

TRANSCRIPT OF PROCEEDINGS

THE HON JULIA GILLARD AC, Commissioner

THE ROYAL COMMISSION INTO EARLY CHILD EDUCATION AND CARE

**MONDAY, 22 MAY 2023
AT 1.15 PM**

This transcript is intended as a guide only and as an aide memoire with respect to the audio-visual record, which constitutes the official record of the hearing on 22 May 2023

SARAH ATTAR, Counsel Assisting

COMMISSIONER

Thank you very much to everyone. We're going to open this public hearing of the Royal Commission into Early Childhood Education and Care. This morning we've had a great round table discussion here in Adelaide's north. And we are looking forward to taking evidence this afternoon and during the course of tomorrow in this location. But can I more formally start by acknowledging the traditional owners of the land on which we meet and in a spirit of reconciliation, paying my respects to elders past, present and emerging. Before we commence with our first witness, Professor John Lynch, I will ask Counsel Assisting to make her opening statement.

COUNSEL ASSISTING

Thank you, Commissioner.

This afternoon, we turn to another of the Commission's Terms of Reference, that is the extent to which South Australian families are supported in the first thousand days of a child's life with a focus on opportunities to further leverage early childhood education and care to enable equitable and improved outcomes for all South Australian children. If a key purpose of three year old preschool is to address disadvantage and benefit all children, then preschool needs to be viewed in the broader context of children's lives. The key theme of today's session is the role early childhood education and care can play in the first thousand days of a child's life, through the lens of the lives of children in the northern suburbs of Adelaide. The simple facts of population growth in Northern Adelaide demand a focus in this area. There are about 4,000 births each year at the Lyell McEwin hospital. The north of Adelaide is predicted to grow by over 100,000 people over the next 25 years. Much of that population growth will be amongst families with young children. That is why, as the Commissioner has said, the Royal Commission will present this round of public hearings from here in the City of Playford. This focus on the north will allow insight into the unique needs of the region and will give the Commission an opportunity to hear how innovative models, family supports and community development can provide key services in the first thousand days.

Building on the evidence given by Dr Pilkington in January, we are today joined first by Professor John Lynch, Professor of Epidemiology and Public Health at the University of Adelaide. He's an internationally recognised scholar in both of those fields. Professor Lynch will help us understand the predicted population growth in the north of Adelaide and why this reveals that the need for additional services is so great here. He will also explain the extent of disadvantage experienced for some in northern Adelaide, but importantly, he'll share his insights as to how the north can be a real leader for change and innovation when it comes to the provision of services in the first thousand days. There is an opportunity for positive life altering reforms to come out of the north. We will then be joined by Sam Green, the Chief Executive Officer of the city of Playford to help us understand the community in his area today, where it came from and its visions for the future, especially when it comes to the growing population of children and young people. Mr Green brings a vital perspective from the north in terms of what works best when it comes to support in the first thousand days. More broadly, Mr Green can help to illustrate how crucial local service integration is to ensure that the needs of a particular community are met and the integral role that local government can play in service delivery in the first thousand days.

And for our final two sessions today, we are joined by Commissioner for Aboriginal Children and Young People, April Lawrie, and Tina Quitadamo Aboriginal Education Coordinator with the Department for Education. The significance of strong family connections, kinship and culture on the development of Aboriginal and Torres Strait islander children cannot be overstated, particularly in the first thousand days. This is true for all Aboriginal children in South Australia, no matter where they live. The final two witnesses today will help the Royal Commission to understand how South Australia can best recognise culture as a protective factor and embed Aboriginal voices and self-determination across service provision both within the first thousand days and within the delivery of quality three and four year old preschool.

Tomorrow, we turn our attention to the issue of the workforce within early childhood education and care with a particular focus on the delivery of three year old preschool from 2026. It is critical to note that the timeline for achievement of universal three year old preschool inevitably will depend on workforce supply. This important work is done by educators who hold diploma or certificate qualifications, such as provided by TAFE and those with early childhood teaching degrees.

The Royal Commission's Interim Report found there is a need to create between 5,740 and 11,130 places to support universal preschool depending on whether three year old preschool is delivered by government preschool only, long daycare and non-government preschool only, or through a mixed approach. The report also illustrated there will be a need for between 618 and 811 additional early childhood teachers, noting that there are around only 1,100 early childhood teachers currently working in preschool programs. There will be an additional need for between 768 to over a thousand additional educators, again, depending on delivery approach. And we will also need additional staff in the form of directors. Now, this is in the context of an industry where we know there are already longstanding systemic issues with attracting and retaining quality educators. So tomorrow we will explore key issues such as attracting potential teachers and educators to the sector; training and development; and importantly, including models that look at upskilling current diploma trained educators to up skill; transition to work and early career support; and sustaining and growing the workforce. We'll try to look for solutions to combating the current retention issues.

The first witness tomorrow is Helen Gibbons, Executive Director of Early Education with the United Workers Union. That's an Australian trade union that covers more than 150,000 workers across broad sectors from early childhood education to age care to defence and hospitality. Ms Gibbons represents the voices of a large number of educators and teachers from the early childhood sector. She's very well placed to help the Commission to understand the key factors driving people from the sector and to help us explore potential solutions.

We will then hear from Jane Hunt, who has significant experience across the for benefit, corporate and academic sectors, and is the founding Chief Executive Officer of The Front Project. The Front Project is an independent national enterprise addressing disadvantage and improving outcomes for children, families, and society by realising the benefits of quality early learning. It's work is directed towards alleviating disadvantage by removing barriers that keep children and families from having quality early learning experiences. Assisting current certificate or diploma qualified staff to upskill presents an opportunity to rapidly expand the early childhood education workforce. Ms Hunt will help us understand some of the key barriers

that currently prevent the existing diploma trained education workforce to upskill to bachelor qualifications. And importantly, she'll give evidence about an initiative of The Front Project called the Upskill Program designed to assist that cohort in enrolling and successfully completing further study.

We will then hear from Dr Jane Lomax Smith, who is the current Presiding Member of the Teachers Registration Board in South Australia. Dr Lomax Smith will help us to understand the regulatory framework that currently exists in south Australia when it comes to accrediting both initial teacher education programs and the registration of teachers to work in the early childhood sector. As we know, the National Quality Framework requires at least 50% of educators for early childhood education and care settings to be diploma qualified or higher, or actively working towards that qualification. And a service must also provide access to an early childhood teacher. In South Australia, early childhood teachers must be registered with the Teacher Registration Board. The Teachers Registration Board by regulation can only accredit teachers holding a four year degree. A change to this requirement would require regulatory change. Consequently, the University of South Australia and Flinders University both offer a four year degree in early childhood teaching that prepares teachers to teach children for birth through to age eight. Upon qualification, they are then qualified to teach in both early childhood settings in early primary school. These are sometimes called dual or combined degrees. The content that focuses specifically on the early years can vary and is often far less than the primary school directed content. Anecdotally, we know that the larger proportion of those graduates also currently choose to work in primary teaching upon graduation rather than early learning.

Elsewhere in Australia, we've seen a trend where some places are focusing on degrees with birth to five in mind. Some of those are three years in length. A three year degree in some jurisdictions can be completed within two years, once credit for a relevant diploma is applied. So this is an important option to consider in the context of the workforce requirements that will be needed in South Australia to give effect to the universal provision of three and four year old preschool. But there is another important reason for the Royal Commission to shine a spotlight on the current early childhood education and primary degrees offered in South Australia - given that science clearly tells us now that the first five years of a child's life is a period of rapid growth in development with 85 to 90% of brain development happening in this time - any consideration of delivering quality early childhood education must necessarily consider what learning best qualifies an early childhood teacher to teach children in this crucial period.

Dr Lomax Smith will explain that South Australia, consistent with the current legislative scheme, can only accredit four year degrees that meet the requirements of the Australian Professional Standards for Teachers. These requirements have a focus on delivering primary school curriculum. The early learning component of any teaching degree requires additional approval by the Australian Children's Education and Care Quality Authority. A three year degree focusing solely on teaching children from birth to five, and which meets the ACECQA requirements would not currently be capable of accreditation by the Teachers Registration Board in south Australia. This is a deeply contested space and views differ as to whether a focused birth to five degree versus a combined early childhood primary degree can best prepare a teacher to teach children in the early years. Views also different as to whether a three year degree can provide appropriately rigorous content, as well as produce teachers who are valued at the same levels as those holding four year degrees.

To continue exploring this issue, tomorrow after Dr Lomax Smith, we will be joined by a panel representing both Flinders University and the University of South Australia. South Australia's universities play a key role in the development and maintenance of a secure pipeline of early childhood education and care teachers, both in terms of upskilling the existing workforce and training additional educators. The University of South Australia strongly supports change to allow the accreditation of a three year degree in South Australia, focusing on teaching from birth to age five. For an alternative perspective on this issue, the final witness tomorrow will be Professor Sue Irvine from the School of Early Childhood and Inclusive Education at Queensland University of Technology. Professor Irvine believes the strength of a birth to eight focused degree lies in building a shared knowledge base to promote continuity of learning and successful transition to school and optimising employment and career pathways.

For this afternoon's first witness, I called Professor John Lynch.

< PROFESSOR JOHN LYNCH AFFIRMED

COUNSEL ASSISTING

You're currently Professor of Epidemiology and Public Health at the University of Adelaide, is that correct?

