

Feedback from Service Delivery Model

All feedback received was collated and themed, feedback included proposed changes to the Service Delivery Model, clarifying questions and key concerns or challenges to be considered in its implementation. The proposed changes were themed into sections, with accompanying comments and rationale for actions made in relation to this. There are some recommendations made for implementation and further training and development in response to some themes.

The feedback has been set out into 17 broad sections; Structure of the document, which considers how this document relates to other documents, clarity of information, language used and considerations for overarching structure. The other sections relate specifically to sections within the Service Delivery Model and include; Forward, Introduction, Service Scope, Principles, Legislation and Policy Context, Overview of model, Commissioned service, ATSI considerations, Collaboration, Case Closure and specific discipline sections. Where there were comments that did not fit within these categories they have been included as a group in the general section.

Feedback	Actions/comments	Recommendations
Structure of Document		
Suggest a range of documents as not clear who the audience is and if for SSS needs more detail than is in here	There are a range of documents that sit with the service delivery model that support the information within it. <ul style="list-style-type: none"> - Catalogue of services - Workforce capability frameworks - Service delivery standards - Range of flowcharts and procedures to outline more detail 	Need for a communication strategy in implementation
Way too complex and long, unwieldy. Very long and not user friendly. Can some tables/graphics be removed when they are saying the same thing – its not really about making it look pretty	There have been varying opinions regarding the length of the document. Length and detail have been guided by the feedback regarding the content and detail required. Formatting and hyperlinks may assist in user friendly. Some people engage with tables/graphs and others with text so at times there is the requirement for both of these. It is easier to read and digest if it is laid out well.	
Overlap between SDM and the catalogues of service, could combine documents	There will be, they are for different purposes. Catalogues are a quick reference for preschools and schools. There should be commonalities across them. Combination of documents will make document too lengthy for schools/preschools	
Schools want single page	Catalogues of service provide much	All teams to send

outlines who to ring for which service	simpler direct information.	information brochure start of each term
Electronic hyperlinks to appendixes that open in new tab		?? need to work with comms regarding this one, good suggestion
Change improve capability to improve capacity	Changed	
Consistency in language regarding WAVES not same for schools	This is the reason they are described as proactive, targeted and intensive as there is a difference in schools understanding of 1,2,3	Ensure this is communicated to schools as part of implementation
Some statement that child will always be at the centre	This is articulated in the guiding values at the start of the document	
Holistic approach on page 6 and 15 is a repetition	These have two different contexts. On page 6 this refers to holistic as an underpinning principle of service. ON page 15 it is the context of describing the frameworks and models from which we work	
Can page 5 and 6 repetition be avoided	One gives an overarching framework the other describes it. Some people related to visual layout and others to text. It is important to have both of these options in here.	
Add that contacting family to inform that of what will occur constitutes informed consent	Completed	
Change internal divisions to other directorates and divisions in the department	This is difficult in the model, require a simplified title, intent is to describe as internal to the department rather than external	
Service Delivery standards consultation has yet to occur seems to repeat ideas does it add value	Service delivery standards have been through consultation with TMs, CMs, Principal discipline leads and all seniors. Yes, they still need to go for broader consultation. The purpose of the standards and the service delivery model are different. The service delivery standards provide a framework upon which we can determine if we are meeting expectations across a range of domains. There should be repetition of ideas, it would be concerning if they did not link and they were different.	Service delivery standards are aimed for consultation towards the end of Term 4/early term 1 2019
Service delivery model and workforce capability frameworks developed to complete SDM is this accurate?	Yes, Service Delivery Standards have been drafted and are ready for consultation and the discipline specific groups will commence developing capability frameworks, psychology has completed draft of theirs	
Discipline service models	Yes, and would be concerning if they	

contain certain elements that repeat what is in other part of the SDM	did not relate. This document is a reference guide and each discipline section also need to flow and have key components that are part of the SSS overarching framework	
Grammar and Tense		Editing prior to finalisation of the document
Discipline service models contain more that is conveyed in catalogues	Yes, there are different purposes the catalogues should provide a simplified version for schools about what can be delivered by each discipline	Information sheet needs to be developed to clarify intent of each document
Numerous statements/assertions made but minimal information regarding how's	The how of services will be more detailed in the specific discipline chapters and the catalogues of service.	
Repetition throughout document with similar sentences can this be combined	Will be reviewed and edited prior to finalisation	
Potential inconsistency – refers to what site needs to do prior to SSS involvement but also about SSS working proactively	There is that tension, SSS may well provide input to build the capacity of preschools and schools to be able provide appropriate intervention prior to our involvement with individual children	
Foreword -include preschools -combine paragraph 3&4 -change to support them to' -concern about breadth of SSS role, ensure reflected in partnership with	Updated Removed paragraph 3 Updated Updated	
Introduction - Purpose and scope of the document Unclear why ATSI statement is on page	Included section Have put higher in document after the foreword	Information sheet needs to be developed, people unclear about audience of document
Service Scope		
Who is eligible for service	This detail is in the chapters for each of the discipline, this provides a general overview of the service.	
Want to know what is not in scope	This has been included where relevant under eligibility	
Principles		
This is the department vision shouldn't this be SSS vision	This was discussed as a leadership group and clearly want to be aligned to department vision	
Included highly skilled	The principles were designed and voted	

workforce in principles	on by all of student support services, have not included here. This aspect is defined in the service delivery standards	
Consistent what are the same service elements?	This refers to that catalogue of services, e.g. a school can expect access to the range of services from a behaviour coach in Para Hills as they can expect from one in noarlunga	
Inclusive – participation in ‘education’ as opposed to ‘schools’	Updated	
Right service right time – doesn’t consider proactive/preventative services	Updated to include this focus also	
Inclusive – should access and achievement be added to participation	Updated to include achievement	
Values partnership with sites what does proactively mean in this context	Proactive in seeking out work with sites and working with them to identify trends, issues etc. It does not refer to Proactive in regards to the model.	
Legislation and Policy Context		
Update Children’s Protection Act to Children and Young People (safety) Act 2017	Completed	
Numerous other legislation, policy and frameworks for inclusion were suggested.	Added that it was not an exhaustive list in this section, but it that these are the core considerations. Included – Disability Inclusion Act Updated Children’s Protection Act to the Children and young people (Safety) Act 2017 It was suggested to included the Education Act, this is highlighted in the prose section	
Overview of Model		
Formatting of core services – missed speech pathology	Formatting updated	
Update language from completes service request to ‘activate’ service request	Completed	
Include health as a service outcome	This has not been included, wellbeing considered to broadly cover health and we can often not directly impact on health outcomes	
Links with other govt and non-govt agencies to ‘deliver coordinated services	Updated	
Joined up approach would	Have not updated. Team around the	

joint approach or team around child be better	child is not always the approach used, 'joine up approach' relates to the literature regarding public sector work and how agencies and departments need to be better coordinated	
Take out health in scope	updated	
Wouldn't we include some of intensive practices in students we assess in targeted group	May well do, the WAVE model is certainly not exclusive to each part and work may shift between these. May also do some proactive work with the school whilst working intensively with a child	Clarity regarding fluidity in the WAVEs in roll out
Last two dot points in targeted are these not proactive?	They are considered to be part of targeted if the education etc. is around support for an individual child or group of children. Again, there is fluidity between each WAVE of intervention	
Targeted – assessment included in service but not in descriptor	Updated	
What is an issues? Incomplete sentence	Amended	
Service plans, are we using these?	Should be some type of service plan, or may be contributing to the student's one plan	
Page 8 – core services delivered through 'domains' of practice not consistent with waves	changed	
Service outcomes – change from development of priorities to identification of priorities – page 9	Changed	
Page 11 – referral process adds in that sites should discuss concerns with family and also provide whatever intervention they can first	This is covered in the RTI section and also in the scope of service. Concern that there will be duplication of information if that is added in here.	
Goal focussed suggests time specified than time limited	No sure about this, if you are specifying time then it is limited??	
Commissioned Services		
We will need to make it clear what services would be commissioned and which not	We can't stipulate what services can and can't be commissioned, that will be a negotiation with the particular site and their ED (regarding appropriateness) and SSS (if a core service). SSS may assist in providing advice regarding service type	
Meaning not clear about SSS provide 'direct' services	Have changed to state simply we provide a range of core services.	
Commissioned services		

unclear regarding parameters and SSS role		
Aboriginal and Torres Strait Islander		
Include the most recent AB Ed Strategy as mentioned in the conference	Checking with Aboriginal Education team as it is still in consultation phase	
Has the wording of cultural competency been reviewed by the aboriginal education team	The model has been sent to the Aboriginal Education team prior to it going out for broader consultation	
Are inclusive and culturally competent practice frameworks/approaches? Not sure whether inclusive refers to SS behaviour in its work or promoting inclusion in sites?	Inclusion does not just sit with the behaviour coaches; inclusive practice needs to be embedded across all disciplines and across Whilst inclusive and culturally competent practice are approaches to our work, given the focus from a department level, and that both of these have policy regarding them, they sit outside the frameworks/approaches sections.	
ATSI prioritisation, should be prioritises, when two students of the same significance in presentation	ATSI are priority 1 for all presentations to the service	Need for training for all staff in why ATSI population is a priority for service
Page 9 link priorities of ATSI and children under care as State government priorities	Linked to Department of Education priorities	
Components of Model		
Include departmental partners as well as non-departmental partners in model	Changed to internal and external partners	
WAVES of intervention not an acronym so should not be in capitals	Changed	
Lot of what we are working towards not how we do this	Catalogue of services outline how we do this	Information sheet on differences between documents
Sites implement response to intervention 'where appropriate' possibly add cannot implement speech programs	Concern to add where appropriate as we would want schools to be implementing interventions to support students, we would be assisting and advising them on what appropriate interventions would be within their scope of practice	
TAC not included in intensive service description this was what SSS intensive model has been about	TAC still forms one aspect of intensive Wave but not all in the intensive area will be a TAC. Now included as one aspect of intensive. This is also already included under framework also	
Page 11 multi-disciplinary we	Multi-disciplinary in this context refers	

also partner with other parts of the department is this an approach	to our own SSS and other professionals in working with children and schools. This aspect of other parts of the department is included under collaboration.	
Tiers have not been clarified further description here would be useful	The catalogue of service and the individual service models give more detail in regards to the tiers	Consider education regarding to different tiers in implementation
Unsure whether we should use the waves of intervention as the service model to describe the work of sss. Bulk of the work is building capacity of the site to implement intervention, Team around the site approach would be a better fit in keeping with the site improvement agenda	This would require a large piece of work regarding developing a different way of describing SSS. Under proactive work, should be working with the site regarding their site improvement agenda. We still need a way in which to also describe the work that we do with individual children. The wave model does not exclude systematic work with preschools and schools regarding improvement plans	
A number of conflicting messages across the document; for example, proactive/universal service priority yet most information related to individual support for children/students	There is more detail in the individual service models regarding proactive approaches to support schools. All work ultimately is focussed on improving outcomes for children and students. Check for consistency	
Terms proactive, targeted and intensive are not the same terms that schools used. different terms and modes get confused	This is part of our communication with schools regarding what is meant by these waves, the catalogues provide an excellent resource to detail this	
Smart art graphic misleading looks like core services consist of either commissioned or partners	Have adjusted to include dotted lines. Also, text explains that these are additional services	
Intensive – comes across as hands on? consultation	There is more detail in the chapters and in the catalogues of service. If it is intensive yes, it is hands on	
Would like more information on evidence informed programs	Not for this document, will go into more detail in the catalogues of service	
Collaboration		
Organisational chart to describe the working relationships with CWB, Ab Ed, and other areas	May be too unwieldy to put in document but can do hyperlink	
Need to be clear that preschool/school is the primary client of the service	Children are in the centre of our service and we do provide services in collaboration with preschools and	This needs to be communicated well in implementation

who in turn provide services to children and families. suggest reworking of diagram	schools. Preschools and schools are not always the primary client	
Suggested wording changes to include strategic in our planning and work to ensure a culture of collaborative and creative problem-solving	Changed	
Complex needs how will they be accessed/facilitated by SSS,, intra and interagency section could be ideal to clarify what SSS did and don't do and what is done by others	This is included in the scope section both in the overarching front end and in each individual discipline SDM can't state what other agencies will or won't do	
Student Support Services and Aboriginal Services in the honeycomb section	Difficult to fit all the services into this visual model. Greater definition has been included under intra and inter agency to ensure that it is better defined.	
Partners on page 8 – wondering about example from practice suggests active rather liaison	Yes, it should be active partnering	Need to include in implementation
SSS needs to write up in the continuum of services provided by the Department, it can't be seen as something separate from the rest of the Department as difficult for sites to separate out.	The collaboration section aims to deliver the message that we work within a larger department. There has been more detail provided regarding the other services with which we operate, large focus of the document is SSS as it is the service model that we are describing.	
Interface with NDIS and other partner agencies with more info as to service options	Have included more detail under interagency collaboration. Not able to clarify service options, as this may change and would sit within other agencies service delivery models.	
Talks about collaboration but does to describe work on mental health, behaviour, attendance and special education	Included under work with intra-agency	
Need to include work with LET GL LID and link to SIPs and QIPs and define TAS and TAP	Included in intra and interagency collaboration section	
Talks about integrated multi-disciplinary team but looks like silo operating disciplines using common process. What are structures for all disciplines working together?	The document does explain multi-disciplinary approach and identifies TAC approach also. Updated section under roles to re-enforce multi-d work. Tension within the document is that it needs to articulate clearly the role and scope of each provider.	Ensure in implementation a strong focus on multi-disciplinary approaches.

