

INDIVIDUAL LEARNING PLANS FOR CHILDREN IN OUT-OF-HOME CARE



INFORMATION FOR EARLY CHILDHOOD EDUCATORS

This is an overview of what early childhood educators need to consider when developing individual learning plans for children placed in out-of-home care (OoHC).

The advice is aligned with the Victorian Early Years Learning and Development Framework (VEYLDF)¹ and supports the commitments outlined in the Early Childhood Agreement for Children in Out-of-Home Care.



The Early Childhood Agreement for Children in Out-of-Home Care

- The Early Childhood Agreement is between 11 partners, including the Department of Education and Training (DET) and Early Learning Association Australia (ELAA). It outlines partners' shared responsibilities to ensure all children aged 0–5 years in statutory OoHC are engaged in high-quality early childhood education and care. This includes kindergarten, long day care and Maternal and Child Health (MCH) services.
- Under the Agreement educators should collaborate with Child Protection and the child's guardian or carer to develop individual learning plans (ILPs) (see individual learning plans for Children in OoHC in this document for more detail).
- Educators should refer to the Agreement which outlines roles and responsibilities, guiding principles and useful information such as a glossary of helpful terms and available subsidies.

Children in OoHC

- As at 30 June 2018, Victoria had 7,954 children and young people living in OoHC. Of these, around 2,306 are aged from newborn to five years. Nearly one-third of children under five in OoHC are of Aboriginal or Torres Strait Islander descent.
- Some children stay in OoHC for a few days or weeks, while others may be in long-term care. Children in kinship care may require more support.
- Many children in OoHC struggle to participate and remain engaged in kindergarten. Frequent moves between carers and parents, can disrupt continuity of learning. Carers can also become overwhelmed with the complexity of the service system and how to access funded kindergarten.
- ILPs are critical to engaging carers in children's learning and can help provide consistent support during transition points like these.

For more information, go to: dhhs.vic.gov.au/children-and-families

Supporting planning processes

When establishing and updating ILPs for children in OoHC, educators should check other relevant supporting documents that could influence planning. These could include:

• Looking After Children framework

Looking After Children (LAC) provides the practice framework for considering how each child's needs will be met while that child is in OoHC. The LAC looks at health, emotional and behavioural development, education, family and social relationships, identity, social presentation and self-care skills.

The service provider of the child's care placement is responsible for coordinating the LAC processes and completing the LAC records with other care team members. Educators may be invited to attend care team meetings to discuss issues outlined in the LAC plan.

See providers.dhhs.vic.gov.au/looking-after-children-framework for more information.

• Cultural support plan

The Children Youth and Families Act 2005 states that all Aboriginal children must have a cultural support plan developed by child protection or the Aboriginal Children in Aboriginal Care representative. It is important for educators to incorporate the cultural support plan into the ILP as required.

Also, the *Marrung Aboriginal Education Plan 2016–2026* commits all educators to ensuring the needs of Aboriginal children are met within schools and early learning services².

• Maternal and Child Health (birth to school age)

Maternal and Child Health (MCH) provides a comprehensive and focused approach for the promotion, prevention and early detection of the physical, emotional or social factors affecting

young children and their families; providing early intervention, support and referrals as required.

Assessments for a child's health, wellbeing, safety, learning and development are undertaken at Key Ages and Stages. The My Health, Learning and Development Record, known as the Green Book, is kept as a record of a child's health, growth and development, and other milestones throughout childhood.

MCH utilise the Parents' Evaluation of Developmental Status (PEDS) and the Brigance as developmental screens to assess child development. Sharing of birth information, sequential growth and developmental outcomes are best practice in supporting children in OoHC. Early years educators are encouraged to contact MCH for this information.

• Health services plan

Children who have entered OoHC are referred to a health service for a comprehensive multidisciplinary health assessment and ongoing care management for any physical, mental or oral health issues identified. This information is documented in a health, wellbeing and safety plan that can be shared with other services involved in the care of the child.

