



# **Operational Guidelines: Flexible Support Packages**

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## **Operational Guidelines: Flexible Support Packages (FSPs)**

## 1. Introduction

The 2021/22 State Budget allocated funding for Flexible Support Packages (FSPs) for children with complex trauma in funded kindergarten programs who are experiencing complex and significant learning and developmental barriers or who have needs that impact their inclusion and participation.

#### **FSPs** objectives

FSPs primarily aim to provide responsive, short-term support for an individual child with complex trauma that presents with extreme or concerning behaviours. FSPs seek to achieve this through a range of available supports, such as targeted in situation specialist support that builds the capability and capacity of early childhood teaching teams to address the specific child's needs.

FSPs complement but do not duplicate available inclusion programs, such as School Readiness Funding (SRF), Kindergarten Inclusion Support (KIS), National Disability Insurance Scheme (NDIS) plan and/or the Commonwealth Inclusion Support Program (ISP).

Each successful FSP application will receive support for up to a 10-week period. This intends to:

- act as a short-term support while longer-term program supports are applied for and arranged, and/or
- stabilise the child's enrolment and attendance in the kindergarten program
- preserve the relationships between the child and familiar adults, including the kindergarten teacher and educators
- create safety, connection and predictability for the child within the kindergarten program.

#### FSPs eligibility criteria

Child-level eligibility criteria

- Child must be enrolled in and attending a funded kindergarten program.<sup>1</sup> FSP applications for children enrolled in unfunded kindergartens are ineligible.
- Child has a background of complex trauma e.g. prolonged state of stress, repeated exposure to adverse life experiences, in out-of-home care (OoHC), or is a child known to Child Protection (CKCP).<sup>2</sup>
- Child demonstrates presenting concerns that require immediate support to stabilise their attendance and inclusion in kindergarten.

#### Service-level criteria

- Services are unable to access appropriate and timely support through existing programs.
- Requested supports are not already funded through other available funding streams.

<sup>&</sup>lt;sup>1</sup> A funded kindergarten program means a kindergarten program that complies with the requirements of the Victorian kindergarten policy, procedures, and funding criteria.

<sup>&</sup>lt;sup>2</sup> Screening form provides a non-exhaustive list of potential child and family characteristics of complex trauma.

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In addition, the experience level of teachers and educators working with the child will also be considered, such as previous trauma-informed training participation. Priority will be given to services where the teacher working with the child is a recent graduate.

#### Defining complex trauma and its impact in the early years

For children in early childhood, complex trauma describes the experience and impact of repeated, prolonged and/or unbuffered exposure to adversity and overwhelming stress. This occurs within a caregiving context and at a time of critical brain development and dependence on adult caregivers. Some children have also experienced the cumulative effect of historical and intergenerational trauma. In these cases, children have been witness to, and experienced the trauma, that government policies have had on their families and communities. This is particularly true for Aboriginal and Torres Strait Islander children and those of refugee and asylum seeker backgrounds.<sup>3</sup>

Children impacted by complex trauma in the early years can present with a range of different learning and developmental needs. These needs and presenting concerns can be especially challenging within the setting of early years education and care. The effects of trauma can affect a child's ability to participate, and the way that staff and other children respond to them.<sup>4</sup>

Longer-term consequences of complex trauma in the early years includes educational and developmental trajectories such as difficulties with:

- attention and learning
- forming safe, secure and satisfying relationships
- regulating emotions, behaviour and physiological triggers
- exploring, discovering and understanding themselves and the world around them
- developing physical and self-care skills.<sup>5</sup>

<sup>&</sup>lt;sup>3</sup> Australian Institute of Health and Welfare (AIHW), '<u>Children living in households with members of Stolen Generations</u>', catalogue number IHW 214, AIHW, Australian Government, 2019.

<sup>&</sup>lt;sup>4</sup> E Berger, L O'Donohue, L Chinh, G Quinones and M Barnes, 'Early Professionals' Perspectives of Dealing with Trauma of Children', *School Mental Health*, 2022, 15(1): 1-12.

<sup>&</sup>lt;sup>5</sup> National Workforce Centre for Child Mental Health (NWCCMH), <u>*Complex trauma through a trauma-informed lens:</u></u> <u><i>Supporting the wellbeing of infants and young children*</u>, report prepared by M Hervatin, NWCCMH, Australian Government, 2021.</u>

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#### Indicators of complex trauma

Box 1 below provides examples (without context) to guide understanding of possible presenting concerns that may be indicators of complex trauma.

