

Family Day Care Coordinators' Views on Delivering More Flexible Models of Care



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Introduction

The aim of this project was to understand Family Day Care (FDC) Coordinator's perspectives on delivering more flexible models of childcare in a context where the *Productivity Commission Inquiry into Childcare and Early Childhood Learning* had found that:

The childcare and early learning system can be improved because families are struggling to find quality childcare and early learning that is flexible and affordable enough to meet their needs and to participate in the workforce (Productivity Commission, 2014, pp. iv-v).

This project developed from researchers at the School of Social Science, University of Queensland approaching Family Day Care Association QLD in late 2014 about potential areas of shared research interest around childcare flexibility. Dr Brady's research had found that childcare inflexibility was a significant issue for Australian families and particularly single parents while Family Day Care Association QLD had recently been involved in the childcare flexibility pilots that aimed to:

gain greater understanding about parents' and service providers' perspectives on flexible child care [and] to test a number of approaches to the delivery of flexible child care, with a focus on families whose needs did not fit with standard models of child care delivery (Baxter, Hand 2016).

A key concern for Family Day Care Association QLD at this time (late 2014) was to examine areas where FDC coordinators could potentially increase their revenue stream in a context where they would lose Community Support Programme (CSP) funding the following year (during 2015). Research by the New South Wales (NSW) and Queensland (QLD) Family Day Care Associations (NSW Family Day Care Association, Family Day Care Association Queensland 2014) and by Brennan et al (2014) had suggested one potential strategy for adapting to this change was to add an income stream by diversifying services, with some viewing the regulation of nannies offering care in families' homes as a "natural extension of family day care schemes" (Cortis, Blaxland, Brennan, & Adamson, 2014).

The aim of this project was to gain FDC coordinators' views on whether or not there was potential to increase income streams, and improve Australian families' access to flexible care, by expanding the coordinator's role to include the delivery of more flexible forms of care. The first step was to identify existing models of more flexible care through a scoping review of overseas childcare models and the second step was to seek FDC coordinators' responses to these models through focus groups. Within the focus groups coordinators were asked if they could see themselves adopting some of these models in their service, if they had any concerns with any of these models, and any aspects of the models that they required further clarification on before they could make a decision about whether or not they would like to adopt them.

The review of overseas models identified that no country appears to have comprehensively addressed the issue of childcare flexibility, but some countries do provide interesting alternative models. Innovative models include in-home after school care, combined group care and nanny services, and emergency care. In addition, a range of nanny services are provided in Australia and overseas. Another key finding was that these more flexible forms of care tend to be either unregulated or very lightly regulated.

In the focus groups, an important finding was that a number of services currently delivered multiple types of care (including Long Day Care, Family Day Care, In-Home Care, and OHSC) but only one service sought to actively offer families access to multiple types of care concurrently so as to better meet their needs. Another key finding was that FDC coordinators reported very large variation in the degree to which their educators currently offered flexible care. While some services reported that

many of their educators provided school pickups and drop offs, weekend and overnight care others reported that very few or none of their educators offered these services. Key reasons for not offering more flexible services was risk and logistics, which influenced coordinators' willingness to offer new models of care. The current childcare service delivery context, including budget cuts, time pressures, and uncertainty around existing government support made many feel unwilling to take risks with new models of care. In evaluating their willingness to take on new models of care coordinators consistently came back to three key issues (1) if there was demand for that services in their geographic area; (2) how well the model addressed children's needs; (3) whether it was financially and logistically feasible to offer that service. Coordinators had significant concerns about very young children being in lightly regulated forms of care for long periods (e.g. nanny care) but were more open to less regulated forms of care for school-age children.

The following report is divided into three parts. The first outlines the methodology used while the second describes the childcare models uncovered in the scoping review of overseas models, and the third outlines FDC coordinators' responses to these models.

Methodology

Our first step was to conduct a scoping review of overseas models of flexible childcare. A scoping review aims "to map rapidly the key concepts underpinning a research area and the main sources and types of evidence available" (Mays, Roberts et al. 2001). The scoping review involved a review of websites, a search of policy documents and academic articles, and four key informant interviews including an informant at PORSE in New Zealand, at Asquith Nannies in the UK, and informants from In-Home Care and FDC in Australia. From this review we identified four key models:

1. Services offering a combination of playgroups/centre-based care/nurseries and care in the child's home (e.g. PORSE and Asquith Nanny programme);
2. Nanny services;
3. Emergency care in the child's home services;
4. Short hours of after school care in the child's home.

In order to obtain FDC coordinators' perspectives on these models focus groups were conducted with the following number of FDC coordinators, located in the following regions on the following dates:

- Brisbane (6) (4 June, 2015)
- Bundaberg (15) (6 August 2015)
- Cairns (8) (2 July, 2015)
- Ipswich (4) (12 November, 2015)
- Sunshine Coast (12) (24 November 2015).