PROFESSOR LYNCH

That's correct. Yes.

COUNSEL ASSISTING

And also a visiting Professor of Epidemiology in Population Health Sciences at the University of Bristol.

PROFESSOR LYNCH

Yes, that's true.

COUNSEL ASSISTING

I understand you spent some 20 years working and studying in North America before coming back to Australia in about 2009?

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

You've also held, I think, professorial positions, both within the USA and Canada.

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

In 2005 were you awarded a Canada Research Chair in Population Health?

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

And in 2007, I understand your work in epidemiology and public health was recognised with an Honorary Doctorate in Medical Science from the University of Copenhagen.

PROFESSOR LYNCH

Correct.

COUNSEL ASSISTING

And in 2005, were you elected as a Fellow of the Australian Academy of Health and Medical Sciences?

PROFESSOR LYNCH

2015 I think.

COUNSEL ASSISTING

Thank you. In 2019, I believe you were successful in winning Research Australia's Award for Data Innovation for developing the South Australian Better Evidence Better Outcomes Linked Data Platform.

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

We heard some evidence in January about this and we might know it as BEBOLD for short we'll return to that in the course of your evidence today. And is it correct that you've published very widely in your fields of expertise, over 350 publications, I believe.

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

And you currently serve on international, national, and local scientific advisory groups.

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

And have you also been the editor of the International Journal of Epidemiology for over a decade?

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

As a very broad summary, do your research interests include health and development, social and health inequality, child maltreatment and using large scale linked data systems to enhance evidence based public health.

PROFESSOR LYNCH

Yes.

COUNSEL ASSISTING

As part of your current role at the University of Adelaide, you lead a group called BetterStart Health and Development Research. Could you give us an outline as to what BetterStart is?

PROFESSOR LYNCH

BetterStart is an interdisciplinary group of people who are basically motivated about how we do better, especially for disadvantaged children. So all the things you talked about, all the evidence, you know, points to brain maturation, et cetera, synaptic pruning, all of those things. They all drive the idea that there are periods under five, that doesn't mean that there aren't other periods in life that are important, but that one under five is particularly crucial. And I suppose we've come around to, I used to work in cardiovascular epidemiology and do life course processes. So you find out that early life conditions matter, but the trouble with doing that research is you've got to wait around 70 years to figure out what the outcome is. So we decided that instead of trying to understand those really long term things for people who were born in the twenties and thirties, conditions for children dramatically altered, and we have to

spend more time understanding the conditions that exist that children are born into. They don't choose those conditions. And that's what really drives most of our, most of our research. We've, as you know, from the previous witness statement, we've been drawn into child protection research quite a bit, probably because some of the basic things that epidemiologists want to know had not been done around child protection. And you've seen some of that evidence. But increasingly we understand, we can't think of these things as separate problems, the problems of growth and development for children, can't be separated out from child protection. They can't be separated out from early education, et cetera et cetera. So hence we try to think of creating ecosystems that optimise child and family wellbeing. And again, I think the family wellbeing is a really important part for us because we have to be able to increase the capacity for parents and carers to nurture those health and developmental triggers.

COUNSEL ASSISTING

I want to come back in a moment to this concept of an ecosystem and how we embed strong family relationships within it. But I think it might help for those watching, if we can start with an overview of what the various sources of information that BEBOLD has access to can tell us about how children are faring in South Australia and also particularly for our lens today, what it tells us about the north and significantly why it tells us that resources and that ecosystem are so important in the north. Through BEBOLD you have access, I think we heard in January, to de-identified data on over 500,000 children born from 1991 onwards, I think, is that right?

PROFESSOR LYNCH

That's right.

COUNSEL ASSISTING

And it links in a large number of sources of information from State and Commonwealth across health, human services, welfare, education, justice, and social systems, is that a general summary?

PROFESSOR LYNCH

Yes. Yeah.

COUNSEL ASSISTING

Now you've in your submission provided us with an illustration that I think helps people to understand why there's a significance attached to Northern Adelaide. Can we bring up, I think slide one on page six. When we use the phrase Northern Adelaide, what are you

PROFESSOR LYNCH

Can I turn?

COUNSEL ASSISTING

Turn your chair please if you need, I'm hoping this shows up for people watching at home, but we're talking about quite a large area.

PROFESSOR LYNCH

Yeah. I think the first thing, we talk about the North, but the North is quite diverse and we need to understand that. So I think, you know, it goes from, if you look at AEDC results from comparing One Tree Hill to Elizabeth, they're not very far apart, they're 15 km apart, but they're examples of the diversity in the North.

COUNSEL ASSISTING

And other areas within the North, the next witness will tell us, experience levels of advantage so it's important that I think we understand that no one approach will be the same for any other, for different parts of the community. I want to unpack that in a moment, but can you help us understand what some of those AEDC statistics tell us about, and I don't like to use the generality 'the North', but are there greater levels of children who perhaps are struggling compared to Metro Adelaide? Perhaps take us through some of those key figures?

PROFESSOR LYNCH

Yeah. So I think the data that we presented to you on AEDC trends over time, where you can see the results for Playford are not as good as Salisbury. And in fact, Tea Tree Gully is doing better than the state average, but they're all pretty flat. So, do you want me to go through some of the data in the tables that we presented?

COUNSEL ASSISTING

Yes. We can bring up pages nine and 10. Perhaps if we just start though with the predictions of population growth, what were the sources of information and, and what are the main statistics we need to bear in mind when we think about just how big a population of young people we're going to have in this large area looking forward.

PROFESSOR LYNCH

Yeah, all the state government projections point in the same direction. And if you go onto the Plan SA website, and I've got a screenshot of that, we're looking between five and 10,000 more zero to four year olds in the next 15 years, and then 10 to 20,000 five to 17 year olds in the same time period. So I was just trying to make the point that you can see it just walk out the door and you can see the incredible growth. The growth that will happen in the North is more than the South and West of Adelaide combined. So as a public health person, that's where the people will be, that we are needing to support. So that alone argues for a concentration of focus on "the North". And we can define that in different ways, but I think most people understand, you know, we're talking about Grand Junction Road, you know, up towards Gawler, that's where most of the growth will be, especially in South Gawler and Munno Para. So we were just trying to make the point that from a public health perspective, we think about

where is the population going to be that might be at risk, and we're trying to prevent poor outcomes for that population. So obviously you focus where the people are. That doesn't, that doesn't mean there aren't other areas in the south, in St Marys and Hackham West. But the, one of the things that we were trying to get across in this submission was the absolute numbers. And I think in the other tables, so I'm not sure which ones we're looking at there, but

COUNSEL ASSISTING

Well, perhaps if we take, you've used a lot of information from the Australian Early Development Census, and it's important to point out as you do that this is not an exercise in revealing figures to paint a negative picture, but to appropriately allocate resources. And you've pulled out some statistics though for us that do I think shine a very particular spotlight on numbers of children. And so I think we're looking behind you at page nine, if you could just talk us through, we know that the AEDC covers physical health and wellbeing, social competency, emotional maturity, language, and cognitive skills, communication skills, and general knowledge. You were able to do some work using the data available to BetterStart and just tell us what we are looking at at the top of page nine.

PROFESSOR LYNCH

Yeah. So these, these are characteristics of the North versus the rest of Metro, where we are combining Central, the Hills, South and West. So these are characteristics that we get through the linked data. Nobody else can do this because they don't have these linked data assets. So you can see a list of characteristics there. So the one that I think we've highlighted in red, if you look at parents history of child protection contact, so we've got twice the prevalence of that in the North, as we do in the other areas. And if you look down that list, they're nearly all two times, two times higher. Researchers love relative measures. So we always talk about two times higher or three times higher, and that's important to do, but we think it's really important to convert those into absolutes. So in the next panel down, you see the absolute numbers. So if we've got about five and a half thousand five year olds in the North, that first line says over a thousand of those children, their parents will have had history of child protection contact. And then we can go through the list and you can see parents who were in out of home care, parents with drug or alcohol or ED presentations, hospitalisations, and mental health hospitalisations. And it's really important to understand they're just hospital data, that means it is the very serious end, so that doesn't include other forms of mental illness that are not as acute, that they don't turn up in emergency department and they're not hospitalised. So these will be way under counts, but they represent serious mental illness that requires hospitalisations. And then some other things about jobless family at birth, so we've got nearly a thousand kids out of that five and a half who are born into a jobless family at birth and over a thousand who will have had their own child protection contact before they enter school. So when you're talking about five and a half thousand, and we've got numbers like 1000 and eleven hundred, that's a substantial part of that cohort of five year olds that we are trying to change life trajectories with.

COUNSEL ASSSITING

Before the creation of BetterStart and the BEBOLD data set, how much were we able to put together in terms of the picture that we now have?

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PROFESSOR JOHN LYNCH

Um, nothing. We wouldn't have been able to generate those numbers because we have to link up Births, Deaths and Marriages with perinatal data, with hospital data, with Education Department data, with child protection data, et cetera. And it's not until you create those linkages that you can start to get, um, we talk about it as a child and family view. So we turn data silos, so government has a data silo for perinatal data, and they report in that silo. And then somebody else has got a child protection silo. They don't talk to each other. So we turn incident data that government collects into experienced data. So that's why we're able to say a thousand of the five and a half thousand kids in the North who are coming through to get their AEDCs, 1000 of them will have been reported to child protection before that AEDC, at least once. So I think what that does is focus attention on the scale of what we're talking about. We're not talking about one or two kids. These are, there's a, these are big numbers. So we've found over the years, working with government, that it is those absolutes that help us understand what scale of response do we need. Knowing that it's two times doesn't help you very much. But knowing that there's a thousand out of five and a half thousand helps us understand how much support are we going to need for those families and carers.