*Box 1:* Possible indicators of complex trauma that may impact inclusion and participation in kindergarten programs:

- **Anxiety and/or fear** (e.g. self-soothing difficulties, distress when leaving carer or in transitions, head banging, self-harm, absconding)
- Significant difficulties regulating attention, emotions and behaviour (e.g. unable to focus; escalates quickly into distress or aggression; often appears withdrawn and absent)
- **Difficulties in peer relationships** (e.g. difficulties with taking turns, developing empathy, or relinquishing control within shared play)
- **Regressed or challenging eating, sleeping and toileting** (e.g. tired and irritable; doesn't notice when hungry, thirsty or full; toileting problems; delayed self-care skills)<sup>6</sup>
- **Difficulties in relationships with adults** (e.g. child may be indiscriminate, overly self-reliant, or reluctant to engage with adults)
- **Developmental delays and impaired cognition** (e.g. delayed receptive and expressive language)

#### The importance of early intervention

Children with complex trauma are among the most disadvantaged in the State. Many of these children experience intersecting forms of vulnerability, such as disability, refugee or asylum seeker backgrounds and/or involvement with family services or Child Protection. Research has shown that quality early childhood education and care services can address the impact of toxic stress associated with trauma on children's learning and development.<sup>7</sup>

Intervening early for this priority cohort is critical for several reasons:

- Fully engaging in a kindergarten program builds strong foundations for learning and development. The Department of Education (DE) recognises that vulnerable cohorts have the most to gain from a kindergarten program, as emphasised in existing DE policies and reforms, such as Priority of Access Criteria and <u>SRF</u>.
- Early adverse life experiences can affect the development of brain architecture. The early years are a period of rapid brain growth and change. The brain architecture built at this time provides the foundation for all future learning, behaviour, and health.
- The early years are a critical window for responding to the developmental needs of vulnerable children. Children who experience complex trauma have frequently had less exposure to the kind of healthy relationships that provide optimal brain development. Positive, early experiences, support from adults and the development of adaptive skills counterbalance the consequences of early adversity. This results in long-term impacts on child health, wellbeing and educational outcomes.

<sup>&</sup>lt;sup>6</sup> J Howard, 'Trauma-aware early childhood education and care', *ECA Research in practice series*, Early Childhood Australia, 2020.

<sup>&</sup>lt;sup>7</sup> The University of Melbourne, <u>24 months in the Early Years Education Program: Assessment of the impact on children</u> <u>and their primary caregivers</u> (Report no. 4), 2019.

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• Targeted, relationship-focused interventions can address developmental risks and promote protective factors. Children learn to regulate, relate, and reason through attuned, consistent, and repetitive interactions with caring adults and environments.

#### Building on existing quality supports and processes

FSP support is available when a kindergarten service has demonstrated that they have made reasonable adjustments and embedded strategies and supports within their existing capacity to support the child, but that these have been insufficient to fully include the child. It is also designed to complement existing resources that are designed to facilitate the provision of a quality kindergarten program, including:

- skills of early childhood teachers, educators, family and community
- professional development opportunities, particularly those that are trauma-informed or aware
- School Readiness Funding (SRF), including as Allied Health Professionals and traumainformed training
- Kindergarten Inclusion Supports (KIS), such as specialist consultancy, Additional Assistants and the Specialised Equipment Program (SEP)
- cultural inclusion supports, such as the Culturally and Linguistically Diverse (CALD) Outreach program and free translators
- Preschool Field Officer (PSFO) program, in instances where the PSFO provides support to the child's kindergarten room
- Inclusion Support Program (ISP), in instances where the child has planned or current support in the kindergarten service. Please note this is only available in Commonwealth funded early childhood settings
- National Disability Insurance Scheme (NDIS), in instances where the child has planned or current support in the kindergarten service.

Where applicable, FSP's should interact with established individualised planning activities. For instance, FSPs should be incorporated into discussions and enhanced planning undertaken during collaborative planning meetings such as Program Support Group (PSG) meetings.

