Glenelg Transition Project

STEPPING STONES TO SCHOOL
2015 - 2016
Report Summary

The project’s aim was to ensure the integration of services to provide a more cohesive transition support for families with children making a transition from Kindergarten to Primary School.

Bernadette Tapscott
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Overview</td>
<td>2</td>
</tr>
<tr>
<td>Role of Transition Worker</td>
<td>4</td>
</tr>
<tr>
<td>Phase One</td>
<td>7</td>
</tr>
<tr>
<td>Phase Two</td>
<td>34</td>
</tr>
<tr>
<td>Recommendations</td>
<td>58</td>
</tr>
<tr>
<td>References</td>
<td>62</td>
</tr>
</tbody>
</table>
The aim of the program was to build the capacity and connection between stakeholders and families to ensure children are ‘school ready’ and able to make a smooth transition from kindergarten to primary school.
Project Overview

Project Overview

The Glenelg Transition Project was specifically designed to address the Beyond the Bell goal to improve year 12 or equivalent through a better alignment of the early childhood, kindergarten and primary sectors with the aim of improving transition into primary education.

The Stepping Stones To School Program was a concept of the Kindergarten / Foundation network supported by Portland principals group for the Glenelg Beyond the Bell Local Action Group. It was funded by the State Trustees Australia Foundation.

The project brief was developed and managed by Portland South principal and Glenelg and Southern Grampians Local Learning and Employment Network Executive Officer for the Glenelg Beyond the Bell Local Action Group.

Program Aims

The aim of the program was to build the capacity and connection between stakeholders and families to ensure children are ‘school ready’ and able to make a smooth transition from kindergarten to primary school by

• Identifying early children with developmental delays before they begin school
• Strengthening connections with parents, raising understanding of the developmental milestones and expectations required for successful transitions
• Discussing the individual needs of their child, and support practitioner advice around whether their child is developmentally ready to transition.
• Ensure appropriate transition information is available so that resources are in place at schools when the child commences

Stakeholders

All kindergartens:

Good Start Kindergarten
Elsa MacLeod
“The Hub”

Kalbarri Kindergarten
Jaycee Kindergarten
Heywood Kindergarten

All government primary schools in Portland and Heywood:

Portland South Primary School
Portland North Primary School
Bundarra Primary School
Heywood Consolidated School

Portland Primary School
Bolwarra Primary School
Narrawong Primary School

A child’s Early Years is highly recognized as a period where a significant impact can be made on their later outcomes in education and life.
Role of Transition Worker

The role of transition worker has been to build the capacity and connection between providers and families to ensure children are ‘school ready’ and able to make a smooth transition from kindergarten to primary school, including parental permission for exchange of information between sectors. To achieve this we have worked directly with:

Kindergarten Service Providers to:

- Create positive partnerships with Kindergarten Teachers and a clear understanding of the projects goals and potential to assist them in school transition
- Connect with parents and offer assistance / guidance in their child’s transition to school
- Gain an understanding of the children attending services through observation and involvement
- Investigate the most effective approach that will ensure relevant information regarding interventions for children is passed onto schools through the Transition Learning and Development Statements
- Clarify understanding of the current Early Years Learning & Development Framework (EYLDF), Transition Statements and the School Transition Process
- Determine what Kindergarten Educators define as “School Readiness”
- Collect data relevant to the project

Primary Schools to:

- Create positive partnerships with Foundation Teachers and a clear understanding of the projects goals and potential to assist them in school transition
- Gain an understanding of their Transition Programs
- Identify what Foundation Teachers consider the deficits / issues in the current transition process
- Develop pathways for effective collaboration with Kindergartens and Other Professional to ensure appropriate transition information is available so that resources are in place when children commence school
- Determine what School Educators define as “School Readiness”
- Collect data relevant to the project.
Families across settings in order to:

- Ensure early identification of children with developmental delays before they begin school
- Strengthen connections with parents, raising understanding of the developmental milestones and expectations required for successful transitions
- Discuss the individual needs of their child, and support practitioner advice around whether their child is developmentally ready to transition.
- Ensure appropriate transition information is made available so that resources are in place when their child transitions to school.

Service Providers from Various Sectors

- Pre School Field Officers
- Inclusion Support Officers
- Koorie Engagement Support Officer
- Portland District School Support Services
- Portland District Health – Allied Health - Occupational & Speech Therapists
- Maternal Child and Health

Supporting Data Sources

- Australian Early Development Census
- Foundation Reading Assessment
Phase One

Perception of Project
The project was both welcomed and supported by Kindergarten Educators and School Foundation Staff. Kindergarten educators indicated that an additional support person for families would be of value and readily made information regarding the role and availability known to parents. Schools indicated that additional support to ensure that appropriate information regarding a child’s developmental delay and interventions by other professionals during kindergarten would be beneficial for a smooth and effective transition and essential for any students eligible for the Program for Students with a Disability (PSD) applications. Heywood Consolidated Primary School and the Heywood Kindergarten indicated that they have a strong relationship and being the only school and Kindergarten in the Heywood township the children from the Kindergarten transitioned to Heywood Consolidated Primary School. Although both readily provided data for the project, provided parents with information about the role and information regarding the School Readiness Forums for parents, there were no staff from either facility in attendance at the School Readiness forums or Kindergarten / Foundation Network meetings. Both Schools and Kindergartens were very supportive of parents having the opportunity to be presented with information regarding “School Readiness”. Both sectors identified ‘difficulty’ in creating connections with vulnerable families.

Connections with Families
Parents were provided with an information sheet that indicated the role of transitions worker and availability to meet with them and included a permission form allowing me to observe their child within the Kindergarten setting. Staff from the Kindergartens had conversations with parents regarding the role in an effort to assist in the ability to create connections and to ensure that those they felt would benefit from project involvement were aware of the opportunity available.

- Of the 5 Kindergartens in Portland connections were able to be made with 3. Within those 3 Kindergartens connections were developed with 2, 4 & 2 parents. Although it was anticipated that there would be a greater number of connections with families, staff indicated that due to it being term 4, the majority of parents had already made their school selections for 2016.
- There were no connections made with parents from the Heywood Kindergarten. Staff believed that this was due to the fact that all of their students were attending Heywood Consolidated and that the school offered an extensive and effective Transition to School Program.
At each of the facilities parents and children would arrive by vehicle and the only opportunity to informally meet them was at the Kindergarten during the drop off and collection period. A combined Kindergarten Parents coffee morning at McDonald’s was offered but this was not successful with only 3 parents attending.

Possible Explanations For Lower Than Expected Connections

When reflecting on why it was difficult to create connections with parents the following conclusions were drawn:

- Due to the project commencing in term 4 when parents have already enrolled their child in school for 2016
- Parents lack of understanding regarding the importance of “School Readiness”.
- Parents not accepting that their child has a developmental delay or diagnosed condition.
- Parents wanting their child to have a “fresh start” at school with many believing they may not encounter the same issues in the new setting.
- The fact that families see it a natural and inevitable transition to move from Kindergarten to School and are unaware that there are options that will create better opportunities for their children’s academic achievement.
- Vulnerable Families in particular have proven difficult to make connections with. Possible reasons may include their own experiences of education, their health and wellbeing, lack of confidence about their own skills and abilities, lack of trust and confidence to share personal family information, a perception that nothing makes a difference.
- Four children with diagnosed conditions were attending a non-government school and so a connection was not developed.
Outcomes of Family Connections Made

Connections were made with 8 families that had a variety of reasons for seeking support and guidance.

Family One

The child in this family had a diagnosis of Autism and the parent was proactive in her approach to seeking assistance to make the transition to school as effective as possible. I participated with her in a session called “Planning Successful Transitions to School for Students with Autism Spectrum Disorder” that was arranged by School Support Services Speech Pathologist Caroline Shepherd. I cannot speak highly enough of this collaborative workshop it was comprehensive, explicit and successful for all involved. As a result all parties had a common understanding of where the child was at, what to expect and where they were headed. The child’s transition into foundation in 2016 was a positive and effective experience.

Family Two, Three & Four

The parents of these children had concerns regarding “emotional maturity”. In two of the cases the Kindergarten had recommended a second year, the families chose to send their children to school as a direct result of being encouraged by the school principal that the school and staff were well equipped to cater for the children. Although these children have settled into school well, they are the youngest of their class turning 5 in April this year and are not achieving at the academic rate of their older peers. The third child repeated Kindergarten after the parent was encouraged to meet with another parent who had the same decision to make about their child having a “bonus” year at Kindergarten the previous year.

Family Five

This family were concerned about the effect that the size of a school has on a student’s potential to succeed. They were encouraged to talk to other parents they knew at schools and we had discussions about what “School Readiness” meant, the benefits of attending the nearest school and the total educational experience where the child would eventually transition to secondary school.
Family Six & Seven

These families were concerned about their child’s social group as they believed that there were not many children from their kindergarten enrolled at their chosen school. Discussion with these parents was centered on school readiness, neighborhood boundaries for government schools, as promoted by Portland / Heywood & District Primary Principals Collegiate Group and it was highlighted that at this age children are very ego centric and it could never be guaranteed that children will retain the same Kindergarten social group when they commence school. Both families went on to choose the school based on their initial thoughts and felt more comfortable that their children would make new friends.

Family Eight

This family were Guardians of a sibling child, expecting their first child at the commencement of the 2016 year and were concerned how the arrival of their child would impact on a smooth transition to school. The school offered additional visits for the child to ensure confidence in being dropped off and picked up, a connection was created with another parent to provide the opportunity to assist in school drop off and pick up and it was suggested that further guidance be sought from Maternal Child Health. Unfortunately the relationship did not last, the couple separated and the child’s attendance at school was irregular for term 1. Another relative has taken responsibility for the child and attendance has improved towards the end of term 2.
Positive Outcomes

- To address the lack of opportunity for parents to develop a clear understanding of “School Readiness” a Parents Information Night was arranged. Educators from both Kindergartens and Schools prepared talks on topics related to school readiness to deliver on the night, with all willingly participating. The evening was held at the Portland Secondary College Hospitality Centre, parents were made aware of the event through the Kindergartens and schools by verbal contact and a flyer was distributed with their newsletters and an article was placed in the local newspaper. Unfortunately there was a limited attendance by parents on the night with only 8 parents attending. The positive outcome was that the Kindergarten and school educators gained a greater understanding of what they each understood as school readiness and worked collaboratively towards achieving a specific goal. It was agreed that the time of year was a potential barrier to parents attending, combined with the fact that parents had already enrolled their children in school for 2016.

- Families with whom connections were made indicated that they appreciated the opportunity to have an independent person to talk to regarding their concerns.