COUNSEL ASSISTING

And on that point, we won't go through all of the figures that you've pulled out for us on the following page of your submission, because people can look at that at home, where you've completed a similar exercise for indicators for children in the North who are developmentally vulnerable on one or more of the AEDC domains. And again, you've compared them from statistics to absolute figures. But what I'm interested in is the process you undertook, where you then looked at two scenarios to try and come up with how many children's lives would we actually need to make a difference to, to bring us closer to a, a national average?

PROFESSOR LYNCH

Well, I think if one of our key outcomes, if one of our key ways of knowing if we are, if we are getting there, the AEDC is a hugely important piece of public health and child wellbeing infrastructure for Australia and South Australia is consistently below average. And if one of the goals is, if we get this right in the first thousand days or 2000, however many days, we're going to count up to age five, if we get it right, we ought to be able to see that shifting at the population level. So I think that what we tried to do was to say, so if we've got this many children developmentally vulnerable in South Australia, how many of those would we have to prevent from being developmentally vulnerable so that we hit national average, and that's about 350.

COUNSEL ASSISTING

And what was the national average?

PROFESSOR LYNCH

Uh, 20 something percent.

COUNSEL ASSISTING

I think you say about 22%.

PROFESSOR LYNCH

Or we can go more boldly and say, well, Victoria is the best case. And that's often what we do in public health, we look for, well, this is possible, whether it's life expectancy or some other, this is possible. That ought to be what we shoot for. And that would mean we'd need to shift about 1500 kids from being developmentally vulnerable to not. And that is when we would start to see AEDCs at the population level. And that's what people talk about in terms of turning the curve, that we would have to have that scale of prevention to turn the curve. And obviously they're not all in the North, but there's a high number and a high concentration in the North.

COUNSEL ASSISTING

Perhaps, so that we don't leave it out entirely, we'll just look behind you at the third slide, which I think is page 10. Did you just want to highlight the most significant features there for, in terms of indicators for children in South Australia in the North who were vulnerable on one or more of those domains?

PROFESSOR LYNCH

Yeah. So now we're looking at a comparison of children who are developmentally vulnerable in the North versus the rest of Metro. So if we look at that table where there are absolute numbers, of the children who were developmentally vulnerable in the North, 453 of them will have had a parent who's had child protection contact. And I think what we were trying to do in that table is to say, if you look in the rest of Metro area, Adelaide, we are generating more developmental vulnerability there than the other three areas combined, which is another pragmatic case for why the North matters.

COUNSEL ASSISTING

And the comparative figure I think was 325 children for the rest of Adelaide compared to the 453.

PROFESSOR LYNCH

Yeah. And I think if you look through those characteristics there, you'll see that for the children's own contact with child protection, and we think of that as a marker of developmental risk, because when we connect that up, it's a very strong predictor of not doing as well. So 497, so nearly 500 children will have had their own contact in the North. We've got 460 for the other three areas combined. So it's, it's a little bit of pragmatics about where do we really deploy our intensive efforts. And I think we were just trying to make the case that the North generates as much or about the same as the other three areas in Metro combined.

COUNSEL ASSISTING

Can I ask you now to explain for us the vision that BetterStart hold of this ecosystem? And perhaps if we can talk generally about a child and family ecosystem, and then turn to looking at specifically how we might draw on strength already existing in the North to create an example of this ecosystem in the area of Adelaide that we're in today. So, firstly, what do you mean by that concept of the ecosystem?

PROFESSOR LYNCH

Um, it just developed out of people having patches. We've got a child protection system, we've got an anti-natal care system, a postnatal care system. We've got a child care system, an early education system. And I suppose they exist because that's the way we organise the world to deliver services, but it's not really the way people experience life. It's not how children and families and carers experience life. And I understand why there are good reasons to do that, but that has created the enduring issue of how do we connect them in ways that are meaningfully connected for individual children and families and carers, but also at the population level, how do we integrate those across so that we don't ... so we know an awful lot, if we go down to Lyell McEwen hospital now there'll be about 350, 400 pregnancies that those wonderful caring midwives are worried about. We have lists, we get to know a lot about the circumstances that families experience. And yet we have very poor ways of passing that on even to postnatal care with child and family health, let alone into early care and education. And that, if we do go across the systems, then people are telling their same stories every single time they go to a new system, we surely have to be able to do better than that. I think. So that's what we mean by a set of systems, but they comprise, they're experienced as an ecosystem and the best ways of ensuring child health and development and good outcomes for families will be to have those things be as seamless as possible. And that's certainly not a new idea, but we don't seem to be able to do it. I think government has made significant efforts to try to do that, but it is actually very hard for government to do that because we fund in silos, we measure in silos and it's very difficult to incentivise collaboration. So that's why I think in the previous, the previous submission, we began to understand mainly through people on the ground, that the reason it works is because of a lot of personal relationships. So a midwife at Lyell McEwen happens to know somebody over there and they can get help. And that's what we talked about as we don't have infrastructure for the glue, the glue that holds the ecosystem together, we rely on personal relationships, organisational relationships to make that as seamless as possible. That's an enormous challenge, but all the feedback we get is that that's the way people want to be able to experience that support. And at the population level, we don't lose touch. So we have, we have one in 10 children in South Australia notified to child protection before they can walk and talk. Who's got them after they walk and talk, who's in touch with those families? Are they getting the supports they need? And that's what I mean about the falling through the cracks when we don't share information, well, we have to reinvent it every time. And for some of those, some of those families and carers, they will fall through the cracks and nobody will be in touch with them. In other ways you will have 16 different agencies in touch with the same family. So we have both, both sets, both, both things are true.

COUNSEL ASSISTING

And in terms of the importance of a properly designed data system that ensures proper sharing of information, which is obviously a large part of what you were just speaking about, do you see a particular role for early childhood education and care in terms of trying to connect some of the silos?

PROFESSOR LYNCH

I think whenever we are trying to have a discussion about doing something truly innovative, such as your Commission is dealing with, then there is an opportunity to try to disrupt and create best practise. I think we could do much better connecting into the health system. And I think, in my evidence, I'd sort of had this idea of we've got to get better pull from the health system. We need to know what they know, and we bring that in and we need to get better push into the education system. But because that bridge is there in between the two largest agencies, you know, health and education are the two, they consume more money in government spending than anybody else. But it's a, it's a really important bridge. The health system rightly is interested in trying to generate health. There's a little bit of development, but not much. And the health system after age one to two sort of loses interest. And then we pass off to childcare. The ecosystem would say, we're all in that same business.

COUNSEL ASSISTING

And what do you see as the key enablers that need to be on the ground for this to happen? You've spoken of barriers government have experienced in the past. What are the key features that we need to focus on in terms of trying to build this new system?

PROFESSOR LYNCH

The information systems itself. It is not beyond our capacity to do that. You know, I use the stupid analogy, Woolworth knows exactly how the lettuces are growing, that are going to be on their shelf next week. We have no, we don't have much insight. I don't think that's that difficult to do. So I think that's why I talked about the assets in the North, one of which is POPN, the Pregnancy Online Platform at NAHLN, which is something they did as a piece of their own innovation. But I think examples like that, where you've got, all of that used to be done on paper, all of these forms throughout antenatal care and so forth. And then you might get some sort of show bag that said, well, you know, you're going to need this when your child's two. So it wasn't exactly in time kinds of ways of connecting. POPN seems to be accepted by about 95% of all of the antenatal care coming to Lyell Mc but it represents a way to connect. And it sends reminders and says, you know, your nine month, your six month check-ups is due et cetera. So it can push information. And I think that's a way of thinking about how do we keep that going? Why can't we keep that going once we've made contact at birth and why can't we share it across other agencies so that everybody's using the same information and why can't we share it across non-government services, who are supplying so many of these. Now I understand there will be privacy concerns, et cetera, but at least in my mind, I think that gives us a chance to say we are reaching the population that we're trying to support. And that is another, another feature of a smart information system is so we've given some numbers in here and we know that there's a thousand that we're trying to get to. Have we got to them? We could know that. And then we can say, actually we are reaching this population that we think is at, at higher risk. So that's really important to know. Even if we've got effective supports, if

we're only reaching 10% of that population that's at risk, we'll never turn the curve. So we have to have that kind of insight into, are we getting to the populations that we need to support?

COUNSEL ASSISTING

You make the point in the written submission that the AEDC results haven't changed in this area over say 15 years. Now, data collection and sharing is obviously very important, but in terms of how we start to build rapport and reach those 1000, for example, is an approach that is universal and targeted as compliments to each other, a successful model that we should look at. Do you have any insights in relation to that - can they coexist happily?