• National Disability Insurance Scheme (NDIS) plan

The NDIS plan of a child or young person outlines their personalised and funded supports. It focuses on supports not provided as part of another service system's universal service obligation (for example, meeting their health, education, housing or safety needs) or covered by reasonable adjustment (as required under the *Commonwealth Disability Discrimination Act 1992* or similar legislation in jurisdictions).

• Allied health reports

Relevant reports by allied health professionals such as occupational therapists, physiotherapists, psychologists, social workers and dentists caring for the child.

¹ Department of Education and Training (2016), Victorian Early Years Learning and Development Framework, education.vic.gov.au/childhood/professionals/learning/Pages/veylf.aspx

² The *Marrung Aboriginal Education Plan 2016–2026* is a ten-year integrated plan that supports improved learning and development outcomes for Koorie Victorians, including those in OoHC across early childhood, school, training and skills and higher education.

INDIVIDUAL LEARNING PLANS FOR CHILDREN IN OoHC

- Each child’s learning and development must be assessed or evaluated as part of an ongoing cycle of observation, analysing learning, documentation, planning, implementation and reflection (National Quality Standard Element 1.3.1).

Each child enrolled in an education and care service (National Regulation 74) is required to have a record that documents assessments of: each child’s developmental needs, interests, experiences and participation in the educational program and the children’s progress against the outcomes of the educational programs.

An ILP will support services to meet this requirement.

- Some children with more complex needs will require additional reflection and planning to appropriately address their learning needs.
- An ILP enables educators to scaffold each child’s learning through differentiated strategies. It can be used in discussion with the child’s care team.
- For our most vulnerable children, additional considerations should be made because their overall presentation and behaviour may be impacted by their life experiences.

All ILPs should reflect the child’s voice and outline a meaningful educational program to engage the child in learning. ILPs should:

- support the child’s regular attendance at the centre
- plan for transition times throughout the day and the week
- carefully consider each child’s circumstances and potential vulnerability
- reflect the strengths the child brings, and developmental progress or level
- ensure there are strong partnerships developed with families or carers, including seeking and documenting their perspectives for their child as outlined in VEYLDF practice principle 5
- be developmentally age-appropriate, holistic in their approach, flexible and future-orientated
- incorporate collaboration with other professionals, often through kindergarten support groups
- ensure that the objectives and goals are measurable, achievable, supported and time-framed
- establish short-term objectives across the five VEYLDF outcomes that will lead to the achievement of long-term goals
- support the continuity of educators to promote a safe and secure connection that positions children to explore the program

ILPs can look and present differently across educational services. There is no one ‘correct’ format.

For further information see, online modules and practice resources under **Learning frameworks birth to eight years** on education.vic.gov.au

Trauma lens

- A child or young person who has been or is currently in an OoHC placement may have experienced trauma.
- The Australian Childhood Foundation (ACF) defines trauma as emotional, psychological and physiological residue left over from the heightened stress that accompanies experiences of threat, violence and life-challenging events. It causes a constant state of tension and arousal, leaving children unable to concentrate on, retain and recall new information. They have little space left for learning.
- Evidence of trauma can display itself in the behaviour and development of children or young people who have experienced it. They may, for example, display a learning delay or non-typical language and communication skills. Their behaviour might be challenging, and they can be labelled as disruptive, defiant and poor learners.
- Children and young people who have suffered trauma can also struggle to maintain positive peer relationships, and can be at high risk of disengaging from education. However, with support, children and young people can, and do, recover from the harmful effects of trauma.

Because of this, early childhood teachers and educators should be trauma-informed, and adopt a trauma lens when developing an ILP. The ILP should:

- identify supportive and reliable relationships, including a champion for the child
- include ways that educators understand and respond to children’s unique needs to actively support their recovery from trauma in the education setting
- reflect how educators will adjust the environment and their interactions to create a safe, supportive and calming space
- In daily practice and programming, educators should adopt the three pillars of trauma-informed practice:
 - 1) safety
 - 2) connection
 - 3) self-regulation⁴.