	Structure to ensure practice is when it is operationalising, e.g. at allocation and through supervision and meeting structures.	
Include school improvement model, literacy guarantee and one plan	Have provided more detail in inter and intra agency work	
QDTP moved to proactive rather than targeted	Is now included in both sections	
Internal divisions to include DPP etc, why are LETs and school mentioned but no other divisions	Difficult to include all in the diagram. Preschools and schools and the LETs are mentioned as they are core partners who we work with to delivery operational services. The other corporate divisions are included in the internal divisions. These are now explained in more detail under intra and inter agency collaborations.	
Include external agencies and 'providers'	Changed	
Working collaboratively is a type of framework/approach and if so match format of heading	Format of heading is correct it is the beginning of a new section to describe working with others individually but also system wide collaboration	
Change WCHN to SA to be broader	Done	
Case Closure		
Two distinct points: Identified risks reduced Pre/school has a management plan in place.	Updated.	
Case closure planned for at the outset of service, wouldn't it be better planned for following the assessment outcomes Means we are not open to finding out new information	The planning process includes assessment of the situation. This does not mean that the case closure is determined prior to involvement by the service provider. This also may change as things emerge...	Training required in understanding of case closure and how to plan for this
Time limited how can it be set within limited knowledge of support needs	Time limited means it is not an ongoing service, it is in relation to the goals, planning for closure and goal setting is an ongoing process.	As above
Case closure could it be review times as a priority	Review is part of the service, as is assessment, planning and implementation of strategies etc. Case closure as is highlighted is a positive aspect of the service.	As above
Case closure use key reasons in the case work continuum for consistency. use of ideally	Updated, explicitly stating in various sections involvement of family in the decisions.	

doesn't seem consistent with other content about family involvement in decisions		
In section on case closure would it be valuable to reinforce the idea of accessing an education program is still a universal intervention/service. Schools nervous about closure	Updated end of section, stating what ongoing support is available and if additional needs emerge it can be reopened.	
Case closure when consent is withdrawn – add except in attendance	Changed	
Change DECD to correct terminology	Changed	
Under cultural competency add suspension, exclusions and attendance	Not sure it sits here; this section is about how we practice in a culturally response way.	
Parent/Carer Collaboration		
Strong messages about supporting sites and then at other times families	Review document to improve consistency, underpinning values is that we work in partnership with both	
Page 18 – Unclear about whether we are implementing what they decide or not	This is a framework outlining a continuum of family/carers participation. It depends on the nature of the work as where it sits	Training required on how to include parent/carers voice appropriately.
Issues highlighted regarding lack of communication and involvement in planning No clarity how SSS working with parents	Updated child/carers voice to explicitly include the need for regular communication and involvement in planning with their child	
A strong focus on working with parents how/what is not evident. Are parents eligible for service and what type?	Parents as a direct client are not provided with a service through Student Support Services. However, in working with children, consideration and suggestions for supporting children both at school and home can be considered. Attendance and engagement in particular work closely with families.	
General		
Great clarity on service descriptor section Requires more clarity on eligibility and how implemented in sites More clarity on what providers do and don't do	Detail is in catalogues and in specific chapter section.	
Significant change in student needs at the moment – highlight schools have to go back to basics to address	This will be covered in the school improvement model and forms an important part of working closely with preschools and schools regarding	

wellbeing and numeracy and literacy levels	proactive whole of site interventions.	
Discipline leads also have a role in documentation	Have included them as having responsibility of this.	
Supervision doesn't need to be included, not important to schools Don't need to justify existence	This document is for both SSS and schools, it is important to be clear that supervision structures are in place – this then links to supervision document	Recommend to clarify purpose of document in implementation.
A package of services to sites from the Department needs to be the focus	In some way the catalogues of service provide more detailed information about what is provided. I think this highlights the need for better coordination between sss , guarantee unit etc.	
At times model seems focussed on service as being about individuals whereas at other times focus includes other work	SSS needs to address both of these	
Consent for attendance is preferred	Changed to preferred but not required	
Include more information about methods of assessment under cultural competency	Not the purpose of this document, more broadly around the work capability framework	
Children under care – include transition and enrolment	Included	
Service delivery standards need set of criteria under each heading	Service Delivery Standards is a separate document that should be read in conjunction with the SDM	
Roles _ BC. Include trauma informed lens	Changed	
Professional development – include associations as well as board requirements	Changed	
Include how for meeting professional development requirements	Have not included, will be included in the development of the workforce capability frameworks which are under development	
Include adhering to the children and young person safety act in sharing of information	Included	
Engagement and wellbeing team are working on strategies to proactively support mental health and wellbeing how do these connect with SSS	They do need to connect and is concerning that we have not been involved in any planning or development	Recommend that SSS meet with Engagement and Wellbeing team regarding these strategies
Consider how to deliver services – use of technology	Have included in the information management section.	
Transition points – continuity	This will be addressed in the catalogues	

of care should be included	and workforce capability frameworks	
Should align with Level of adjustment matrix	This is referred to in the catalogue of services. Model is based on the level of service provision	
Consent – guardian rather than carer?	Have left as parent/carer given moving away from guardianship as a term	
Concern no specific section on Disability	Services are provided to a range of children and young people some of whom have disability. Disability is referred to under inclusion and will be more specifically addressed in catalogue of service. In legislation and policy context this is also highlighted that this model sits within these frameworks.	
Speech Pathology		
Speech Pathology- introduction in different style. most describe their role or the relevance to education.	Updated introduction for Speech Pathology to align with the other disciplines	
Dislike the way proxy and direct interventions are tacked onto the end – read better if it were embedded in the relevant section	This was felt the most user friendly way to present the information.	
Behaviour Coach		
Do SEE procedures need to be explained	This is a policy that will need to be read in	
Some of frameworks already mentioned in the overview do they need to be mentioned again?	The document is a reference guide and some will only refer to specific chapters, important that all essential frameworks and approaches for BC are also in the chapter	
Eligibility – stated ATSI and children under care priority. priority for everyone so this is redundant	Removed under eligibility for all disciplines and left as overarching. Also included as priority in the matrix and catalogues of services	
<ul style="list-style-type: none"> Taking a lead role where there is complexity in implementation of SEE procedures as negotiated with school leader Wants to be changed to providing support and advice	Change to also providing support and advice	
Change one child one plan to one plan	Updated	
Intensive – student under care role of the T/M	TMs role is to secure the enrolment but B/C may facilitate this once enrolment is confirmed. Have changed language	

	to facilitate transition rather than enrolment, and have also put that where there are identified behaviour issues, there may be other multi-d members who are better placed to support this transition	
Intensive – last two dot points could be any service providers role	Yes, that is correct, working as a multi-disciplinary team there will be some aspects that any could take a lead on. These roles are also reflected in another providers delivery model.	
Intensive – Educational assessment? Is this a coordinators role?	Changed to behavioural assessments	
Special Education/hearing		
Role of special educator appears to suggest largely around special options	Have amended to define as working with multi-d teams to ensure most appropriate and inclusive environment	
Minor changes to dot points under proactive and targeted heading	Updated	
Include Early Intervention – although not sure of process review ??	Await outcomes of review	
Social Work		
Take out case management and use case coordination?	Updated	
Take out specific type of assessment and change to conduct relevant assessment?	Have left as specific, as relevant provides varying scope	
Give example of collaborative intervention for restorative practices (e.g. case/parent meeting)	More detail about approaches will be detailed in the catalogue of services and workforce capability framework	
Proactive – give example of professional development – e.g. trauma informed engagement	More detail about approaches will be detailed in the catalogue of services and workforce capability framework	
Don't need collaborative development of individual and school improvement plans in this section as is in proactive	Have included in both, as may be proactive or may be working intensively with an individual student and their family	
Social workers – attendance and engagement – do we still use this considering pending changes?	Changed to Social Work - Truancy	

Emerging Themes from the Service Delivery Model Feedback

All feedback was been collated and themed, feedback included proposed changes to the Service Delivery Model, clarifying questions and key concerns or challenges to be considered in its implementation. The information below is a summary of the themes which related to ongoing issues, challenges and key considerations for implementation. They have been themed under 6 categories; Strengths, Resourcing and capacity, information management, parent carer voice, need for additional services and implementation considerations.

1.0 Strengths of the model:

Clarity: Generally, respondents indicated that the model was clear, well structured and was comprehensive in the what and why of service provision. It was proposed that it was easy to read and follow and assists new leaders to understand and support the model. It was further suggested it provided a framework of **consistency and accountability**.

Key Aspects: Key aspects that resonated with respondents included the frameworks and approaches, inclusive practice, support for proactive work and the focus on being child centred and the strength around working with families and collaborating with preschools and schools. In addition, there was support for the broader opportunities for work in diverse ways which may support recruitment and retention.

2.0 Resourcing and Capacity

There were a range of responses which indicated issues regarding understanding our resourcing and capacity to enable the delivery of an effective service. Specific issues related to current allocation of resources with proposals that it be based on per capita of disability and a need to consider distance to be travelled in rural and remote areas and a review of how the resources were distributed. In addition, in rural areas there are often limited access to other services with Student Support Services the only providers for children, young people and families. It was also highlighted that whilst inclusion and the need to ensure that we have supports in place and provide appropriate training for teachers in this context.

Gaps were also identified with the funding model, with the need to be able to be more responsive to children and preschool and school needs, along with a proposal to review the cost effectiveness of supporting many students in mainstream in comparison to additional special class placements. Partnerships additionally raised frustrations with the capacity of service providers to respond and querying how this will be addressed. In particular the funding reform was raised as a critical feature in being able to deliver on the model.

3.0 Information Management

Clarity regarding data sets and how to progress this with local education teams was also raised, with a desire to better understand need. Improvements were sought in data systems to ensure that these worked together to enable better facilitation of information between student support services and preschools and schools. Suggestions were also made regarding targets for timeframe for allocations and communication to preschools and schools.

4.0 Parent/Carer Voice:

There were a range of responses from families and carers which are important for Student Support Services and the wider Department to consider as we progress and strive to improve our service:

Trust and Value: Parents expressed that they would like to see Student Support Services and preschools and schools trust that they understand their child and their child's needs. They act as advocates for their child and they have the best intentions for the outcomes of their child. Acknowledgement of the value they bring in understanding their child would progress towards optimal outcomes achieved. It was frequently stated that 'relationships' are the key. Trust and valuing this relationship are therefore critical.

Communication: Communication issues was the most frequently cited issue for parents and carers, both a lack of information, lack of clarity, timeliness of information and how we communicate. Particular examples regarding special options were raised in that the communication can feel bureaucratic and heartless. It was suggested more frequent communication is important, even if it that there has not been progress or an outcome, that parents and carers understand where to access information and that parents and carers have access to all people involved with working with their child including SSO's. "Keep the communication lines open... update us like on e-bay"

It was proposed that there needs a greater prominence of goal setting inclusive of parents/carers and child/student and that the family's needs are more explicit to ensure a coordinated, consistent and responsive approach to their child's needs.

Support: Parents and carers also highlighted that this is often a vulnerable time for them when trying to find the best option for their child. They can be under a lot of stress. It was important that as a Department we acknowledge that vulnerability and are more sensitive in regards to both their and the child's needs.

5.0 Need for Additional Services:

The consultation also highlighted the need for addition to the core services. The most frequently cited additional service was Occupational Therapy and the need for a lived experience consultant/worker to support parents and carers through the system.

6.0 Considerations for Implementation:

Training and Development: Key issues highlighted through the feedback included

- understanding of prioritisation of Aboriginal children and families
- the need and purpose of case closure
- Common understanding of evidence informed programs and how to support sites to implement these
- Understanding of each other's role
- Collaboration and active partnering with external agencies
- Clarity and understanding of the differences between targeted and intensive services
- Training in specific approaches and tools to ensure capacity of the workforce (e.g. Boxall profiles)

Consideration to how Student Support Services communicates the strategies to preschools and schools as well as parents in relation to the three waves of intervention, to ensure that everyone understand differences and roles within those waves. Would also be great to related the strategies for home.

Communication: Frequent feedback regarding the need for marketing tools and clear communication to parents and carers as well as preschools and schools regarding the service delivery model. It was also suggested that a flow chart was required to explain case closure. Given

concerns were raised that there is a need for verification to access any support, critical that communication relates to a range of supports provided by Student Support Services and that funding is not the only means of support.

Processes and Systems: Work flow was highlighted as an area that required further exploration, and in particular the need to quarantine proactive work. In addition, it was suggested that a process to ensure parent consent section of the request is also sent to Student Support Services electronically. Consideration of how to ensure continuity of care within our model was important, not only when a child transitions between sites but our approach to recruitment and retention. Also need to consider the issue of consent when someone is referred under section of the Children and Young People (safety) Act 2017.

Collaboration: Ensure that we work closely with other divisions, services and external in implementing the service delivery model. In particular partnering with the Universities to identify evidence informed practices, and developing a stronger connection with the Youth Education Centre and understanding of the impacts of any funding reform that may be implemented.

Information management: It was also highlighted it was important to understand and identify appropriate data sets to use with partnerships and preschools and schools to assist with identifying trends, issues and most appropriate interventions and support. Preschools raised particular concerns regarding not having a long enough timeframe to collect information prior to input from Student Support Services.

Review: Review the process 6-12 months

Student Support Services Delivery Model

Early Years and Child Development Division

Date	Version	Change	Responsibility/Feedback
10/07/2018	1.0	Initial draft document	Sarah Anstey
30/07/2018	1.1	Amendments and Edits	Pauline McEntee/Sarah Anstey
13/08/2018	2.0	Amendments and Edits	Feedback from EDs and CMs
26/09/2018	3.0	Amendments and Edits	Feedback from staff, partnerships, DPP, Engagement and Wellbeing,
28/09/2018	4.0	Amendments and Edits	Feedback from Parents and Carers
3/10/2018	4.1	Amendments and Edits	Feedback from CM



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Foreword

The Education Strategic Plan set a clear agenda for South Australia to build a stronger future for our children by making South Australia's education and child development system world class (Department for Education and Child Development, 2017). ***The Department endeavours to give all children and young people an equal opportunity to achieve their full learning potential regardless of gender identity, sexuality, religion, geographical location, ability to participate, age, language or cultural heritage.***

Student Support Services is in a unique position to assist preschools and schools to support children and young people who face a range of barriers to learning to achieve their educational and developmental potential. Our service is vital to the Department's focus on best outcomes for all learners and inclusive education practice.