We also conducted three follow-up interviews with participants in the Cairns focus group due to problems with the recording of that particular focus group. In total 45 coordinators participated in the groups and provided their perspectives on the models that we uncovered in our scoping review. The focus group meetings lasted between 40 and 130 minutes, and all were conducted by Dr Michelle Brady (UQ). Cathy Cahill from Family Day Care Association QLD also attended all the meetings and at times provided input on issues or clarified issues for either the interviewer or the participants. The groups began with each participant introducing themselves and their role, the size of their service and details of any flexible childcare that their services currently provided (including school pick-ups, overnight care, weekend or evening care). Once all participants had introduced themselves the interviewer then began by describing the first model and then asked participants for

their thoughts and comments. As far as possible the aim was to receive feedback from all participants on all models. The meeting continued until each of the four models had been described, and participants had an opportunity to comment on them.

We have classified Brisbane as an urban area, and Bundaberg, Cairns, Ipswich and the Sunshine Coast as regional areas. Participants came from different FDC services that ranged in size, with some services consisting of only a few educators and others more than 80. We have used the following classification for service size: forty educators or less is considered small, fifty to seventy is medium, and eighty or more is large. In the findings below the participants' names have been replaced with pseudonyms.

Overseas Models of Flexible Childcare

Combined Group Care and Nanny Packages

In our review, we located two services, one in New Zealand and one in the UK, which provided families with nanny care and nursery or playgroup care for a single fee. The UK Asquith Nanny programme provides families with nannies that work in the child's home and one (or more) day per week at one of their nurseries. They state on their website that "Asquith Nannies provides the perfect blend of childcare and learning, incorporating a mixture of premium nanny care and nursery for a single fee" (Asquith Nannies Ltd, 2013 para 3-5). Another key aspect of the model was that they "employ the nannies directly as opposed to agencies who provide the nannies, who are then employed by the parents" (Martin, Asquith). The Asquith Nanny programme has been described in Australian research as an integrated childcare in the home model that enables the staff members at the nursery to take the child back to their own home after the centre closes, and care for the child until the parents return home (Brennan, Adamson 2014). While this arrangement is potentially possible under this model, as highlighted by Brennan and Adamson (2014), this is not the model that is marketed by the Asquith Nanny programme. In both the key informant interview and their promotional material there is more of an emphasis on the nanny providing the primary care with the nursery care there to provide early education and socialisation (Bhardwa 2013). In the key informant interview Hinchliffe reiterated this when he explained that most of the clients were professionals who worked long hours and that:

Really we're proud of our nurseries and to try and bring that additional service available for the parents that couldn't necessarily always operate within the working hours of a nursery. That wanted the additional flexibility [of a nanny] but still desperately wanted their children to have all the benefits of the social interaction in the nursery as well.

However, while this was the programme emphasis, he stated that it was theoretically possible to combine the nanny and nursery care in the way that Brennan and Adamson (2014) suggest.

The New Zealand provider PORSE (Play Observe Relate Support Extend) also offers a combined group care and nanny care programme. However, the PORSE model is different to the Asquith model in that they offer a playgroup rather than a nursery, and the nanny must remain with the child while they are attending the group. Furthermore, PORSE does not directly employ nannies. Instead, trained PORSE nannies work as independent contractors and PORSE assists families to find nannies and the independent contractor nannies to find families to care for and then helps to coordinate contracts between these parties (PORSE 2015). Like Asquith, according to the National Market manager Kelly Taylor, this service is primarily offered to allow children that use nanny care access to

additional opportunities to socialise with other children and receive early education and learning, rather than to increase childcare flexibility. As the marketing manager explained:

We believe that babies, especially zero to threes are best nurtured in a secure, loving, close, low ratio relationship in a home environment. We think that is - the research has told us that that is the best for early brain development. So basically what we're trying to do is create a series of activities through our programme which give our educators the opportunity to socialise with other educators, but socialise children in a way that still provides them with that secure attachment relationship, so as to not obviously hinder brain development by stressing the baby out, releasing too much cortisol in breaking down all neuro-connectors in the brain (interview, 2015).

Thus nannies in the program bring children to PORSE owned and operated play groups that focus on either music, movement or nature, and which are also open to parents who are not using a PORSE service. Due to the emphasis on quality care, POSRE also offers their educators access to extensive personal development (Kelly Taylor, interview 2015). Because children must be supervised at these centres, it was not possible for parents to use the playgroup plus nanny package to increase the flexibility of their care. However, the marketing manager advised that families do more commonly package two other services that PORSE operates, namely: center-based care and what they call in home care, which is similar to FDC in Australia.

In summary, while the nanny plus centre based care packages have the potential to increase childcare flexibility the services we reviewed are not (for a range of reasons) seeking to market these services in this way. Instead, these services are primarily targeted at families who seek for their child to be cared for in their home but wish for the child also to have the educational and social opportunities that are enabled by attendance at a playgroup or nursery.

Nanny Services

Australia currently has a range of private nanny matching services whereby they receive a family's nanny request and then forward suitable nannies' profiles to the family for viewing. Services vary in regards to their nannies' experience and educational qualifications. Most services offer short to long-term nanny placements, full-time, part-time, and before and after school care. In our review, we sought to locate nanny services that provided additional services that might increase their flexibility.