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## 2. FSPs Expected Practices, Practice Principles and Approved Supports

The intervention priority for children with complex trauma is establishing responsive relationships and environments that restore the child's sense of safety, control and predictability.<sup>8</sup>

The presence of at least one familiar and supportive relationship, as well as regular opportunities to develop effective coping skills, are the building blocks for social-emotional development, school readiness, future learning and life-long health.<sup>9</sup>

#### **FSP Practice Principles**

FSP Practice Principles are instructive when identifying and implementing appropriately targeted supports for children with complex trauma. All planned interventions and supports requested must reflect the Practice Principles:

- 1. **Trauma-informed** all interventions and supports hold an understanding of trauma-based behaviour and seek to enhance the capability and knowledge of the adults who care for and educate the young child.
- **2. Safety and relationships** all interventions and supports prioritise elements of the child's safety, building trust with and for the child and protecting and repairing their relationships.
- **3.** Child-centred all interventions and supports are tailored, child-centred and aligned to the child's unique circumstances and significant stressors.
- **4. Reflective and collaborative practices** all interventions and supports are informed by reflective, collaborative approaches involving the team around the child to ensure targeted identification of strengths, challenges and support needs as they evolve.
- **5. Culturally inclusive –** all interventions and supports are culturally inclusive and support the child's connection to culture, meaning the environment is spiritually, socially and emotionally safe.

These principles are used to guide decision-making on supports requested through the Application process.

#### Approved supports

FSPs are designed to provide short-term, immediate support for a period of 10 weeks. Requested supports and goals must:

- be informed by the FSP Practice Principles
- not duplicate activities already available to the service, funded by other streams, such as SRF Allied Health allocation, SRF planned activities and KIS
- reflect integrated individualised planning for the child's immediate inclusion in the kindergarten program
- be used for building service capacity and capability to address the child's individual needs.

<sup>&</sup>lt;sup>8</sup> J Howard, 'Trauma-aware early childhood education and care', *ECA Research in practice series*, Early Childhood Australia, 2020.

<sup>&</sup>lt;sup>9</sup> National Scientific Council on the Developing Child (NSCDC), 'Connecting the brain to the rest of the body: Early childhood development and lifelong health are deeply intertwined', 2020 (Working Paper no. 15).

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FSPs can be used for a range of supports that seek to address the learning and developmental needs of children impacted by complex trauma. It is up to the approved provider to identify and arrange additional supports.

Providers will be reimbursed by DE following implementation.

Payment is only available for support(s) accessed after the approval of an FSP and when the support(s) has been implemented. Please note requested and approved supports are inclusive of GST. Please see <u>Section 3: FSP Screening and Application Process</u> and <u>Section 4: Assessment of an FSP Request</u>.

The level and type of support(s) sought will determine the amount of funding provided. Funding is limited and available for approximately 50 FSPs state-wide each year.

When considering FSPs supports, the approved provider, funded kindergarten program staff and teacher are encouraged to consider how the requested FSP support(s):

- complement each other, and existing activities planned through other DE programs, such as SRF and KIS
- seek to strengthen the kindergarten teaching team's capacity and capability to establish and maintain effective relationships with the child and address their specific needs
- facilitate a co-ordinated approach with other professionals involved, without overwhelming the child with multiple activities.

See <u>Appendix B</u> for a case study demonstrating how FSPs can be used.

See <u>Appendix C</u> for a list of potential SRF menu items and providers, for consideration.

FSP Support	Requirement		
Trauma- specialist or allied health practitioners	Time-limited (up to 10 weeks), in-situation coaching to build the kindergarten teaching teams' understanding of the child support needs and ability to implement targeted strategies to support the child's participation and inclusion.		
Backfill	<ul> <li>Only used in situations that allow kindergarten teachers and educators to:</li> <li>participate in coaching and debriefing sessions with the trauma consultant or allied health staff, purchased through an FSP</li> <li>engage in collaborative meetings such as PSGs that support learning and development and establish specific goals relating to the child</li> <li>participate in trauma-informed professional development or training, purchased through an FSP.</li> </ul>		