We have a dedicated, professional multi-disciplinary workforce that strives to work holistically with the child, their families and preschools and schools and uses their expertise to deliver a service based on best practice and innovation.

We are creating a culture of accountable and transparent practice. The service delivery model enables children and families, schools and broader communities to have clarity regarding our purpose, values and the services that we deliver.

Our service will continually improve and we will track our progress against the Student Support Services Service Delivery Standards to ensure that we are making a difference in the lives of children and young people.

We have high expectations of all children and young people and are committed to building a professional service that supports them to achieve best outcomes for their wellbeing, health, development and educational achievement in partnership with preschools, schools and families.

Pauline McEntee

Director

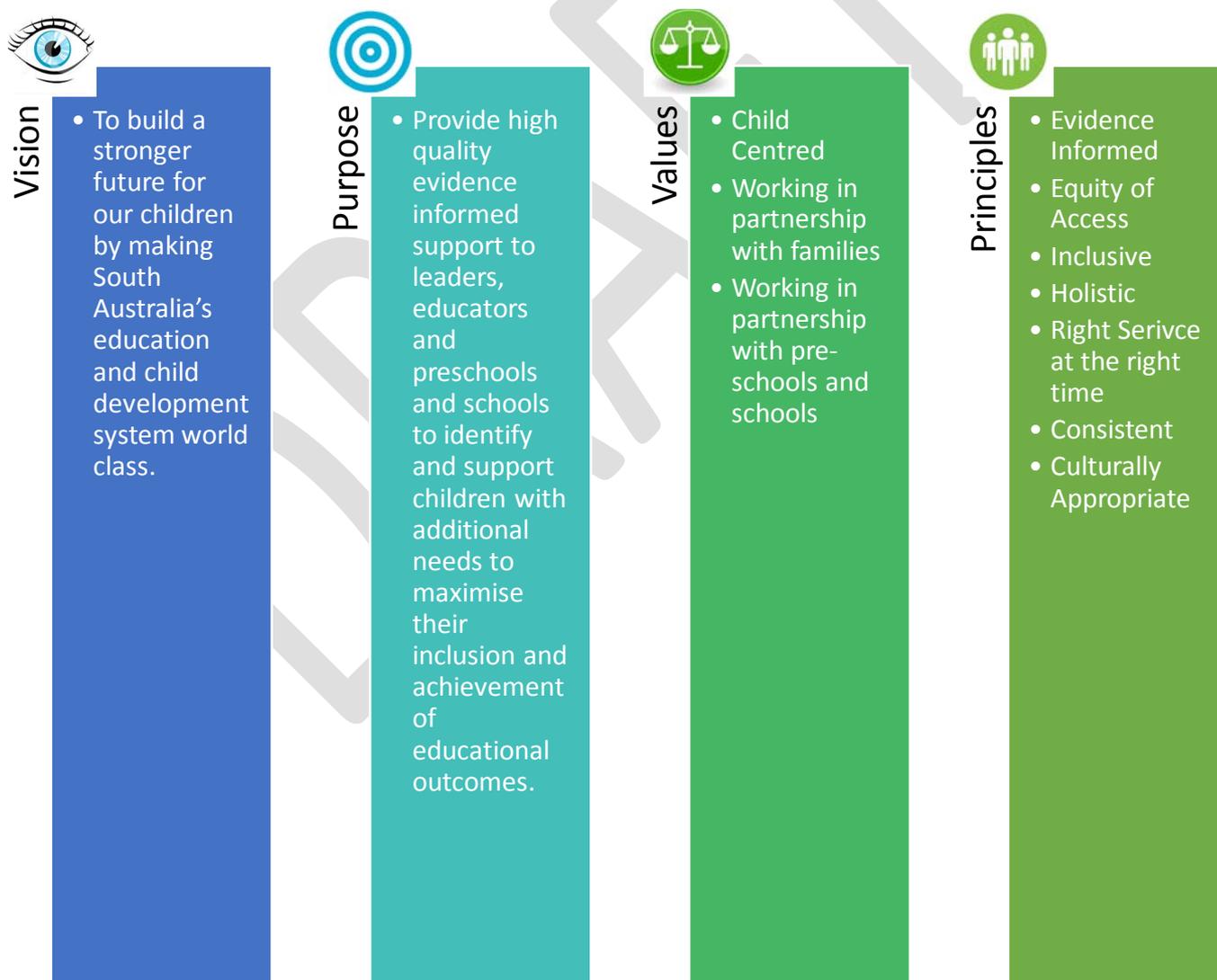
Student Support Services



Aboriginal and Torres Strait Islander People

The Government of South Australia acknowledges Aboriginal people as the first peoples and nations of South Australia. The Department for Education recognise and respect their cultural connections as the traditional owners and occupants of the land and waters of South Australia and that they maintain a unique and irreplaceable contribution to the state.

Purpose of Document: The service delivery model broadly defines the way services are delivered, describing the support we deliver to children and young people and how we deliver it. For the Student Support Services directorate it provides a guide to the way we work and for preschools and schools, families and other key stakeholders. It provides a resource to understand our service delivery and what can be expected. This document should be read in conjunction with the Service Delivery Standards, Workforce Capability Frameworks and Catalogues of Services.



Vision: To build a stronger future for our children by making South Australia's education and child development system world class.

Purpose: To provide high quality evidence informed support to leaders, educators and schools to identify and support children with additional needs to maximise their inclusion and achievement of wellbeing and learning outcomes.

Values:

Child Centred: The needs and best interest of the child will be central to everything we do.

Work in Partnership with Families: We will engage families as active participants at all points in the service journey.

Work in Partnership with Preschools and Schools: We will work proactively and collaboratively with preschools and schools to ensure optimal outcomes for children and young people.

Principles:

Evidenced Informed: Professional practice will be based on the best available evidence of efficacy. There will be a process of ongoing monitoring and improvement to the practice on the basis of regular review and evaluation (SARRAH, 2016).

Equity of Access: Services will be accessible and delivered to those children and young people most in need regardless of location.

Inclusive: Services will work with preschools and schools, children and families to assist them to eliminate barriers that restrict participation and achievement in education and promote a culture that accommodates the needs of all children and young people including those with additional needs.

Consistent: Services will be delivered consistently across the state, with the same service elements available in response to need.

Right Service at the Right Time: The most appropriate and effective services are provided to support preschools and schools to develop universal approaches to support all children and to also work with children and young people early in the life of the child or in the life of the issue.

Holistic Approach: The child's physical, personal, social, emotional and spiritual wellbeing as well as cognitive aspects of learning will be considered in addressing and supporting their needs (DEEWR, 2009)

Culturally Appropriate: Services will be delivered in a manner that affirms families' cultural, racial and linguistic identities (Manalo, 2008).



Legislative and Policy Framework

Student Support Services recognises and adheres to the legislative and policy context within which it operates. Outlined in this section are the core legislation and key frameworks for consideration and is not an exhaustive list. There are also numerous Department policies and frameworks that further guide practice.

The Children and Young People (Safety) Act 2017 (Government of South Australia, 2017) and the United Nations Convention of the Rights of the Child (United Nations, 1989) provide an important context and guidance in regards to the delivery of appropriate services to children and young people.

The Education Act 1972 (Government of South Australia, 1972) Disability Discrimination Act 1992 (Australian Government, 1992), Disability Standards for Education (Australian Government, 2005) and Disability Inclusion Act 2018 (Government of South Australia, 2018) leads our approach to the delivery of service. We will ensure that our recommendations, strategies and any adjustments made to support children and young people to participate are free from discrimination in an environment that maximises their learning and wellbeing outcomes.

The core values outlined in the ‘Protecting Children is Everyone’s Business, A National Framework for Protecting Australia’s Children 2009-2020’ (COAG, 2009) are critical to the delivery of services in an educational setting these include:

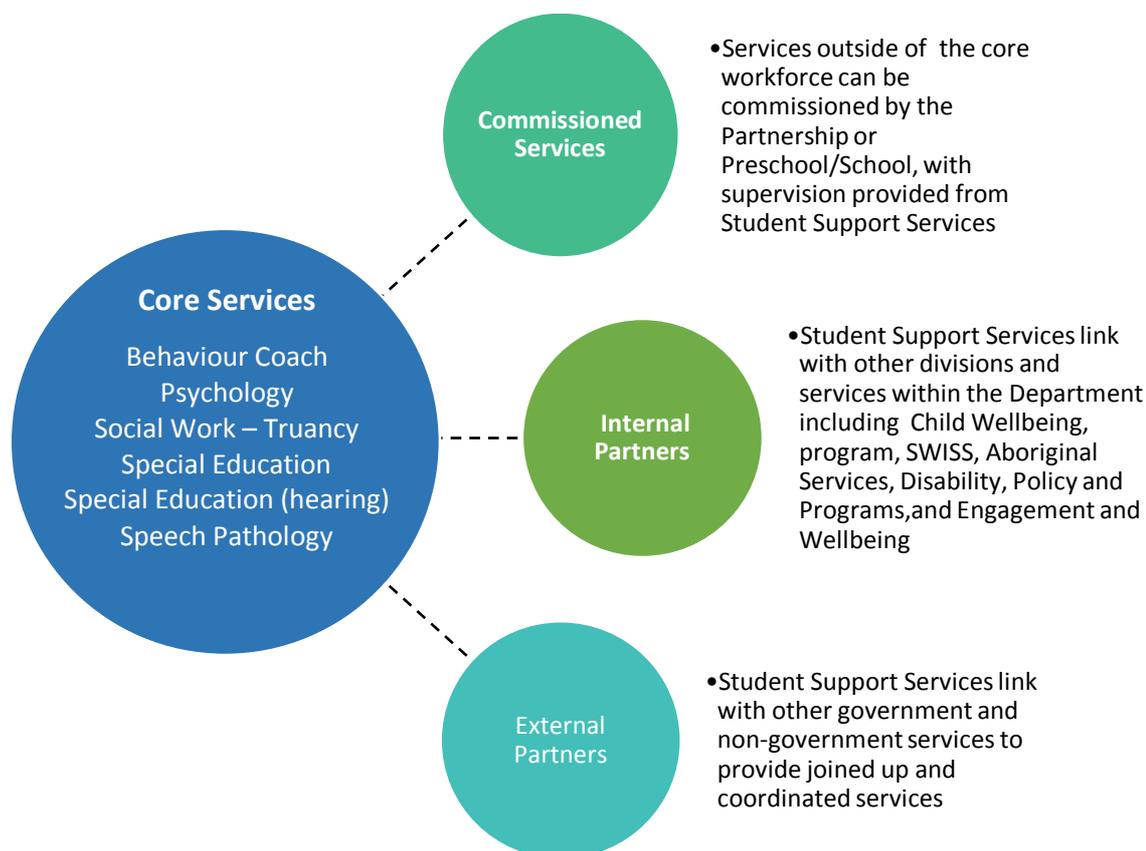
- All children have a right to grow up in an environment free from neglect and abuse. Their best interests are paramount in all decision affecting them
- Children and their families have a right to participate in decisions affecting them
- Australian society values, supports and works in partnership with parent, families and others in fulfilling their caring responsibilities for children
- Children’s rights are upheld by systems and institutions

The Department’s Reconciliation plan also sets a role for Student Support Services to be an active part of creating better opportunities for all Aboriginal children and young people to develop, achieve and reach their full potential (Department for Education, 2018). Student Support Services is committed to working with preschools and schools, families and communities to ensure the delivery of our services are culturally inclusive and relevant for Aboriginal peoples and that our partnerships are built on respect, trust and equity (Department for Education and Child Development, 2013).

Student Support Services work with preschools and schools to assist them in adhering to particular legislation and policy.

Child Protection	Aboriginal Education	Disability Education
<ul style="list-style-type: none">•United Nations Convention of the Rights of the child 1989•Children and Young People (Safety) Act 2017	<ul style="list-style-type: none">•National Aboriginal and Torres Strait Islander Education Strategy 2015•Department for Education Aboriginal Education Strategy 2013 -2016•Department for Education Reconciliation Plan 2018 - 2021	<ul style="list-style-type: none">•Disability Discrimination Act (1992)•Disability Standards for Education (2005)•Disability Inclusion Act (2018)

Overview of the Model



Service Description:

Student Support Services provide an integrated, multidisciplinary service to assist schools and preschools to meet the needs of children and young people who have additional learning and wellbeing needs. The Student Support Service works in partnership with preschools and schools, families, Aboriginal Education teams, Social Work Incident Support Service (SWISS) and Child Wellbeing program to ensure optimal outcomes with a joined up approach to service delivery. The services focus is on children and young people with developmental delay, disability, learning difficulties, health concerns, behavioural, social, and emotional or wellbeing issues or issues with disengagement and/ or non-attendance.

Core Services are delivered through three waves of practice:

- **Proactive:** Support preschools and schools to deliver quality universal services for all children and young people, and focus on ensuring the education, health and wellbeing strategies in preschools and schools are accessible to and inclusive of children and young people with additional needs through building preschool and school capacity.

- **Targeted:** Provide targeted additional specialised expertise to support preschools and schools working with individual and groups of learners. This may include assessment and intervention strategies to support best learning and wellbeing outcomes.
- **Intensive:** In collaboration with preschools and schools provide highly specialised support and intervention at an individual, classroom and preschool /school level. This will often involve collaboration with a multi-disciplinary team and an interagency approach to address complex issues.

Services may also be delivered through **commissioned services** or via **partnership** with other government or non-government agencies to deliver coordinated services.