PROFESSOR JOHN LYNCH

Yeah. Sometimes we get into paralysing debates about the benefits of universal and targeted services. And that leads us to a zero sum game where we'll do some more targeting, but we'll take from that side or we'll do some, and we'll take from that side. In my view, which is probably pretty simple minded, you can't run targeted services unless you have high quality universal services. So that's a pragmatic view because you don't know who's at risk. There's no point in having targeted services running around if you can't say, well, here's the group we're trying to support. And that means universal because they see everybody and that's the, the beauty of antenatal care. Most people get antenatal care. And I think in South Australia, it's like 80, 85% are getting seven or more. In other words, we see everybody. That's an enormously important thing to be able to do to then have that idea of proportionate universalism, where there's more support for more need. So we have to talk universal and targeted and we'll need investments in both. I think the point that we were trying to make was that universal services will need to raise the bar on what they're able to do. When I first came to South Australia, Child and Family Health Services would not go into that universal postnatal visit, where there was issues of domestic violence or drug and alcohol use. That was beyond the scope of practise. To me, that was exactly the sorts of situations where we do need to support. So universal services will need to be able to deal with greater complexity and part of what the data on these things show is when we look down that list of parental contact, jobless family, et cetera, amongst the kids who are developmentally vulnerable in the North, they have higher prevalences of those things than developmentally vulnerable children in the rest of Metro. That implies there's more co-occurrence, that it's more common to have those list of adverse circumstances that children are born into. So universal services will have to be cognisant of that, plus all the underlying issues of housing and joblessness and lack of transportation. I'm not quite sure how we crack that, but we better go into it eyes wide open about that scope of that challenge.

COUNSEL ASSISTING

And when it comes to designing measures to help the most disadvantaged, how do we embed in them those concepts of human capital and community capital that you touch on in your submission? What do they look like in practise?

PROFESSOR LYNCH

I'm sorry, what do

COUNSEL ASSISTING

You speak in your written submission about the importance of building human capital and community capital. For those of us who might not be familiar with those terms, what do you mean by them? And what would that look like in terms of trying to build upon the role that early childhood education and care can play for example.

PROFESSOR LYNCH

Yeah, first of all, some people dislike the term capital when we apply it to health or development, but different audiences respond in different ways. There's lots of language around social investment. You can hear the current Treasurer talking about that. But the idea is human capital can be conceived of changing the life chances of a child. And we could improve the human, the early human capital development of children. Part of the way we're going to have to do that is by building family capital. But then the other piece that we throw into that is in relation to building community capital infrastructure, and that's where universal services become so important because they're a piece of the community infrastructure that we build and it stays. So we've got birth cohorts, 20,000 babies being born every year coming through and they age through to five and their AEDCs haven't changed in the North. They're flat. So whatever's going on for each one, and every one of those kids has enormous potential, but somehow the same proportion are developmentally vulnerable going through. So maybe even if we were successful for some of those kids in building human capital, the average in the population doesn't change. So that might imply that we haven't improved the support, the family capital, but probably even more important, the community capital, we haven't built an infrastructure that improves chances for every birth cohort coming through. And that's where high quality universal ECEC is a really important piece of that infrastructure. If we can connect it up better with the health system. And of course all the resourcing issues in the health system and the links into the education system.

COUNSEL ASSISTING

Do you see there being an underutilised role at the moment in terms of collaborations with philanthropic or non-government organisations in this space and what could we do better in terms of the ecosystem?

PROFESSOR LYNCH

I think we've had plenty of indication from philanthropy around Australia, the two big ones that I think of immediately who have explicit goals in this area are Minderoo out of WA and the Paul Ramsey foundation who are trying to break cycles of disadvantage. So I don't think, so we have examples like Logan Together that's been around for a long time.

COUNSEL ASSISTING

Could you give us a little bit of an explanation about what that is?

PROFESSOR LYNCH

It's a whole community approach that was built around doing better for children and families, and it's had all kinds of investment and co-investment from local government, state government, federal government, philanthropy, and through other bits of fundraising. So I don't see why we can't do something like that for the North where we create a situation that's led by ECEC, but it will require investments across all of those human, family and community capital. And there are different things that government can do, but it can't, government can help drive things, but it can help support things as well. And it doesn't have to do everything, but it would take that kind of co-investment. And, you know, I look at the budget and the federal budget just put \$200 million out there for disadvantaged communities. So I'd love to see the impetus that comes from a Commission into early childhood education and care in South Australia, situate itself as a key part of something larger that is also building that community capital. So that next birth cohort of children come into conditions that are already helping them have better lives. But I think that's the community part that we need to build. And I suppose the other piece of that, while I'm thinking, I'm a bit scattered with this, I'm sorry, but this sort of data that we're showing, it's government data, but we don't share these kinds of stories with community very well. And yet I'm not allowed to show this data to community. And yet there is an enormous appetite out there to try to help. So part of the things that we can do to build community capital is change the narrative so that we all become aware of what we are trying to do together. And that I think is the power of something like Logan Together. So there is an element here of engaging and activating community assets. And you'll hear that from Sam, there are a lot of assets in the North. Engaging those, having open narratives about things like child protection and not keeping it hidden, I think there's a role there for greater disclosure of data that we hold and data that is sensitive to change to help us know, are we doing better? And if we're not changing those things, then we go back and we do it differently. We don't cut a contract. We actually say, no, let's create a learning system and to learn, we've gotta know when that's not quite working, let's change that up.

COUNSEL ASSISTING

So just to unpack that. In fashioning a more cohesive data system, you would like to see, with appropriate parameters, the ability to share, perhaps de-identified across local community service providers, so that more cohesive solutions can be created.

PROFESSOR LYNCH

Yeah, it's no magic bullet. It's just a, a piece of it. It's a piece of the puzzle in terms of sharing what we know. So I could, I can show these statistics to lots of people and they go 'what? I don't believe that'. You can turn on the radio in the morning and you can hear radio people saying, oh, I, I don't believe that one in 10 number. There's a lot we need to do. And you can go to journalists. And I know of editorial meetings where people in media offices, they don't know it, they don't believe it. So I think there's a, there's an element of urgency. So when I say one in 10 notified before they can walk and talk, that is a statement about our world and the world that people live in. We can't hide, we can't hide from that. So I think, I think there's several roles that the information system plays. Operationally, it's are we in touch with the right people? Are we reaching everybody in a sort of evaluation sense. Are, are we, are we getting

there? But in a community sense, it's also having an open discussion about here's the way the world is working for some folks. And we have a joint responsibility to fix that.

COUNSEL ASSISTING

How do you see a discussion being encouraged within a community where there might be some inherent reluctance to engage with even the discussion, let alone interacting with service providers.

PROFESSOR LYNCH

Yeah. And I think you, you will hear that from April Lawrie, there is great scepticism, cynicism fear, often around child protection, because it's about removing my child. And I don't have a pat solution for that one. Other than if the systems change, we won't be having that same discussion in 10 years time. I hope that we have changed those things. And there is not fear. You know, we also need to think about refugee and migrant communities in the north where their experience with governments, from the places they've fled sometimes, does not lead them to trust. But in the end, in the end, I think we know high quality, early education and care is all about relationships. And it's the relationships with family carers, children, staff, that's the stuff that really matters. So we have to be able to have those high quality relationships to try to engage people who are reticent to have anything to do with government services. But I think the advantage is that for ECEC and for health, those systems come from a place of caring. They come from a place of our motivation for being connected is not to remove your children, it's to try to help. So we have to leverage that. And I think ECEC is uniquely placed because we are really trying to care for the children and the families and the carers. And that's obvious in how we think about what we do in ECEC.

COUNSEL ASSISTING

Commissioner.

COMMISSIONER

Thank you. Thank you. Thank you very much for your evidence, which is very powerful. I did want to just press you on, excuse me, across your evidence you've obviously concentrated on the data that you have, which is de-identified data. And you've talked about the role that data could play if it is shared with communities in lifting, and engaging communities with changing the data. So like what's been happening in Logan, Logan Together. But I did want to press you on the systems level, which would necessarily have to have identified data. I think you used an example where a midwife recognises at the time of a pregnancy that this could be a family or child with particular risks. And you know, at the moment, there's nothing to connect that information to what follows, whether that's early childhood education and care or any other form of services, but for that flow to work, inevitably that data's got to be identifiable data. It has to be about, you know, John or James Smith and their children. Can you talk to us about how you could imagine that would work given the privacy constraints? Are you imagining that families at the time that they're engaged with a pregnancy and engaged with health services would be giving some form of consent around all of that.

PROFESSOR LYNCH

So I think there's, you are talking the operational side of how we would use knowledge that we gain about circumstances that might not be the best for certain and how we would communicate that. So government already does that, and it doesn't require consent because it's data that's collected within the course of government business. So we already have a data sharing act in South Australia, which allows agencies to share their identified data. And we have the Office for Data Analytics, which already does similar sorts of things. They've done a piece of work around a dashboard related to child protection that pulls data from police and other places. So providing we have the right privacy safeguards around that that would only be used within government agencies. And then of course, all public servants have the same set of rules about how that data is used. Much trickier, I think, to go to non-government organisations and probably not going to happen to community. So I think on that side, it's not unusual for, it's not unusual for governments to use data to build intelligence about lots of things. And they will pull that from various sources. In our world where we are totally de-identified that is perhaps the part where we can engage communities through the deidentified route. And that's exactly the same data but we just don't know which one's John, which one's James. So I can see a role, and I'm not arguing for a surveillance state, that's, I don't like that idea.

COMMISSIONER

No.