#### Table 1: FSP item support requirements

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FSP Support	Requirement
Additional educator	<ul> <li>Time-limited engagement (up to 10 weeks for funded kindergarten hours only)</li> <li>Can be degree-trained kindergarten teachers or Diploma or Certificate-III trained educators</li> <li>The kindergarten teacher/educator works directly with the child, implementing the proposed strategies and interventions planned, with the additional capacity provided across the kindergarten group</li> <li>This short-term capacity support allows for the kindergarten teacher or educator to implement agreed early intervention strategies and trauma-informed practices as per the FSP Practice Principles</li> </ul>
Additional assistant	<ul> <li>Where an additional educator is not available an additional assistant may be used</li> <li>An additional assistant does not hold an early childhood qualification</li> <li>The additional assistant must not work exclusively with the identified child and is not to be used to increase staff levels to meet licencing requirements</li> <li>The kindergarten teacher works directly with the child, implementing the proposed strategies and interventions planned, with the additional capacity provided across the kindergarten group</li> <li>This short-term capacity support allows for the kindergarten teacher to implement agreed early intervention strategies and trauma-informed practices as per the FSP Practice Principles</li> </ul>
Additional hours	<ul> <li>Can be used when existing kindergarten teachers or educators work extra hours outside of their regular contract hours</li> <li>This must be to participate in professional development or coaching provided through an FSP, overtime to conduct family/carer support meetings or to attend consultation sessions outside regular working hours</li> </ul>
Professional learning	Trauma-informed or other relevant training and professional development may be purchased where this capability building cannot be provided through SRF.
Medical specialist recommended equipment or learning resources	<ul> <li>Evidence of a medical specialist's recommendation for equipment or learning resources is required, such as a letter from an allied health practitioner or paediatrician</li> <li>Equipment and resources must be necessary for the child's inclusion, meaning that without this support the child would not be able to participate in kindergarten</li> <li>Equipment that is expected to be provided as part of a quality kindergarten program or that the parent/carer is expected to provide is out of scope</li> <li>KIS Specialised Equipment Program should be explored before requesting specialist recommended equipment through an FSP</li> </ul>

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## 3. FSP Screening and Application Process

Applying for an FSP comprises of two key steps:

1. **Screening phase** (completed by the Early Childhood Improvement Branch (ECIB) team) – to screen for provisional eligibility and ensure existing program supports have been explored and are not available to immediately support the service's capacity and capability.

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2. **Application phase** (completed by services) – to gather further information about how the child's past is impacting the child's learning and development and what collaborative plans have been implemented to assist the child's inclusion through the development of goals, interventions and requested FSP supports.

Submission can occur at any time throughout the year when a child is enrolled and has been attending a kindergarten program. An outcome of both the Screening and Application Forms can be expected within five business days of receiving a fully completed form.

Further information on these two steps is explored below. <u>Section 5</u> provides information on the FSPs acquittal and payment process.

#### Step 1: FSP Screening Form

#### How does the FSPs process begin?

As soon as a child is identified as requiring additional support through a FSP, the professional who identifies the child sets up a meeting with the ECIB team to discuss the child and service context. For example, this could be a meeting between the approved provider, teaching team, ECIB team and Early Childhood Learning Advisor (ECLA).

The professional who identifies the child can be a DE funded support staff or a kindergarten service staff member. The professional who identifies the child and liaises with the ECIB team should be the person with the most information on the child's educational and developmental support needs.

#### Who is involved?

The ECIB team is responsible for:

- receiving a request for an FSP from a kindergarten teacher, service manager or educational leader, ECLA, PSFO or other DE support staff
- leading the completion of the Screening Form in consultation with the kindergarten teacher, service manager or educational leaders, ECLA or other relevant support staff as appropriate
- determining whether existing program supports have been explored and are not available to support capacity and capability building necessary to immediately support the child and service
- emailing the Screening Form to <u>flexible.support.packages@education.vic.gov.au</u> with [service name] FSP Screening Form –and [DE area] in the subject line.

At a minimum, the ECIB team must collaborate with the kindergarten program teaching team to gather and confirm de-identified child information, service context details and confirm approved provider support for seeking an FSP. The ECIB must also ensure that approved provider is aware of and endorses the submission of Screening Form.

Further information on the ECIB team's responsibilities can be found in the **Frequently Asked Questions for DE staff.** 

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Screening Forms that have not been completed and submitted by a member of the ECIB team will not be processed.

#### What information is required in the Screening Form?

Information gathered in the Screening Form requires the following information:

- **contact information**, including service and provider details and professional contact information
- child education context, including enrolment and kindergarten attendance
- de-identified child and family characteristics (tick boxes), including but not limited to OoHC care status, CKCP, Child FIRST/Orange Door, diagnosed disability or developmental delay, refugee/asylum seeker background, and family experience of mental illness or homelessness
- **de-identified indicators of complex trauma** that place the child's safety, relationships and enrolment and attendance in the kindergarten program at risk (tick boxes), see <u>Box 1</u>
- **funding and support from other sources,** including information on existing funding and supports, including SRF, KIS, PSFO, AEL, ISP and NDIS.