Student Support Services, works in a way that is child centred, responding directly to the needs of children and young people with additional needs. In addition as educators and schools/ preschools are the primary support for children, Student Support Services has a focus on building the ongoing capacity of the preschool or school to effectively respond to children with additional needs in their community.

Service Outcomes:

- Improve the capacity of preschools and schools to assist children and young people who have additional needs or are disadvantaged or vulnerable to achieve successful learning and wellbeing outcomes.
- Work with preschools and schools to ensure every child and young person with additional needs has an opportunity to access, participate and achieve in learning on the same basis as their peers.
- Develop and strengthen the family's capacity to support their child's needs.
- Respond to emerging needs in relation to learning and wellbeing across Partnerships and contribute to the identification of priorities and development of strategies to meet those needs.
- Strong and collaborative partnerships are established with government and non-government agencies to best meet the needs of children and young people.

Service Scope:

Preschools and schools provide high quality education and evidence-informed programs and interventions that address the learning, wellbeing, and education needs of children and young people. They plan and implement strategies to ensure the best outcomes for all children and young people. Interventions and strategies provided by the preschool or school should be explored (including proactive, targeted and intensive) prior to Student Support Services involvement occurs, to ensure services target learners with the greatest need.

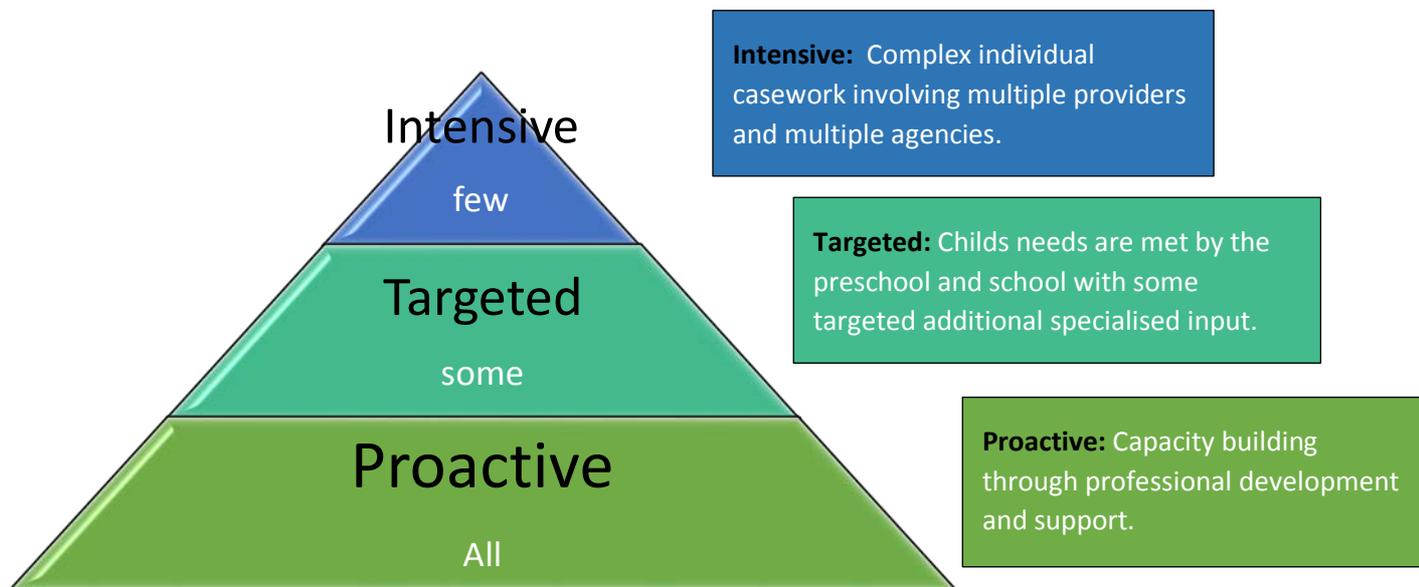
Student Support Services provide preschools and schools with specialised input and support to address a child's learning, health and wellbeing needs that cannot be addressed through the specific education and wellbeing services provided at the preschool or school level. In particular, services target children and young people with particular education support needs which may include; a development delay or disability, learning difficulties, behavioural, social and emotional issues, health issues and disengagement or non-attendance.

In keeping with Education Department priorities Student Support Services have a strong focus on and prioritise Aboriginal children and their families and children in care.

Waves of Intervention:

Student Support Services works within a Response to Intervention (RTI) model (RTI Action Network), which is a multi-tiered approach to working with children and young people. It begins with the preschool and school providing high quality teaching instruction and systematic monitoring of all students. The second step involves early intervention to students who are struggling via additional systematic instruction and the provision of evidence-informed intervention by the preschool or school. Student Support Services may become involved with those students where there are continued concerns around their learning outcomes despite these preschool and school based interventions.

Student Support Services provides services across three waves of intervention; proactive, targeted and intensive that may involve working with individual and groups of children and young people, leaders, individuals or groups of educators or the whole preschool or school. We work collaboratively with educators to understand the level of intervention and how it relates to their practice in different contexts.



Proactive: Support preschools and schools to deliver quality universal services for all learners, and focus on ensuring the education, health and wellbeing strategies in preschools and schools are accessible to and inclusive of children and young people with additional needs through building preschool and school capabilities. Services include:

- Provide training and development to enable education communities to cater for and include the needs of all children and young people
- Collaborate proactively with preschools and schools and Partnerships in the development and planning for children and young people with additional needs, promoting quality differentiated teaching practice.
- Collaborate with leadership to analyse preschool and school data and undertake joint planning to develop priorities and identify learning needs
- Support effective inclusive practice and challenge practice that increases exclusion or creates barriers to inclusion

Targeted: Provide targeted additional specialised expertise to support preschools and schools working with individual and groups of children and young people. This may include assessment and intervention strategies to support best educational and wellbeing outcomes.

Services include:

- Assess and recommend remediation strategies (i.e. adjustments that are both modifications and accommodations embedded into Quality Differentiated Teaching Practices) that lead to improved outcomes for children and young people
- Model, work alongside, coach teachers, individuals, small group, faculty, year level and also partnership level to embed best practice in inclusion and differentiation to increase access to curriculum
- Provide expert advice on evidence-informed programs
- Assist Educators to explore practice in class to better support student learning outcomes
- Provide input to professional learning communities, preschools, schools and Partnerships

Intensive: Student Support Services provide highly specialised support and intervention at an individual, classroom and preschool and school level. This will often involve collaboration with a multi-disciplinary team and an interagency approach. Services include:

- Comprehensive analysis and assessment of factors contributing to complexity of issues.
- Collaborative problem-solving, goal-setting approach to develop plans for preschools and schools, classrooms, children and/or families.
- Case coordination and a Team around the Child approach where there are multiple service provider and agencies involved.
- Support the implementation of a plan and its ongoing review, evaluation and adjustment
- Support schools to assess and manage risk in relation to children and young people with additional needs.

Multi-disciplinary Approach:

Student Support Services use an integrated team approach, with professionals from a range of disciplines with different but complementary skills, knowledge and experience working together to deliver comprehensive services aimed at providing the best possible outcome for children and young people (Mitchell, Tieman, & Shelby-James, 2008). The multi-disciplinary approach can consist of a range of disciplines from within Student Support Services or it may be a team that functions across agencies.

Commissioned Services:

Whilst Student Support Services provide a range of core services, the Partnership or an individual preschool or school may identify additional needs for their particular cohort of children and young people. A commissioned service may include additional core services (e.g. more speech pathologists or psychologists) or service from a different discipline background (e.g. occupational therapist or physiotherapist).

Where the preschool, school or Partnership is commissioning additional services which are provided by Student Support Services, a service agreement is developed. This agreement clarifies the roles and responsibilities of each division, in this arrangement, the provider is employed by Student Support Services and the service provides professional supervision, whilst the preschool or school manage day to day operational supervision.

Where an alternative service is commissioned, the Partnership or school will be required to engage those services from an external private provider, currently this is arranged through the Medicare rebate system.

The commissioning aspect of service delivery is in the early stages of development, and it is envisaged that this will develop as preschools, schools and Local Education teams work with Student Support Services to identify needs and more innovative strategies to meet those needs.

Referral Process:

Where a preschool or school identify particular needs of an individual, cohort of children or young people or whole preschool or school, consultation occurs with the relevant service provider. The initial consultation is a service which clarifies the needs, considers the strategies that the preschool or school has already implemented, provides timely advice and strategies that the preschool or school can implement and determines any need for further service input.

If further input is required following the initial consultation the preschool or school activates the request, with consent from the family. The case is then allocated to the most appropriate service provider, using the prioritisation matrix as a guide.

Parent / Carer Consent:

Consent for the provision of Student Support Services, such as observation, assessments and intervention must be obtained by the preschool or school as part of the referral process.

Upon allocation of a case services providers must contact family/ carer and inform them about what to expect regarding the nature of the service. This is necessary to ensure that there is informed consent.

A parent or carer has the opportunity to refuse consent or consent to a full or limited range of services. They also may remove their consent at any time.

Services may be provided without prior consent in an emergency situation. Consent, however, should be obtained as soon as practicable.

Consent is preferred but is not required for Attendance and Engagement concerns.

Goal Focussed Service:

Service provided by Student Support Services will be time limited and guided by negotiated goals. These goals and the responsibilities of each party are set out in a plan. This plan must be agreed upon between the preschool/school, Student Support Services' service provider/s, family and where appropriate the student.

Case Closure:

Case Closure is an important part of the service and is planned for at the outset of service with the child, family and preschool or school. For effective case closure, the child, family and preschool or school are involved in planning and reach agreement on the goals for the service. Case closure should be seen as a positive aspect of the service, highlighting the service goals and strategies that have been implemented and achieved.

The case closure process may occur for a variety of reasons such as when one or more of the following occurs:

- Identified assessment, report, or review completed and the outcome and actions have been discussed with the child, family and preschool or school
- Negotiated requested actions are completed by service provider and the service goals have been met

- Support for applying for additional one-off funding completed
- Preschool or school has a plan of action to manage identified referral issue
- The identified risks to the child or young person and/or preschool or school have been reduced.
- The preschool or school has a management plan to continue to monitor and/or support active risk management.
- Professional development or capacity building has been delivered to preschool or school
- No further service has been negotiated to occur

It may also occur when:

- ***Parental/Carer consent has been withdrawn, except in Attendance cases***
- ***Child or young person has left a departmental government preschool or school***
- ***Child or young person's whereabouts unknown*** (school and Student Support Services has exhausted all efforts to locate the child or young person and departmental procedures followed)

The professional decision for case closure is reached by the service provider and if necessary in consultation with the line manager. The decision is made in consultation with the family and preschool or school and is a joint agreement. This is a time where the family, preschool or school can provide feedback about the service, the service plan goals can be reviewed and evaluated and if needed a review undertaken of the child's or young person's ongoing needs.

If agreement is not reached, the service provider will engage in a discussion with the line manager about the case, including the preschool's/school's or families reason for not wanting case closure. This will either result in case closure or further specified input followed by case closure.

Case closure involves some evidence that the service plan has been reviewed and there is discussion with the family, preschool or school (e.g. a closure meeting). Following case closure, Student Support Services may still provide input via consultation, whole of preschool or school approaches and the case can be reopened if there are other issues or challenges emerging requiring further intervention and support.

Inclusive Practice

Student Support Services is committed to inclusive practice that ensure learning contexts reflect the diversity of experience of students within the context of a continuum of need by:

- Respecting and using the knowledge that teachers and the community have of their students' learning strengths, needs and interests
- Allowing for student voices to be heard in ways that empower students and raise self and group esteem
- Using inclusive language that acknowledges diverse perspectives and different ways of feeling, being and knowing
- Viewing diversity as a strength and source of enrichment for all. Diversity includes, but is not limited to race, ethnicity, gender, gender identity, sexuality, physical and intellectual ability and religious beliefs.
- Aiming to teach the whole child, acknowledging diversity as part of social and academic success
- Ensuring pedagogy and resources reflect the diversity of the school and their students.

Culturally Competent Practice

Student Support Services is committed to continuous improvement of our cultural understanding through actively seeking to further develop our knowledge, awareness and skills aimed at providing a service that is

committed to engaging respectfully with people from other cultures; that encompasses and extends elements of cultural respect, awareness, and safety.

How we will work with Aboriginal and Torres Strait Islander People:

Student Support Services is committed to developing an appropriate response for Aboriginal children and families and recognises the ongoing impact that colonisation, dispossession of land, and loss of culture has had on the community.

It is recognised that learning outcomes for Aboriginal children and young people are greatly improved when preschools and schools establish partnership and connections with Aboriginal families and communities (Department for Education and Child Development, 2013). Student Support Services will actively partner with Aboriginal Education Teams and broader Aboriginal communities to establish best and culturally appropriate approaches for working with Aboriginal children and families. Student Support Services acknowledges that this partnership approach should be characterised by listening and responding, strong accountability and active engagement, collaborative information sharing and informed decision making (Education Council, 2015).

Student Support Services will ensure that all service providers are trained and competent in working together with Aboriginal people and that we are committed to working towards implementing culturally appropriate methods of assessment.

The Aboriginal Strategy 2013-2016 further set an ambitious target of halving the gap in reading, writing and numeracy achievement between Aboriginal learners and non-Aboriginal learners by 2018 (Department for Education and Child Development, 2013). To support this focus on closing the gap, Student Support Services will prioritise Aboriginal children and young people for additional support needs and will have high expectations for Aboriginal children's learning and wellbeing outcomes.

How we will work with children from culturally and linguistically diverse (CALD) backgrounds:

Student Support Services will recognise the impact of culture, migration, and refugee and/or resettlement experiences on children, young people and families of culturally linguistic and diverse background. Student Support Services will actively work to acknowledge and respond appropriately to different cultural values, styles of communicating and learning and potential impact of trauma (Kids Matter, 2012).