PROFESSOR LYNCH

But maybe there is a way to build better intelligence for, to support motivations, to help. And if we did that, we might avoid the one family where nobody's helping, and we might not have 16 agencies running around the same family. Where the next knock on the door, they don't even answer because it's another somebody trying to give me something or do something. So I'm not sure that that answers your question very well.

COMMISSIONER

No, its a good answer, but my understanding of the data collection that is done by state governments and which therefore feeds into your de-identified data is its administrative and not giving you texture. For example, it might tell you that a family's had contact with the child protection system but it's not going to give you more than that, or in the example that you started with, and hopefully I correctly a repeated back to you, it wouldn't give texture about why that midwife was concerned. And so, and because it's, you know, more stock taking of contacts with the system, it's, I'm trying to figure in my mind, does that mean it all is almost inherently backwards looking rather than pathway changing.

PROFESSOR LYNCH

There's a lot of textural information that's collected about past history, mental illness, et cetera, et cetera. It's not just, so in the antenatal system, I'm blanking, postnatal the Edinburgh, postnatal depression is collected. So those things are increasingly collected. That provides some texture. There are also the text notes, the case notes that are often written in text, but it's

becoming fairly simple with AI now to read those and turn them into other data. So I think there are opportunities to get enough textual information that can be shared. We actually work with some government agencies to improve that. So there's a reform that Human Services is running around Child and Family Safety Pathways. And they've just embarked on a quite extensive data collection exercise that is intended to try to understand protective and risk factors. So I think there are examples where we can get much better context within routine government data collection systems.

COMMISSIONER

Okay. Thank you. And you mentioned, and we heard earlier this morning at the round table about the app that's being developed here, the Pregnancy Online Platform, and I think you said 95% usage. I think this morning, they might have said 98% usage, but it really doesn't matter, it's extraordinarily high. Families who are having their child, download the app and then continue to use it. And so I'm interested in, I mean, that's a localised development here in the North, which is clearly working very well and we were talking this morning about how it could be built on, and I think there's plenty of potential for that, but I'm interested, I guess, in any intuitive feel you might have as to why an app like that has hit such a note when we know so many other engagement mechanisms between services and families don't get that kind of response, don't get anywhere near that kind of response. Is it, and there'd be plenty of families who are given any amount of written information at the time of a pregnancy, and then, you know, don't respond to the written information. So the, so it's not, I don't think explained just by the stage of family life. There's something about people's engagement with the technology, the sense that they're the master of their own destiny, that they use the app, rather than sort of the app using them, if I can put it that way, that they feel like they're opting into the transaction in a way that perhaps they don't in other forms of contacts from services. Have you got a sense of why it's been so successful?

PROFESSOR LYNCH

Pregnancy might be a special case. Everybody understands antenatal, nearly everybody understands antenatal care. So I think I wouldn't want to take that analogy from the pregnancy and compare it to any other kind of outreach where you are trying to engage a client or a service user. I think the motivation is extremely high during pregnancy. And so it may be a special case that, I suppose I was just trying to say, it's an asset that's developed in the North it's here. It does seem to be working, and we should have a think about how it can help be a conduit. If we can reach out, 90, 98% this morning it's even better, are using it, then what's the best use of that. I think that's a discussion that we have to have. That's not solved by people like me. I see it's potential. I think that's a discussion we need to have about what's the right place of something like that. And what is its role in trying to maintain a contact that is coming from a place of caring? And I do mean that it's really, really important people trust the health system and they know what its motivation is. So I think that's really important to keep in mind. Maybe that's also partly why it's successful, but I'm interested in its potential to try to be used as a platform where we start out with everybody's in touch. That's unique, we've got everybody then. And then how can we use that to support families? And not, not do what you said, but we are using them. We've gotta be able to find ways to do that. And I think that's a piece of work that we, we need to do. I'm not sure that Lyell Mc has thought about that. For Lyell M I think it's just a way of, 'we don't have as much paper'.

COMMISSIONER

Yes, yes. And reminding people of appointments.

PROFESSOR LYNCH

And doing all those logistical things. And that works logistically. I don't know, maybe I'm wrong, but I think it's an opportunity to think about how we might use that in connecting that part of the ecosystem to the next part, which is early education, early, early care and, and education.

COMMISSIONER

Agreed. Thank you very much. That's been very interesting. Thank you.

COUNSEL ASSISTING

The witness can be released. And I call Sam Green.

SAM GREEN AFFIRMED

COUNSEL ASSISTING

Mr. Green, are you current currently the, CEO of the City of Playford?

SAM GREEN

That's correct.

COUNSEL ASSISTING

How long have you held that role for?

SAM GREEN

Approximately five years.

COUNSEL ASSISTING

And prior to that, were you employed with the Council?

SAM GREEN

Yes, I've been with the Council for 11 years.

COUNSEL ASSISTING

And is it fair to say that throughout that period of time, you've had a great deal of interactions with service providers across the Council in health, education, leisure, all sorts of spheres of life?

SAM GREEN

Yeah. We, we tend to find ourselves at the middle of all those service providers.

COUNSEL ASSISTING

And presumably you are at the receiving end of a lot of feedback from community, whether that's coming from providers or community members themselves.

SAM GREEN

Absolutely.

COUNSEL ASSISTING

So today we are in Northern Adelaide, about 30 kilometres from the Adelaide CBD, but we'd like you to help us understand some of the unique characteristics of Playford. First of all, what are some of the suburbs that it encompasses? It's quite a huge area.

SAM GREEN

That's right. City of Playford's 345 square kilometres, 35 or 36 suburbs. It has its urban spine through the, what I'd describe as the old Elizabeth suburbs, Davoren park, Smithfield Plains, some of the older parts of our city. And we have suburbs to the East with our Hills region, One Tree Hill, et cetera. And we have extensive growth areas to the North and West of the city, so the area that we're in today, and as we head out towards what is now known as Riverlee, out to the West.

COUNSEL ASSISTING

And in your submission, you've given us an estimate, in terms of population growth, that was very similar to what Professor Lynch has just told us, so it's a significant increase in population expected over the next 10 to 20 years. Can you help us understand what drives population growth in this area?

SAM GREEN

Predominantly, it's the access to available land for cheap or affordable housing, is a large driver. We also find that we do have a higher birth rate probably in Northern suburbs, which contributes to that. Probably the best figure to sum it up is seven people, seven new people, call Playford their home every single day. And that is a projected stat for the next 20 years.

COUNSEL ASSISTING

In terms of the age makeup of the area you make the point in the submission it's significantly younger than greater Adelaide and I think the median age was 33 in 2021, something like that. What about cultural makeup?

SAM GREEN

We have a very diverse community culturally. We're finding that we have extensive numbers of new migrants moving into our area. We also have a higher proportion, percentage of our population is Aboriginal and Torres Strait Islander.

COUNSEL ASSISTING

We've had some evidence this afternoon about areas within the region that experience greater disadvantage compared to metropolitan Adelaide. You also make the point that there are areas within the community that experience greater advantage. So it's council that, in terms of service provision, has to take into account a broad range of needs and interests. Is that a fair summary?

SAM GREEN

Yes, it is.

COUNSEL ASSISTING

You've given us some figures in the submission about some AEDC results and we had something of a discussion earlier this afternoon about those so don't think we need to rehash that now, but you are in a good position to help us understand, I think, generally what some of the greatest barriers are to accessing services within this area and through a lens of early childhood education and care. But I know that there, there are barriers that impact upon all service access. Can you take us through what you understand to be some of the greatest barriers?

SAM GREEN

Sure. I think I'd probably talk about the barriers in two forms. One's perhaps the attitudes and mindset of our community. The other one is the physical barriers. I might start with the physical barriers firstly. We have a community that doesn't always have the ability to find their way around our community from a transport perspective. And we have a high proportion, number of households, that don't necessarily have access to a private vehicle. We have a public transport system in this region of Adelaide, which is predominantly North, South and not East West so navigating around the city is difficult. And a number of the service providers don't necessarily sit in regional centres, which are well serviced by public transport. I'd particularly say that for schools. A number of the schools in the city, particularly the newer schools, have been built in

residential growth areas where there's not necessarily retail and commercial centres nearby. So they're not, they're not well serviced in that respect. So that creates a number of physical barriers for our community to actually access the services that they may desire to. The other issue that our community talks to us a lot about is the issue of trust with service providers and particularly with government. I think whether it be their own experiences or experiences of people, they may know, they have a general concern that if they identify as needing help, that they might find themselves engaged with government agencies and having to answer questions around the quality of their parenting, et cetera. So we know that that has become a mindset or attitudinal barrier for some of our community over time. And they tend to tell us this because they don't necessarily see us as government in that respect. A number of our facilities are not branded as local government particularly, they're branded as community centres and facilities and our community when they come and visit us, tend to come and visit for an experience of joy or an experience of learning. They don't necessarily come to us for help, but over time we build relationships with that community as they come back to our programs and it's through those ongoing relationships that we tend to determine where their needs might be and having built a trusting relationship where you find ourselves in a good position to make referrals onto the agencies that can provide support.

COUNSEL ASSISTING

And we'll talk about some of the programs offered within the Council, but are there other factors that you think make local government an important provider or link between the other tiers of government and particularly within the early years?

