ABOVE & BEYOND DISABILITY SOLUTIONS

Early Childhood Supports Guidelines

Family-centred, inclusive and evidence-informed supports for children and families

1. Purpose and Scope

These Guidelines set the minimum practice expectations for all Above & Beyond Disability Solutions (AABDS) workers, contractors and relevant practitioners who provide, coordinate, supervise or support early childhood services for children and their families.

They apply across intake, assessment, planning, service delivery, collaboration, review and transition. They must be read together with AABDS policies and procedures relating to participant rights, child safety, consent, privacy, complaints, incident management, risk, workforce screening, restrictive practices, records, infection prevention and continuous improvement.

2. Current NDIS Early Childhood Approach

The NDIS early childhood approach is the nationally consistent approach for supporting children younger than 9 and their families. It focuses on helping children build skills and capabilities, participate in everyday activities and be included in family and community life.

- Children younger than 6 may be supported through the early childhood approach where they have developmental delay, disability or developmental concerns.
- Children younger than 9 with disability may be supported through the early childhood approach.
- A diagnosis is not required for a child to receive help and connections where developmental concerns are present.
- Early childhood partners and the broader service system help families identify appropriate mainstream, community and NDIS-funded supports.
- AABDS does not determine NDIS access. Decisions about access and funding remain the responsibility of the NDIA in accordance with applicable legislation and rules.

3. Our Practice Commitment

AABDS will provide early childhood supports that recognise children as rights-holders and active participants in their own lives. Our practice will be family-centred, child-centred, strengths-based, culturally safe and responsive, trauma-aware, inclusive and evidence-informed.

- Support participation in meaningful everyday life rather than focusing only on impairment or isolated skill acquisition.
- Work with the people and settings that matter to the child, including family, carers, early childhood education and care services, schools, health professionals and community supports, with appropriate consent.
- Use coaching, capacity building and collaboration so that adults and communities around the child can confidently support development and participation.
- Respect each family's culture, language, identity, values, beliefs and priorities.
- Promote the child's voice, communication, preferences, dignity, safety and best interests in a manner appropriate to their age and developmental stage.

- Use the least intrusive and most appropriate intervention, avoid unnecessary duplication and regularly review whether supports remain beneficial and fit for purpose.

4. Legislative and Regulatory Framework

AABDS will comply with all legislation and regulatory requirements relevant to the supports it delivers. Key Commonwealth and Queensland instruments include, but are not limited to:

- National Disability Insurance Scheme Act 2013 (Cth), including the current access and early intervention requirements.
- National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018, including the Early Childhood Supports supplementary module.
- National Disability Insurance Scheme (Quality Indicators for NDIS Practice Standards) Guidelines 2018.
- National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018.
- National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018, where applicable.
- Disability Discrimination Act 1992 (Cth) and associated Disability Standards, including the Disability Standards for Education 2005 where relevant.
- Privacy Act 1988 (Cth), Australian Privacy Principles and applicable health/privacy obligations.
- Child Protection Act 1999 (Qld) and other applicable state or territory child protection and mandatory reporting requirements.
- Human Rights Act 2019 (Qld), where applicable to the organisation's functions and decision-making.
- National Quality Framework and Education and Care Services National Law/Regulations where AABDS operates within, partners with or is otherwise subject to those requirements.
- Any applicable professional registration, health practitioner, workplace health and safety and anti-discrimination legislation.

Where legislation or regulatory requirements change, the more current legal requirement takes precedence over this document and the Guidelines must be reviewed without waiting for the scheduled review date.

5. NDIS Practice Standards – Early Childhood Supports

AABDS aligns its practice with the Early Childhood Supports supplementary module of the NDIS Practice Standards. The following seven practice domains guide this document:

Practice domain	AABDS commitment
The child	Protect rights and safety, promote functional development and support meaningful participation and inclusion.
The family	Respect family expertise, priorities, choice and decision-making; provide understandable information and practical support.
Inclusion	Support access, participation, relationships and belonging in ordinary family, community and education settings.

Collaboration	Coordinate with the family and relevant professionals to reduce fragmentation and work toward shared outcomes.
Capacity building	Build the confidence, knowledge and skills of the child, family, educators and community around the child.
Evidence-informed supports	Use current evidence, professional expertise and family/child preferences, and monitor outcomes.
Outcome-based approach	Plan around meaningful functional outcomes and review whether supports are making a positive difference.

6. The Child

6.1 Rights, voice and best interests

AABDS will recognise that children have legal and human rights. Practitioners will actively seek and respond to the child's communication, preferences and cues using developmentally appropriate and accessible methods. Decisions must consider the child's safety, wellbeing, dignity, rights, developmental needs and best interests.

6.2 Child-safe practice

- Maintain a child-safe organisational culture in which child safety and wellbeing are embedded in leadership, governance and everyday practice.
- Maintain appropriate screening, recruitment, supervision and training arrangements for workers.
- Respond promptly to concerns, disclosures, incidents and allegations involving harm, abuse, neglect, exploitation, discrimination or other risks.
- Follow applicable reporting obligations and AABDS incident, safeguarding and escalation procedures.
- Create physical, online and service environments that are safe, inclusive and appropriate to the child's age and needs.
- Never use humiliating, coercive, punitive or degrading practices.