One such option is nanny sharing. The British Association for Professional Nannies (BAPN) has guidelines for nanny share (British Association of Professional Nannies 2014). According to BAPN a nanny share is where one nanny works for two families at the same time under one umbrella agreement. They may care for the children together, or they may care for the children on separate days (British Association of Professional Nannies 2014). A nanny who works for two families but on separate days is not necessarily in a share arrangement but may have two entirely separate employments, although payroll providers may consider the nanny to be shared for administrative purposes, particularly when the tax code is split (British Association of Professional Nannies 2014). BAPN recommends families find nanny share arrangements by going through an agency to ensure families only receive applications from candidates who are genuinely interested in a share arrangement and understand what it entails (British Association of Professional Nannies 2014). They describe the following possible scenario regarding combining care:

Family A and B have 2 children each. Family A have a child at nursery in the mornings and a younger child at home full time, Family B have a child at nursery in the mornings and an older child at school full time. They work out that Family A are using 10.5 hours a day for their younger child and 7 hours a day for the older child, a total of 17.5 hours per day, and Family B are using 7 hours a day for their younger child and 2 hours per day, a total of 9 hours per day, for their older child for 36 weeks a year, with both families needing full time care in school holidays. The ratio is approximately 2/3: 1/3 for 36 weeks and 1/2 : 1/2 for 16 weeks. A gross weekly salary of £600 in term time means Family A pay £400 and Family B £200 each week, with each family paying £300 per week in the holidays (British Association of Professional Nannies 2014).

Another additional nanny service is the arrangement of international nannies. Services arrange nannies from a range of countries for families needing nannies or au pairs. Positions may be for live in, daily live out nannies, full-time, part-time, temporary nannies, mother help, and maternity nannies. In some services, nannies must have qualifications for sole charge positions.

Before and After School Care in a Child's Home

Our third model is after school care in the child's home. The Bluepoint childcare service in Auckland, NZ, matched families and after school carers, whom they called Bluepointers. As they explained on their website:

We call our in home childcare givers 'Bluepointers'. This is because each of our caregivers are not a nanny, baby-sitter, homework tutor or friend. A good Bluepointer is all of these – as well as being an indispensable support for Mum and Dad ... Our Bluepointers are from all age groups and walks of life. They must have a car and full licence. They must consent to a full police check. They are fully briefed on Bluepoint's in home childcare systems, procedures and philosophy before they start. Mentoring, advice and resources are available to them once they are on the job (Bluepoint 2014).

Within this programme the Bluepoint coordinator matches families with a Bluepointer who is appropriate for their family's needs (Bluepoint 2014). Normally Bluepointers collect children from school and take them through an afterschool routine while some families may mix centre-based after school care with Bluepoint (Bluepoint 2014). For example,

Monday and Tuesday a Bluepointer picks children up from school at 3pm and cares for them in the family home until 8pm. Wednesday-Friday children attend the after school care programme that is run at the primary school. Parents pick the children up from the school programme at 5:30pm.

Employees of Bluepoint advised us that it charged families \$25/hr and paid Bluepointers \$15/hr but while we made repeated requests we could not obtain confirmation of this from the Bluepoint agency.

On-call Care

Our final model involves one-off emergency care. A service offering such a model is Care on Call, which is delivered in New Zealand and offers on-call care for young and old persons. Although this service offers regular care (similar to a nanny service), it also has care coordinators who are available to take calls 24/7 to link families to emergency care. Call on Care states that their carers are trained to recognised standards, and are honest and reliable (Care on Call, 2015). This service further advises that their caregivers operate at all times within their policies, which are independently audited (Care on Call, 2015).

Coordinators' Views of the Overseas Models Findings

Combined Group Care and Nanny Package

As outlined earlier the scoping review uncovered two overseas services that provided combined nanny and nursery/playgroup packages. In the focus groups, the interviewer only described the Asquith model in order to simplify the discussion and also because only the Asquith model allowed the child to be cared for in the nursery without their nanny if the parent so wished. Within the focus groups, it was challenging to get participants to focus on the specific nature of this package rather than only focusing on nannies. This was because at the time the focus groups were conducted the government had just released details of the Nanny Pilot, which was to commence in late 2015. Participants tended to focus on the Nanny Pilot model rather than the nanny plus nursery model that was being presented. Overwhelmingly participants viewed the Nanny Pilot as re-directing funding from what they viewed as the successful and well-regulated In-Home Care programme to a model of unregulated, potentially unsafe care. Participants' concerns with the Nanny Pilot included issues related to nannies' qualifications, and the high cost of this model of care, which was viewed as potentially wasteful if used by families that could use alternative models (such as Long Day Care or FDC). Regarding participants' willingness to be involved in the Nanny Pilot as service providers they were concerned with the logistics of training and managing nannies in a context where the coordinators are currently time-poor.