See page 2 for detail on FSPs eligibility criteria.

#### What is the outcome of the Screening Form?

A Screening Form may be submitted to the FSP email at any time, with an expected response within five business days. Those who progress through Step 1 are provisionally eligible and move on to Step 2: FSP Application Form, for further information, assessment and prioritisation.

Provisional eligibility is communicated to the approved provider and kindergarten service via email from the FSP Central Team. The ECIB contact and other relevant DE support staff involved in the screening stage are copied into the correspondence.

#### Step 2: FSP Application Form

This process commences *after* the approved provider and kindergarten service receive provisional eligibility from the FSP Central Team via email.

#### Who is involved?

The kindergarten teacher, service manager or educational leader is responsible for completing the Application Form and submitting it to <u>flexible.support.packages@education.vic.gov.au</u> with **[FSPID]** [service name] FSP Application Form –and [DE area] in the subject line. The approved provider must also endorse the FSP Application Form requested supports.

The ECIB team member who led the Screening Form process must also be copied into the email submitting the Application Form.

Consent from the child's parents/carers/legal guardian is required before the submission of the Application Form.

Additional stakeholders should be consulted as part of this process, including (where appropriate):

- ECLAs, in situations involving children in OoHC
- Koorie Engagement Support Officers (KESOs)/Koorie Preschool Assistants (KPSAs), in situations involving an Aboriginal or Torres Strait Islander child

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- PSFOs or SRF allied health staff, in situations where professionals have been involved in identifying the child for additional support
- the ECIB team, such as a KIA or ECIB manager
- the parent/carer/legal guardian.

#### Why is consent required?

Consent is required to approve the supports and interventions requested, and for collecting the child's name and other details for monitoring and reporting purposes.

In situations where consent cannot be obtained quickly, provisional eligibility enables services to commence organising service-level supports such as seeking availability of a Trauma Consultant in the event that the Application is approved. This will enable FSP supports to be implemented as quickly as possible once consent is obtained and the full Application Form is submitted. An application cannot be approved and supports cannot be implemented before consent is received.

#### What information is required in the Application Form?

The FSP Application Form is an extension of the Screening Form. The additional information collected provides further information to confirm eligibility and prioritise applications in situations where there is excess demand for support.

As noted above, consultation with parents/carers/legal guardians and relevant DE support staff should occur to capture additional information.

Information gathered in the Application Form requires the following information:

#### Child-level information

Please note that only broad descriptions are required. Do not provide specific details, incidents or identifiers (e.g. names of peers or adults).

The following child-level information is required:

- relevant care and educational history and context (such as placement stability, changes in living and care environment, barriers to attendance, engagement and attendance at prior early childhood settings)
- **strengths and protective factors** (such as the child's key interests and strengths, observed instances of child engagement in play-based activities)
- **key presenting concerns** and their impact on the child's safety, relationships and participation in the kindergarten program (such as wellbeing concerns, observed behaviours)

#### Service-level information

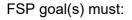
The following service-level context information is also required:

- contact details
- **kindergarten program context**, such as number of children in the kindergarten program, capacity building challenges and opportunities
- prior FSP supports
- **planning information**, including details of any collaborative planning that has taken place with relevant professionals and adults around the child.

#### FSP goals and requested supports

Information on the FSP requested support/s are also requested. This includes the type of support, name, description, duration, proposed organisation and estimated costs that are inclusive of GST.

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- be for short-term, immediate support (up to 10 weeks) and provide support for the funded kindergarten program hours only
- reflect the <u>FSPs Practice Principles (page 6)</u>
- demonstrate alignment to the learning and development needs outlined in the child and service context.

#### How are requested supports and providers identified?

FSPs provide immediate support that is flexible to the child and service context. As part of the package's responsive and flexible nature, the kindergarten service and approved provider must consider whether capacity exists locally to deliver on requested supports within 10 weeks.

Kindergarten services and approved providers should consider the following when identifying an organisation to deliver FSP supports:

- SRF menu providers and items (see <u>Appendix C</u>)
- local organisations that have allied health expertise and experience delivering traumainformed practices in the context of early childhood
- local early childhood educator relief agencies that have a pool of educators or additional assistants
- approved provider or service workforce to cover backfill, additional hours or additional educator time.