We will partner with families and communities, English as a Second Language (EALD) division and engage outside agencies and services as required to ensure that our service is culturally appropriate and best meets the needs of the child, young person and preschool or school.

Children in Care

Children in care may have significant psychological, developmental, educational needs and behavioural challenges as a result of trauma, abuse and neglect. Indeed, children in care have significantly poorer academic outcomes than their peers (Australian Institute of Health and Welfare, 2011, p. 14). Student Support Services recognises the significant emotional and behavioural challenges children and young people may face as a result of complex developmental trauma and acknowledge that these complex issues may require support and input from a range of agencies. Children in care are prioritised for service. In particular, transition points relating to changes to care arrangements and change to school enrolments require input

from a range of agencies, including schools, to ensure a positive and supportive start for children and young people. Student Support Services work within a trauma-informed multi-disciplinary approach, incorporating expertise from other agencies to ensure the most appropriate service is delivered to achieve the best outcomes for children and young people in care.

Frameworks and Approaches

Whilst Student Support Services is a multi-disciplinary service, there are a number of common frameworks and practice approaches that underpin all professional practice. The following practice approaches are central to the delivery of services and in response to the varying needs of children and young people.

Evidenced Informed Practice:

Evidence informed practice is the integration of best research evidence with professional skills in the context of the child's and families values (Thyer, Bulmus, & Sowers, 2013). Student Support Services will ensure the purposeful and systematic use of the best available evidence to inform the assessment of various options and related decision making practice, program delivery and policy development (Australian Institute for Teaching and School Leadership, 2011).

Trauma Informed Practice:

Approximately one quarter of children have experienced some form of adverse childhood experience. The experience of heightened and/or prolonged stress is likely to significantly impact a child's neurobiological development, leaving them with a reactive and/or heightened state of arousal where they find it difficult to concentrate, to retain and recall new information, to form and maintain relationships, and to manage their emotions and behaviour. Trauma informed practice in schools relates to creating staff understanding of how trauma and adverse childhood experience creates these cognitive, emotional and behavioural changes and is integral in facilitating recovery for children who have experienced adversity in providing them with a safe, predictable, structured and nurturing environment where they are able to learn and grow.

Holistic Approach:

The holistic approach considers the child and young person's physical, personal, social, emotional and spiritual wellbeing as well as the cognitive aspects of learning (DEEWR, 2009).

Common Approach:

The Common Approach is a holistic, prevention-focused and flexible way of working to assist practitioners in having quality conversations with young people and their families about all aspects of their wellbeing. These aspects fall into six wellbeing areas: Relationships, Health, Safety, Mental Health and Emotional Wellbeing, Material Wellbeing and Learning (ARACY, n.d.). This approach promotes those working with children, young people, and families to work in partnership with them, focus on strengths, place the child at the centre of the conversation, and consider all aspects of a family's circumstances.

The Common Approach is supported by a suite of resources that facilitates conversations with families by providing prompts and guidance for practitioners. It is not a standardised risk assessment tool, but rather a simple, versatile way of working that enables child-led and child-focused discussion across all areas of wellbeing.

Strengths Based Approach:

A strengths based approach to working with children and young people that acknowledges and identifies the strengths and abilities that they come with, and then works to build on these strengths to address the issues they face.

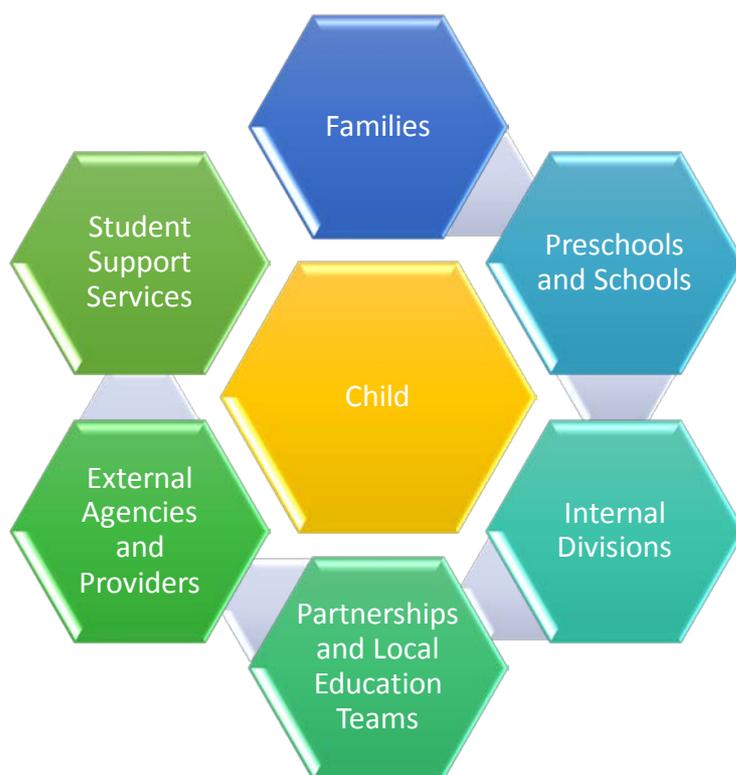
Positive Behaviour Support (PBS) Framework

This framework differs from traditional behaviour management approaches in that its ultimate goal is to enhance a student's engagement with learning through the development of new skills, coinciding with a reduction of challenging behaviours. PBS is based on the assumption that all behaviour serves a function for the student, even if that behaviour appears to others to be maladaptive or inappropriate. As such, a Functional Behavioural Assessment is conducted with hypotheses development regarding the triggers and functions of a student's challenging behaviour. These hypotheses guide modifications to a student's learning environment and intervention. The primary focus of PBS is scaffolding student success by modifying their learning environment and developing their skills to meet their needs, as well as developing resilience.

Team Around the Child:

The Team Around the Child (TAC) approach is a family centred, strengths based approach that promotes and supports effective collaborative working. It is underpinned by collaborative working relationships that bring together different disciplines, appreciation of the importance of family involvement and support, a more holistic view of the child and a clearly defined case management approach that can address complexity (Department for Education and Child Development, 2015).

Working Collaboratively



Student Support Services work with a range of key partners to ensure the best outcomes for children and young people. Working collaboratively with families, preschools, schools and local education teams, internal agencies and external agencies will ensure that the expertise and knowledge from each of these areas can contribute to supporting the children and young people to achieve optimal outcomes.

Working with preschools, schools and Local Education Teams

It is vital that we work collaboratively towards common goals and outcomes. As a service we work to support not only individual children and young people, but to also work strategically to deliver services that meet the needs of the broader preschool, school and Partnership context.

With the development of the new school improvement model Student Support services is a critical arm of the strategic approach to ensuring that appropriate strategies and interventions are developed to meaningfully contribute and enhance outcomes for children and young people and the broader preschool and school communities. We work proactively with Local Education Teams and preschool and school leadership to provide input into school improvement and quality improvement plans. This may include identification of issues, contributing to data collection and analysis and jointly planning whole of preschool or whole of school interventions and support. This work can be considered in the context of a Team around the school (or preschool), particularly where there are schools assessed in the foundation or shifting gear categories or a team around the partnership approach.

Work in collaboration with the Local Education Team and educators in preschools and schools will be based on mutual respect and acknowledgement of different skills, expertise and knowledge and shared ownership

and responsibility. We will aim to be strategic in our planning and work to ensure a culture of collaborative and creative problem-solving.

Child and Family Voice

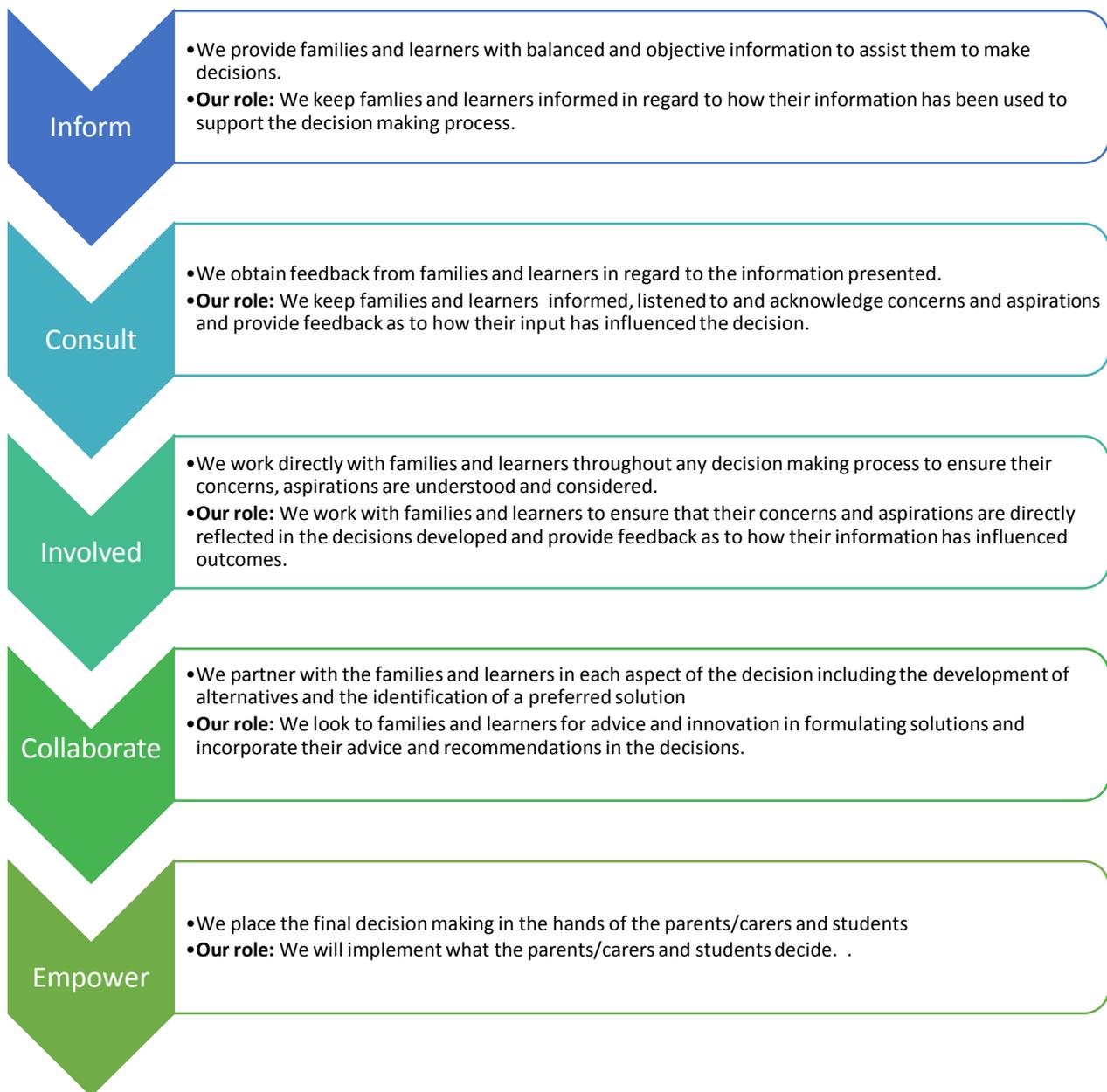
Student Support Services is committed to engaging the voices of families and children and young people being embedded into decision making which is relevant to them. Student Support Services communicate regularly with parents and carers and ensure that they are involved in planning and delivery of services. We work to ensure the views and needs of parents and carers are explicitly included to ensure a coordinated, consistent and responsive approach to their child's needs.

We will achieve this by ensuring the principles outlined in Better Together are met (Youth Affairs Council of South Australia, 2015).

- We know why we are engaging and we communicate this clearly
- We know who to engage
- We know the background and history
- We embed parent/carers and student 'voice' in our approach as we start together
- We are genuine
- We are creative, relevant and engaging

Engaging with children, young people and families provides important benefits to the Department as their experiences, thoughts and perspectives can provide alternative and innovative solutions that may lead to more relevant decisions regarding their individual service as well as decisions impacting programs and policy.

The International Association Participation 2 model provides an important framework for the Department to effectively engage (Youth Affairs Council of South Australia, 2015). It outlines a continuum of engagement for decision making, Student Support Services will use this framework to understand and identify the most appropriate way to engage families and young people in different contexts. Outlined below is the continuum of engagement with the role for Student Support Services identified in each section.



Intra-agency and Inter-agency collaboration

It is clear that skills, resources and knowledge required to respond appropriately to the complex issues facing children, young people and families within the education setting are often beyond the capacity of a single agency. The Department's strategic plan acknowledges the need for better linkages with government and non-government services particularly in relation to the protection of vulnerable children (Department for Education and Child Development, 2017).

Interagency work at a local level assists in addressing individual and family needs and/or system issues for children, young people and their families. Interagency work at an organisational level is critical with the Department for Child Protection, SA health (in particular CAMHS) and National Disability Insurance Agency (NDIA) and will support collaborative practice partnerships, including referral pathways and co-working systems.

Operationally it is also important to ensure that our services work together to ensure best outcomes for children and young people. Implementation of the national disability insurance scheme (NDIS) has seen a large increase in the number of providers accessing preschools and schools to deliver services. Similarly, CAMHS and DCP or non-government agencies may be involved with providing support and interventions to children and families. Where there is Student Support Service involvement they will facilitate regular communication and joint planning where appropriate to ensure that there is consistency in approach to working with the child, family and preschool or school.

Student Support Services also work closely with a number of internal divisions. Within the Early childhood division this includes Aboriginal Education Team, SWISS and Child Wellbeing program which have a strong operational service delivery component as well as the policy arms of Disability, Policy and Programs (DPP) and Engagement and Wellbeing. In particular Student Support Services collaborates with DPP regarding evidence informed practice, policies and funding options in the area of disability and special education and works with wellbeing and engagement regarding best practice approaches in the areas of behaviour and attendance and engagement.

