

Australian Early Development Census (AEDC)

Case study: Eskay Kids Springfield Childcare and Early Education Centre Springfield

Resources for Queensland early childhood education and care services

We held a team meeting where we collaboratively planned together. We looked at the AEDC data together and brainstormed some ways that we could provide learning opportunities through our program.

Springfield is a large, master-planned community made up of a number of growing suburbs, attracting up to 20 new households per week to the area.

Eskay Kids Springfield Childcare and Early Education Centre opened in December 2012 and is a 67 place service that has four rooms with children aged from 15 months through to five years of age. When a director within the organisation attended an information session on the Australian Early Development Census (AEDC), it allowed them to assess and understand the data in more depth. With this knowledge, they found that children in their community were showing higher vulnerabilities in three domains of the AEDC.

Centre Director, Kristy-Lee Hudspith analysed the data, noting the need for an additional focus on supporting physical health and wellbeing. As a long day care service they know that they are well placed to provide opportunities to support children in their learning and development.

One of the main challenges for the service was how to interpret the AEDC data and then decide how they could build relevant learning experiences for the children. They began by searching for online resources, and used their own knowledge and expertise of children's development, building on children's strengths.



Putting the AEDC into practice

As part of their self-assessment of the areas within the National Quality Standard, the team at Springfield Childcare and Early Education Centre used data from the AEDC in their Quality Improvement Plan. They had already identified the need to improve physical health and wellbeing, so it was only fitting that they used the AEDC data as evidence to support improvements in that area. As a team, they held meetings to discuss the data and work together on ideas and suggestions for improvements that were achievable within their setting.

‘We’ve provided group game opportunities where children can be involved in active play. We’ve also provided quite open ended experiences outdoors with loose parts and recycled materials for them to build and construct with,’ Kristy-Lee explains.

The service introduced an external physical education program that provides two half-hour sessions for the children once a week. Further, they got the children involved in growing their own produce in gardens and also included cooking experiences where children learned to use fresh ingredients and eat nutritious meals.

‘We use an outdoor classroom approach to promote physical activity and encourage extended periods of physical play through our outdoor environment. We plan specific experiences for the children to engage in such as climbing, large group games and yoga sessions in shaded areas,’ she says.

Of particular significance is the way in which the service offers flexible routines that allow children to be in tune with, and make decisions, when they are feeling hungry, thirsty or tired.

‘We talk a lot with the children about how they are feeling and what makes them feel hungry and then we give them opportunities to discuss the amount they wish to eat and they identify when they are feeling full.’

Another important initiative was to develop a parent resource library in the foyer where families can borrow resources with encouragement from educators.

Integral to the team’s focus on the AEDC data are their bi-monthly meetings, when they come together and reflect on their programs. ‘There are also informal opportunities to share information as well, on a daily basis or during programming sessions,’ Kristy-Lee describes.

The service has seen great improvements, particularly with children’s nutrition. Despite efforts to provide nutritious foods in the past, the children were reluctant to eat the food offered. Through educating the children about food and how it helps your body, they are now more willing to eat nutritious options.

The road forward for Kristy-Lee and her team is to continue to provide a wide range of active play and reflective experiences for the children and promote healthy eating and healthy lifestyles through their programs. They will achieve this through collaborative partnerships with organisations that can educate them on ways to improve their practice. The team will also collaborate with local schools utilising the AEDC data and discussing ways that they can share information to support successful transitions for children.

Reflections

- How might you share AEDC data with educators to identify opportunities to respond to community vulnerabilities through educational programming together?
- How can approaches to learning informed by the AEDC be continued at home, supporting families as first teachers?
- What opportunities are there to work with organisations or services to improve support for children in areas of vulnerability within the community?