THE VEYLDF EARLY YEARS PLANNING CYCLE

The VEYLDF planning cycle uses a five-step approach to developing an individual learning plan.

The planning cycle is designed to ‘discover what children know and understand, based on what they make, write, draw, say and do’⁵.

It considers the context of family, culture, community and individual settings, and supports assessment of learning that contributes to a detailed, up-to-date, strength-based picture of the child’s learning and development, to inform planning and practice decisions.

The information below covers additional considerations for children in OoHC that educators should factor into their usual planning according to the VEYLDF Planning Cycle. A corresponding National Quality Standard (NQS) providing explicit practice advice relevant to the planning cycle stage is also highlighted, as are possible guiding questions an educator may ask.

Refer to Appendix 1 for a case example of a child placed in OoHC that has drawn on the VEYLDF planning cycle. Please note that this example is not comprehensive and is only intended as a suggestion to support the thinking of the educator.

There is no particular format that needs to be used for the ILP. What is important is that educators record their planning and discuss it with the child’s carer.

THE FIVE-STEP APPROACH TO DEVELOPING AN INDIVIDUAL LEARNING PLAN



Collect Information - page 6

Question/Analyse - page 7

Plan - page 8

Act/Do - page 8

Reflect/Review - page 9

³ Australian Childhood Foundation (2018). Making Space for Learning. Trauma Informed Practice in Schools.

⁴ Bath, H. (2008). The three pillars of trauma-informed care. Reclaiming Children and Youth, 17(3), 17-21. Australian Childhood Foundation.

⁵ VEYLDF, Department of Education and Training (2016), Victorian Early Learning and Development Framework page 8.

COLLECT INFORMATION

Early childhood professionals recognise families and carers as 'the primary influence on children's learning and development' and develop shared understandings that extend children's learning and development⁶.



What can you find out about the child from their carer or guardian? For example:

- How does the child approach transitions and separations?
- What are their preferred interests and skills?

To understand the complexity of the relationships surrounding the child, educators can map who is in the child's life in terms of 'family', 'kinship' and 'cultural influences'.

What can other professionals tell you about the child? For example:

- Are there others and supporting planning processes in place, such as LAC? How can alignment with ILP be created to deliver the best outcome for the child?
- If the child is of Aboriginal or Torres Strait Islander descent, is there a cultural support plan?
- Have you arranged a kindergarten support group? Members of this group should include the carer and relevant professionals working with the child.
- If the child has recently seen a MCH nurse, was there a Brigance assessment completed?
- If the child has a developmental delay, have they been linked to the NDIS? Have there been recent assessment reports that will help you understand the level of learning and help you begin to consider the learning plan? Has a Preschool Field Officer visited and provided advice?

NQS 1.1.2

Each child's current knowledge, strengths, ideas, culture, abilities and interests are the foundation of the program.

Use the Ecological Model adapted from Bronfenbrenner⁷ in your planning to consider the context for your service or setting, at this time and with this child and family.

What am I noticing and why?

- What have I observed about the child's interactions, temperament, involvement and disposition for learning as they move around the room?
- How does the child interact with other adults and the environment?
- Do the levels of engagement for the child vary throughout the day?

Other Resources

As you get to know the child, you might consider other assessment tools to gain a better understanding of what the child can do and what might assist them to consolidate their current learning and assist them to continue to learn, develop and flourish.

Ideas to consider as you get to know the child include:

- if the child has a disability or developmental delay, the Early ABLES assessment and learning tool would be useful
- if the child has challenges settling in, or getting involved or engaged with learning, the free resource Reflect, Respect, Relate may be useful. Educators are able to order this resource
- other helpful resources can include Assessment of Wellbeing in ECEC: A Literature Review and Wellbeing Practice Guide.

⁶ VEYLDF, Department of Education and Training (2016), Victorian Early Learning and Development Framework page 9.