- To gain a deeper understanding of the Kindergartens Framework the transition worker applied to participate in a program being offered by the Great South Coast Early Years Network in 2016. The program “Assessment For Learning – Supporting Early Years Networks” was facilitated by Debbie Cole and Sharyn Trewin at Deakin Warrnambool City Campus and comprised of 5 full day sessions commencing in February and concluding in September. This program has been beneficial in providing an environment to work collaboratively with a variety of Kindergarten providers in our area and has assisted in gaining a much deeper understanding of their Framework and Assessment.

- Both Kindergarten and School Educators were open and honest about the issues that they perceived as impacting collaboration between their services. There are significant areas that need to be further addressed to achieve the aim of this project. These will be listed in identified issues.

- School Support Services Speech Pathologist, Caroline Shepherd, provides an excellent transition program for children who are diagnosed with Autism Spectrum Disorder. The transition worker attended such a program to support the parent and child and was impressed with how comprehensive and effective it was.
Identified Issues

There were a number of issues identified as a result of the project, these will be addressed in three categories. The first is related to parents and their child, the second Kindergarten and School Educators and the third Other Service Providers.

1. Parents and Children

Issues having a direct effect on parents’ making the decision for their child to transition to school.

ISSUE: Costs involved in repeating a year of Kindergarten are high and the process to access an additional years funding is difficult. A child’s emotional development directly effects their school readiness, however this factor has been removed as an indicator in applications for second year funding. Families also indicated that their financial position and the expiration of maternity leave from work were additional reasons they would choose to send their child to school. Childcare expenses are far higher than school fees.

ACTION: Explore why “emotional development” has been removed as a criteria for funding of a second year of Kindergarten. The Australian Early Development Census (AEDC) makes the following reference to the category Emotional Development as a result of their data collection, “The number of children developmentally vulnerable in the emotional maturity domain has fluctuated over time. It decreased from 8.9 per cent in 2009 to 7.6 per cent in 2012, then increased to 8.4 per cent in 2015. As emotional maturity is a significant indicator of school readiness it is of concern that it is no longer considered criteria for allowing a second year of Kindergarten.

ACTION: Explore the opportunity for the Maternal Child Health Service to assist in this area by having discussions with parents regarding the importance of a child’s emotional development and the implications of delaying starting Kindergarten as opposed to requiring a second year of Kindergarten. The Early Life Foundation provide a parent information sheet on School Readiness that supports the importance of a child’s “emotional development”, this may be a useful link for Maternal Child Health to provide to parents. The Royal Children’s Hospital provides further evidence of the importance of the role of Community Health Care Professionals in supporting Literacy In Early Childhood They also provide considerations for policy and programs.
**ISSUE:** Parents are unaware of the role and their access to the Pre School Field Officer.

Parents who the transition officer spoke to were not aware that they could ask for an assessment of their child from a Pre School Field Officer and those who were aware of the role were of the understanding that it was only for children with a disability.

**ACTION:** Kindergartens raise awareness of the role of the Pre School Field Officer to all parents when they enroll their child and during the year.

**ISSUE:** Parents feel a sense of failure if their child repeats a year of Kindergarten, were concerned about how they as parents and their child would be perceived by their extended family and other parents and had concerns about implications a second year of Kindergarten would have on their child’s social group.

**ACTION:** Kindergartens could provide opportunities for parents who have chosen for their child to have a second year of Kindergarten to be advocates regarding the benefits this had for their child through a combination of articles in Newsletters, informal and/or formal discussions at their information nights and articles in the Education News section of the local paper.

**ISSUE:** Schools too readily encourage parents to enroll their child in an attempt to raise their enrolment numbers. This is an area of concern that has been identified to only one school.

**ACTION:** Ask the Principal group to consider the issue as raised by parents and question if they indeed refer parents with concerns to have further conversations with their Kindergarten Educators, as they are the professionals who have the greatest contact with the child and so have the greater knowledge regarding their development and suitability to make the transition to school. Raise the question if there is a need for collaboration between school principals and Kindergarten Educators in this area of “parent conversations” regarding school transitions.
**ISSUE:** Vulnerable families have a lack of trust / confidence to engage with educators regarding their child’s transition to school. They have a sense that there is an unchangeable progression of 3 year old Kindergarten - to 4 year old Kindergarten - to School.

**ACTION:** This has been an area of engagement which was difficult during the project.

The transition officer documented an article from The Royal Children’s Hospital Melbourne, their Centre for Community Child Health is at the forefront of research into Early Childhood development and behavior. They are committed to translating their research into policy, service delivery and practice and their Policy Brief No 18 deals with Engaging Marginalised & Vulnerable Families.

The Department of Early Childhood and Education’s document *Victoria’s Vulnerable Children: Our Shared Responsibility Strategy 2013-22* is also an important document for further consideration regarding how to engage vulnerable families.

**ISSUE:** Through the provision of a letter “Enrollment for School” parents are encouraged by the Portland/Heywood & District Principals Collegiate Group to arrange a tour of schools of their choice and meet the people who will be working with them to educate their child. The information indicates that the Principal will give you a tour of the school and answer parent’s questions.

The delivery of this written information does not take into account that there are families that have literacy issues and may not be able to read the information. This method of information delivery may cause marginalized and vulnerable families to not explore their options at all.

For the majority of parents written documentation is an appropriate option and in the past it has been unsuccessful to arrange for individual principals to attend parent information sessions at Kindergarten facilities or to have them deliver individual information packs about their schools to Kindergartens.

**ACTION:** Kindergarten Educators are aware of the majority of families who may fall into this category and make every attempt to share the information verbally. Further options in point one of the next section.
2. Kindergarten & School Educators

During this phase of the program a number of issues facing Kindergarten and School Educators were identified.

**ISSUE:** Through the process of “Enrollment for School” parents are encouraged by the Portland/Heywood & District Principals Collegiate Group to arrange a tour of schools of their choice and meet the people who will be working with them to educate their child. Indicating that the Principal will give you a tour and answer questions. Some parents have suggested that Principals and Vice Principals are not necessarily the most appropriate advocate for their school, as they believe the Foundation teachers have the “hands on” experience and knowledge to answer parent’s questions and concerns. It is acknowledged though that the School Tour is deemed appropriate to inform the parent of the Total school culture not simply a guide to the Foundation year.

The DEECD document Policy Brief No 18 Engaging Marginalized & Vulnerable Families, identifies that such families may not feel comfortable to make the connection with the Principal.

**ACTION:** Schools could collaborate to provide an Open Day Experience for parents of children enrolling their child in the Foundation Year, this could be held during Education Week as a Highlight to the week for parents to explore their options.

**ACTION:** The Glenelg Shire Council, through their Child Services Department, could develop an initiative to be held during Education Week. This could be a combined school collaborative provision of access to Foundation Teachers from all schools to provide parents with the opportunity to ask questions and clarify their expectations about school.

It would also be an opportunity for parents who have had a child repeat 4 year old Kindergarten to be advocates regarding the benefits of that option.

Either of these ideas may also be a message to parents that our schools work together to provide the best outcomes for all children.

**ISSUE:** The current Time Line for both Kindergarten and School Enrollments does not appear to be appropriate for all parties. Throughout the State foundation enrollments are called for during Education Week which occurs in mid-term 2. The Glenelg Shire Council calls for an Expression of Interest for parents to
enroll their children for the following year of Kindergarten at the start of term 2. Considering that children have had one term of Kindergarten it places considerable pressure on Kindergarten Educators to have had conversations with parents about the possibility of their child benefiting from a second year kindergarten. Parents in turn are pressured to be making decisions earlier than is really necessary. The brief time also places undue pressure on the role of the Pre School Field Officer to attend all services and provide comprehensive assessments.

**ACTION:** Lobby the DEECD for Education week to occur at the start of term 3 so as to allow Kindergartens a more appropriate time line for discussions with parents regarding their child’s need for a second year of Kindergarten.

**ACTION:** Discussion with Glenelg Shire Council, Karen Meyrick Team Leader Education and Care (Kindergarten Cluster) regarding timeline for Kindergarten enrolment.

**ISSUE:** The “Transition Learning and Development Statements” that are prepared by Kindergarten Educators and parents for each child and provided to the school the child is enrolled in have a number of significant identified issues that directly effect a smooth transition for the children to school.

The following transcript regarding these statements is taken directly from the Department of Education and Early Childhood Development (DEECD) website:

*Part of supporting your child to have a positive start to school includes you and your child’s early childhood educator completing a Transition Learning and Development Statement (‘statement’). This is designed to be given to your child’s new school. The statement summarises your child’s strengths and abilities as they start school, identifies their interests and tells your child’s prep teacher how they can continue to support your child’s learning and development. The statement consists of two parts: one for you, the family, to complete (Part 1 – Sections A, B & C) and one for the early childhood educator (Part 2). Part 1 - Section C is for families of children with additional learning and developmental needs, a disability or developmental delay to record information on the additional services involved or other important information the school should know.*

Some parents fail to complete their sections, fail to provide permission for the early childhood educator to discuss information in the statement with the child’s Foundation teacher and many also fail to complete Part 1 – Section C, it is noted that Section C is optional.

This highlights the following questions:

• Do parents need additional guidance on the importance of these documents and how to complete them?
• Are parent literacy skills an issue completing these documents?
• Should Section C be an option?
• When providing school tours do the schools indicate to parents that the information in these statements is of value to them in being able to plan for their child commencing school?

**ACTION:** Schools could include a document similar to Section C in their enrollment packages to be sure they have such critical information recorded before a child commences school. This document could also include parental or guardian permission for the school to have a discussion with the relevant professionals who have worked with the child.

**ISSUE:** The statements do not have any form of attendance record for the child which can be very relevant history for the school. However two of the five Kindergartens do include this information by stating a child “regularly” attends.

**ACTION:** Conversation between the Kindergartens and schools to include such information.
ISSUE: All Kindergartens indicated that even when they request the opportunity to discuss information further with the Foundation teachers, they are never contacted.

ACTION: Schools should provide the professional courtesy of making contact with the Kindergarten Educators. Failing to do so clearly indicates teachers not valuing their professionalism or the statement.

ISSUE: The project was not able to legally access Kindergarten records that indicated children had been seen by therapists without parent consent. Kindergarten staff were only able to suggest that this permission be given but this was not a success. Transition statements were not provided to the schools until the end of the term and if parents had not indicated on these that their child had been seen by a therapist then there was no alert to the staff of a need. Where parents had indicated that their child had been seen by a therapist, the school is still required to request consent from the parent to contact the agency involved for further information regarding that intervention.

ACTION: Schools need to have parents complete a form similar to Section C as part of enrollment. Schools need to read the Transition Statements prior to the end of the year and immediately request information from any therapists involved.