Contact your local ECIB team if you have any further questions on identifying potential FSP supports.

See <u>FSP approved supports</u> (page 6).

#### FSPs beyond 10 weeks

In circumstances where, after the 10 weeks of support, the child's longer-term inclusion cannot be supported through available programs, an additional FSP request can be submitted. It is recognised that for some services and children, additional support to plan for and respond to the child's needs may be required. This may be likely where a child is experiencing significant and ongoing complexity within the educational context.

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### 4. Assessment of an FSP Request

The Early Learning Participation Branch receives and makes decisions on the FSP Screening and Application Forms based on the <u>child and service criteria</u> (page 2).

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#### How and when will an outcome be communicated?

An outcome of the Application Form will be communicated to the approved provider, kindergarten service, ECIB team and ECLAs (where appropriate) within five business days of a fully completed Application Form submission. In situations where additional information is required to make a decision, the FSP Central Team will request further information within five business days.

## **5. FSPs Acquittal and Payment Process**

The Acquittal Form and payment process will be outlined in the FSP outcome email. This email also provides the approved support(s) to be purchased. Following the implementation of the approved FSP support(s), the approved provider is required to submit:

- the Acquittal Form, outlining the approved FSP support(s) and amounts, along with the spent funds per each approved FSP support
- evidence that the FSP approved supports have been implemented (see <u>Table 2</u> below).

This will provide the evidence required for the Early Learning Participation Branch to issue a reimbursement payment via KIMS to the approved provider.

Table 2: Required evidence	r each FSP approved support
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Approved support	Evidence required
Professional learning, Trauma-specialist or Allied Health Practitioners, Specialised equipment	Invoice of approved supports including organisation name, date and cost.
Backfill, Additional hours, Additional Educator, Additional Assistant	A record of the staff member's name, dates of engagement, hours worked, hourly rate, where they have been sourced from (external or internal) and evidence of expenditure.
	Examples of evidence include:
	<ul><li>Screenshot of payroll system</li><li>Invoice from an educator relief agency.</li></ul>

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### 6. Transfers and Withdrawals

Children who have a background in complex trauma are likely to experience instability in their care and living environment. In a situation where a child moves to a new kindergarten program, a transfer of support should be considered.

#### **Transfer of application**

When a child identified in an FSP application transfers to another kindergarten program, the kindergarten service is required to advise the ECIB team. The ECIB team should consider the FSP in the context of the new service's supports. At this stage, the ECIB team should inform the FSP Central team of this change. This must take place within two weeks.

If it is determined that the FSP is required in the new funded kindergarten program context, the ECIB team in the new DE area are required to update and submit a Screening Form to reflect the new service. The new funded kindergarten service will be required to complete a new application form.

If the child is transferring to a kindergarten program in another DE area, the original ECIB team is responsible for transferring a copy of the Screening Form to the ECIB team in the new DE area.

#### Withdrawal of support

If a kindergarten service is advised that a child identified in an approved FSP application will no longer be attending their state-funded kindergarten program, the approved provider or kindergarten service is required to inform the ECIB team within two weeks.

If the approved supports can no longer be implemented, the approved provider or kindergarten service is required to inform the ECIB team as soon as practicable. The ECIB team is then required to notify the FSP Central Team.

In these instances, the approved FSP support allocation for the inclusion of this child will cease.

# **APPENDICES**

## **Appendix A: Available Participation Supports**

Available participation support	Further information
Access to Early Learning (AEL)	Access to Early Learning
Early Childhood Improvement Branch (ECIB), including ECIB Managers and Kindergarten Improvement Advisors (KIAs)	Contact an Early Childhood Improvement Branch
Inclusion Support Program (ISP)	Inclusion Support Program
Kindergarten Inclusion Support (KIS) and KIS Specialised Equipment Program (SEP)	Kindergarten Inclusion Support Kindergarten Inclusion Support program Specialised Equipment Trial
Koorie Engagement Support Officers (KESOs)	Child care and kindergarten for Aboriginal children
Koorie Preschool Assistants (KPSAs)	Child care and kindergarten for Aboriginal children
LOOKOUT and Early Childhood Learning Advisors (ECLAs)	LOOKOUT Education Support Centres Out-of-home care
National Disability Insurance Scheme (NDIS)	Early Childhood and the National Disability Insurance Scheme (NDIS)
Preschool Field Officer (PSFO)	Preschool field officer program
Programs Support Groups (PSGs) and Individual Learning Plans (ILPs) <sup>10</sup>	Programs Support Groups (PSGs) in kindergarten Individual Learning Plans for Children in Out-of- Home Care
School Readiness Funding (SRF)	School Readiness Funding

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<sup>&</sup>lt;sup>10</sup> Note that PSGs are a form of collaborative planning meetings that are mandatory for children accessing KIS and children in OoHC. ILPs are only mandatory for children in OoHC.