However, many participants also viewed nanny care as providing some benefits compared to Long Day Care (LDC) particularly in potentially providing children greater continuity in their care. One participant suggested that older children appreciate continuity in their care, and under this model they could have the opportunity to establish a close relationship with the one nanny, as well as becoming familiar with other nannies through relief care:

I can definitely see the advantages in it for the child, for the consistency for the child, and establishing a really strong relationship with that nanny (Paula, practice mentor for a medium size service in a regional area).

An educational leader from a regional area highlighted how nanny care can be beneficial in providing children with continuity in their sleeping schedule: "when you go to work and your baby's in bed and they can stay in bed" (Courtney, educational leader in a regional area).

Although there was not extensive discussion about the centre-based care plus nanny feature of this model given that they were primarily involved in FDC, some participants did acknowledge the benefits of this packaging with one participant indicating that this model would be a preferable alternative to full-time nanny care. This was attributed to the centre-based component of this model providing children with the opportunity for important group socialisation so that they "get to experience a larger group in preparation for school" (Paula, practice mentor for a medium size service in a regional area).

Participants more commonly suggested that it would be possible to adapt the model so that FDC replaced the centre-based care component of the nanny and kindergarten package. Participants felt this arrangement could improve their services' capacity to offer families flexible, overnight, and relief care. While one of the commonly discussed benefits of FDC was its greater flexibility, most coordinators suggested that there were now fewer educators who were willing to provide flexible care compared to in the past. Under the current FDC model, a family generally has one educator, and it is the choice of an individual educator on whether they can, or want to, provide flexible care and overnight care. Participants explained that educators commonly found that offering flexible care

was very demanding, especially if the family requires overnight care for consecutive nights in a row and thus offering this service may not be “sustainable” for the educator. The demands that overnight and weekend care place on educators has increased over time particularly with the introduction of the Education and Care Services National Regulations and National Quality Standard (See <http://www.legislation.nsw.gov.au/#/view/regulation/2011/653>; Regulations 81, 166 and (<http://files.acecqa.gov.au/files/National-Quality-Framework-Resources-Kit/NQF03-Guide-to-NQS-130902.pdf>); Standard 2.1 Element 2.1.2). These provisions and considerations impact on more than just the educator and their home environment; it also has implications for other household occupants and their leisure activities.

One coordinator for a medium size service in an urban area suggested that an FDC plus nanny model could address educators’ burnout and families’ need for evening and overnight care by providing “more flexibility, capacity for the family to be able to access multiple [carers] instead of just one” (Carrie, coordinator for a medium size service in an urban area).

Several participants mentioned that the flexibility offered in this model could be useful for providing families with relief care, with a manager of a large service in an urban area raising the possibility of people being employed for a “dual role of nanny plus relief educator” (Jenny). A coordinator described this model as meeting the needs of working parents, as well as benefitting children and educators:

We do get lots of families where partners work at the mines and other parents are trying to work ... so family day care model during the day, during the regular hours. The nanny for the extra hours perhaps would be something that could be combined and would probably be better for the child and better for the educator for the long term (Carrie, coordinator for a medium size service in an urban area).

Reoccurring in the participants’ discussion of the benefits of nannies was the expectation that the nannies they employed would be required to meet certain levels of qualifications, with some participants insisting that nannies and educators should have the same qualifications. One participant from a small service in a regional area explained her service would ensure that nannies are qualified and providing high-quality care, even if not required by legislation:

If our service [were] to run a nanny service like that, even though the legislation wouldn't say they have to be, our service policy would be that [nannies] would have [to be] qualified and they would still be doing the same sort of stuff as the educators (Carmen, small service in a regional area).

Participants looked favourably upon the fact that the Asquith nannies were employed by the agency, and would therefore have access to a support network and professional development. This employment model was therefore seen as more desirable compared to the alternative model in which nannies were contractors who would not necessarily have access to these opportunities.

In the context of the recently announced Nanny Pilot participants were troubled by the uncertainty over how government support for nanny care would be implemented and were particularly concerned about apparent duplication of services that involve care in the child’s home, costs for families and the kinds of quality standards that would be attached to the Nanny Pilot model. Participants felt that the Nanny Pilot was essentially the same as the In-Home Care programme, yet carers were subject to different qualifications requirements. To be a nanny in the Nanny Pilot carers only had to meet the following requirements:

- be at least 18 years old

- hold a current working with children check in the state or territory in which they intend to work
- hold a current first aid qualification
- be an Australian citizen, permanent resident or have a relevant visa that allows employment on a continuous basis for 12 months or more.

Furthermore, the care that the nannies provided would not be subject to comprehensive standards that were set down by the government whereas the In-Home Care programme is regulated via interim standards (Australian Government: Department of Education and Training 2016). Participants resented this disparity and found it difficult to understand why the government was introducing the Nanny Pilot:

Because really and truly the nanny [pilot] is no different to the In-Home Care and the In-Home Care is well regulated (Irene, regional area).