None of these children had any indication on their Transition Statements as needing or having had speech assessments.

ACTION: Consideration could be given to Kindergartens having a blanket permission form allowing the Pre School Field Officer to observe all children in their setting to avoid any children slipping through the system without their needs.

ACTION: Consideration could be given to Kindergarten being compulsory so that every child is seen on a regular basis over a lengthy period.

ACTION: Schools and Kindergartens initiate a Reciprocal Visit Program so that Foundation teachers have the opportunity to interact with children and potentially identify children who in their professional opinion may require an assessment regarding their development.
ISSUE: I was asked by a Kindergarten to assist them with an Aboriginal child who had poor attendance as they were concerned he would not attend the transition program at Portland Primary where he had been enrolled. The workers were not able to make contact with the parent and so in conjunction with the school the Koori Education Support Officer (KESO) Di Bell was asked to assist. The child did attend part of the transition program and Di remained involved to assist the family. The school are proactive in their efforts to engage with and support Aboriginal families as they have a 16% Aboriginal enrolment.

ACTION: Explore how the Aboriginal Community can be supported to ensure their children’s attendance at Kindergarten and school.

3. Other Service Providers

Speech & Occupational Therapists

Kindergartens are required to seek the assistance of Portland District Health Occupational and Speech Therapists to assess children and provide therapy. When finishing the year at kindergarten children receiving speech therapy are signed off. Under severe circumstances they will be carried over for the first term of school. Occupational therapy services are continued on to the school setting. Both of these services reach capacity quickly with referrals for assessments, this reduces the capacity to provide therapy sessions. Currently there is a 3 month waiting period for non-urgent referrals.
ISSUE: There is a deficit of speech and occupational therapists available to our Kindergartens for children to be provided with timely and effective assessment and therapy.

ACTION: Assisted by PHD Allied Health Staff I was made aware of a Community Health Program in Gippsland Lakes ‘Active Lorikeets – addressing readiness for school entry’. This is a model worthy of consideration for the Glenelg Shire. A report of this also appears in Appendix A

ACTION: As the DEECD do not employ an Occupational Therapist at the School Support Service and there is evidence of an increased need in this area, there would be significant benefit to exploring an initiative such as ‘Active Lorikeets’.
## GAP Analysis of Speech & Occupational Therapy Allied Health Team at Portland District Health

<table>
<thead>
<tr>
<th>Current State</th>
<th>Future State</th>
<th>Gap</th>
<th>Gap Description</th>
<th>Factors Responsible</th>
<th>Proposal</th>
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<tbody>
<tr>
<td><strong>PDH Allied Health Team</strong> has a full time Speech Pathologist providing assessment and therapy to Kindergartens</td>
<td>Increase access and efficiency of PDH Allied Health to meet the number of referrals made by Kindergartens for assessment and therapy</td>
<td>Yes</td>
<td>The number of requests for assessment and therapy are greater than the current service capacity</td>
<td>Insufficient staff to meet the current client needs</td>
<td>An additional PDH therapist is required to meet the current number of Kindergarten referrals</td>
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<td>An increase in the number of referrals being made</td>
<td>Funding be sought for Kindergartens to have PDH Speech Pathologist to set up articulation programs to be delivered by an allied health professional. This would require the Speech Pathologist to periodically revise the programs as needed// PDH Website &amp; DHHS Better Health Channel</td>
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<td>Current client protocol does not result in timely continuity of service.</td>
<td>Funding be sought to pilot a project similar to Gippsland Lakes Community Health -Active Lorikeets Addressing Readiness for School Entry Program with Allied Health Assistants to implement on site</td>
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<td>The number of referrals for services is greater than the capacity of one speech therapist</td>
<td>Progress partnerships with other services to improve outcomes for clients by co-provision of referral pathways and prioritisation based on individual client needs GPMP &amp; Teachers</td>
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<td>The PDH Allied Health Speech Therapist Service ceases when the kindergarten client enrols in school and records remain the property of the service.</td>
<td>For there to be continuity of service between the PDH and School Support Services that allows for client information to be shared with parent consent so that they may continue their therapy in term one of the school year</td>
<td>Yes</td>
<td>Client cases do not have continuity between Kindergarten and school which results in therapy being halted until a referral is made to the School Support Services Speech Therapist</td>
<td>Current client protocol does not result in timely continuity of service for the client</td>
<td>An additional PDH therapist is required to meet the current number of Kindergarten referrals in partnership with DHHS, Access through intake services and prioritisation needed</td>
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<td>Disconnect EDA &amp; DHHS programs implemented</td>
<td>Funding be sought to pilot a project similar to Gippsland Lakes Community Health -Active Lorikeets Addressing Readiness for School Entry Program with</td>
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<tr>
<td>PDH Allied Health Team has a full time</td>
<td>Increase access and efficiency of</td>
<td>Yes</td>
<td>The number of requests for</td>
<td>Insufficient staff to meet the current</td>
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| Occupational Therapist providing assessment and therapy to Paediatric clients in the community (including Home and Community care- HACC), day care centres, kindergartens, primary and secondary schools and Adult clients in the Health Rehabilitation programs. | PDH Allied Health to meet the number of referrals made by Kindergartens for assessment and therapy | assessment and therapy are greater than the current service is able to provide Need to create a casual bank at PDH With 1 full time DHHS The current therapist has indicated an increase in cases of low upper body strength and bilateral integration impacting hand skills. | client needs An increase in the number of referrals being made The number of referrals for services is greater than the capacity of one occupational therapist | Allied Health Assistant, OT Paediatrics through a partnership with: Allied Health Assistants Services Portland District Health Glenelg Shire Council Beyond The Bell |
School Support Services

DEECD have a School Support Service in Portland that employs a full time Speech Pathologist. Servicing all of the State Schools in the Portland / Heywood district results in a beyond capacity case load for one therapist. As a result there is a waiting period for assessment and when assessed students are provided with a home program and the program monitored periodically. The enormity of the caseload does not allow for the Speech Pathologist to provide regular therapy sessions within the school settings, however with the limited time she has available excellent support and guidance is provided to staff regarding those students who have been assessed. It is at the schools discretion that school based programs are implemented. The SSS Speech Pathologist provides an excellent Transition to School Program for students with Autism Spectrum Disorders. There is a significant need for increased assistance to be provided to the Speech Therapist so that therapy can be provided in schools. Issues identified in assessments and not effectively addressed through therapy results in student achievement and engagement being reduced and indeed compounding as the child moves from grade to grade. This is an area that urgently needs to be addressed to achieve the Beyond the Bell Goal “to improve year 12 or equivalent through a better alignment of the early childhood, kindergarten and primary sectors with the aim of improving transition into primary education.”

*Data below from AECD indicates a significant rise in the language domain for Portland, which supports the above suggestion that additional support is necessary.*
Diagnosis of Specific Disorders

- **ISSUE:** There are no local services that are able to make complete a diagnosis for conditions such as “Autism Spectrum Disorder”. M Power and Gateway can assist parents with this issue but parents still have to have the additional stress of lengthy waits for appointments, transport and cost. There is also limited emotional support for parents, who often find acceptance of their child needing and/or receiving diagnosis of conditions difficult.

**ACTION:** Explore options for PDH to be able to provide services on a part time.

Pre School Field Officers

There is one Pre School Field Officer (PFO) for the Portland Cluster. It has been indicated by Kindergarten Educators that they feel they would benefit from additional assistance from the PFO and this issue needs to be raised with the Team leader Karen Meyrick. The PFO works directly with children, families and specialists and their role could be further investigated to explore potential for them to be involved in how children's information can be provided to schools.

There is a need for there to be discussions within the Kindergarten Cluster to address concerns that Kindergarten Educators have identified as a result of the Stepping Stones Project.

The findings of the Project could be discussed with the Team Leader to gain her opinion and insights.

Department of Education and Early Childhood Development

DEECD governs both Kindergartens and Primary Schools however there is no common link between the two. Inclusive governance would be beneficial to both parties. It would allow for continuity between the services, sharing of information and opportunity for collaborative Professional Development. Such a link would have the potential for improved community engagement as parents would not see them as totally separate services. The DEECD census data does not include Kindergartens, such data would create beneficial knowledge and understandings that would assist all educators in program planning and delivery. Data regarding Pre-School in Australia does exist on the Australian Bureau of Statistics, however inclusion in AECD and DEECD census would be beneficial.
Local Data

Enrollment in Kindergartens in 2015
Elsa Macleod = 54  Jaycee = 48  Kalbarri = 29  Goodstart = 24  Hub = 13  Heywood = 27  TOTAL 195

Transition to School Data

<table>
<thead>
<tr>
<th>Area</th>
<th>Portland Bay</th>
<th>South PS</th>
<th>Bundarra PS</th>
<th>Portland Primary</th>
<th>North PS</th>
<th>Bolwarra PS</th>
<th>Narrawong PS</th>
<th>Heywood Consol.</th>
<th>Private Repeat Kinder</th>
<th>Left Area</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>3</td>
<td>29</td>
<td>23</td>
<td>38</td>
<td>17</td>
<td>9</td>
<td>29</td>
<td>36</td>
<td>2</td>
</tr>
</tbody>
</table>

Australian Early Development Census

In 2009, Australia became the first country in the world to collect national data on the developmental health and wellbeing of all children starting school. The success of the 2009 data collection laid the foundation for the Australian Government’s commitment to ongoing Australian Early Development Census (AEDC) data collection cycles. The second collection occurred in 2012 and the third in 2015. The AEDC measures the development of children in their first year of full-time school. AEDC data is collected using an adapted version of the Early Development Instrument, which was developed in Canada. The Australian version of the Early Development Instrument consists of approximately 100 questions across five key domains, which are closely linked to child health, education and social outcomes.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Domain Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Health &amp; Wellbeing</td>
<td>Children’s physical readiness for the school day, physical independence and gross and fine motor skills</td>
</tr>
<tr>
<td>Social Competence</td>
<td>Children’s overall social competence, responsibility and respect, approach to learning and readiness to explore new things</td>
</tr>
<tr>
<td>Emotional Maturity</td>
<td>Children’s pro-social and helping behaviors and absence of anxious and fearful behavior, aggressive behavior and hyperactivity and inattention</td>
</tr>
<tr>
<td>Language and Cognitive Skills</td>
<td>Children’s basic literacy and interest in literacy. Numeracy and memory, advanced literacy and basic numeracy</td>
</tr>
<tr>
<td>Communication &amp; general Knowledge</td>
<td>Children’s communication skills and general knowledge based on broad developmental competencies and skills</td>
</tr>
</tbody>
</table>
Developmentally Vulnerable: below the 10th percentile

Developmentally At Risk: between the 10th & 25th percentile

Developmentally On Track: above 25th percentile

The largest shift in the proportion of developmentally vulnerable children between the two most recent collections occurred in the emotional maturity domain, from 7.6 per cent in 2012 to 8.4 per cent in 2015. This remains below the 2009 level (8.9 per cent).

