

Australian Early Development Census (AEDC)

Case study: C&K Hatton Vale Community Kindergarten Hatton Vale

Resources for Queensland early childhood education and care services

One of the things that we really wanted to get out into the community was the knowledge and awareness that families can monitor their children, and be aware of help they can give them and different community services they can access.

For the educators at C&K Hatton Vale Community Kindergarten, analysing the Australian Early Development Census (AEDC) data for their region revealed significant developmental vulnerabilities, and marked the start of a major community effort to strengthen those developmental domains.

Leesa Woodall, the director at the new Hatton Vale service, 45 minutes west of Brisbane, discovered that 45 percent of children in the area were vulnerable in one or more domains, and that 20 percent were developmentally vulnerable in two or more domains. The biggest priorities for further support were in physical health and wellbeing, followed by language and cognitive skills.

It was clear to Leesa and her team that any solution to these problems would need to involve a range of stakeholders—so the first step was to invite them into the fold. A project team was established, comprising members of the kindergarten, the local state school and two long day care services.

‘We developed a collaborative partnership and started some early year’s meetings where we—myself, the Principal and Assistant Principal and the Prep to Year 2 staff—would meet on a fortnightly basis,’ Leesa explains.

‘The meetings went into discussion about the AEDC data, looking at the areas of physical health and wellbeing particularly, and looking at ways that we could work together to increase opportunities for children to develop physically. So we collaborated on a perceptual motor program with the school, and the kindergarten to Year 2 children participated once a week in a half-hour program,’ she says.



The perceptual motor program was established as a 'proactive and preventative' measure throughout the early childhood community in Hatton Vale, to build children's skills in both physical and cognitive domains. According to Leesa, the program was a good fit with the philosophy and values of the kindergarten. 'One of our main goals in our Quality Improvement Plan (QIP), from the beginning of the service, was a collaborative partnership with the school,' says Leesa. The QIP now incorporates references to the cross-institutional working group, and to the Quality Areas that relate most closely to the AEDC project work.

Educational program

The educational program at the Hatton Vale Community Kindergarten has also gained greater depth through links to the AEDC data. 'Our program is based on the children's interests, however, we look at their interests and at their needs identified through the AEDC data as well, just to try and complement any experiences that we're presenting to them based on their interests. So it might be they're interested in the beach, and we might use a poster of a beach scene that's going to stimulate that language and cognitive development as well,' Leesa explains.



Building partnerships with families and communities

Language and communication skills also form an important component of the Hatton Vale community's response to the AEDC findings. Through forging links with Queensland universities and private practitioners, Leesa and her colleagues were able to establish an extensive speech therapy program. Experts from the University of Queensland visited the kindergarten to conduct speech and language screening of each child, with reports provided to both the kindergarten and the families. The information also formed part of the transition process to school. 'For the 2013 group of kindergarten children, the results were passed on so that families could share that with the school,' says Leesa, 'just to give them an insight into each child and whether they need any additional support or not.'

Students from the University of Queensland also visited the kindergarten and designed a series of resources for the educators to use and share with their colleagues in the school and long day care services. Families are also able to borrow the resources, which provide 'simple activities that give families ideas, so that they can follow through with different kinds of communication techniques and language at home', Leesa says.

The University of Queensland students and clinical educators also provided professional development for educators in the Hatton Vale area, which drew 'a great response'. In addition, they ran two parent information sessions on speech and language and occupational therapy, to provide opportunities for families to ask questions about their children.

For families, the speech therapy program has been highly significant. 'We were fortunate enough to establish a relationship with the university so that they are now providing services for families,' explains Leesa.

Leesa also discovered that many families had little knowledge of the clinical options available to them. 'That meant providing families with the information on services they could access, which they weren't aware of, such as the enhanced primary care incentive through Medicare. This means they can access up to five funded sessions of speech therapy, occupational therapy and other services,' she explains.

‘One of the things that we really wanted to get out into the community was the knowledge and awareness that families can monitor their children, and be aware of help they can give them and different community services they can access.’

The professional focus on the AEDC data in Hatton Vale is now well entrenched. ‘Our early years network meets monthly now, just to touch base on what’s happening within the community, as well as discussing AEDC data and upcoming events, our transition to school program, perceptual motor program, and share any ideas that anyone has to change it or evaluate it in any way,’ says Leesa.

In terms of advice for other services wanting to use AEDC data, Leesa recommends ‘researching the data for your specific community and building those partnerships with your community and your schools. She also advises ‘building relationships with health care professionals who can come in and provide services for you’, whether they are based in public, private practice or tertiary institutions. Finally, Leesa notes that educators should ‘find ways that such projects can be completed within the constraints of everyone’s budgets’.

‘I think the benefit of the collaboration, and something that we’ve been able to achieve throughout our project, is to promote awareness in the community of any vulnerabilities or issues that may present, and then promote screening and early identification, providing the best possible start for our children as they head off to school,’ says Leesa.

Reflections

- How might you use the AEDC data from your local context to identify opportunities to support children’s development in your educational programming?
- What partnerships can be formed with local networks, schools and early childhood services to review and respond to the AEDC data?
- What opportunities are there to work with organisations or professional services to improve support for educators, families, and children in your community?

