional development for child care staff?
4. Does the committee have input into decisions concerning staff PD?