The pattern for the proportion of developmentally at risk children was similar, starting at 15.5 per cent in 2009, decreasing to 14.2 per cent in 2012, then increasing in 2015 to 15.3 per cent, just below the 2009 level.

The initial increase in the proportion of children developmentally on track from 2009 (75.6 per cent) to 2012 (78.1 per cent) was not sustained, and whilst it fell back to 76.4 per cent in 2015, it remains above the 2009 level.

After decreasing from 9.5 per cent to 9.3 per cent from 2009 to 2012, the proportion of children developmentally vulnerable on the social competence domain increased to 9.9 per cent in 2015. There was a similar pattern for the proportion of children developmentally at risk, falling initially from 15.2 per cent in 2009 to 14.3 per cent in 2012, before increasing to 15.0 per cent in 2015.

The overall proportion of children developmentally on track in 2015 (75.2 per cent) is slightly higher than in 2009 (75.4 per cent).
The above data clearly indicates that the Shire of Glenelg has a deficit in 4 of the 5 areas, with 3 of the 5 well above the Australian and Victorian statistics. Heywood stands out in both the social and emotional areas and indicating a clear deficit of children vulnerable in at least one domain and again well above the national and state statistics for children vulnerable in 2 or more areas. Portland and surrounds is slightly above the national and state statistics in the area of emotional development and significantly higher in language development.

In the domain of Social Competence being Developmentally Vulnerable indicates the child will experience a number of challenges in the following areas: poor overall social skills.

For example children who do not get along with other children on a regular basis, do not accept responsibility for their own actions and have difficulties following rules and class routines.

Children may be disrespectful of adults, children, and others’ property; have low self-confidence and self-control, do not adjust well to change; and are usually unable to work independently.

In the domain of Emotion a child who is Developmentally Vulnerable Developmentally vulnerable will experience a number of challenges related to emotional regulation. For example problems managing aggressive behaviour, being prone to disobedience and/or easily distracted, inattentive, and impulsive. Children will usually not help others and are sometimes upset when left by their caregiver.

In the domain of Language a child Developmentally Vulnerable will Experience a number of challenges in reading/writing and with numbers; unable to read and write simple words, will be uninterested in trying, and often unable to attach sounds to letters. Children will have difficulty remembering things, counting to 20, and recognising and comparing numbers; and usually not interested in numbers.

In the Physical Domain a child who is Developmentally Vulnerable will experience a number of challenges that interfere with their ability to physically cope with the school day. This may include being dressed inappropriately, frequently late, hungry or tired. Children are usually clumsy and may have fading energy levels.
The above data provides alarming statistics for the Glenelg Shire, with all areas above the National and State statistics. Portland showing a clear deficit in the areas of physical, social and communication. Heywood indicating a significant area of concern being the emotional category.

In the Physical Domain a child who is Developmentally at Risk will experience some challenges that interfere with their ability to physically cope with the school day. This may include being dressed inappropriately, frequently late, hungry or tired. Children may also show poor coordination skills, have poor fine and gross motor skills, or show poor to average levels of energy levels during the school day.

In the domain of Social Competence being Developmentally at Risk indicates the child will experience challenges in the following areas: getting along with other children and teachers, playing with a variety of children in a cooperative manner, showing respect for others and for property, following instructions and class routines, taking responsibility for their actions, working independently, and exhibiting self-control and self-confidence.

In the Domain of Communication being Developmentally at Risk indicates a child may have mastered some but not all of the following communication skills: listening, understanding and speaking effectively in English, being able to articulate clearly, being able to tell a story and to take part in imaginative play. Children may not know some basic general knowledge about the word such as knowing that leaves fall in autumn, apple is fruit, and dogs bark.

In the domain of Emotion a child who is developmentally at risk will experience challenges in the following areas: helping other children who are hurt, sick or upset, inviting other children to join in activities, being kind to other children, and waiting their turn in activities. They will sometimes experience problems with anxious behaviours, aggressive behaviour, temper tantrums, or problems with inattention or hyperactivity.

In the domain of Language a child Developmentally at Risk has mastered some but not all of the following literacy and numeracy skills: being able to identify some letters and attach sounds to some letters, show awareness of rhyming words, know writing directions, being able
to write their own name, count to 20, recognise shapes and numbers, compare numbers, sort and classify, and understand simple time concepts. Children may have difficulty remembering things, and show a lack of interest in books, reading, maths and numbers, and may not have mastered more advanced literacy skills such as reading and writing simple words or sentences.

In the area of Vulnerability the data indicates that since 2009 there has been an increase in the number of children in the Physical and Emotional Domains, with little change in the data from 2012 to 2015. The Social Domain indicates significant improvement in numbers from 2009 and slight improvement from 2012 to 2015. The Language Domain is of concern with a significant rise noted in 2015. This is an area that will directly influence the Beyond The Bell aim and is potentially a result of inadequate early intervention with Speech Therapy.

The above data is of concern as it indicates a significant increase in children identified in 4 of the 5 domains since 2012. The implications for the children in this percentile of data are that they will continue to experience issues in these areas.
areas if they do not receive adequate intervention. Such implications will impact directly on their ability to engage and achieve positively in their educational experience.

The data has alarming implications with significant increases in the domains of social and emotional development, as well as the numbers of children with vulnerabilities in 1 or more domains.

While this data indicates a decrease in the Physical domain, it also indicates substantial increases in the social, emotional and language domains and alarming increase in the communication domain.
This data indicates significant improvement in data from 2009 to 2012 in the domains of physical, language and vulnerability of children in 2 or more domains. While the social domain increased from 2009 to 2012, it decreased significantly in 2015. Of concern is the substantial increase in the emotional domain and the lack of change in the domain indicating a child being vulnerable in one domain, there is potentially a correlation between these two domains.

While the bulk of this data has excellent implications of significant improvement in 4 of the 5 domains, it also clearly identifies that the emotional domain requires further exploration into how children can be supported. This domain identifies a child may experience difficulty helping other children who are hurt, sick or upset, inviting other children to join in activities, being kind to other children, and waiting their turn in activities. They will sometimes experience problems with anxious behaviours, aggressive behaviour, temper tantrums, or problems with inattention or hyperactivity. There is a need to explore how parents,
families and communities can be supported and perhaps this is an area where Maternal Child Health Services may have an impact.

The AEDC site includes a description of a number of Case Studies that could be examined as a guide to proving intervention in various domains that have been identified significant numbers of children falling in the vulnerable and at risk categories.²

The above data is relevant as it makes it clear that while there are significant issues in both Portland and Heywood, all domains with the exception of Social, indicate greater numbers of children in the vulnerable category in Portland in comparison to Heywood, particularly in the physical, language and communication domains.²

Phase Two

2016 Project Aims

The transition worker role specified the following areas to address in 2016:

- Support schools in making applications for students eligible for the Program for Students with Disabilities
- Gather data from schools determining if there have been children enrolled who have had unexpected needs
- Monitor the effectiveness of procedures put in place in 2015 to ensure schools received reports from other professionals interventions during the children’s previous year at kindergarten
- Create opportunities for both school and kindergarten staff to be collaborative through the strengthening of their network and to consider the potential for shared Professional Development opportunities
- Provide a Public Forum for parents to develop an understanding of what is meant by school readiness
- Explore the need for additional Culturally Appropriate Support for families, particularly support for Aboriginal Families and their children
- Follow up with parents with whom connections were made in 2015
- Research and data collection
Student Applications for Eligibility to Program For Students with Disabilities (PSD)

When schools were approached to offer assistance with gathering data to make applications for student’s eligible for the Program for Students with Disabilities (PSD) it was indicated that assistance was not required as schools have a role dedicated to this task and involving a third person meant additional meetings and transferring of information that was viewed as unnecessary.

In our government schools there were 7 PSD applications made, 4 of these were identified as potential applications upon enrollment. An additional four students identified as potentially eligible for PSD applications prior to commencing school were enrolled in Private Schools, one of these students had no prior interventions. Where it was known to schools that a student would be eligible for an application to the PSD in 2016, there was sufficient time in December 2015, to request relevant information and reports from Childhood Support Service Staff who had worked with the child to ensure documentation that supported the application was available when school commenced.
Effectiveness of Intervention Information Provision through Transition Process

Transition Learning and Development Statement- Part 1: The Family Section C (optional)

The following is a copy of the instructions provided for that section:

SECTION C

This section is to be completed by the child’s parent/guardian. This section provides information if your child has additional learning and development needs, a disability or developmental delay.

Prior to starting school, your child may have received extra support from early childhood services. Staff in these services can work with you and your child’s early childhood educator to complete this section.

For more information visit www.education.vic.gov.au/earlylearning/transitionschool or phone the DEECD Information and Referral Service for your DEECD Regional Office on 1800 809 834

Section C of the Transition Learning and Development Statements (TLDS) is optional for parents to complete.

Early childhood support service details

While most parents are willing to complete this section, there are also some who choose not to. Possible reasons for parents not to complete this section are:

- Parents want their child to have a fresh start at school, believing the new environment and experience may mean old issues vanish or the school will have a better/different approach
- They are unsure of the details and too embarrassed to seek assistance to complete the form
- There literacy skills are an issue in completing the form

It is a definite disadvantage for the child if there is not a continuity of the services they have been provided with in Kindergarten. Section C of the TLDS also has no provision for parents to give their consent for Schools to make direct contact with Early Childhood Support Service Staff who have been involved with their child to discuss the intervention.

If the child has had any interventions then this information is essential for the schools to know so that they can ensure resources are in place for the child. While Kindergarten Educators do offer their assistance to parents to complete Section C, it is presented as optional. I therefore see schools as the only place to “catch” this missing information through the following action.
Children enrolled with unexpected needs.

Of the 165 children enrolled in public schools there were 23 identified as having unexpected needs. Four potential reasons have been identified as to why this occurred:

- Unexpected enrolments from children of families who moved to the area
- Poor kindergarten attendance which makes it difficult to arrange for children to be seen by relevant professionals
- Parents not providing information in Section C of the TLDS
- Parent denial that their child has additional needs.

Kindergarten is not compulsory for children. There were 3 children enrolled in school for 2016 who did not attend Kindergarten, they have had successful transitions to school.

When a child is enrolled in Kindergarten their attendance is determined by the parent. There are no records provided to schools regarding a child’s attendance at Kindergarten, however two Kindergartens did indicated on the TLDS whether a child had regular attendance.