More broadly across the department Student Support Services collaborates with the Learning Improvement Division (LID) and Partnerships, Schools and Preschools divisions. In particular, within these areas we collaborate with the literacy guarantee unit and operations unit regarding key improvement initiatives and operational issues impacting on students learning and wellbeing.

Forging partnerships is critical for effective inter and intra agency work, outlined below are partnership principles that underpin our approach.

Partnership Principles

- Communication that is clear, regular, timely and relevant underpins quality partnership
- Sharing information appropriately can keep children safe and improve outcomes
- Respect for each other and the strengths and contributions that all parties bring to the work
- Clarity around roles and responsibilities supports improved outcomes
- Shared commitment
- Valuing diversity and celebrating difference
- Perseverance in finding solutions to issues as they arise
- Transparency about organisational agendas and future intentions
- Equality between agencies delivering services

Governance

The Director, Student Support Services has overall responsibility and accountability for the delivery of an efficient, effective and quality service. Services are provided through five Channels across the state, with each channel consisting of metropolitan and regional teams. Each channel manager has line reporting responsibility for all management and workforce issues. Within channels, a number of multidisciplinary teams provide services to local education Partnership. Each multidisciplinary team has a Team Manager responsible for operational issues. Allied health Discipline Principals provide clinical governance for the respective discipline.

Student Support Services will operate in adherence with the service delivery standards, in accordance with the Education Act (1972), Disability Discrimination Act (1992), Disability Standards for Education (2005),

Children and Young People (Safety) Act (2017) and in accordance with Department for Education policies and procedures.

Service Delivery Standards

Service delivery standards are a set of criteria which state expectations of what will be provided to children, young people, their families and preschools and schools to ensure that they receive the best quality service. Student Support Services are committed to achieving these standards to ensure optimal outcomes for children and young people's learning and wellbeing. These standards provide a mechanism in which to assess the services ability to effectively implement the service delivery model. The six overarching standards are listed below (Department for Education, 2017). The service delivery model should be read in conjunction with the service delivery standards.

Standard One: Responsibilities and Practice –uphold the rights of children, young people and families in collaboration with preschools and schools. Student Support Services display a high level of professional behaviour and attitude in all aspects of service provision.

Standard Two: Child, Young Person and Family Voice –work in collaboration with preschool and school staff to provide children, young people and families with meaningful opportunities for active participation and promote the development of shared responsibility.

Standard Three: Valuing Diversity –respect, value and respond to the diversity of children, young people, families and preschools and schools in the provision of services.

Standard Four: Working in Collaboration –work collaboratively within Department for Education and with other agencies to support an integrated approach when working with children, young people, families and preschools and schools. This approach promotes best outcomes for children, families and preschools and schools.

Standard Five: Service Excellence –follow a service delivery model which enables equitable access, supports evidence informed practices and promotes a strength based, holistic and timely service.

Standard Six: Leadership, Management and Governance –Leadership and management structures and approaches support effective practice, continuous quality improvement and the ongoing development of staff.

Workforce

Roles

Student Support Services consists of a broad range of professionals who work together in multi-disciplinary teams, focusing on providing individual and group based support, workforce capacity building and the provision of specialised services. Outlined below are the roles and responsibilities of each professional. Whilst these are presented individually it is an expectation that these disciplines work together in a multi-disciplinary approach to ensure best outcomes for children and young people.

■ Behaviour Support Coach

Behaviour Support Coaches are educators who provide high-level advice and support to preschools and schools to support positive behaviour and optimal learning outcomes for children and young people. They promote a proactive and restorative approach to behaviour using a developmental

and trauma informed lens to explore the function of behaviour to address need using a positive behaviour support approach.

- **Psychologist**

Psychologists provide specialist support in the areas of learning, behaviour and wellbeing. They apply their psychological expertise to support preschools, schools and families to meet the needs of children and young people with additional needs to achieve academic success, psychological health, and social and emotional wellbeing (The Australian Psychological Society LTD, 2009).

- **Social Work**

Social Workers, Truancy work collaboratively with schools to achieve an inclusive, engaging environment that promotes the attendance and engagement of all children and young people. They do this by working with individuals, groups, families, preschools and schools and communities to address complex individual and family issues and other social and educational barriers to meaningful participation.

- **Special Educator and Special Educator Hearing**

Special Educators and Special Educators (hearing) support children and young people with additional needs, including disability, sensory impairment, and complex health needs, in partnership with families. They consult with preschool and school staff, families and where relevant, Department psychologists or speech pathologists, when considering appropriate placement for children and young people to ensure the most inclusive environment to support access, participate and achieve in the curriculum.

- **Speech Pathologist**

Speech pathologists work collaboratively with educators and other professionals within the education context. They support preschool and school staff and families to optimise the learning and wellbeing outcomes for children and young people with or who are likely to have speech, language and communication needs. This is achieved by the integration of discipline specific knowledge with an understanding of the education system and curriculum.

Supervision Framework

All staff within Student Support Services are expected to actively engage in supervision. Supervision comprises of three core elements; administration, developmental or educative and support.

Supervision is a formal process of professional support and learning which enables individuals to develop knowledge and competence, assume responsibility for their own practice and enhance outcomes in complex situations.

Underpinning principles include:

- Supervision utilises a proactive approach to support staff in their roles.
- Supervision will promote a reflective approach to practice.
- Supervision will assist professionals to grow and develop and respect their individuality and distinctive ways of working and learning.

Professional Development

Ongoing professional development across all disciplines in Student Support Services is essential. It is critical to maintaining service standards and the expertise of the workforce. It further ensures that service providers maintain currency of practice and meet the requirements set by their respective boards and associations.

Professional development should be in line with the roles and responsibilities of their position in the team and contribute to the delivery of quality and evidence informed services.

Improvement and Accountability

The Department's strategic plan sets a clear agenda for improvement and accountability to be embedded in our system, ensuring decisions and services are based on the best available evidence (Department for Education and Child Development, 2017). The application of sound governance and accountability requirements, mechanisms for service monitoring based on measurable standards, good information practices and a motivated and professional workforce is vital.

In response to this direction Student Support Services have developed a workforce capability framework and service delivery standards to complement this service delivery model, which outlines the evidence informed approaches that will guide practice.

Student Support Services will implement a Performance Framework, which will enable an effective mechanism to monitor and evaluate our service with the view to continually improving our service and outcomes for children and young people.

Families and children and young people will be meaningfully engaged in the planning and delivery of services and improvement strategies.

Information Management

Service providers are responsible for documentation of the work they undertake. Records are to be maintained in line with the Departments Records Management policy. Oversight for documentation rests with the Discipline Principals, Discipline Seniors and Team Managers.

In working collaboratively with other key agencies, information may be requested. The information sharing guidelines (ISG) for promoting safety and wellbeing of children and young people (Ombudsman SA, 2013), and the sharing of information legislation outlined in section 152 of the Children and Young People Safety Act 2017 (Government of South Australia, 2017) will be adhered to. Service providers will;

- Ensure a child's right to safety is paramount in guiding actions and is not overridden by other considerations such as privacy and confidentiality;
- Seek the consent of adults and children to share their personal information, where it is safe and practicable to do so.

It is also important to consider the options for how services are delivered in rural and remote regions and how advances in technology can assist. Student Support Services actively work to ensure flexibility regarding service delivery, considering the use of new and emerging technology platforms to ensure the best possible access for all children, young people and families.

Chapter 1: Behaviour Support Coaches

Behaviour Support Coaches are educators who provide high-level advice and support to preschools and schools to support positive behaviour and optimal learning outcomes for children and young people. They promote a proactive and restorative approach to behaviour development and explore the purpose of behaviour to understand precipitating factors.

The behaviour support coach works as a member of a multi-disciplinary team to build the capacity of families, educators and other professionals to create safe and conducive supportive learning environments.

Service Description

Behaviour support coaches provide proactive, preventative and targeted services, including support and interventions for individual children and young people, groups, classes and whole of preschool and school; as well as consultation with education staff, families, and other professionals to improve preschool and school wide practices and policies.

The behaviour support coach applies evidence informed interventions in a range of contexts that supports the promotion of socially acceptable and positive behaviour and preventing, reducing or redirecting unsafe and/or unproductive behaviours. They work to improve families and preschools and schools understanding of behaviour and to develop their capabilities in consistent, fair and equitable responses to behaviour that foster trust.

Behaviour support coaches have particular skills in repairing and restoring relationships that have been harmed by problematic behaviour and facilitate the restoration and re-establishment of safety and wellbeing following critical behaviour incidents. They work closely with educators to embed inclusive pedagogies that ensure the learning environment reflects the diversity and experiences of children and young people.

Behaviour support coaches practice according to the following evidenced based frameworks:

- Positive Behaviour Support (PBS) Framework
- Managing Actual and Potential Aggression (MAPA)
- Trauma Informed Practice
 - SMART (strategies for Managing Abuse Related Trauma)
 - Berry Street
- Common Approach
- Teacher Standards

Service Outcomes

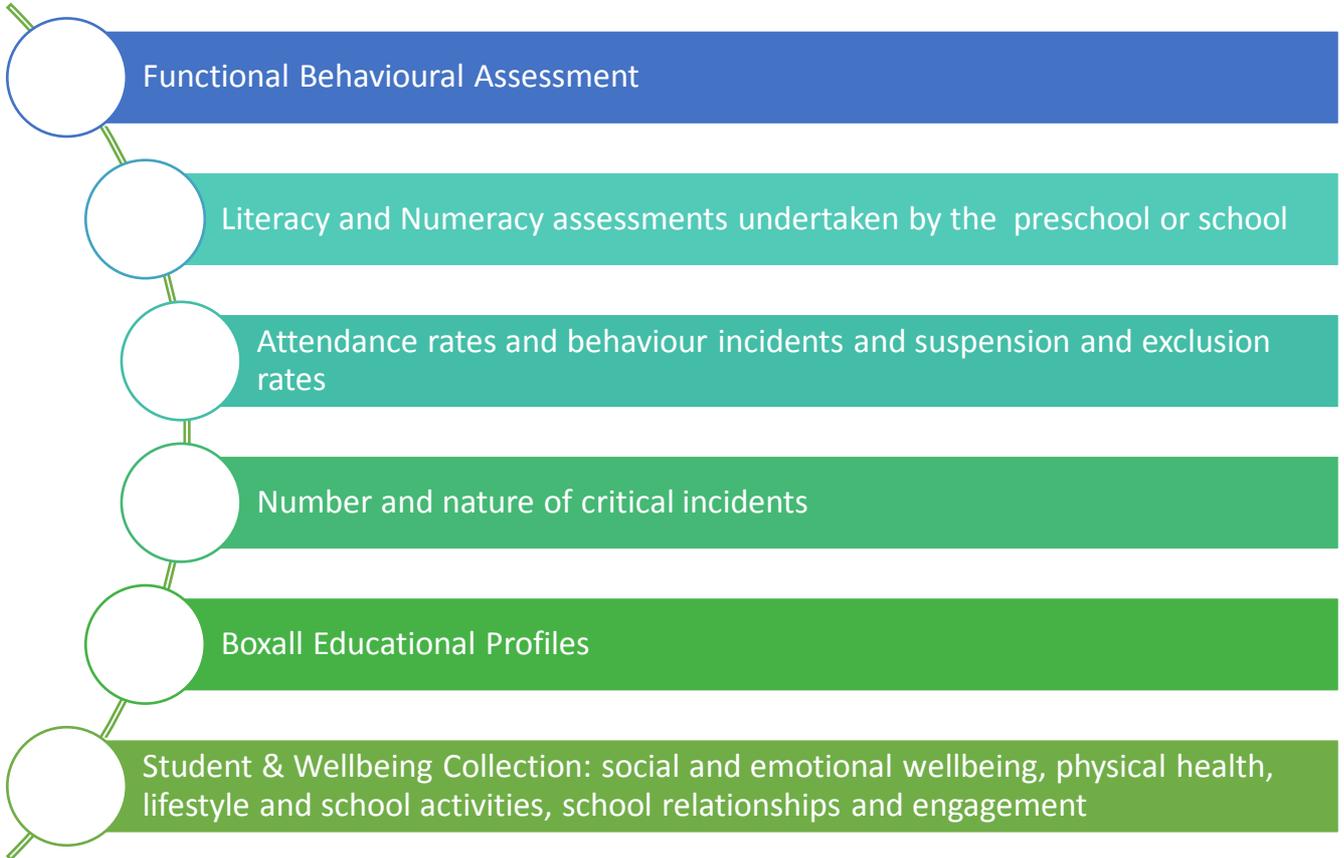
The Behaviour Support Coach outcomes include:

- Support preschools and schools to ensure children and young people reach their educational potential
- Families and children and young people's understanding of behaviour and the use of effective strategies is strengthened
- Preschools and schools understand and provide an inclusive educational environment that supports positive behaviour for all children and young people
- Preschools and schools implement whole of school positive behaviour strategies
- Preschools and schools improve capabilities in effectively managing problematic behaviour, using trauma informed and restorative practices.



Data

Data utilised by a behaviour coach assists in understanding appropriate approaches to intervention as well as ascertaining children and young people’s progress in regards to their behavioural and social, emotional and wellbeing outcomes.



Eligibility for Service

Behaviour Support Coach services are accessible to children and young people in the Department for Education preschools and schools who continue to be at risk of disengaging from their learning, due to their behaviour within the context of social-emotional issues, following interventions from the preschool or school.

This includes children, young people and families who are identified as at-risk, with complex student and family needs and where there are school based issues and system barriers.

Schools may access this service where there is an identified need for capacity building relating to promotion of positive behaviour, understanding behaviour in the educational context, quality differentiated teaching practice, the impact of social and emotional wellbeing, and effective partnering with families and other agencies.