Many coordinators felt that any move to implement a model of care that was not strictly regulated would undermine the hard work that they had undertaken to ensure that FDC educators were qualified and that their care adhered to National Quality Framework (NQF) standards. Participants were concerned that care quality would be compromised if a new programme (The Nanny Pilot) did not require nannies to hold qualifications and provide care that met certain standards, as highlighted by a regional FDC manager:

... it's really important with the nanny if you're going to have this introduced into Australia ... I think you've really got to [have] the regulations and the standards because we've worked so very hard in childcare overall ... that's been our foremost goal and principle of what we do (Brooke, FDC manager in a regional area).

The cost was another consideration. Participants were concerned that the documentation they had reviewed appeared to suggest that the childcare subsidy available through the Nanny Pilot would be lower than the In-Home Care programme which would make this form of care more expensive compared to what was already available.¹ Participants felt that most parents would not be able to afford this service.

Due to perceived differences in service philosophy, participants were concerned with combining nannies and FDC educators in a care package. It was considered problematic that nannies would be doing work that was essentially the same as educators; while the former were unregulated, the latter had to conform to strict regulations under the NQF. Participants expressed that this did not seem fair to the educators and that it did not support their FDC ethos of delivering high-quality care. A participant running her FDC team in a regional area elaborated on educators' feelings of resentment towards nannies:

[FDC educators] say well nanny doesn't have to have Certificate III or they don't have to have public liability and we spend all this money and ... we're so heavily regulated where nannies aren't (Beth, coordinator in a regional area).

Assuming financial and regulation concerns could be addressed, there remained logistical concerns with the implementation of this model. Participants anticipated challenges with ensuring nannies attend training and managing administrative aspects related to employing the nannies and providing this service for families.

Nanny Services

Participants' concerns with offering a nanny model of care echoed the concerns that arose about model one (the nursery plus nanny model). Participants were divided about the nanny share model. Participants were supportive of the greater affordability of this model (compared to a full-time nanny) and viewed it as being potentially popular with certain families and profitable for providers. However, participants were also unsure about how significant demand for this service would be. Additionally, it was anticipated that services would face significant logistical challenges when attempting to match families, and they were concerned about issues relating to liability under this shared care arrangement.

The nanny share model was considered by a number of participants as offering a more affordable option in comparison to a full-time nanny, and an educator in a medium size service in a regional area emphasised that this model could address the current lack of reasonably priced services for overnight care in Australia. Currently, many Australian parents are limited to the option of paying expensive rates for an unqualified babysitter if they require overnight care. This participant shared her personal experience as a single mother struggling to secure affordable overnight care, highlighting a gap in Australian childcare services:

So to have access to something outside even if it was just from 5:00pm until 8:00am to get you through that night period there is nothing besides paying \$45.00 an hour for someone unqualified to babysit there is nothing in Australia to meet that need (Sylvia, educator in a medium size service in a regional area).

Furthermore, participants believed that this model might address a mismatch between the needs of nannies and families, whereby most nannies sought full-time employment but most families sought part-time nannies. One of the participants working for a service in a regional area explained that nannies in his area might be worried about not having full employment – an issue that would be addressed through a formal nanny share arrangement:

It might attract nannies to know that they're going to receive full-time employment closer – especially if they're able to share between families it sort of helps remove that doubt that may not pick up families in the services and looking after them saying yes we're going to have a shared arrangement (Ryan, service in a regional area).

Participants acknowledged that nannies that potentially offered flexible, 24-hour care could be useful for providing childcare for a particular niche of families. They provided examples of families with nonstandard working hours including ambulance officers, midwives, and fly-in fly-out families like those working in the mines.

We have had families that are in need of nanny care, for example midwives and ambulance officers. So we see the need there (Courtney, educational leader in a regional area).

Farming families on remote properties are logistically and financially unable to have their child in centre-based care, and thus desire to use care in the child's home:

There's [farmers] who want the nanny role. They're the ones who want the nannies in their homes because they can't afford long day care. They can't be driving 45 [kilometres] into town ... to drop them off to a long day care to drive home to work and then come back in or it costs them a fortune because they don't get [Childcare Voucher] (Participant not identifiable, from regional area).

However, participants also stated that certain families have a personal preference for a nanny and are in a financial situation where they can afford to pay for an unsubsidized nanny. A particularly relevant example is overseas doctors who work non-standard hours. Given that they are not eligible for the Child Care Rebate the absence or presence of a subsidy would not be a consideration in their choice about which type of care to use.

Nanny services were viewed as a potentially valuable addition to their FDC services as participants felt they could profit from charging families a fee for matching them with a nanny and for organising the initial paperwork and a home safety inspection. Most (though not all) participants felt their concerns with the quality of this care could be addressed by ensuring that nannies met a certain level of qualification such as a Certificate III qualification and ensuring their care met existing In-Home Care standards.