## **Appendix B: Case Study**

#### Child context

Jana is a 4-year-old girl in her second year of early childhood education. She was placed in out-ofhome-care (OoHC) in her first year of life and lived in a long-term foster care placement with her siblings until four months ago. At this time, she transitioned into kinship care with her maternal aunt and two school-aged cousins, with enrolment in a new long day care kindergarten setting.

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#### Relevant learning and developmental history

Jana's developmental history features significant early adversity, trauma, and neglect. This includes in-utero exposure to parental substance abuse and family violence which resulted in her being placed in OoHC, and subsequent rejection by and separation from her siblings.

Her early life experiences have shaped her ability to form secure attachments. Jana can experience heightened anxiety in relation to both adults and children, with accompanying difficulties regulating her emotions and behaviour. This is complicated by an expressive and receptive language disorder.

In her previous kindergarten setting and prior to transitioning into kinship care, Jana had been settled and well engaged, without any reported presenting concerns.

#### Key presenting concerns

Jana is demonstrating escalating incidences of angry and aggressive behaviour within her new kindergarten program, with these difficulties increasingly jeopardising the safety and wellbeing of other children and her ongoing enrolment at the kindergarten setting.

Her teacher and Additional Assistant exhibit low confidence in predicting and managing Jana's support needs despite their significant efforts. They report that Jana is very difficult to soothe and/ or redirect. They are aware that Jana did not require intensive support at her previous early learning environment, with growing kindergarten staff frustration about the suitability of her current carer and the therapeutic supports in place.

#### Service context

The service has made use of available supports but with Jana's background of intersecting vulnerabilities, there appears to be challenges in support coordination, integration and planning strategies and adjustments.

Supports available for Jana and the service include:

- NDIS package occupational therapist and speech and therapeutic intervention, sourced through Berry Street Take 2 Program (approved).
- KIS Additional Assistant
- ISP Additional Educator
- SRF Build Resiliency in Pre-schools program, Reflective Practice program, Wellbeing Social and Emotional Support with an OT program.

Educators at the service are relatively new, with an average of less than four years' experience. Staff reportedly lack confidence in their skills and ability to support Jana, even with an Additional Assistant in the room.

Department

of Education

TORIA

State Government

#### Requested support and expected outcomes

A trauma-informed consultancy and training package is requested to support in identifying the core priority strategies for Jana's immediate stabilisation and inclusion in the program and identify how existing supports can be integrated and aligned in the short and longer term.

This request involves:

- in-kindergarten observations and coaching, where the trauma consultant provides advice and evidence-informed strategies to address the child's needs, promote protective factors and ultimately improve the child's engagement and inclusion in the program
- after-session debriefs, where the EC teacher can clarify strategies and approaches and build an understanding of trauma-informed practices.

## **Appendix C: School Readiness Funding Items and Providers**

The table below provides an overview of the SRF Menu items and providers that may be considered by approved providers when identifying FSP requested supports as part of the FSP Application Form.

EDUCATION

**CTORIA** 

State Government Department of Education

SRF Menu Item	Professional learning	Consulting / Coaching	In-Person / On-Site Option	Online Option
ACF Healing Relational Trauma Through Play				
ACF Introduction to Relational Trauma				
ACF Resources to Support Partnership with Parents Affected by Trauma				
ACF Trauma Informed Practice				
Bethany Community Support Professional Development Packages – Working with Vulnerable Children				
Brain Power: How Our Understanding of Brain States Can Support Social and Emotional Development				
Family Violence in a Child's World				
Trauma Informed Early Childhood Training and Professional Conversations				
Trauma Informed Practice (Berry Street Education Model)				
ACF Trauma Informed Mentoring				
Alannah & Madeline Foundation Early Years Trauma Consultancy Service (Early Years TraCS)				
Attachment and Trauma Theory - Understanding and Applying Trauma and Attachment Theory in the Early Years				
Kids First Trauma Informed Training and Consultancy				$\square$
SEED Program				