Attendance information is very relevant to schools and is an issue that is monitored closely once a child attends school. Attendance and late arrival at school does impact on a child’s ability to engage and achieve at school. Schools attempt to support parents in ensuring children arrive on time and prepared for their school day.

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**Recommended Action:**

To attempt to provide for students whose parents choose not to provide intervention information in the TLDS, the schools would benefit from adding to their enrollment applications a section similar to Section C of the TLDS, making it a compulsory section, as opposed to it being optional. Such a document would benefit from including consent to make direct contact with Early Childhood Support Service Staff who have been involved with the child to discuss the intervention, as well as consent to seek guidance from relevant School Support Services Staff for ongoing assistance. Such action would allow the school to:

- Place the child on the School Support Services Speech System for intervention in term 1 of 2016
- Compile a list of children requiring ongoing Occupational Therapy and have relevant ongoing therapy tasks in place from week one, as well as make contact with PDH OT regarding the expected case load.
- Engage the assistance of KESO if required.
- Ensure any ESL student resources were in place.
In 2015 one Kindergarten was assisted with a child who had very poor attendance and there was concerned the child would miss the Transition Program provided by the school. I was able to work with the school in engaging the assistance of the Koori Educator to ensure the child attended the Transition Program. This was not a complete success with the child missing one of the three sessions and the child having irregular school attendance in 2016. Connections with the family by the transition officer would have been as beneficial as engaging the Koori Educator.

**Recommended Action:**

- Collaboration between the Kindergarten and School Educators to ensure attendance information is included on the TDLS
- Lobbying the DEECD to take action to make Kindergarten compulsory
- Collaboration between Schools and the Koori Educator to engage all families with children enrolled in their foundation year of school regarding Transition and Engagement
- School Foundation Staff could arrange to attend Kindergartens at the end of the year and observe specifically the children that are enrolled in their school for the following year. This would have many advantages for the child, the school and the child’s family and would provide the Foundation teacher with valuable insight into the environment the child has been in for the year.
- Pre School Field Officers (PSFO) – It would be off benefit if Kindergartens were able to have PSFO attend and observe children to provide their expertise in identifying any children who may require additional screening or interventions. This would require parental consent that could be included upon enrollment in Kindergarten.
Effectiveness of procedures put in place in 2015 to ensure schools received reports from other professional interventions during the children’s previous year at kindergarten.

As the project had no specific authority to put procedures in place to ensure schools received reports from other professionals’ interventions during the children’s previous year at kindergarten it was only able to rely on making recommendations. Parent consent is required to ensure such information is made available and relevant professionals providing such interventions are governed by their own protocols and procedures. Throughout the report recommendations have been made as to how this can be established effectively with collaborative action required on the part of all parties concerned.

Create opportunities for both school and kindergarten staff to be collaborative through the strengthening of their network and to consider the potential for shared Professional Development opportunities.

There is clear a need for Collaborative Professional Development between educators from primary schools and early childhood settings foster a better understanding of the work undertaken by each group and the development of a deeper respect for each other’s work.

At a network meeting the transition worker presented to educators an opportunity that exists in Semester 2 to participate in a combined PD at Bastow in Melbourne. Bastow is a State Government Institute of Educational Leadership. The course on offer incorporated AusVELS and key frameworks including the Victorian Early Years Learning and Development Framework (VEYLDF) to support collaborative communication between early childhood, schools and relevant educational professionals. The course was to be undertaken over four months with 3 workshop days at Bastow in Sept, Oct and Nov. The cost of the course is fully subsidized for Victorian childhood services/organisations and all Victorian School. There is also an accommodation and travel grant available for participants who are 100km or more from the venue. Unfortunately none of the educators felt they would be able to participate in the course.

A kindergarten Director indicated she would be willing to deliver an overview of the VEYLDF for Foundation teachers either individually or as a group. This offer was only accepted by on Foundation teacher.
The project makes reference here to the document “Transition To School Executive Summary”. A copy of this document in Appendix B and the following introduction cited directly from the document.

*Across the first half of 2015, Semann & Slattery, on behalf of the Department, conducted a series of consultations (the Consultation) across Victoria. The Consultation obtained qualitative feedback from key stakeholders that will further strengthen the Department’s understanding of current transition approaches, including Transition Learning and Development Statements and supporting resources.*

To further support the need for increased collaboration between these sectors also included in Appendix B is a document *Transition: A Positive Start to School. Supporting Reciprocal Visits*. The following introduction is cited from that document:

*Starting school is a significant moment in the lives of children and families. Past research projects undertaken by the Victorian Department of Education and Training (in 2009 and 2012) have identified a number of factors supporting positive transition approaches. One such factor was reciprocal visits between prior to school and school settings. This project, Transition: A Positive Start to School. Supporting Reciprocal Visits*

*These documents reinforce recommendations that there is a need for Collaboration between staff of primary schools and early childhood settings. Such a collaboration would have many benefits including:*

- Fostering professional respect and regard
- Developing an understanding of each other’s frameworks, requirements and protocols
- Creation of a common language in programming, reporting and information sharing
- Coherence and continuity of children’s early learning and development
- Enhancement of children’s educational outcomes by creating a smooth and meaningful transition from early childhood settings to the school environment
- Potential to increase parent and community engagement
Public Forum for parents to develop an understanding of what is meant by school readiness.

Through the Assessment for Learning Program undertaken by the project worker with the Great South Coast Early Years Network, connections were made with the “Early Life Foundations” organization founded by Kathy Walker. Many Kindergarten Programs, including those in Portland, are based on Kathy’s approach.

The Walker Learning Approach is an Australian designed teaching and learning approach (pedagogy) that authentically personalises learning and is developmentally and culturally appropriate. Learning is real, relevant and meaningful for all children regardless of their age, culture, family context, socioeconomic background or geographical position. The WLA has been developed over 20 years using an action research model. It places the child at the centre and utilises developmental psychology and biology alongside cultural and environmental influences as its pedagogical platform and the basis for practical application across the Australian setting.

The project employed the services of Melinda Vad Deer Resst from the foundation to speak at a Parent information night on School Readiness and to conduct a workshop with Kindergarten and Foundation teachers. Melinda was available on May 5th and June 1st, unfortunately the Warrnambool May races meant there were no available flights to Portland that week and the original date altered to the June 1st. The preferred option was to hold the night prior to Education Week when School Enrolments commenced. Unfortunately this was not possible.

The event was held at the Portland Secondary College Discovery Hospitality Center. Three of the five Kindergartens were represented, five of the seven government schools were represented and one of the two private schools was represented. All present felt there were many positives to be gained from the workshop where Melinda made strong mention that:

- Both Schools and Kindergartens operate under the direction of DEECD but do not have direct links that would make them more effective and this is a state issue that continues to need addressing
- Schools have no Professional Development that assist them in having an understanding of the National Early Years Framework that Kindergartens operate under
- Kindergartens and Schools can work together to create a common language to be used in the Transition Learning and Development Statements, that allows them to share information that benefits both parties. By working together they can have a clearer understanding of the meaning of the headings reported under and the content they include
• A child’s Emotional Development and Competence is the single most important consideration in determining their School Readiness. If a child is not emotionally ready for school then they are likely to remain this way throughout their educational experience. Interestingly this was removed as a criteria under which an application could be made for a child to seek a second year of Kindergarten Funding. Maturity on the other hand is a biological process that over time changes and evolves.

Approximately 20 parents attended the parent session. This was a disappointing number considering there had been a great deal of effort gone into advertising the event which included:

• Flyer distribution through the kindergartens and schools, the kindergarten staff indicated that they had handed these to parents and encouraged their participation rather than placing them amongst other information going home.
• Newspaper advertising two weeks prior to the event and the week of the event
• Radio advertising on Radio National and local community radio 3RPC
• A stall with a display at an annual Garage Sale event held by the local Breast Feeding Association aimed at toddlers and children
• Direct contact with playgroups

Those who did attend felt that they gained a great deal from the talk and appreciated the opportunity to ask questions and have 1:1 discussions with Melinda. It was established as a result of the evening that parents were not aware that they could seek the guidance of the Pre School Field Officer in making the decision as to whether a child was ready to commence school. It was also a new consideration for some parents present to consider that a child’s chronological age has ongoing implications throughout their years of education. It was additionally beneficial for parents to hear from those school staff who remained for the talk, that a second year of kindergarten was preferable to a second year of foundation. Parents present indicated that the cost of a second year of Kindergarten was often a deciding factor and that perhaps it would have been better had they had the opportunity to delay commencing Kindergarten.

The outcomes identified as potential actions from this event are:

**Recommended action:**

Maternal Child Health (MCH) could be engaged to determine how they can assist in promoting to parents and guardians:
- the implications involved of when a child commences Kindergarten
- the importance a child’s emotional development has on school readiness and their overall academic achievement
Contact was made in this area and while MCH do touch base with parents in regard to school readiness, this could be further highlighted and prioritized as they are the most likely contact for parents of children at the most relevant age.

Kindergarten and School Readiness are areas that need further community engagement to enable the education of parents and guardians so they have a clearer understanding that the early years of a child’s life are critical for their present and future health, development, wellbeing and education. This could be promoted best through the Glenelg Shire Councils Children Services Section.

**Recommended action:**

Kindergartens and Schools need to investigate how they can create greater contacts within their communities to educate parents/guardians about School Readiness. There has been reference to this point throughout this report.

Kindergartens may need to make parents more aware of the role of the Pre School Field Officers in assisting them in making decisions regarding their child’s readiness to transition to school.

Kindergarten and School Staff need to develop a stronger collaborative partnership to improve their understanding of each other’s service and to develop a common language that can be used in TLDS that will benefit all.

DEECD need to be lobbied to have Kindergartens and Primary Schools combined under the same Department Umbrella.

**Need for additional Culturally Appropriate Support for families, particularly support for Aboriginal Families and their children.**

Following up the Aboriginal child who was enrolled at Portland Primary School I found that he continued to have periods of poor attendance. Currently 16% of the enrolled students at Portland Primary are Aboriginal, there are 4 children in the 2016 Foundation class and a further 4 are enrolled for 2017. Attendance patterns for this 16% of students indicates consistent lateness and absences for lengthy periods. There are also concerns regarding their effective and sustained engagement.

The school use the available support services, KESO, WANNICK and DWEC as much as possible in an attempt to support the students and strengthen partnerships with their families. It has been identified that the KESO would benefit from having additional assistance in supporting Portland Schools.
Follow up parents with whom connections were made in 2015

Parents with whom connections had been made in 2015 were contacted and indicated that they had developed a positive relationship with school staff and no longer felt assistance was necessary but were grateful that it had been available. I was not able to continue a connection with one family that were no longer together and the child had been placed in alternative care.
**Data Relevant to Phase Two**

1. Transition Learning & Development Statements

I present the following data which was gathered from 144 of the TLDS of children making a transition from Kindergarten to school, the data excludes those children who transitioned to private schools, repeated Kindergarten and left the area.