While most participants did not believe that there was significant demand amongst families for a nanny share service, some acknowledged that they might not be aware of the need unless they offered the service. A few participants noted that they knew a small number of highly flexible educators who made themselves available for overnight care, and described that these educators were always busy with work opportunities. Participants thus extrapolated that if agencies were able to provide more flexible educators under a nanny share arrangement, then this could perhaps develop into a popular service. A coordinator for a medium size service in an urban area described the high demand for her flexible educators:

They're often working nights. They're often working those - doing that flexibility stuff, so if we had more educators would we be able to say yes we can do this (Carrie, coordinator for a medium size service in an urban area).

The most commonly raised concern across the focus groups with this nanny share model was anticipated logistical challenges including difficulties finding families' whose needs, preferences and schedules matched. A participant from a medium size service in a regional area elaborated:

... to find someone to go into someone else's home and look after children for, perhaps, limited hours like before-school care, after-school care, can be really hard to find that right person. But to have one person for two families, and both families are happy with that person, I could see ... lots of struggles (Veronica, coordinator for a medium size service in a regional area).

Participants were concerned that under this model, the schedule changes of one family would impact the care arrangements of another family, which would be both challenging for services to coordinate, and undesirably disruptive for families. Participants explained that it was highly common for families' arrangements to change and that under this model two sets of families would be impacted, which would be detrimental. Thus some participants asked if this model would be flexible in practice. A participant from a medium size service in a regional area reflected:

If the family needs an extra day, then that nanny's not available because she's with the other family. Or if their work changes, or something happens then the whole situation needs to be relooked at again (Laurie, practice mentor for a medium size service in a regional area).

Participants believed that these challenges would be even greater in regional areas where there would be a smaller pool of families from which to choose matching pairs and where families may live significant distances from each other which would entail the nanny travelling over significant geographical distances. These service providers are under time constraints, and some felt that they

would not have the capacity to manage the workload associated with this service, as summarised by a participant from a medium size service in a regional area:

I can see a lot of work from that. Or service. Time consuming, and I know we're all under time constraints (Veronica, coordinator for a medium size service in a regional area).

Finally, some participants felt this model could raise issues with liability; for example, they were uncertain who would be held accountable if something was stolen, or if a child was injured at another child's house. There was concern over what would happen if something went wrong, and how this could reflect poorly on the service provider. To minimise these risks participants felt that there would need to be regulations and nannies would need to have certain standards of qualifications – the existing ambiguity regarding the level of standards caused concern. Similar to the nanny and kindergarten package, participants' concerns with regulation ambiguities contributed to their frustration with this model that they perceived as essentially an unregulated FDC service: an existing model of care that is currently subsidised, regulated, and maintains quality standards. A coordinator of medium size service in a regional area described why she would be cautious of matching up families to share nanny care:

I mean if something did happen and we were the person that had matched that nanny with that family ... I don't think I'd want that on my shoulders (Lisa, coordinator of medium size service, regional area).

Before and After School Care in a Child's Home (Bluepointer Model)

The Bluepointers model received overwhelming support with most participants viewing the model as having more strengths than weaknesses. The benefits of this model from participants' perspectives were the requirement for Bluepointers to hold basic qualifications, and most could envisage a group of people (namely students and retired people) who would be willing to work on a casual employment contract for these kinds of hours. While participants were often sceptical that the other models would address a real demand amongst families, most participants believed that service based on the Bluepointer model would address a real need. At the same time, some participants did raise concerns around the cost for families, the low wages offered to Bluepointers, the quality of children's care experiences, and the challenge of retaining employees willing to engage in this kind of employment on an on-going basis.

There were numerous references to how this service could fulfil a demand for flexibility from families, including families needing children to be taken to after school activities on certain days of the week, or for children who do not like after school care and would prefer to be looked after in their own home. A coordinator for a medium size service in an urban area highlighted the benefits of this flexibility:

I think it's that alternative ... if you need five days a week that - well we can mix it up. We can go three days here at an aftercare programme and then [Bluepointers] will take the children to the sport. I think that for a lot of families ... whether that's middle or higher income, I think that that would be ticking a lot of boxes (Carrie, coordinator for a medium size service in an urban area).

Participants explained that under the current Childcare Benefit guidelines, educators cannot pick up a child and take them straight home without providing a session of care. Despite these guidelines, there are many situations when this is all that the parent and child want, and this demand would be met under a Bluepointer model. An educational leader of large service in a regional area elaborated on how this model could cater to children's care preferences:

I know that one of the issues with having school aged children is they don't want to be in care. But if they can be in their own home then the burden of provision of something in a child's own home would be a lot less (Diane, educational leader of large service in a regional area).

Participants felt that this model would also provide greater flexibility in service delivery for families who need this kind of service as a 'quick fix' for instances of one-off care arrangements; essentially, there is an existing demand for baby-sitting services, and this model would meet this demand while maintaining a level of standards. A regional FDC manager described the high demand for babysitting, and the market potential associated with regulating this service:

Babysitting, so really probably there is a good marketing area ... because I imagine there's a lot of that of that going on everywhere ... and it could be an area that could quite easily to pick up or make it more formalised (Brooke, FDC manager in a regional area).