Service Model



Proactive

- **Working with the school leadership team to build school capacity to address/support students with additional needs in the context of behaviour. By:**
 - Promoting and scaffolding socially acceptable and positive behaviour
 - Teaching positive behaviour and behaviour expectations
 - Preventing, reducing or redirecting/replacing unsafe/unproductive behaviours
 - Working with parents, families, communities and professionals to understand how challenging behaviour has emerged for a child/young person and develop strategies to replace such behaviour
 - Providing consistent visible, fair and equitable responses to behaviours that foster trust and confidence amongst the school community
 - Restoring and re-establishing safety and wellbeing for people involved in and impacted by behaviour incidents
 - Embedding inclusive pedagogies that ensure learning contexts reflect the diversity and experiences of students.
- **Providing Professional support for preschools and schools in** The provision of professional development in regard to understanding behaviour and the use of whole site, positive approaches to managing behaviour



Targeted

- Building capacity of educators to enhance engagement of identified students through Quality Differentiated Teaching Practice (QDTP) by providing specialist advice, feedback and support to school staff to commence early support planning.
- Assisting preschools and schools to identify targeted strategies to support students with additional and wellbeing needs to engage with the curriculum.
- Supporting development of collaborative plans in partnership with schools, preschools, families/carers and students, e.g. One Plan.
- Advice and support regarding behaviour and wellbeing programs within classrooms
- Supporting effective implementation of context specific plans within the classroom setting
- Supporting preschool and school leadership to implement policies and practice frameworks.



Intensive

- Facilitating the transition of a student in care to a new school environment where there are identified issues with behaviour.
- Participating in a multi-disciplinary case management approach to improve learning outcomes for students by identifying and facilitating the involvement of other services
- Coordinating and supporting the analysis of behavioural assessments
- Participating in the co-development of plans (One Plan) for behavioural issues or other learning and wellbeing needs
- Recommending individual support, group interventions or family engagement strategies to support attainment of identified educational and wellbeing outcomes for the students
- Build capacity of preschools and schools to support strategies requiring further resourcing
- Provide appropriate support and advice where there is complexity in implementation of SEE procedures as negotiated with school leader

Chapter 2: Psychology

Department for Education Student Support Service psychologists apply their psychological expertise to support children and young people with additional needs to achieve academic success, psychological health, and social and emotional wellbeing (The Australian Psychological Society LTD, 2009).

Psychologists have a broad range of expertise in psychological and social and emotional health issues that impact on developmental, learning and wellbeing outcomes in children.

Service Description

Psychologists work in collaborative partnership with children, young people and families, education staff, other service providers and external agencies to facilitate access and participation to learning to maximise educational outcomes for children and young people. They work as a member of a multi-disciplinary team to build the capacity of families, educators and other professionals within the community to create safe and supportive learning environments that strengthen connections between home, school, and the community.

The department's psychologists play a significant role in the assessment and identification of children and young people with additional needs. They provide preschools and schools with recommendations and strategies to support children and young people in both mainstream and specialist education settings who are at risk of social, emotional issues and disengagement from school.

Psychologists provide proactive, preventative and targeted psychological services, including support and interventions for individual students, groups, classes and whole of preschool and school; as well as consultation with education staff, families, and other professionals to improve preschool and school wide practices and policies.

Psychologists practice according to the following evidence based frameworks:

- Biopsychosocial Theory
- Child Development Theory
- Learning Theories
- Cognitive Theory
- Attachment Theory
- Trauma-informed Practice
- Neuropsychology; and
- Positive Psychology

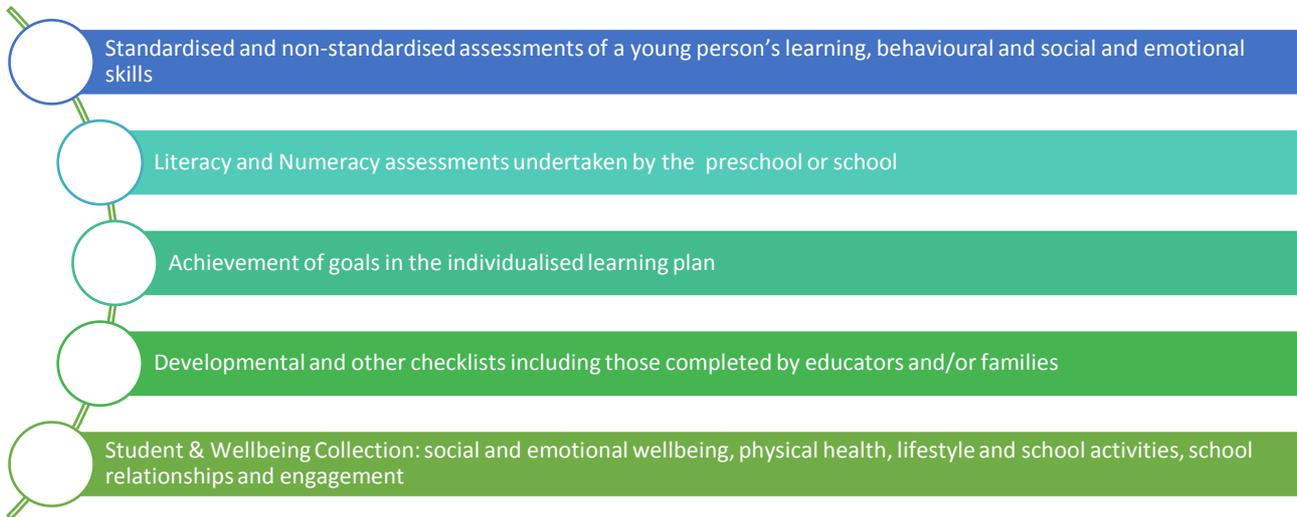
Service Outcomes

The psychology service specifically aims to improve outcomes for children and young people with additional needs. Service outcomes include:

- Support preschools and schools to ensure children and young people reach their educational potential
- Improvement in the child or young person's, social, emotional, behavioural and or physical development. This can include those with exceptional needs (including giftedness).
- Improve the preschools and schools capabilities in effectively planning for and supporting children in an inclusive educational setting.
- Improve the preschools and schools capabilities in addressing the social, emotional and learning needs of all children and young people.

Data

Psychologists operate under the scientist-practitioner model. As such, data collection is an integral part of practice. Data collected by a psychologist may include information pertaining to a child or young person's academic performance, psychological health, behaviour, adaptive functioning and/or social and emotional wellbeing. Data is also collected regarding learner's progress and outcomes in response to intervention. Measures used to collect this information may include:



Eligibility for Service

Psychology services are accessible to individual and groups of children and young people who have ongoing issues after preschool and school based interventions have been implemented and the response to school intervention has been minimal. This includes children and young people who are affected by barriers to achieving their potential due to learning, behavioural, or social and emotional issues.

On occasion children or young people may be eligible for a psychology service when they are not enrolled in a Department preschool or school where the families wish to explore eligibility for placement in a specialised program.

Any Department preschool or school is eligible for a proactive service where a need is identified for capacity building relating to the supporting the learning, behaviour or social and emotional wellbeing of children and young people.

There are a range of services that fall outside the scope of psychology services. These include Autism Spectrum Disorder assessments and therapeutic interventions. Consideration is also given to the requirement for a Department psychology service when a psychology service is already provided through another service or agency, for example National Disability Insurance Scheme (NDIS) or private providers.

Service Model



Proactive

- Support educators by providing advice about relevant teaching and learning strategies to support inclusion
- Assist preschool and schools to identify and implement evidence based interventions to support learning and engagement
- Development and delivery of wellbeing intervention programs to whole of preschool, school and/or Partnership
- Support educators by providing professional development in areas such as:
 - Wellbeing education and prevention programs focusing on resilience, social skills, self-care, study skills, trauma informed practice and behaviour management
 - Psycho-education on a range of education topics (e.g learning disorders and cognitive processes)
- Assist preschool and and schools to identify areas of need for program development and intervention through the analysis of learners data and trends.

Targeted



- Conduct assessments to identify relevant psychological barriers that are impeding learning and participation (i.e. cognitive, academic, adaptive, emotional, social, behavioural). This may involve a review of documentation, observations and clinical interview
- Administration and interpretation of standardised and non-standardised psychology tests to inform and understand an individual child or young person's skills and abilities
- Case formulation, recommendations for intervention, feedback to the child or young person, family and school staff including the provision of a written report
- Provision of support and advice about eligibility and access to additional funding and school pathway options for children and young people with a disability and /or additional needs.
- Design, delivery and evaluation of evidence-informed intervention strategies to support access to and participation in the curriculum.
- Consultation with educators to address individual and group learning styles and/or difficulties with behaviour.

Intensive



- Involves a team approach and is provided to children and young people presenting with one or more of the following features
 - Complex and/or chronic barriers to learning and wellbeing due to personal, social, medical family and/or system issues
 - Involvement of multiple Student Support Service providers
 - Involvement of multiple agencies
- Provision of psychological services as outlined in the targeted section
- Case Management
- Consultation and contribution of services in a Team Around the Child approach
- Participation in multi-disciplinary and multi-agency case meetings

Chapter 3: Social Work – Truancy

Attendance and engagement in the school environment is viewed as critical for not only a child’s social, emotional and wellbeing outcomes but also for its impacts on their ability to reach their educational potential. International research reports a high correlation between full-time attendance and engagement at preschool and school and successful literacy and numeracy outcomes (Shepherd, Lawrence, & Zubrick, 2013).

Social Workers Truancy are highly trained professionals who work collaboratively with schools to achieve an inclusive, engaging environment that promotes the attendance and engagement of all children and young people. They do this by working with individuals, groups, families, and schools and communities to address complex individual and family issues and other social and educational barriers to meaningful participation.

Service Description

Schools as the primary providers of education are responsible for providing high quality education and primary prevention and early intervention programs that address health, wellbeing, education and learning needs for all children and young people. Social Workers Truancy work with schools to develop and implement strategies and programs that foster resilience in children and young people and address their social, emotional and educational needs. Using an inter and intra agency approach is critical to best outcomes for children and young people, the Social Worker Truancy works in partnership with Child Wellbeing Practitioners, Child Protection services and other relevant agencies.

Social Workers Truancy deliver services directly with children and their families, build capacity within the school and develop and support community connections.

Service Outcomes

The Social Work Attendance and Engagement service specifically aims for:

- Improved attendance rates and engagement of all children and young people in school settings
- Improved resilience and social and emotional wellbeing of children and young people
- Strengthened family links and engagement with schools
- Improved and systemically embedded schools’ capacity in effectively engaging children and young people and developing an inclusive culture.
- All schools to plan implementation of effective evidence-informed strategies to support the social and emotional wellbeing of all students.

Data

Information regarding progress and outcomes for children and young people is important to monitor in the areas of attendance and engagement and social and emotional wellbeing. Measures may include:



Eligibility for Service

Social Work Truancy services are accessible to children and young people in Department schools and Catholic and Independent Schools who have ongoing attendance and engagement issues, following input from the school attendance process.

This includes children, young people and families who are identified as at-risk of non-attendance, with complex student and family needs and where there are school based issues and system barriers.

Schools may access this service where there is an identified need for capacity building relating to social and emotional wellbeing, effective partnering with families and other agencies, early intervention strategies for attendance and engagement and development of school attendance improvement plans.

Service Model

Proactive



- Collaborate with education leaders, communities, and other key agencies to address system issues that support effective inclusion
- Support the development of school attendance plans and school improvement plans
- Provide professional development and training relating to approaches and strategies that support attendance and engagement
- Support schools to implement early intervention and evidence based strategies that promote a culture of inclusion and attendance and engagement
- Strategically plan and utilise information with Local Education teams to identify priorities and effective improvement strategies

Targeted



- Provide consultation, advice and timely responses to education staff and leadership
- Bio-psycho-social assessments and systems assessment
- Identification and brokering of referrals and resources for individuals and groups within the school community.
- Collaborative interventions using restorative practice between children, families and education staff
- Collaborative development of individual and school improvement plans
- Case coordination

Intensive



- May require a 'Team around the Child' approach which involves a coordinated intra and inter-agency response and specialised support OR follow up for high risk children or young people and families with multiple complex needs and limited or no support structure in place.
- Consultation across Student Support Services, the Department and other agencies
- Supporting urgent referral pathways including caregivers where there are safety concerns
- Case coordination

Chapter 4: Special Educator and Special Educator (Hearing)

Special Educators and Special Educators Hearing are teachers who provide specialist advice and a range of supports to educators, children and young people, and families. They have experience working with children with disability and additional needs in educational settings, and use their knowledge and skill base to coach and mentor educators to improve the quality of teaching practice in preschools and schools.

A critical aspect of the special educator role is to promote an inclusive environment that supports engagement and best outcomes for all children and young people. They provide support to preschools and schools to implement the Disability Standards for Education to meet their legal obligations under the Disability Discriminating Act (DDA) for children and young people with additional needs.

Service Description

Special Educators and Special Educators Hearing provide proactive, targeted and intensive services to preschools and schools to support children and young people with additional needs, including disability, sensory impairment, and complex health needs. They do this by working collaboratively with educators and families to establish optimal learning environments, differentiated teaching practices and appropriate supports and adjustments to ensure each child or young person is engaged and participating in the preschool or school environment.

They work as a vital member of the multidisciplinary team and in particular consult with preschools and schools, families and Department psychologists or speech pathologists and government and non-government agencies, where relevant, when considering appropriate educational placement for children and young people who may benefit from alternatives to a fully inclusive environment in order to access, participate and achieve in the curriculum.