7. Family-Centred and Strengths-Based Practice

Families are central to a child's life and are recognised as experts in their own child, family context and priorities. AABDS will work in partnership with parents, carers and other people chosen by the family.

- Ask families what matters to them and what is already working well.
- Share information in a clear, timely and accessible way to support informed decision-making.
- Recognise that families decide their preferred level of involvement, subject to the child's rights and applicable legal requirements.
- Build on family strengths, routines, relationships, informal supports and community connections.
- Avoid placing unnecessary responsibility on families; capacity building must be collaborative and achievable.

- Recognise family wellbeing and support needs and provide information or referrals where appropriate and with consent.

8. Culturally Safe and Responsive Practice

AABDS will provide respectful and responsive supports to families from diverse cultural, linguistic, social and community backgrounds. Practitioners will not make assumptions about family structure, parenting, disability, communication or priorities.

- Engage appropriately with Aboriginal and Torres Strait Islander children, families and communities and respect connection to family, kin, culture and Country.
- Use qualified interpreters where required and appropriate rather than routinely relying on children, relatives or friends to interpret sensitive information.
- Provide accessible information and adapt communication to the family's language, literacy and communication needs.
- Recognise the impact of culture, migration, socioeconomic circumstances, disability and other life experiences on access to services and participation.
- Seek cultural advice or support where needed and consented to by the family.

9. Inclusion and Everyday Participation

Inclusion means more than attendance. AABDS will support access, participation, relationships, learning, contribution and belonging in everyday family, community and education settings.

- Identify and address environmental, communication, attitudinal and practical barriers to participation.
- Use reasonable adjustments and collaborative problem-solving.
- Support children to participate in meaningful routines and activities alongside peers where appropriate.
- Work with early childhood education and care services and schools, with consent, to support inclusive practice and continuity.
- Avoid unnecessary segregation or dependence on one-to-one support where capacity building and environmental adjustments can promote sustainable inclusion.

10. Supports in Everyday and Natural Contexts

Learning opportunities will, where appropriate, be embedded in everyday routines, relationships and environments that are meaningful to the child and family. This may include the home, community, early childhood education and care, school and other ordinary settings.

AABDS does not apply a one-size-fits-all 'natural environment' rule. The location and method of support will be selected according to the child's needs, goals, safety, clinical reasoning, family preferences, accessibility and the likelihood that learning will generalise into everyday life.

11. Collaboration and Coordinated Teamwork

AABDS will work as part of a coordinated team around the child, with the family as a valued member of that team. With informed consent, relevant information may be shared with other practitioners and services to support safe, coordinated and non-duplicative care.

- Clarify roles, responsibilities, scope of practice and communication arrangements.
- Use a key worker or lead contact where this is beneficial and agreed with the family.
- Consult with practitioners who have relevant expertise while avoiding unnecessary appointments or conflicting advice.
- Document agreed goals, actions, review points and changes in responsibility.
- Support effective transitions between services and life stages.

12. Capacity Building and Coaching

AABDS will build the capability of the people who spend meaningful time with the child. Coaching and collaborative problem-solving may be used to support families, carers, educators and other relevant people to understand the child's strengths, participate in strategies and adapt everyday opportunities.

Capacity building must respect the family's time, circumstances and choice. It must not be used to withdraw necessary professional support before the child and family are ready.

13. Evidence-Informed Practice

AABDS will use an evidence-informed decision-making process that integrates current and relevant research evidence, professional expertise, clinical reasoning, the child's circumstances and the preferences and priorities of the child and family.

- Practitioners must work within their competence and professional scope.
- Assessment and intervention methods must have a clear purpose and expected benefit.
- Supports must be monitored and adjusted when outcomes are not being achieved or circumstances change.
- AABDS will maintain continuing professional development and supervision appropriate to workers' roles.
- Practitioners will explain material uncertainty, limitations and alternatives so families can make informed decisions.

14. Assessment and Planning

14.1 Initial understanding

Assessment will be proportionate, strengths-based and focused on the child's functioning and participation. AABDS will gather information relevant to the support being provided and avoid unnecessary duplication of existing assessments.

- The child's strengths, interests, communication and functional abilities.
- The family's priorities, routines, resources and concerns.
- Participation at home, in the community and in education settings.
- Environmental barriers and enablers.
- Relevant health, developmental, educational and safety information.
- Existing supports, plans, reports and recommendations, with appropriate consent.

14.2 Outcomes and support plan

Support plans will be developed with the child and family and will describe meaningful outcomes, agreed strategies, responsibilities, review arrangements and how progress will be monitored. Outcomes should be functional, understandable and connected to everyday life.

Where a family chooses not to pursue a recommended strategy, AABDS will respect that choice unless there is a legal or immediate safety requirement requiring another response.