SAM GREEN

I do, yes. Yes. I think local government is a good connector and good referral point. And I think that is because the community access us through a range of services and a range of programs. And when they come to our facilities, they're not coming necessarily for help. And then also they're also coming with other members of the community who are coming also to enjoy the same programs. And it seems to de-stigmatize the situation. So they're not going to service providers where they are effectively sticking their hand up and saying, I need, I need help. It enables them to potentially carry with a bit more anonymity and to actually feel like they are just genuinely engaging in a community environment. And then when it's felt safe to do so, they might then disclose that they might need certain levels of help. And that seems to be a very safe entry point for our community to have that conversation with us. And having built a trusted relationship, we are then able to refer those people onto service providers that we also, give them a third party validation as being trusted and our community seems to respond well to that. And I think that positions local government very well. We already have a number of these facilities operating as well, and including additional services within those facilities is, is not necessarily something that would be difficult to achieve.

COUNSEL ASSISTING

Is your area unique in that level of trust that you've built up? Do you know anecdotally whether other councils experience it, or is it something that you feel is unique to this area?

SAM GREEN

I think it's fairly unique to this area. I couldn't say that with any level of certainty, but I know that the Northern suburbs of Adelaide, and particularly this community, is very close. And the people who work here tend to have a strong relationship with this part of Adelaide. They've either lived here themselves or grown up here or worked here for a long period of time. So there is a very close knit community. And I think that that does add a level of assistance when it comes to this, the building of trust and the managing of relationships.

COUNSEL ASSISTING

There are a range of programs you have detailed in the very helpful submission you've provided that are particularly relevant within the first thousand days. We will come to some of them in a bit more detail, but we are talking about library services, immunisation, healthy food programs, and the like. Just generally is the uptake good in terms of the local services in these first thousand days spaces?

SAM GREEN

Absolutely. All of our programs are, are well attended to differing degrees, whether it be for immunisation services or access to healthy food, programs in our library services or our other community buildings. There seems to be a consistent demand and probably demand that's growing as our community grows also.

COUNSEL ASSISTING

So for example, the library program you've outlined, that there's a range of weekly programs for birth to five that involve development of all sorts of important skills in the early years, are those resources made available in a linguistically and or culturally diverse way?

SAM GREEN

In some cases they are. It's an area that continues to be challenging for us because our, we do have a very diverse community and increasingly so, so it's one of those areas that the Council continues to work on how we provide the best access to those services for the whole suite of our community members and what they need.

COUNSEL ASSISTING

You've mentioned that a benefit of local government can be non-branded physical spaces. I suppose the library's a perfect example of that. What other programs use that the non-threatening space of the physical library here? Are there any others?

SAM GREEN

Absolutely. We have a Playford Wellbeing Hub, which actually operates out of two facilities. One's a facility that we call the John McVeity Centre, which has a sport and recreation element to it but also has other services which are provided out of it. Just up the road from there is a facility that we call The Precinct, which has a healthy food co, has access to cheap second

hand clothing, also has access to a community garden where social connection can occur. Collectively we call that the Playford Wellbeing Hub. We also have a very longstanding, successful site called the Northern Sound System which focuses more on cultural pursuits and creative industries where children access that and particularly have access to music and music production. And that's also been a great facility to provide safe spaces, particularly for young people in that instance.

COUNSEL ASSISTING

In terms of the physical infrastructure that is at your disposal to run these programs, is there a role for those spaces to be used more broadly as introduction points to services in the early years, and how do you think that could best be achieved?

SAM GREEN

Absolutely. I think that's a real opportunity and I think what that requires is the state government working with local government and seeing local government as part of the overall provider of the system. I'm not sure that we always feel like we're included as part of the system as we describe it broadly. So I think the state government working with local government and bringing, and co-locating those services along with what I would describe more broadly as mainstream service provision to our community would be a really healthy way to look at expanding this opportunity, to give access to the services that are required in a non-threatening way.

COUNSEL ASSISTING

In terms of access to the services, given that you've suggested uptake is good, and I know from the submission that you're also having to reassess though the extent of the need for public transport, are people, because of that trusting relationship making ways to be able to get to accessing services? What do you hear anecdotally about that?

SAM GREEN

I think they do their very best. One of the things that I think needs to be considered is the, what I would call is the localisation that's gone missing in more recent times where local centres have petered out in exchange for more regional centre. Which is okay if you have the ability to get access to those areas. But we had more walkable neighbourhoods probably historically, and the ability for people who were reliant on public transport and didn't have access to private vehicles, et cetera, could find their way in a walking sense, might, might be on their way to or from a school was something that I think we had more in the past. And a number of those local centres still exist, although they're somewhat derelict at the moment and often a lot unused space. So I think there's some real opportunity there, which would not only bring some vibrancy and community ownership back to those spaces, but would also provide a greater level of access to those members of our community that don't have the ability to travel long distances.

COUNEL ASSISTING

And in terms of the co-locating of services, and I know that immunisations are one of the programs that you offer, including for sort of broader migrant and immigrant population, and there's also a bigger health centre. How do you see local government as playing a role in terms of trying to make some of those wraparound allied health services more readily available in the early years?

SAM GREEN

I think it is a role that we can play, particularly in terms of our knowledge about what our community needs, what parts of our city need that, our ability to provide physical access to space, so I absolutely think that councils can play, local government can play a role as a coordinator. And as I said earlier, playing a referral agency type role to make sure that people are getting access to the services that they may not know that are available to them.

COUNSEL ASSSITING

If someone were to come in today and perhaps attend a session at a library and then feel comfortable enough to raise with someone working for the Council, that they might have a concern about their child in a particular department, is there an official process for your referrals at the moment, or is that really just good will of Council staff who are putting people in touch with other people?

SAM GREEN

I think it's very much the good will of Council staff and it takes its toll too. Sometimes our Council staff don't have the appropriate training and education and coping mechanisms to deal with some of the information that's actually brought to them. So I think it would probably assist our employees as well to have greater access to training and understand where those referral points might be. And if they're in the same facility and there's a relationship between that Council employee and an employee of a, perhaps an agency that they're being referred to, I think that would work a lot more effectively, and probably what it does today, but it does substantially rely on the good will at the moment of employees and the relationships that they've built across different sectors.

COUNSEL ASSSITING

We've had other providers within the sector talk about 'the glue' not being properly funded and this strikes me as perhaps a local government example of the glue. What would it take to, is it simply funding to have more staff? Is it more culturally diverse training? What would it take to perhaps formalise and extend out that role that you're talking about?

SAM GREEN

Whilst additional funding's always helpful I'm not sure if that's necessarily the answer. I think it's about taking the funding that's currently available and the funding being focused on rewarding collaboration. I think one of the things that we see in Northern Adelaide is when there are opportunities for access to funding, a number of the support services are competing with each other to access that funding. And one of our recommendations is that those funding programs are rewarding collaboration cross-functionally. And I think that could make sure that the funding is channelled to the right areas, inclusive of thinking about the role that connectors play and not just the direct service provision. And again, I think that's where council plays a role.

COUNSEL ASSISTING

At the moment, from what you're saying, there seems to be relatively good communication between different providers within the community. What do you think you owe the success of that kind of unofficial information sharing to, is it, is it this trust and sense of community?

SAM GREEN

And the passion of the individuals involved to want to make a difference in the community that they call home or the community that they love working in. I think it relies a lot on that sort of passion.

COUNSEL ASSISTING

I'm interested for your insights into how you think, within the provision of services within the first thousand days, South Australia can be better at helping to engage with people who might have a reluctance, due to historical and or other factors, to engage with services. Any insights that you'd like to share, given the programs offered and relatively good uptake.

SAM GREEN

I think there's a real opportunity to look at what that support looks like from the moment a child is born into this community, what the access to immediate parental guidance and services is immediately. And for those services to have a connection with the programs that might exist, whether it be through local government or other service providers. So that, from the moment that that child's born, the child, and particularly the family supporting the child, are on a journey of support. And the ultimate goal, I think for us, should be that the community more broadly provides that support. I don't think it should all be a government based system that we are relying on. I think we've somewhat failed if, if that's where we end up. But building community capacity, I think is really important. And as that journey continues, we've certainly noticed the role of say sporting clubs and other cultural groups, and how that they can play a supporting role and a mentoring role for young people in this community.

COUNSEL ASSISTING

In terms of this concept of community capacity and using all of these broader facilities to try and encourage access, the Commission has heard that when it comes to preschool particularly, families in the North often have lower rates of participation. In your vision for the

community how do you see us improving actual attendance to preschool facilities? Do they need to be more closely connected with local culture or sport? Do you have anything to share in that regard?

SAM GREEN

I think they need to be more closely related with other forms of support or community groups, whether it be sport or cultural groups, whether it be council library service. I think there's another, there's also an issue with, perhaps not so much early access to preschool, but more generally support services not being available outside of traditional business hours. I think families may not be able to get to a support service during business hours, particularly if they are employed. And the issues that might confront a family don't always appear between nine and five in the day. So I think support services that extend more into the evening and perhaps even earlier in the day would be important as well.

COUNSEL ASSISTING

In terms of building and leveraging on the asset rich programs that are offered at the moment, what could local and or state government do to assist in this model that exists here already in terms of service provision in the first thousand days?