⁷ VEYLDF, Department of Education and Training (2016), Victorian Early Learning and Development Framework page 5.

QUESTION/ANALYSE

What do your observations and information you have collected tell you about the child, particularly in relation to the VEYLDF outcomes?

What do your observations possibly indicate about the child's sense of identity? For example:

- Does the child feel safe, secure and supported?
- Are they interested in being part of the group?
- How does the child establish relationships with others?

What do your observations tell you about how the child is feeling and their sense of wellbeing? For example:

- Can they self-regulate?
- How do they engage through the environment?
- Are there health issues impacting on their engagement?
- How involved are they in learning experiences? How do they use and interact with toys, equipment and materials?

What do your observations tell you about how the child is possibly feeling about their place in the community? For example, what is their approach to:

- cooperation
- participation
- belonging
- empathy?

Observe how the child approaches learning.

For example:

- How do they approach new experiences?
- How do they express:
 - interest
 - curiosity
 - persistence
 - confidence?

Children with experiences of trauma sometimes have delayed or non-typical language and communication skills. Consider:

- How does the child respond verbally and non-verbally to communicate with others?
- Is the child able to name their emotions?



NQS 1.1.1

Curriculum decision making contributes to each child's learning and development outcomes in relation to their identity, connection with community, wellbeing, and confidence as learners and effectiveness as communicators.

NQS 1.2.1

Educators are deliberate, purposeful, and thoughtful in their decisions and actions.

**PLAN**

Develop the child's ILP. Consider:

- Based on what I know about the child, what are my planning and practice decisions?
- How can the ILP align with other plans the child has, such as LAC, cultural support plan, NDIS plan?
- What are the short and long-term learning goals?
- What specific intentional teaching strategies are likely to work for this child?
- How will I plan for ongoing learning in everyday transitions, routines and experiences?
- How will I document and share my planning with the child, carers, care team and other professionals?

ACT/DO

Implementation of the child's ILP. Incorporate your intentional teaching strategies, including your level of involvement, quality of feedback, scaffolding techniques and clarity of the child's learning goals.

Consider the behaviour management plan. Are your expectations consistent and clear, and have you communicated the intended learning goals to the child? For example, establish:

- predictable, accessible and quiet spaces to support the child to settle and regulate (for example, a tepee)
- rhythmic and repetitive activities based around trauma-informed practice and the child's interests
- obstacle courses to help the child progress with their gross motor goals.

NQS 1.2.2

Educators respond to children's ideas and play and extend children's learning through open-ended questions, interactions and feedback.

NQS 1.1.2

All aspects of the program, including routines, are organised in ways that maximise opportunities for each child's learning.

REFLECT/REVIEW

Review the goals in the child's ILP. Did they support the child's learning needs and the key people in the child's life. It is important to focus on the child's experience and what you have observed about their responses to particular learning experiences. Consider, for example:

- How does the child's behaviour, interaction and engagement with the program inform your view about their progress in learning, and what needs to be factored into the next stage of planning?
- How can you share your reflections with your team, carers and other professionals?
- What other skills or professional development, resources and support do you and your team need? (For example, training on trauma-informed practice.)

NQS 1.3.2

Critical reflection on children's learning and development, both as individuals and in groups, drives program planning and implementation.



REPEAT THE PLANNING CYCLE

The VEYLDF takes a strength-based approach to planning based on the needs of the child, so you should repeat the planning cycle at relevant points in the child's learning journey.

TRANSITIONS

The VEYLDF emphasises the importance of supporting a continuum of learning, as well as effective transitions for children and families. For children placed in OoHC, this includes:

- daily transitions
- transition into early childhood and school
- placement changes, including moving within and across services
- remember: warm, respectful and predictable relationships are important as a secure base for children to explore and learn
- transitions act as bridges for children from home to early childhood and back again
- use transitions at the start and end of the day or sessions, to invest in relationships.