15. Service Delivery, Consent and Information Sharing

- Obtain and document informed consent before commencing services, assessments, information sharing or other actions requiring consent.
- Explain the purpose, benefits, possible limitations, costs and alternatives in a way the family can understand.
- Recognise the authority of parents, guardians and other legally authorised decision-makers while also respecting the child's rights and participation.
- Review consent when circumstances, services or information-sharing arrangements change.
- Only collect, use, store and disclose information that is relevant, authorised and lawful.
- Maintain secure and accurate records in accordance with AABDS information management requirements.

16. Safety, Risk and Restrictive Practices

Risk management will support safety while recognising the child's right to participation, development and reasonable opportunities to learn. AABDS will identify and respond to risks without unnecessarily excluding children from ordinary life.

- Complete and review risk assessments where relevant to the child, support environment or activity.
- Respond to incidents and near misses in accordance with AABDS incident management processes and applicable NDIS reporting obligations.
- Any behaviour support must be positive, person-centred and consistent with applicable NDIS requirements.
- Restrictive practices must not be used unless authorised and implemented strictly in accordance with applicable legislation, rules, behaviour support requirements and AABDS policy.
- Physical intervention must never be used as punishment or for staff convenience.

17. Complaints, Feedback and Advocacy

Children and families have the right to provide feedback, make complaints and access advocacy without fear of disadvantage or retaliation. Information about complaints and external pathways will be provided in accessible ways.

- Receive and respond to feedback respectfully and promptly.
- Provide procedural fairness and document complaints and outcomes.
- Use complaints and feedback as quality-improvement information.
- Inform families of relevant external complaint pathways, including the NDIS Quality and Safeguards Commission where applicable.
- Support families to access independent advocacy or other assistance when requested.

18. Review, Transition and Continuity

Review is an active process rather than a single event. AABDS will review supports when goals are achieved, progress is limited, needs change, the child moves between settings or services, or the family requests a review.

- Review outcomes and participation, not merely service hours or attendance.
- Plan early for major transitions, including commencement or change of early childhood education and care, school transitions, relocation or changes in NDIS pathway.
- Provide a clear summary of progress, current needs and recommendations where appropriate.
- Support warm handovers and coordinated information sharing with consent.
- Ensure families know what supports and contacts are available after transition.

19. Workforce Capability

- Workers must have qualifications, skills, experience and supervision appropriate to their role.
- AABDS will verify required worker screening and professional registration before relevant work is undertaken.

- Workers must complete induction and mandatory training relevant to child safety, NDIS obligations, privacy, incidents, complaints, risk and role-specific practice.
- Early childhood practitioners will maintain current knowledge of child development, disability, inclusion, family-centred practice and evidence-informed intervention.
- Supervision and performance review will include reflection on practice, ethical issues, cultural responsiveness and outcomes.

20. Quality Assurance and Continuous Improvement

AABDS will monitor the quality and effectiveness of early childhood supports using a combination of child and family outcomes, feedback, complaints, incidents, audits, workforce learning and service data.

- Identify trends, gaps and opportunities for improvement.
- Record and monitor improvement actions through the Continuous Improvement Register.
- Review these Guidelines following relevant legislative, NDIS Practice Standards or evidence-based practice changes.
- Involve children and families, where possible and appropriate, in evaluating service quality.

21. Operational Practice Checklist

☐ Confirm the child/family understands the service, access criteria, fees and expected supports.

☐ Confirm consent and decision-making authority relevant to the service.

☐ Identify child strengths, interests, communication and functional participation.

☐ Ask what matters most to the child and family.

☐ Identify risks and safeguards without unnecessarily limiting participation.

☐ Set meaningful, functional and measurable outcomes.

☐ Coordinate with relevant people and services, with consent.

☐ Use evidence-informed strategies within professional competence.

☐ Build family, educator and community capacity where this is wanted and beneficial.

☐ Document progress, concerns, decisions and changes.

☐ Review whether supports are making a meaningful difference.

☐ Plan transitions and closure so families are not left without clear next steps.

22. Key References and Authoritative Sources

- National Disability Insurance Agency (NDIA). Guide to the early childhood approach and associated current guidelines.
- National Disability Insurance Scheme Act 2013 (Cth).

- National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018, current compilation.
- National Disability Insurance Scheme (Quality Indicators for NDIS Practice Standards) Guidelines 2018, current compilation.
- NDIS Quality and Safeguards Commission. Supplementary module: Early childhood supports.
- NDIS Quality and Safeguards Commission. Quality supports for children.
- Australian Government Department of Education / ACECQA. Belonging, Being and Becoming: The Early Years Learning Framework for Australia V2.0.
- Australian Human Rights Commission. National Principles for Child Safe Organisations.
- Disability Discrimination Act 1992 (Cth).
- Privacy Act 1988 (Cth).
- Child Protection Act 1999 (Qld).
- United Nations Convention on the Rights of the Child.
- United Nations Convention on the Rights of Persons with Disabilities.

23. Document History

Version	Date	Summary of changes	Owner	Approval
1.0	Aug 2019	Original document created	Directors	Board
1.1	Oct 2019	Initial review and approval	Directors	Board
2.0	March 2026	Comprehensive update to current NDIS early childhood approach, current Practice Standards, child safety, legislation and contemporary early childhood practice	Directors	Board / Directors