SAM GREEN

I think it'd be useful to map the services which are already existing across the region. I think there's been work over the years done in that area. And then looking at where the logical collaboration points might exist. I think there does need to be given consideration to accessibility in terms of location and I think there's an opportunity to look at where our community of most need is living and whether those services are located close by. So I think there needs to be a regional mapping exercise to try and match up where the need is with where the services are being physically provided and in a combination that is well rounded and balanced so that the need of that local community is met. I'd also add the importance of design of that being something that the local community and local government is involved in, because I think it's the local community that has the best understanding around what their needs may be and the best idea around what would suit them in terms of accessibility.

COUNSEL ASSISTING

In terms of the regional mapping exercise, is there a model we can look to for an example that you're aware of whether interstate or elsewhere where that's been done on these particular issues?

SAM GREEN

I'm not particularly aware of a model, no.

COUNSEL ASSISTING

And as you'll appreciate the Commission has an interest in better data collection and looking more properly at what we collect and why. Are there areas of data collection that you think we are perhaps not properly addressing at a local government level?

SAM GREEN

Yes, I think, I think a lot of the information that local government holds at the moment is anecdotal. And should we be considered as part of the broader state system I think we would probably turn our minds to how we can collect the right kind of data to support the overall consideration of how well the state system is performing.

COUNSEL ASSISTING

Particularly given what you said earlier about a lot of warm referrals happening in a perhaps non-official sense, I suppose that's an example of where we might capture people being referred and perhaps not knowing what comes from it.

SAM GREEN

Yes, absolutely.

COUNSEL ASSISTING

What are the further opportunities that we have do you think in an area such as the North to leverage early childhood education and care to continue providing improved outcomes? You've spoken about co-location, you speak of a holistic approach in your submission. What more do you think needs to be done?

SAM GREEN

I'll perhaps just reinforce that point around the involvement of the community in designing that service provision, I think that's really important.

COUNSEL ASSISTING

Are there any particular models of integrated child and family community hubs within Playford that have been in existence and any successes that you'd like to share from those sorts of centres?

SAM GREEN

I refer again to the Playford Wellbeing Hub, which is more recent in its inception and was really born during the COVID period, but now exists in a more normalised environment which as I said earlier, operates over two sites. The Northern Sound System has played a particular role for over a decade now in terms of providing a place where young people feel safe to go and engage in music and music production. So I think they are probably the broadest examples.

And there has been some co-location over time of different state services in both of those areas.

COUNSEL ASSISTING

In terms of the wellbeing hub, can you give us a sense as to what services are run through that, and particularly if you can help us on what particularly is offered for parents, caregivers, families in those early years.

SAM GREEN

Sure. And to give one of the sites a bit more context, so there's two basketball courts, some function rooms, a gymnasium room and some other hireable space. So that facility we use for activities like come and try sports. There is the ability to have programs around healthy eating, particularly on our Precinct site, which is located fairly close by where we have a community garden and our Healthy Food Co, which provides access to cheap meals that are put together in an easy to prepare fashion for families. There's opportunities to try gardening and cooking programs so that the community learns and has access to what it means to cook healthy, affordable meals for a family. We have kinder gym playgroups. The John McVeity Centre is located opposite a school and after school there are often parents and children that come in to start to access those programs and services. So I think there's an example where there's some form of co-location which is proving itself to be useful.

COUNSEL ASSISTING

Anecdotally, do you know whether the playgroups and kinder gyms continue to grow in size or decrease or?

SAM GREEN

I think growth is absolutely the challenge for us in most of our facilities. And that's certainly the case in that part of the city as well.

COUNSEL ASSISTING

We had some evidence in an earlier hearing about more regional areas and how they were struggling initially to try and quantify demand for things like childcare and out of school hours care. Do you have a sense, I mean we know the population is growing exponentially within the next 10 to 20 years, but in terms of looking at the Council keeping up, are you having to try and forward plan and work out how to then to sustain models of kinder gym and playgroup?

SAM GREEN

Absolutely. Well, across our whole service profile we are continually challenged with what services we may need to provide in the future. And also recognising that the communities that are moving in are coming from different cultural backgrounds and their needs may be different to what we've been traditionally providing. We're currently looking to try and expand out some of the services which I would describe as more site based or location based and trying to take

them and deliver them more broadly across our city. As I said earlier, it's 345 square kilometres and that makes it quite a challenge. And we have new communities that are being developed. We have Riverlea on a Western part of our city, that's 12,000 homes, 30,000 people and that's probably 20 minutes from here in a vehicle. So we have to think about how do we service the different parts of our city and their different needs because they have differing needs. So there's the communities within the broader community of Playford that we need to be thinking about.

COUNSEL ASSISTING

I know you've drawn our attention in your submission to the Marni Waiendi cultural centre. I'm just interested to ask a few questions about that. And as you're aware, we've got Commissioner Lawrie coming to speak more broadly about service provision for indigenous children this afternoon, but given what you've outlined in the submission about numbers of Aboriginal and Torres Strait island residents, how does the Marni Waiendi centre operate and what does it offer?

SAM GREEN

I'm probably not best placed to give a lot of detail on that, but I'm happy to provide that to the Commission post today, if you'd like. But it is a centre that's operated for a long time in association with the Kaurana Plains school and I think is a really important location for first nations families to access services within our city. And I think again, challenged by the growth of our city over time, as to whether we need more facilities of that nature.

COUNSEL ASSISTING

Is that a centre that's solely indigenous in terms of staff?

SAM GREEN

I couldn't say that definitively, but we certainly do have first nation staff in that facility.

COUNSEL ASSISTING

If we come back to the idea of libraries and other community or local government services being very safe entry points, have there been any models trialled that look at using time for children who might be under the care of the Minister, where there are child protection issues to use some of these local government facilities to have access visits? Has there been anything like that trialled in the early years that you're aware of?

SAM GREEN

I think that has occurred over time. It's not the, certainly not the primary focus of our programs. And one of the things that I think makes our programs fairly successful is that they are seen as

programs which are there for all members of our community, regardless of your current life situation.

COUNSEL ASSITING

Are there any insights you can share on how in delivering services within the first thousand days, given this relationship of trust and service seemingly collaborating in your area, how do we best keep people engaged in terms of sustaining that long term?

SAM GREEN

I think having a broad range of activities which community members can engage in as they make their way through the different stages of life is probably really important. Having the co-location element I think will give visibility to that. So I think that's probably quite important. I have had conversations more recently around potentially apps that might be available to keep families connected to services. One of the things I would bring to the attention of the Commission is that digital literacy rates and also access to internet services in this region is, not necessarily a given, which is sometimes hard to believe in 2023, but that's the situation. So I'd caution the use too much of heavily on digital means to try and engage the community. I think we need to use some of the more traditional base mechanisms.

COUNSEL ASSITING

I'm glad you reminded me of that because we touched upon with Professor Lynch, an app that's been used by, Lyell McEwen hospital within antenatal care, but I'm interested in that because the sense I get from your submission is that a real issue for many residents in this area is perhaps in inability to access digital platforms, even if they are proficient users. So what are some examples, is the council in terms of some of the programs offered, do people still go and make phone calls? Do they try and reach out if they haven't seen a family for a while? Do you have a sense as to what's being done on the ground?

SAM GREEN

I think a lot of the awareness of what's available in the city comes from word of mouth, communication amongst family members or friends, maybe through a school community or the visual understanding of, as people move around the city and actually see these sites. I think that's probably the prevalent means by which people get their information. And we all understand the power of technology. However, I don't think that's something that we should be relying on in terms of looking at the solution for Northern Adelaide.

COUNSEL ASSISTING

In terms of particularly the growing young population in the City of Playford, what's your vision for its future? What would you like to see that isn't in existence now when it comes to crucial services in the early years?

SAM GREEN

I think the Commission's interim recommendations are certainly strongly supported. I think access to education at early years will be, has the potential to be a fundamental change. I think if we can change the view of support services for our community, so that they feel more comfortable engaging, and understanding that that's not necessarily a threat to their parenting then I think that will make a large difference. And if the trajectory of a young person as we move forward in this community shifts because of this change in approach, then their ability to be stronger parents when they become parents later in life, I think has a real chance to make intergenerational change. And I think that's probably what drives everybody in this community to want to keep striving to see change occur. So I think would support again the draft views of the Commission, support the access to early education. And you know, we've worked through the local government perspective on the role that local government could play in the overall system of support.

COUNSEL ASSSITING

You pointed in the submission to some local governments, I think they were within Victoria and perhaps one WA. You pointed to some examples there of integrated child, family and community hubs. I think one was Westall Community Hub; one was Manning Community Hub, I think both in Victoria. What in particular about those examples do you think South Australia can learn from.

SAM GREEN

I think we provided those examples to support our views that there's an opportunity for local government to perhaps be the lead on creation of facilities that have co-located facilities, but have a branding which is very broad in terms of what it is and the design and inclusion, of the community's inclusion in the design and creation of those spaces and what they then become to the community and, the passion the community has to see them be successful. So they seem to us to be a cornerstone for what our local community success might look like.

COUNSEL ASSISTING

Commissioner.