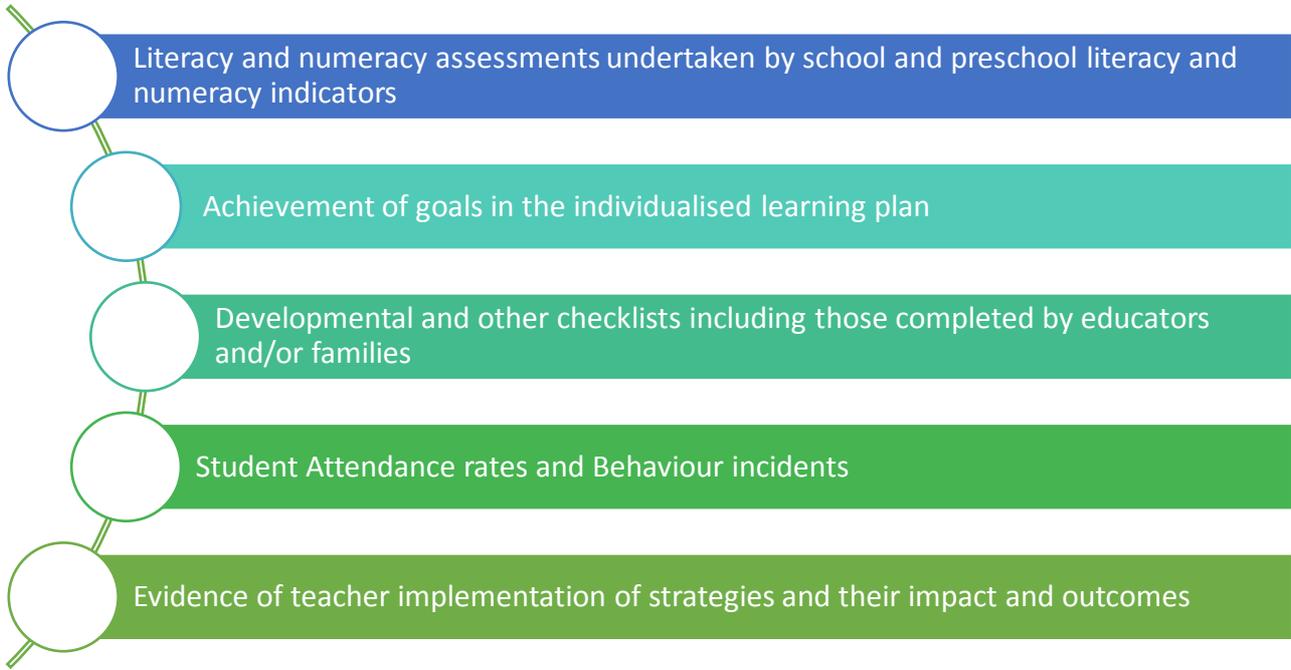
Service Outcomes

Special Educators and Special Educators Hearing work in collaborative partnership with preschools and schools, children, young people, families, multi-disciplinary team and external agencies to:

- Ensure preschools and schools enable every child with additional needs to have the opportunity to access, participate and achieve in learning on the same basis as their peers.
- Assist preschools and schools to improve learning and wellbeing outcomes for all children and young people with additional needs.
- Every child and young person is supported in the most appropriate and inclusive educational setting
- Increase the skills of educators in preschools and schools to use quality evidence informed differentiation and inclusive practices when teaching children and young people.

Data

Information regarding progress and outcomes for children and young people with additional needs is important to monitor and provides an indication of the types of interventions required as well as the efficacy of the interventions implemented. Measures may include:



Eligibility for Service

Any child or young person for whom a Department school or preschool (including affiliate preschools) has ongoing concern regarding access, participation and achievement due to a diagnosed or suspected disability, learning difficulty or health concern, following preschool and school interventions.

For **Special Educator Hearing**: Any child or young person with a diagnosed or suspected hearing loss because of documented risks to speech, language, social and emotional development.

Any Department preschool or school is eligible for a proactive service where a need is identified for capacity building relating to the supporting educators, leaders or Partnerships to better meet the needs of children and young people with a disability or additional needs.

Service Model



Proactive

- Work with preschool and school leadership to build staff capacity to address and support children and young people with additional needs
- Promote and model effective inclusive practices through Quality Differentiated Teaching Practice (QDTP) to increase and challenge practices that create barriers to inclusion
- Build capacity of individual educators by coaching and mentoring to improve quality practice
- Assist preschools and schools to develop processes to assess, prioritise, plan, develop, action and review practices through effective differentiation of pedagogy
- Support preschools and schools to manage social, emotional and educational risks associated with otitis media especially for indigenous children
- Provide proactive professional development regarding risks associated with all degrees of deafness, disability or learning difficulty for social, emotional and academic development



Targeted

- Provide or recommend specialised programs and resources, and specifically provide advise regarding implementaiton of the Disability Standards for Education and the DDA
 - Observe and collect data to assist teachers regarding specific planning and/or behaviour management strategies and assist with evaluation of program
 - Provide specific support to develop SMARTAR goals that incorporate recommendations and interventions provided by other professionals
 - Advise and support effective implementation of assistive technology e.g. Applications and programs
 - Support school/ preschool to acquire skills to develop applications for additional funding required to implement individualised learning plans or programs
 - Support preschools and schools with facilities' requests to enable access for children and students with a physical or sensory disability.
 - Advise preschools and schools about their legal responsibilities regarding implementation of Disabiliity Standards for Education and the DDA
-
- In addition, **Special Educators Hearing** offer specialist advice and support:
 - Recommend effective interventions and appropriate strategies to manage risk and advise regarding identifiication of undiagnosed children
 - Conduct acoustic assessments to identify poor listening conditions.
 - Assist preschool and schools with the requisition for acoustic upgrades to relevant learning spaces.
 - Advise preschools and schools about acoustic standards when building works are planned and when considering appropriate learning spaces for children who are Deaf/Hard of Hearing
 - Formal Speech Perception Testing to measure/indicate disparity between what teachers say and what the child or young person hears.
 - Conduct specific assessments to highlight addressable gaps in the child's or young person's spoken language skills and audition.
 - Advise and assist preschools and schools to effectively use and manage relevant amplification devices
 - Interpret audiometric reports and data
 - Assist to identify hearing loss in children by performing Audiometry screenings

Intensive



- May require a “Team around the Child ” approach using multi-agency case management for high risk cases with multiple complex needs
- Recommend individual support and group interventions for children and young people with additional needs
- Provide advice and support for individual children and young people in co-developing plans for educational accommodations required and strategies for curriculum differentiation

- In addition, **Special Educators Hearing** provide:
- Disability specific support for young children and babies who are Deaf or hard of hearing identified through the newborn hearing screening in country regions.

Chapter 5: Speech Pathology

Communication is a basic human right and communication skills underpin learning, literacy and numeracy and are vital to the development and maintenance of relationships. Communication ability is influenced by a range of factors including but not limited to hearing/physical/intellectual impairment, neurodevelopmental disorders, and social, environmental and cultural contexts. Speech pathologists, in the education context provide specialist skills to diagnose, provide advice and deliver interventions for speech, language and communication needs.

Service Description

Departmental speech pathologists work collaboratively with educators and other professionals within the education context. They support preschools and schools and families to optimise the learning and wellbeing outcomes for children and young people with or who are likely to have speech, language and communication needs. Speech pathologists integrate discipline specific knowledge with an understanding of curriculum and pedagogy to provide services at the proactive, targeted and intensive levels.

A best practice approach to supporting children and young people with speech, language and communication needs is through a whole preschool or school collaborative approach which is multi-tiered. The service encompasses both assessment and intervention for individual and groups of children and young people as well as proactive approaches to support preschools and schools to increase their capabilities in meeting speech, language and communication related needs. It should be noted that proactive service alone is not an effective approach to address speech sound disorders.

The benefits of early intervention are well established. However, developmental language disorder is a life-long disability and the impact this has can change over time. Therefore, the focus and nature of support and intervention may also change over time.

Service Outcomes

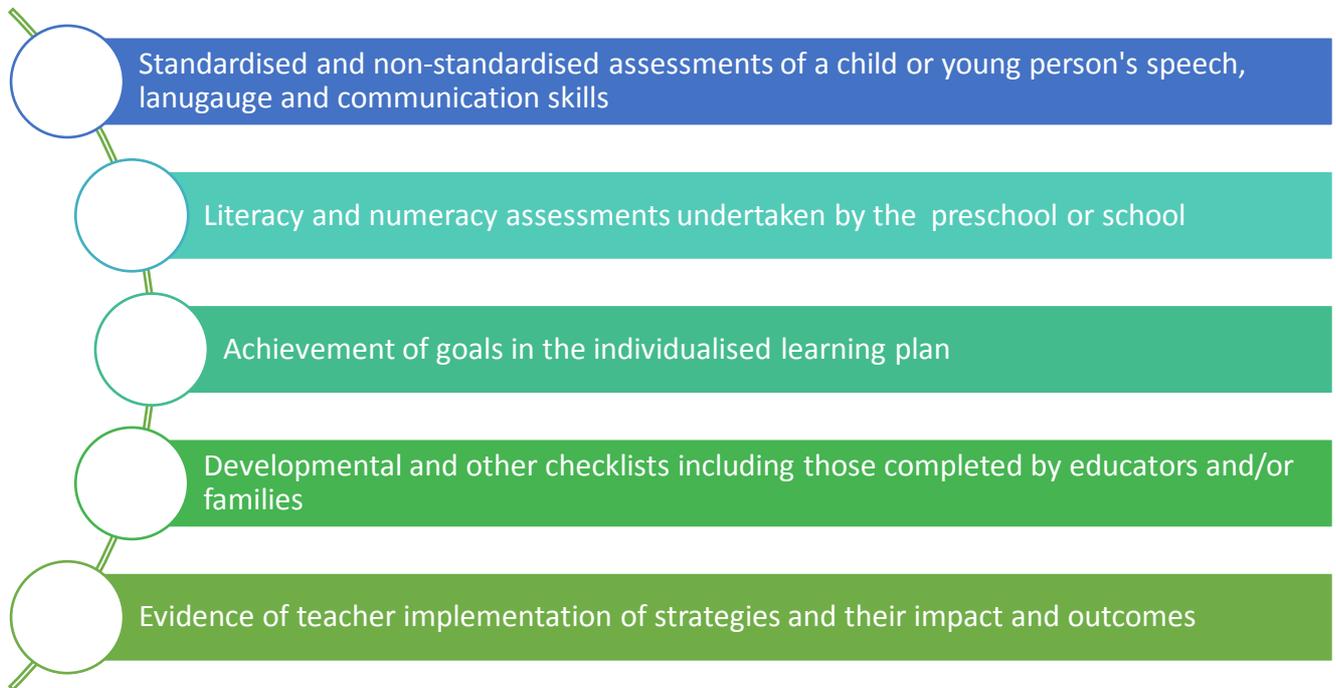
The Speech Pathology service specifically aims to improve outcomes for children and young people with additional needs. Service outcomes include:

- Education staff understand the prevalence, incidence and impact of speech, language and communication needs on learning, social skills, behaviour and wellbeing
- Preschools and schools identify children or young people with, or who may have, speech, language and communication needs
- Preschools and schools provide environments that optimally support language and literacy development and reduce barriers to learning
- Where there are significant concerns, speech, language and communication needs are investigated and the implications for learning, literacy and wellbeing identified
- Educators differentiate teaching to meet the identified learning needs of children and young people with speech, language and communication needs
- Strengthened learning, literacy, social and wellbeing outcomes for children and young people with identified speech, language and communication needs



Data

Baseline data is gathered in a variety of ways to inform decision making regarding appropriate interventions in addition to being an indicator of the outcomes of intervention. Data sets include:



Eligibility for Service

Speech pathology services are accessible to children and young people in the Department preschools (including affiliate preschools) and schools who have or may have speech, language or communication needs that impact on learning and wellbeing, and their educators and families.

Decisions regarding service provision are informed by:

- The nature of the speech, language or communication need
- The functional impact
- The risks of delaying intervention or not intervening, including risks for literacy
- Evidence regarding effective interventions

There are some services that fall outside the scope of speech pathology service, this includes Autism Spectrum Disorder assessment, writing oral and eating and drinking care plans and training in this area or provide voice training to educators. A child or young person accessing an external speech pathology service is not excluded from accessing a speech pathology service within the Department on the basis of receiving a service elsewhere. When a non-departmental speech pathologist is involved, the role of the Departmental speech pathologist must be clearly negotiated with the preschool/ school, family and external speech pathologist.

Service Model

Proactive



- Support awareness and identification of children or young people with, or who may have speech, language and communication needs and the impact of those needs
- Provide advice and support to implement evidence informed intervention strategies that can support a range of children with communication difficulties and promote practices of inclusion
- Build the capacity of preschools and schools to be language rich environments that support language and literacy development
- Build and strengthen educators' inclusive practice in the areas of emergent literacy, comprehension, phonological awareness, vocabulary, syntax, morphology and oral narrative

Targeted



- Explore, identify and diagnose speech, language and communication needs of children and young people
- Support educators to differentiate the curriculum for children and young people with identified speech, language and communication difficulties
- Provide individualised interventions for children and young people with speech, language and communication needs
- Collaborate with educators to implement interventions for individuals and groups. This may involve development of resources and materials to assist with implementation.
- Targeted interventions may be delivered direct or by proxy*

Intensive



- Work at this level pertains to children and young people where there is complexity requiring a team around the child approach and may include case management or case coordination.
- Determine if there is a speech, language or communication need
- Contribute to differential diagnosis and functional behavioural analysis
- Establish functional communication systems
- Contribute to determining goals and intervention
- Liaise and collaborate with, and interpret information from, external providers and provide advice and support regarding the implications for the educational context as required

**Proxy (Indirect) Interventions*

Proxy intervention occurs when the speech pathologist develops and oversees a program that is implemented by an educator/support worker and/or family member who has received training. Monitoring and review of the program is negotiated as part of the service plan, to determine the effectiveness of the program and allow for the provision of further advice, strategies and targets. Speech pathologists review the need for their input in conjunction with preschool/ school staff and families to determine when current active speech pathology involvement closes.

Direct Interventions

At times intervention may be delivered directly by the speech pathologist with individuals or groups. Rationales for such a decision may include the diagnosis, nature of the intervention and the need to coach/train educators/support workers and/or parents in delivering the interventions.

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