A significant proportion of the participants' discussion focused on how this type of employment would suite university students and retirees. This model of care was seen to appeal to university students seeking a couple of extra hours of employment, who would otherwise be working in a minimum wage job in hospitality, and may prefer the experience of working as a Bluepointer. Similarly, the role of a Bluepointer may meet what certain retirees are seeking in terms of a small additional income, and an opportunity where they could share their childrearing experience and stay in touch with the community. A participant from a medium size service in a regional area summarised these benefits:

I would think that semi-retired [people], they still have so much to offer. Just because they finish working, they could still commit to that three, four, five hours without it impacting on their life and health as well. So I see it as a win-win. I quite like it (Laurie, practice mentor for a medium size service in a regional area).

Participants viewed the fact that Bluepointers had to meet standards of qualifications very favourably. This was contrasted to the proposed Nanny Pilot where it appeared that Bluepointers would have more qualifications than the nannies in this pilot even though the Bluepointers were looking after children for short periods of time while nannies would presumably be looking after children for long periods of time. Participants also approved of the ongoing mentoring and support that the Bluepointers received. Although this model does not meet the standards provided by FDC, participants viewed the Bluepointer qualifications as adequate, as this service is for school-aged children, who are considered competent in voicing any issues with their care to their parents and are therefore less vulnerable in their care arrangements.

The concerns with this model were raised more as considerations to ensure that the positives of this model could succeed. These included concerns that care should not be confused with a "delivery" or "taxi" service. This is related to the Childcare Rebate requiring that there has to be a session of care in order to receive a subsidy.

We don't encourage [educators] to be a taxi service ... It's got to have care attached - it's got to be childcare. But ... we do have parents who want that. So I do see that we would have space for that and I think it's a great idea (Alison, regional area).

There were concerns over the level of qualifications the workers would have, and that it would be important that the proposed standards were maintained. Several participants felt that the hourly rate charged to parents would only be affordable if the family had two or more children and that the difference between the fees (we believe) were paid by families and the hourly wage paid to

Bulepointers was too large. This also led to a concern that Bluepointers may choose to opt out of the service and work directly for the families. Additionally, participants related stories of difficulties they had encountered in the past when trying to maintain workers in relief or temporary care. If the work is infrequent, many workers will not be committed to work in the long term. As one participant recounted:

So my only concern with this would be that would you get enough people who would be prepared just to work for an hour here, an hour there, two hours here, two hours there because it's been our experience that people are looking for more work than that and it's not sustainable. In the beginning if they were keen, keen, keen it worked well for six months and then it peters out because there's not enough work (Irene, regional area).

On-call Care (Emergency Care)

Across the focus groups, there was a consensus that there was at least some demand for on-call care and many coordinators stated that at least one of their FDC educators offered this service. However, participants also raised a large number of concerns regarding the logistics of operating such a model including finding a sufficient supply of workers, and concerns regarding parents' motivations for using this kind of care (e.g. to go to the movies).

Participants provided plenty of situations where parents required this care, and most participants described a high demand for emergency care. Hospitalisation of the child's mother was a commonly given example, with others including court cases, business travel, domestic violence cases and other child safety situations. A couple of participants said they received two to three enquires a month, and another said this was as common as two to three times a week.

I've turned down hundreds of spots in the last 10 years because I'm full and they've rang that morning saying, can you help mum's in hospital and you need a whole day and I can't provide that. That's within just my families that come on a regular basis I can't imagine what would happen if you opened that up to the community as a whole, to extend in emergency situations for that eight hours (Kylie, educator for a medium size service in a regional area).

In contrast, the Educational Leader in Cairns describes demand for this service as low, and could only remember providing this service on three occasions over the past year.

While some participants stated their educators were reluctant to provide this form of care in the Bundaberg participants consistently stated that FDC workers were generally happy to provide this service to help families in need, as FDC is grounded in a community-service ethos. One participant from Bundaberg even described their service as actively marketing 24-hour care as one of the benefits of using FDC as they are authorised to provide this care under the current NQF. Additionally, they viewed offering this service as good for business, with one participant noting that half of the families who use emergency care return to the services if they have a good experience with their particular educator:

... people who come in fresh off the street who are intending to have one off emergency care, they have their emergency care and they think, that was great ... I'm going to come back and I'll have some day care (Irene, regional area).

The most common concern raised was around the logistics of delivering this form of care. Some participants saw the child to carer ratios that are set down in the NQF as a major barrier to allowing FDC educators to deliver on-call care. These restrictions prevent educators from taking on the emergency care of a child if they are already caring for the maximum number of children established under the ratios. One potential solution to this barrier is to employ relief educators. However,

several participants in the Sunshine Coast focus group stated that it was sometimes difficult to employ people on a casual basis (an issue that was also raised in during the discussion of the Bluepointer model). They stated that in the past their services had experienced difficulties with retaining relief educators due to the inconsistent nature of the work:

... we've tried [relief care] and in our area it doesn't work because people want some sort of consistent income so it's so up and down as to what the work would be (Sharon, provider and educational leader for a medium size service in a regional area).