COMMISSIONER

Thank you. I want to just drill in a bit, I've been struck by what you've first said about the, you know, physical size of Playford, the problems with transport links and all the rest of it. And so I want to just follow that thread of thinking. One of the things that the Commission has said in its interim report that we're interested in is this question of the glue, you know, what truly creates an early childhood education and care system. And we talked about some of this earlier in the day in the round table format. And so if we imagine, for example, that we are trying to get to a stage where long daycare centres that are providing preschool programs, standalone government preschools, and all of the other services in a region are connected. So the, you know, educators providing the preschool know for example that there's opportunities at the

local library to be building on children's literacy skills or that they know that there's a food bank down the road that can help families who are in real difficulty, or they know that there's some new services and supports coming on stream for allied health, that they can refer children to. Here in the North what's the reasonable geography for that kind of interconnection? I mean, it seems to me, from what you're saying, there's no point making that Playford wise because there's no point being an early childhood centre here that's referring people to a food bank that's the other side of the municipality and that there's no public transport route that could take them there. So I was sort of struck by what you said, you know, local, regional, where is the balance in that for these sorts of ecosystems that we are thinking about and thinking about being better glued together?

SAM GREEN

That's a fantastic question. I think the answer lies in people's transportation methods and how far they can reasonably travel. If the facility is located in one of our more regional centres where there is good public transport access, then I think the ability for someone to live further away from that facility exists. If there isn't good public transport network, then I think we're back to a walkable community sort of sense, which probably puts us in a more localised context and probably what, what strikes me is when this community was first established as a satellite city of South Australia, as the City of Elizabeth, it was very much a walkable community and those local shopping precincts in many forms still exist. And I think they give us a bit of a clue and an indication as to what a reasonable distance would be. So I'd probably use that as a starting point, particularly from the concept of what might be a walkable community. And then in addition to that, how have we managed to complement that with public transport services, as services have become better over time? I think that would be the way to undertake that and to recognise that there are new parts of our community, which are going to be a long way away from where the current services are and to consider, well, what do those new communities need? And that's something that the Council is very involved in when there are new established developments or suburbs, we are looking at what the community service provision needs to look like right from its inception. And whilst I know it's probably well, and truly outside the scope of this Commission, one of the challenges there is the funding of that infrastructure right up front from a state government perspective. So often that is left to local government to deal with and that's challenging given that new community centres can, of the sort of scale that are required can easily be 10, 15 million dollars which is quite a burden on a community, particularly where you need several of them, uh, across a broad city.

COMMISSIONER

And so, from what I understand you to be saying, you know, there may well be good reasons to bring service providers in early childhood education care together, across all of Playford or all of a region, a bigger region for population planning, discussions and policy exchanges and those sorts of things. But in terms of this ecosystem about where people could be referred to, then that would be a much smaller unit and you are thinking of basically a walkable or public transportable, if I haven't just made up a word, public transport, navigable unit.

SAM GREEN

Yeah, I think so. And the other advantage that I think might come from that is the building of the community fabric. One of the concerns that I have and that we see now is drive in drive out type suburbs, or I described earlier today a drive in drive out school dropoffs where parents are no longer having that additional interaction with other parents in schools, which is where the relationships are built in a community sense, where the exchange occurs around managing perhaps the challenges that come with parenting. If we spend our whole life in our car or on a public transport system, and the people that we are travelling with are not the people who live in our local community, then we're not going to build those networks. And I think that's one of the real opportunities here is being more localised is actually creating a better community fabric. So you keep walking past the same people and hopefully build those social connections, which again, is about building the community's capacity and resilience to respond and not relying wholly and solely on a government system.

COMMISSIONER

And one of the recommendations of the interim report of the Royal Commission is that in order to realise the promise of three year old preschool that there will need to be expansions in the number of places and that some of that expansion would happen through other specific commissioning of a thousand places for more disadvantaged children. And so obviously a share of those places, quite a large share, given the disproportionate number of children and the disproportionate number of disadvantaged children in the North would come to the North. What role do you think government, local government, can and should play in the commissioning arrangements? I mean how would a state government that was interested in doing that commissioning best partner with you, or draw on your local knowledge to get the place the, the actual physicality of where those places should go?

SAM GREEN

One of the things the local government does as part of it's core business is land use and service planning across our region. So we already have the skills and expertise and mechanisms established. I think being invited to the table for that discussion and given some level of authority to give at least recommendations, guidance, and advice around where those locations would best exist in the local community that we understand, also in line with what we understand is the future planning for the city as we are, we have already been undertaking it would give, I think, great capacity for us to give really helpful guidance as to where those places are most likely to have maximum benefit.

COMMISSIONER

That that's useful. And looking at the planning and the planning for your population growth, one of the things that the Commission has heard evidence about is childcare deserts, where you know, obviously in the interim report, we are very focused on preschool, but moving more broadly from preschool to the ability to get child care no matter what age your child is to facilitate labour force participation. Is that something that you as a local council hear from the local community, or that is a concern when you're developing new suburbs, that there won't be long day providers coming in quickly enough to meet local community needs?

SAM GREEN

I think the answer, the short answer is yes, we, we do hear that from our community. One of the challenges of our new community is we haven't met them yet. We're planning for a community that's going to arrive next week or next month or next year, or in a decade's time. So foreshadowing or seeking to futureproof those developments is the challenge of local government. We do that with the experience that we bring with us having done that for some time. The other thing I would add to the mix is the more mature and larger developers that we would deal with and perhaps where they're, they're building developments, which are a community in their own right - and I made reference to a new community Riverlea of 12,000 homes - that developer understands that that population moving in is going want access to all the sorts of services that any other community would want. So the more mature developers we find are probably ahead of us, to be honest, in terms of understanding what that community might want and need, and are fairly active in terms of creating those spaces. So I, I actually think the new communities might be better off than perhaps some of our established communities, which, where those services have, have been regionalised over time. And again, have gone away from those more localised locations. So I think, I think those new developments are probably well looked after.

COMMISSIONER

And one of the other things that the Commission is having to turn its mind to is it's not only about commissioning new places. I mean, places only work if there are staff. And there is, you know, high, National Quality Standards there's a high degree of specificity about staffing in childcare and staffing in preschools, understandably. And one of the things that, you know, people have raised with us in the round table format, and we will be getting evidence on workforce shortages is that, you know, getting a workforce planning approach locally, partnering locally, where, you know, perhaps local high schools are offering cert twos or cert threes, in childcare, then people could start in childcare. Maybe they can articulate through, get their diploma. They can ultimately articulate through, get their degree. Is that something that from a local government perspective you would, think about and be open to being engaged in?

SAM GREEN

Absolutely. This community was born and supported by an automotive manufacturing industry for 60 years. So there's a long history of understanding what that pathway from a school education environment through to apprenticeships through to trades or other roles looks like. So I think the DNA is there. And I think having a similar concept for the pathway towards having jobs created and fuelled by local community members, we do have a high unemployment rate here, we also have a growing community, so there is lots of capacity, providing our community has the life skills to obtain that education, to continue that on. And the Council has a lot of history and experience in being involved in that and would certainly like to be involved in that, into the future.

COMMISSIONER

And then one of the other things, you know, you've talked to Counsel Assisting about this relationship of trust and one of the things we're obviously thinking about is we know now that there's a universal access offering for preschool for four year olds, but it is not universally taken up and of the cohorts of people most likely not to take it up are very disadvantaged families. That's not the only reason that four year old preschool isn't taken up, but it's a reason. And with the building out of three year old preschool, obviously there'll be a new offering and a new need to engage, to persuade people that this is a good thing for them and their child. In an atmosphere, which you've described here where, you know, capital G government might not be the subject of a whole lot of trust what do you think is the best way to try and, you know, popularise and inform that ability now, not now, but the ability post the reforms and as the reforms are implemented, for people to access preschool for their three year old, as well as for their four year old child.

SAM GREEN

I think one of the challenges, if I just take a step back, for our community is the hierarchy of their needs and housing security and food security I think are some of the barriers. It's not that families won't access early education it's they're very focused on just dealing with the challenges of today, which might be keeping secure housing and food on the table for the family. So if those things can be put in place, then I think we get the opportunity to have the conversation around how does our community feel most comfortable? In our experience, it's got a lot to do with putting a human face to the service, a consistent human face, which is certainly what we experience in local government with our employees who are there day in, day out. I think the branding of those facilities, again, in our experience is, really important. And if they are co-located with activities, which are not just about providing help for vulnerable people, but are about access for services for a community more broadly then I think there's a high likelihood that these families will seek to access those spaces. And I think it would help tremendously with breaking down some of the barriers that come with the social isolation that I sort of described earlier around drive in, drive out schools and kiss and drop arrangements where parents are no longer themselves co-locating in those facilities. So I think having playgroups, libraries, indoor sports and recreation facilities, co-located with those sorts of facilities, I think will create a whole different atmosphere for members of our community.

COMMISSIONER

And from the discussion we had at the round table earlier, it does seem that there's, you know, a lively set of community groups, volunteer groups, we heard from Puddle Jumpers, for example, and I presume Council works with those kind of groups and they could be the kind of groups that might help build some of this trust and engagement.

SAM GREEN

Absolutely. There is no shortage of passionate groups and passionate individuals in this community who want to make a real difference. So the role that we can try and play and continue to play is to connect those groups up.

COMMISSIONER

Yeah, that's great. Thank you very much. This has been very helpful. Thank you.

COUNSEL ASSSITING

Commissioner, our next witness is arriving at 3.30pm.

COMMISSIONER

Okay. So we will get ourselves a little bit of a break. Thank you. Thanks everybody.

< HEARING ADJOURNED UNTIL 3.30PM