<table>
<thead>
<tr>
<th>Area</th>
<th>Data</th>
<th>Discussion</th>
<th>Suggested Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>PART A: A Positive Start to School Part 1 The Family (parent/child completes)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cover where a picture of the child is provided or drawn</td>
<td>48%</td>
<td>The low % of parents that engage to complete this indicates to me a lack of value in the statement.</td>
<td>Kindergartens could address this issue by guiding parents as to the value of the action. Schools could express to parents that they value the inclusion on the statement as an indicator of their child’s development.</td>
</tr>
</tbody>
</table>
| Consent by parent/guardian to share TLDS with  
  • School  
  • outside school service  
  • for discussion with the | 93% Yes  
  4% No  
  3% Blank | 81% Yes  
  14% No  
  5% Blank | 62% Yes  
  22% No  
  14% Blank | This indicates only 7% of parents/guardians have little understanding of the importance of the document  
  This is not a consent relevant to all children  
  This indicates to me that there are parents who | Schools need to ensure they make contact with parents who do not provide a TLDS  
  Kindergartens could highlight the need for collaboration between services |
<table>
<thead>
<tr>
<th>Foundation Teacher</th>
<th>regard school as a fresh start for some children and/or do not have a clear understanding of the value of the connection between kindergarten and school</th>
<th>Schools need to be pro-active in ensuring they have parent contact and use the statement as a guide to parents they need to make stronger connections with</th>
</tr>
</thead>
</table>
| Request by Early Childhood Educator to be contacted by the Foundation teacher | Yes 22%  
No 52%  
Blank 36% | All of the Early Childhood Educators (ECE)indicated that they were not contacted by a Foundation Teacher (FT)  
It would be beneficial for ECE to always complete this section  
Lack of response by FT's indicates a lack of respect for the ECE professionalism | Foundation teachers should take advantage of this opportunity |
| Maternal Child Health Consultation Acknowledged | 93% Yes  
4% No  
3% Unsure | This indicates that the Maternal Child Health is well attended and could be a valuable partner for both Kindergarten and Schools | |
| Aboriginal / Torres Strait Islander Descent | 23% | This indicates that there is a case to support recommendations of additional support for children and their families that responded to this criteria | |
| Section A The Family  
Background, experiences at home & within the community, about school, how the school might assist the child to settle in | 68%  
providing a detailed response  
14%  
providing a minimal response  
18% left this blank | This indicates to me that it is possible some parents have trouble completing the document independently and may not wish to ask for help and/or some parents may not value the document | Kindergartens do make an effort to provide assistance to parents to complete the document  
It was indicated that some middle socio economic parents do not value the document and believe the school already knows their child  
Schools can use the lack of data as an indicator of a family |
<p>| | | | |
| | | | |</p>
<table>
<thead>
<tr>
<th>The child's view</th>
<th>58% of TLDS had information</th>
<th>I consider this a low % when the child is central to the document</th>
<th>they need to foster connections with Schools &amp; Kindergartens could highlight the value of the parent &amp; child completing this together</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part 2 ECE Report</td>
<td>67% Provide detail in all areas with 47% stating regular attendance</td>
<td>Those that provide detailed reports put in a great deal of effort to ensure they clearly express the child’s strengths and highlight their development</td>
<td>FT’s need to collaborate with ECE’s to create a common language that is of benefit to both parties. FT’s could consider providing some form of feedback regarding TLDS so as to indicate to ECE that they value their input</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Regular is an adequate attendance descriptor</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>ECE have indicated that they seriously question whether FT’s actually read their reports</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Parents read the report prior to it being shared with the school and so there should be no unexpected surprises for any parties</td>
<td></td>
</tr>
<tr>
<td>Section C (Optional)</td>
<td>25% of parents/guardians provided a detailed description</td>
<td>This data indicates to me that there are a significant proportion of parents/guardians are providing schools with relevant history that would enable them to plan for their child’s transition to school.</td>
<td>There appears to be scope for more detailed screening of Kindergarten children to ensure early identification of needs regarding speech and occupational therapy intervention.</td>
</tr>
<tr>
<td></td>
<td>14% of parents/guardians provided</td>
<td></td>
<td>Schools could address the history of a child’s additional assessments &amp; interventions</td>
</tr>
</tbody>
</table>
Overall findings from this investigation is that the Kindergartens and School Educators would benefit immensely from a joint professional development that assisted the school educators in developing an understanding of the Kindergarten framework and reporting system.

Collaboration starts with respect for others’ skills and knowledge, along with appreciation of the boundaries of one’s own professional expertise. Collaboration does not mean setting aside your specialism or creating a ‘generic’ early childhood professional. Collaboration means each professional in a partnership is respected for their perspective and insights into children and families.

2. Parent Awareness Regarding School Readiness

At the Baby & Child Garage Sale held by the Portland Breastfeeding Association at the Portland Civic Hall an informal survey of 50 parents was conducted regarding their understanding of School Readiness. Included below are the questions asked and the responses.

<table>
<thead>
<tr>
<th></th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Do you know what is meant when schools and kindergartens talk about “School Readiness”?</td>
<td>7</td>
<td>12</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Those responding yes already had a child at school, those responding no and unsure did not have children at school or Kindergarten</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Do you believe that a child’s experiences and development from the ages 0 to 5 can affect their ability to learn during their school years?</td>
<td>35</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Those indicating No / Unsure said that you don’t know until a child starts school how they will respond to it</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Do you believe it is easy and affordable to get help from Speech and occupational therapists?</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Do you believe that a children should turn six in the first year of school?</td>
<td>Yes 2</td>
<td>No 10</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Most indicated that you are meant to start school when you are 5 so they have never really thought about it.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Do you believe that Kindergarten Staff provide you with enough help in deciding if your child is ready to go to school?</td>
<td>Yes 10</td>
<td>No 5</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Those responding yes were going on previous and current experiences, those unsure had not had the experience as yet.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Do you believe the Orientation Program that the Primary Schools offer children starting school is enough?</td>
<td>Yes 10</td>
<td>No 5</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>Those indicating yes based their response on past experiences, those saying no thought that Kindergartens need to visit schools throughout the year, those unsure had no experiences as yet.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Do you think schools want you to enroll your child in school whether they are ready or not?</td>
<td>Yes 5</td>
<td>No 4</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Those responding yes has themselves or known of others who were unsure and enrolled a child on advice from the school. Those who were unsure indicated that a child can always repeat their first year of school if they need to.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Do schools encourage you to enrol your child and say they can repeat Prep/Foundation?</td>
<td>Yes 5</td>
<td>No 4</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Potentially responses to this question were based on the response to the previous question.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Would the cost of repeating Kindergarten be the deciding reason not to allow your child repeat?</td>
<td>Yes 38</td>
<td>No 4</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>The majority asked what a year of Kindergarten cost and instantly said yes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Is there a need to provide parents with more opportunities to learn what is meant by “School Readiness”?</td>
<td>Yes 22</td>
<td>No 15</td>
<td>13</td>
</tr>
</tbody>
</table>
|   | Those responding yes did so as a result of the survey thinking perhaps they needed to know more, those responding no indicated their child was only a toddler and they didn’t need to think about it yet, those unsure thought they didn’t need to think about it until their child went to Kindergarten.
The responses gained from the above survey are definite indicators of a need to engage parents early in an awareness and discussion about School Readiness and the implications it has for their child. An interpretation of the survey is that:

- Parents are not thinking about education when their child is a toddler
- Parents who do not already have a child at school or kindergarten have limited knowledge of School Readiness
- Parents believe that it is ok for a child to repeat their first year of school
- Parents are not aware of the implications a child’s chronological age has on school achievement
- That the cost of repeating Kindergarten would be a significant factor in a parents decision for their child to have a second year of Kindergarten
- There is a need to work with Maternal Child Health Services and Glenelg Shire Children Services and in raising parents understandings regarding School Readiness

3. Transitions to School in 2016

Children making the Transition to School without Intervention Noted

There were 23 children attending the Public Schools that have been identified as requiring additional assessment that were not identified prior to starting school. Of these children 12 have been referred for a Speech Assessment, 10 for an Occupational Therapy assessment and 1 recommended for an application for the Program for Students with a disability.

Children making the Transition to School with Intervention Noted

There were 37 children identified prior to their transition to school who had some form of additional intervention but this did not necessarily equate to them requiring further intervention when transitioning to school. There were 4 children known to require an application to the Program for Students with a Disability. Of these there were 3 unsuccessful and 1 successful applications. There has since been another 2 applications made that are awaiting approval. Another 4 children would have been know and considered under the public system for this program but they were enrolled in the private system.
4. Foundation Reading Assessment Data

Schools indicated that the Foundation Reading Assessment Data was not yet available at the time of writing this report.

5. Parent Forum Surveys

Due to the low attendance at the 2 forums parents attending were not requested to complete questionnaires. All were appreciative of the opportunity provided and indicated that they found them beneficial.