Due to this difficulty in retaining relief educators, it was suggested that the ratio guidelines could be adjusted to allow full-time educators the option of taking on an additional child if an emergency situation were to arise. Lisa describes how this strategy may make the model more viable in terms of maintaining a supply of workers, as educators would not find themselves short of work:

I think probably a way that it could work is if the educators that we have in place at the moment were able to offer emergency care but then with potentially their ratios be an allowed to be expanded for that day (Lisa, coordinator of medium size service, regional area).

Another worry is that the Childcare Voucher only covers up to 14 days of emergency care per child each year, and participants stated that once families had used their entitlement to 14 days of care they typically stopped using this emergency care service.

Participants in the Ipswich and Sunshine Coast focus groups raised concerns about the additional infrastructure they would need to put in place to offer such a service. Specifically, there would need to be a person available to answer these calls, and they would need to know the details and availability of the educators, and there would need to be processes in place to manage the paperwork and financial transactions. A manager of a large service in regional area expressed workforce and resource limitations would make this model difficult to implement:

I'm very much in agreement with most of those models [but] it's the workforce that we don't have. I think there's a place for all of them and a way to make them work, we don't have the infrastructure as a business to do it and we don't have the workforce out there to staff it (Robin, manager, large service in regional area).

Throughout the meetings, participants raised specific suggestions around items that would need consideration including how to ensure that the educator was paid (i.e. taking credit card details), and the need for guidelines to ensure that it was used for genuine emergencies rather than for optional social occasions.

Overall Views on Flexibility

A reoccurring concern in the focus groups was that coordinators were very concerned about the risk and potentially complex logistics associated with taking on new models. The current service delivery context including budget cuts, increased time pressures, and uncertainty around existing government support, appeared to exacerbate coordinators' aversion to potential risk associated with embracing a new model. An educational leader in a regional area outlined these concerns in further detail:

The main thing is really timewise and - like we've already budgeted very tightly for this year. So having to have extra time to be able to write policies and put things in place, that way to be ready to even - to start it. Then to start it - I think I did read there are grants or something out there but to - again it's the hours and the staff to be able to go and do the home checks and meet with the families and advertise - advertise for families as well. Government will probably do a bit of that (Courtney, educational leader in a regional area).

Participants' overwhelmingly negative feelings about the Nanny Pilot influenced the direction of discussion around the combined nanny and group care package. Given that the Nanny Pilot was not going to require nannies to have childcare qualifications participants were very concerned about this issue of qualifications and devoted significant time to discussing the need for those working in childcare to be qualified. Many felt that the combined nanny plus group care model might be viable if nannies held the same qualifications as educators. This proposed model would entail structuring the package so that FDC was the primary source of care, with qualified nannies complementing this service by catering to flexibility needs of families; for example, providing overnight care when required.

The nanny share model generated discussion similar to the nanny and kindergarten package. Participants liked that this model was more affordable than a full-time nanny, and felt that it could be popular with a certain niche of families and that service providers could profit from matchmaking fees. However, participants were also mixed in their opinions on whether there was significant demand for this service, and critical of problems with the structure of this service that led it to be inflexible for families and confusing for liability.

The Bluepointer model received overwhelming support, as participants felt it could meet a very significant demand from families in a way that would cater to their flexibility needs. Participants felt that school-aged children preferred to be looked after in their own home, and appreciated that this model would allow children to attend after school activities that they might otherwise miss out on. Participants favoured the qualifications that the Bluepointer had to meet and felt that students and retirees would be suited to providing In-Home Care in this role. There was some concern that there could be difficulty in maintaining employees in this position, as the work was infrequent.

On-call care was viewed as addressing a need that some families would experience; however, participants' opinions varied regarding the extent of demand for this service. Participants were concerned with how they could go about practically implementing such a service, as it can be difficult to maintain ongoing employees in relief care. A viable solution would be if FDC educators could have their care ratios relaxed so that they could care for an additional child if an emergency circumstance arose.

Conclusions

Policy research suggests that families' demand for more flexible care has increased over time while coordinators' reports suggest that FDC educators' willingness to provide more flexible care has decreased over time in part due to the increased legislative requirements placed on educators who offer 24-hour and overnight care. In the focus groups, coordinators provided feedback on models that might help address these conflicting trends. Overall the focus group findings suggest that there is very significant variation across geographic locations in families' demand for more flexible care and educators' current willingness to provide it. These differences shaped coordinators willingness to offer additional services. In areas where educators were already flexible or there was little demand coordinators were less interested in offering new services. In areas where educators were less willing to offer flexible services, but there was significant family demand then coordinators were more interested in offering new services that would complement FDC. However, coordinators

reported that a key constraint to moving towards embracing new models was the current childcare service delivery context, where budget cuts, increased time pressures, and uncertainty around existing government support generated a high degree of risk aversion. Building on these findings FDC and UQ are currently commencing a new project that will investigate whether services that currently deliver multiple forms of care might be able to better integrate these services to offer more flexible packages of care to families.

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