6. Foundation Teacher Survey

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you believe that the first mention of School and Kindergarten enrolment should occur in term 3?</td>
<td>20%</td>
<td>40%</td>
<td>20%</td>
<td>Parents need to think about the whole journey before their child begins kindergarten. So, if their child is to start school after they turn 5, they should start kinder 12 months before. This may reduce the need for some children to have a second year of kinder.</td>
</tr>
<tr>
<td>Is the current process of receiving reports from professionals such as Pre-School Field Officers, Speech Therapist, Occupational Therapist and other professionals regarding their interventions with children during Kindergarten adequate?</td>
<td>20%</td>
<td>60%</td>
<td></td>
<td>Some reports don’t tell the whole picture and it’s not until the child is in the classroom before issues such as speech are identified and addressed. Most parents of children with additional needs are their greatest advocate and are very good at making sure school receive all the information required.</td>
</tr>
<tr>
<td>Do you have a clear understanding of the content of the Early Years Learning and Development Framework?</td>
<td>75</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the content of the Transition Learning and Development Statement useful in you gaining an understanding of the child it represents?</td>
<td>80%</td>
<td>20%</td>
<td></td>
<td>Not always. Depends how much of it is filled in and what information the centre passes on.</td>
</tr>
<tr>
<td>Is there additional information you would like to receive so that you are better prepared for the child at the start of the school year?</td>
<td>80%</td>
<td>20%</td>
<td>20%</td>
<td>Our principal interviews each child and their parents and records valuable information for us, that together with the transition report gives us a better understanding of each child and how to group them when splitting them into classes. As mentioned above.</td>
</tr>
</tbody>
</table>


Do you believe that schools and kindergartens share a common understanding of what is meant by School Readiness? | 40% | 40% | 20% | Depends on the Kindergarten teacher.
Do you believe that it would be of benefit for there to be joint Professional Development opportunities for staff of schools and kindergartens? | 100% |
Do you believe that parents provide enough information about their child on the Transition to Learning and Development Statements? | 20% | 20% | 60% | Some do. Others write very little or nothing at all. not often Some are great, others don't write anything
Do you believe it would be better for a child to have a repeat year at Kindergarten in preference to a repeat year of Foundation? | 100% |
To assist the kindergarten children to transition to school do you provide them familiar experiences 1st term? 1? | 100% |

From this survey I have made the following observations:

- There is a belief that there can be further improvement regarding the transfer of information between educators
- Staff believe they have a clear understanding of the EYL&D Framework however I do not agree with that this is the case and there is a definite need for this to be addressed
- Staff feel they would benefit from additional information regarding students but have not indicated what this may be, I believe it to be regarding the students who are not identified at Kindergarten
- There needs to be further clarifications as to what each profession understands as School Readiness
- There is 100% agreement that joint PD with Kindergarten Educators would be of benefit
- Only 20% of respondents indicated that they feel parents provide adequate information on TL&D5
- Staff believe they provide children with experiences similar to Kindergarten, however I feel there is further exploration as to what this means
7. Survey for Kindergarten Educators

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you believe that the first mention of School and Kindergarten enrolment should occur in term 3?</td>
<td>75%</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are Pre School Field Officers allocated sufficient time to work at your centre?</td>
<td>25%</td>
<td>50%</td>
<td>25%</td>
<td></td>
</tr>
<tr>
<td>Do you have the support of other professionals such as Pre School Field Officers, Speech and Occupational Therapists and Psychologists when discussing with parents the benefits to their child to repeat a year of Kindergarten?</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you believe that School Principals support your professional opinion of a child not being ready to make the transition to school?</td>
<td>75%</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you believe that Principals have a clear understanding of the criteria you use to determine that a child may require a second year of Kindergarten?</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you believe that schools value the content of Transition Development and Learning Statements?</td>
<td>75%</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you believe that schools have a clear understanding of the Early Years Learning and Development Framework?</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you believe that parents have a clear understanding of the importance of the Transition Learning and Development Statements?</td>
<td>50%</td>
<td>50%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you believe that Kindergartens and Schools share a common understanding of what is meant by School Readiness?</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
There are significant indications in this survey that the Kindergarten Educators have no confidence that the School Educators share common understandings of their Early Years Learning & Development Framework, the content of the Transition Learning & Development Statements or a common understanding of what is meant by School Readiness.

They also indicate that they do not believe School Principals support their professional opinion or have an understanding of the criteria they use when deciding if a child requires a second year of Kindergarten.

They clearly indicate that it would be beneficial for school enrolment to occur in term 3 and that they would benefit from additional assistance from Pre School Field Officers having additional time to spend at their facilities.

All of this indicates strongly that there would be benefits to joint Professional Development with Foundation teachers and Principals.

There is also scope for the Glenelg Shire Council, Karen Meyrick Team Leader Education and Care (Kindergarten Cluster) to meet with staff to discuss their concerns.
### 8. Survey for both Kindergarten and School Educators

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the Stepping Stones Program been of benefit to you?</td>
<td>66%</td>
<td>34%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the program been of benefit to the parents of children attending your centre?</td>
<td>50%</td>
<td>16%</td>
<td>34%</td>
<td></td>
</tr>
<tr>
<td>Has the program been of benefit to the children of your center?</td>
<td>66%</td>
<td>34%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the program had a positive effect on children's transition to school?</td>
<td>50%</td>
<td>16%</td>
<td>34%</td>
<td>hopefully in the future as kinders and schools work more closely together, No children required support</td>
</tr>
<tr>
<td>Has the program identified any gaps or issues that need to be addressed between kindergartens and schools?</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the program identified a need to develop a common understanding between Kindergartens and Schools as to what is meant by School Readiness?</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the program identified a need for Kindergartens and Schools to have a common understanding of each other's frameworks?</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have difficulty engaging the parents of families you would regard as the most vulnerable?</td>
<td>84%</td>
<td>16%</td>
<td></td>
<td>sometimes, but as most families are involved in the school, they are generally responsive</td>
</tr>
<tr>
<td>Do you believe that parents need to be provided with more opportunities to understand what is meant by school readiness?</td>
<td>66%</td>
<td></td>
<td>34%</td>
<td>Kinder teachers provide parents with this information</td>
</tr>
<tr>
<td>Do you believe that parents need to be provided with opportunities to understand how the age of their child when enrolling in Kindergarten influences their development and educational progress?</td>
<td>83%</td>
<td>17%</td>
<td></td>
<td>Kinder teachers provide parents with this information</td>
</tr>
</tbody>
</table>
• This joint survey has identified that 66% of participants believe the Project has had benefits for educators, children and facilities.
• 50% indicating it has resulted in a smoother transition for children from Kindergarten to School.
• The area the project has been able to have 100% impact is in identifying that there is a need for both Kindergarten and School Educators to develop a common understanding of what they mean by School Readiness.
• 100% agreed that there are a number of issues identified as needing addressing by both parties.
• 100% agreed that there is a need for both to develop an understanding of each other’s Frameworks.
• It has also been strongly identified by both that there is a need to provide parents with opportunities for education regarding school readiness and the influence that a child’s age has on their education, with respect to progress and engagement.
• In addition to this both parties have identified that they find vulnerable families difficult to engage.
Recommendations

The vision, aims, goals and activities articulated above have been consultative with the stakeholders. There is further work to be done. This report provides a framework for responding to areas identified as requiring further investigation, prioritizing, consultation and consideration for effective actions to be put in place to work towards achieving the aim of the program that was “to build the capacity and connection between stakeholders and families to ensure children are ‘school ready’ and able to make a smooth transition from kindergarten to primary”.

Information has been included in the Appendix that was felt to be of particular importance to be shared for further reference and as a comparison to what is potentially achievable with additional resources and projects.

The following recommendations are offered as a result of the Stepping Stones to School Program.

There is a need to further explore ways to make connections with and support vulnerable families.

Engage School Principals and Kindergarten Directors / Management to consider the potential benefit of:

- shared professional development between their services to address identified misunderstandings and to provide clarity of their frameworks
- collaboration between Kindergarten and School staff to identify How Transition Learning & Development Statements can be more effective for both parties and parents
- collaboration between Kindergarten and Schools regarding Transition Programs actions that will make parents aware of what is meant by School Readiness
A strong emphasis is placed on the importance of promoting a common language and pedagogy to support the continuity of learning for children and to build an understanding of effective early years teaching practices in both early childhood and primary school settings as being essential to achieve the best possible outcomes for all stakeholders.

Encourage School Principals to

- Revise school tour protocols and/or enrollment week protocol to be more effective for all families, including those most vulnerable
- Raise awareness with parents as to the significant impact that a child’s age and emotional development has on their educational experience
- Consider how a child’s prior intervention information could be included in documentation when enrolling
- Value that staff in Early Childhood settings and Kindergartens are “Professionals”

Investigate how Maternal Child Health Services can increase their assistance to parents in developing a deeper understanding of

- the importance of their child’s emotional development in regards to school readiness
- the impact that a child’s resilience, emotional and social development has on their education potential
- the impact that a child’s age has on their educational experience and potential
Consider how additional Occupational and Speech Therapy Services can be provided in the Kindergarten Sector.

There is significant evidence that early intervention has the greatest impact on a child’s development and so it would seem logical that any possible additional resources be provided to Kindergartens to ensure such intervention occurs before a child commences school. There is significant merit in the Active Lorikeets – addressing readiness for school entry - Gippsland Lakes Community Health Program. Investigation into how a similar initiative could be implemented in the Glenelg Shire is worthy of consideration possibly partnered by Maternal Child Health, The Glenelg Shire Council Children Services and PDH Allied Health and Beyond The Bell.

Need for additional Culturally Appropriate Support for families, particularly support for Aboriginal Families and their children in the transition to School and School Engagement.

There would be many benefits in exploring how the indigenous community and the Koorie Engagement Support Officer team can be assisted in expanding the resources they have available to assist schools. Portland Primary stood out as a school that would benefit from additional support in this area as they have the highest Aboriginal enrollment amongst the Portland public schools and are very active in their efforts to engage and support their families. Heywood Consolidated Primary School also has a significant Aboriginal enrollment, but also has significant support from their Aboriginal Community in comparison to Portland.
Lobby DEEC to

- Include Kindergartens under them same framework as Primary Schools hold Education Week in early term 3
- Acknowledgement that the current time line for kindergarten and school enrolments does not provide Kindergartens with the optimal opportunity to work with families in considering a second year of kindergarten
- Identify why emotional development has been removed as a criteria for applying for a second year of funding
- Seek the inclusion of a full time Occupational Therapist for the School Support Services in Portland
- Seek additional personnel to support the current Speech Therapist at the School Support Service

Further investigation is needed into the capacity of support services that provide assessment of kindergarten children with developmental delays, the diagnosis of specific disorders, speech and occupational therapy.
References

Australian Early Development Census | Department of Education and ...
www.aedc.gov.au  Community Story KindiLink WA

Bastow Institute
The course incorporates AusVELS and key frameworks including the Victorian Early Years Learning and Development Framework (VEYLDF) to support collaborative communication between early childhood, schools and relevant education professionals.

AEDC National Report 2015

GAP Analysis of Speech & Occupational Therapy Allied Health Team at Portland District Health, Internal document, PDH

Research into Practices to Support a Positive Start to School, Equity and Childhood Program, Youth Research Centre, Melbourne Graduate School of Education, University of Melbourne 2012

Semann Slattery, Transition - A positive start to school supporting reciprocal visits

Transition Resource Kit:

Transition Learning & Development Statement

Transition Resource Kit

Transition to School Reciprocal Visits

Appendix A

Transition To School Executive Summary

- Research >
- Research Publications >
- Transition To School Executive Summary

Across the first half of 2015, Semann & Slattery, on behalf of the Department, conducted a series of consultations (the Consultation) across Victoria. The Consultation obtained qualitative feedback from key stakeholders that will further strengthen the Department’s understanding of current transition approaches, including Transition Learning and Development Statements and supporting resources.

Key findings of the report are:

What is working well in transition?

- Children and families’ responses to the consultation indicate that the experience of transition to school is largely a positive one.

- The 10 promising practices detailed in the 2009 Transition: A Positive Start to School Resource Kit appear to be widely used by the respondents to the consultation.

- There are many examples of locally-developed resources and processes to support children in the transition to school.

- Networks and relationships between early childhood and school teachers are prevalent but could be enhanced.

- Early childhood and school teachers indicated that face-to-face meetings add value to the Transition Learning and Development Statement.

What are the opportunities for improvement?

- Additional resources for early childhood and school educators are required to support children from diverse backgrounds and those experiencing disadvantage.

- Communication between early childhood educators and school teachers could be strengthened, including through the strengthening of local transition networks.

- Specific feedback on the Transition Learning and Development Statement (the Statement) included:
schools and early childhood centres both indicated that not all schools fully utilise the Statement

- lack of mutual understanding of the strength-based approach
- constructive feedback and discussion from schools on the Statement is not always provided to early childhood teachers
- early childhood educators noted the challenge of managing class, planning and scheduling delivery of the Statement

A significant proportion of participants indicated that they are not evaluating transition to school processes, with many services and schools opting for a more informal method.

The Department's response

In response to the Consultation final report, the Department has completed or is undertaking the following activities:

- Supporting Reciprocal Visits projects
- Delivery of the Leading Continuity of Early Learning professional development course
- Supporting English as an Additional Language (EAL) at transition to school
- Victorian Early Years Learning and Development Framework Practice Principles video vignette series
- Review the navigation and availability of resources on Department’s transition to school
- Revision of the Transition: A Positive Start to School resource kit

The Consultation will contribute towards a richer knowledge base on transition to school in Victoria, and enable the Department to better support children, families, and teachers in early childhood and school settings.
Appendix 2

Active Lorikeets - addressing readiness for school entry

Gippsland Lakes Community Health

A long waiting list for public paediatric speech pathology and occupational therapy services prompted the development of a program for speech and fine-motor skill development in kindergarten-aged children. This program was developed and supervised by Gippsland Lakes Community Health (GLCH) allied health professionals, and is coordinated by Grade 2 allied health assistants (AHAs), who assist with standard screening and delivery of group sessions. Resources are now better targeted to meet more children’s needs in readiness for school.

Identifying a service need

Research has identified that spoken language and fine-motor skills acquired during the preschool years are precursors for the later development of reading and writing.3,4 Children who are developmentally not ready for school may often struggle to catch up. GLCH is the only service offering public paediatric allied healthcare in the Gippsland Lakes area. GLCH identified that referrals of preschool and school-age children with speech difficulties and under-developed fine motor skills were increasing. Average waiting lists and times for initial assessments by an OT and speech pathologist were 30.1 and 33.3 days, and were predicted to continue to increase. In addition, there was not a process to ensure that children most in need of assistance were identified and prioritised. Both teachers and parents expressed concern at delays in accessing services for low-risk referrals. GLCH identified that a new program to proactively address the lengthy waiting list was required. As in many rural and remote locations, skills shortages were an ongoing issue at GLCH, with particular difficulties in attracting and retaining sufficient qualified allied health professionals (AHPs). Given the identified service need, the proposed program structure included utilising appropriately skilled AHAs working closely with the AHPs. GLCH received a Commonwealth Communities 4 Children program grant to support the implementation of the program.

Active Lorikeets program

Active Lorikeets, which commenced in 2010, is a ten-week block program for preschool children requiring speech or occupational therapy to accelerate development of their language and fine motor skills. The program is delivered over a school term. 3 Ramey CT, Ramey SL, 2004, ‘Early learning and school readiness: Can early intervention make a difference?’ Merrill-Palmer Quarterly, vol. 50, no. 4, pp. 471-491. 4 National Research Council, 1998, Preventing Reading Difficulties in Young Children, The National Academies
Press, Washington, DC. Active Lorikeets - addressing readiness for school entry 7 The OT and speech pathologist, supported by the program AHAs, screen each referred child for their suitability to participate in the program, using the Brigance test and the Renfrew Action Picture test (the screening tools used by the OT and speech pathologist) to determine each child’s requirements. Children assessed as requiring intensive or specialised intervention with the speech pathologist and/or OT on the basis of screening are referred to the relevant service(s). If included as part of the care plan, an AHA will work with a child for an additional 15-minute ‘busy-bee’ speech practice session, to enable the speech pathologist to work with the child’s parents. The majority of referred children require weekly group therapy skill sessions that provide structured group development activities to address their needs. These sessions are delivered and supported by two AHAs. The speech pathologist and OT lead the AHAs in intensive initial and ongoing skills development, and oversee the delivery of the group sessions. Parents observe and participate with their children, and learn strategies to support their child’s development. They are encouraged to continue using these techniques during normal daily activities. Home-based programs are also implemented for children requiring this level of support. An individualised program is developed by the AHAs, which includes simple games and activities, and supports parents to provide opportunities for children to practice and develop their skills throughout the week. A range of activity kits are prepared by the AHAs as part of a resource library. These are available to the Active Lorikeets team to lend out for home use. Parents are encouraged to actively engage with the team, and to discuss their child’s program and progress. Initially, program referrals of preschool age children were received from local kindergarten teachers. Over time, the GLCH team has developed and strengthened links with fifteen kindergartens across far east Gippsland, and the team now provides screening sessions at the kindergartens. Parents are invited to have their child assessed through the routine screening process. Uptake has been good. This screening method has facilitated an increase in referrals to and participation in the Active Lorikeets program. A total of 113 screens were undertaken by the AHA over the past 18 months. Nineteen patients were referred to the speech pathologist, six to the OT and 19 to both the OT and speech pathologist, representing 39 per cent of all patients screened. A total of 90 patients (80 per cent) participated in the group therapy program over the past 18 months.

**Defining the AHA roles**

The GLCH Executive Manager of Community Health Services, a physiotherapist by profession, has a long history of working with AHAs and recognised more than twenty years ago, the benefit of bringing AHAs into the team, initially to assist in the delivery of physiotherapy programs. At times, GLCH has had difficulty in recruiting and retaining AHPs. Additional AHA positions have been created to assist AHPs to deliver the services needed in response to local demand. With the success of AHAs working in the delivery of exercise and fitness programs, the benefit of utilising AHAs across other allied health disciplines was recognised. The first AHA was employed 22 years ago to support physiotherapy services at GLCH. She is still working with the physiotherapy service, having developed a strong and diverse skill base, and now holds a Certificate IV in Allied Health Assistance. Ten years ago, a second AHA, originally trained as an enrolled nurse, was employed to assist with the OT and physiotherapy service. She remains with GLCH and now has a Certificate IV in Allied Health Assistance, with a specialisation in podiatry. She works with the podiatrists and supports the delivery of a number of other programs, also providing support to the AHA
team as a mentor, sharing responsibility for their management and professional development, along with the executive manager. This has recently become a Grade 3 position.

**Developing AHA competencies**

The Grade 2 AHA received three months of intensive skills development with the AHPs, including observing client reviews and therapy sessions, assessment tools, administering tests and working with children and parents, one on one and in a group setting. Throughout this period, she was also supported in delivering the program by an experienced AHA. During 2011, she completed her Certificate IV in Allied Health Assistance, specialising in speech pathology. She now coordinates the delivery of the Active Lorikeets program with the support of a new AHA with ten years fitness program experience, who has recently joined the GLCH team. The new AHA is continuing her on-the-job development and considering her options with regard to gaining further qualifications in allied health assistance. Supervision and professional development for each AHA includes a monthly professional development meeting and a six-monthly review formalised through completion of a standard template to record development needs, career goals and individual work plans. The AHA team has a weekly meeting focused on information sharing to support their programs areas and, if necessary, to plan leave cover for each other. The community health executive manager and the senior Grade 3 AHA have regular meetings regarding the AHA team and the management of their supervision. If individual issues arise, a three-way discussion is held and a course of action agreed, which is recorded in writing.

**Service and role review and improvement**

Waiting times for speech therapy and OT appointments at GLCH have been reduced from 33.3 to 13.5 days and 30.1 to 8.3 days respectively, since the introduction of the Active Lorikeets program. A process is in place to ensure that one-to-one service delivery is now clearly targeted at those children with highest need. The Active Lorikeets program ensures that each child is receiving the most appropriate level of intervention. Through the delivery of information sessions to teachers and parents, the program has gained visibility in the community and is highly regarded as a mechanism for assisting children’s skill development. Referral pathways are now well established. Anecdotal evidence from primary schools indicates that more children are reaching school with the appropriate level of language and fine motor skills to manage the challenges of the early school years. The Active Lorikeets program is now in its third year of operation and recurrent funding has allowed for its continuation. GLCH is planning to expand the service into childcare centres, primary schools and holiday programs.
The Department of Education and Early Childhood Development has a key role to play in helping to reach the goals of the whole-of-government *Victoria’s Vulnerable Children: Our Shared Responsibility Strategy 2013-22*. The Department’s Vulnerable Children Action Plan sets out how this will be achieved.

**We share the public responsibility for vulnerable children and young people**

The Department’s responsibilities are to ensure that all Victorian children, young people and adults acquire the skills, knowledge and capabilities that allow them to make their way in the world as active, informed and productive citizens.

The Victorian Government has developed a broad, shared policy definition of vulnerability to ensure all service providers, government departments, and other stakeholders can clearly identify their role in relation to supporting vulnerable children and young people:

*Children and young people are vulnerable if the capacity of parents and family to effectively care, protect and provide for their long term development and wellbeing is limited.*
We have a workforce that is committed to achieving positive developmental and educational outcomes for all children and young people

Due to the high number of children, young people and families that come into contact with the Department’s universal services every year, our workforce is uniquely placed to identify those who are vulnerable or at-risk in order to intervene early by providing support or referring to targeted secondary services. This includes providing services for over 6,000 children and young people living in out-of-home care, for whom the state is responsible.

By improving access to our services, we will provide a positive protective factor in the lives of vulnerable children and young people

The Plan sets out how the established universal service system of early childhood services, schools and higher education and skills is able to intervene early and prevent problems from becoming entrenched.

The Plan recognises existing Departmental programs and services that are in place to support vulnerable children, young people and families, and outlines new actions that we are taking to address vulnerability.

Linking our services to provide a coordinated response will improve outcomes for vulnerable children and young people

Better coordination and linking of services, both across and beyond the department’s direct services, will make it possible for vulnerable children to receive improved assistance.

This Plan is supported by system-wide ‘enablers for action’. Area Partnerships will provide the mechanism for better local coordination of services for vulnerable children and young people. Improved data and evidence to respond to vulnerability will strengthen our capacity to identify, monitor and project outcomes for vulnerable children.

Further Information

Vulnerable children action plan

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