ADDITIONAL RESOURCES

- The DET Transition to School resource kit.
- Out of Home Care roles and responsibilities PDF, available on the DET website.
- *LOOKOUT Education and Support Centres—*
These centres are an additional resource to support schools, child protection practitioners and case workers to meet their obligations under the OoHC education commitment.

Early Childhood Learning Advise are located at LOOKOUT centres, and will be responsible for working across their region to facilitate and monitor children's participation in quality early childhood education and care services.

- Preschool Field Officers, Inclusion Support Program staff and MCH nurse provide excellent supports, especially if referral to an allied health professional such as a speech pathologist might be required.
- *KESOs and KECs—*
Koorie Engagement Support Officers (KESOs) and Koorie Education Coordinators (KECs) work with DET funded services and schools to better engage Aboriginal learners and communities. They are available to provide expert advice and support about culturally inclusive strategies to improve engagement and student performance.
- School Readiness Funding - refer to the wellbeing area on the menu for both free and fee-for-service items that could be relevant.

FUNDING AVAILABLE TO SUPPORT CHILDREN IN OoHC

Children placed in statutory OoHC have access to free funded kindergarten programs including:

- Early Start Kindergarten
- Kindergarten Fee Subsidy
- Early Start Kindergarten extension grant

You can also check with your local government contact about pre-purchased places.

Commonwealth government subsidies allow children placed in OoHC to access up to 50 hours a week of centre based care. where can this further information be found?, see:

- childcare service handbook
- guide to additional childcare subsidy (child wellbeing).

APPENDIX 1

Collect information

Four-year-old Joshua has been in out-of-home care since he was two years old. He lives with his maternal grandparents and 17-year-old aunt. Joshua is currently on a reunification order, as the hope is that he will return to his Mum's care. Joshua has supervised access visits with Mum twice a week, and his father passed away before he was born.

Joshua's grandmother has told educators that he finds new environments and situations challenging. She has described how he can have 'big emotions' during this time, loudly screaming and crying. Joshua's grandmother has found that talking to Joshua softly and calmly and remaining in his company but not touching him is effective in reducing the length of his distress.

Joshua's case worker has reported that he has had a Pathways to Good Health assessment, where he was found to be in good physical health. He has been referred to psychological services for an assessment relating to his self-regulation.

Joshua's aunt has mentioned that he loves football (he barracks for Essendon), being outside and lots of active play. She also explained that Joshua enjoys sitting on her knee while she reads to him. Joshua's grandmother has commented that he enjoys helping her in the garden. He has only recently joined the kindergarten program and is yet to form peer friendships.

Educators have observed that Joshua becomes distressed on arrival at kindergarten and this increases when his grandmother and aunt leave. During these times Joshua cries, clings to his grandmother and begins to shout loudly.

Question/Analyse

Theory:

Attachment Theory – key person approach, primary educators will be available to support Joshua on arrival ensuring consistency and the ability to form relationships.

VEYLDF Identity Evidence Marker:

- Children feel safe, secure and supported

Plan

Aims:

For Joshua to:

- build secure attachment with one and then more familiar educators
- sense and respond to feelings of belonging.

VEYLDF Identity Evidence Marker:

- develop a vocabulary and practice the expression of emotions to describe how they feel in different familiar situations
- practice the skills required to include others and make friends with peers, teachers and other adults.

Plan:

Set up learning experiences that are of interest to Joshua before he arrives, including an obstacle course, footballs and books.

Joshua is more settled outside, so start the day in an outdoor program if possible.

Familiar educators to engage with Joshua, his grandmother and aunt on arrival so Joshua can see that they are comfortable with each other.

Act/Do

- Provide Joshua with a social story about his day. Include photos of key educators, experiences and other children. Include his grandmother and aunt saying goodbye and arriving back to pick him up.
- Have a visual schedule of the day's experiences available for all children. Ask Joshua's grandmother to show him the schedule each morning and talk it through – for example, first you will play outside with the footballs and then you will have morning tea and so on, through to home time.
- Let Joshua know that his grandmother will be leaving and assure him that she will return.
- Ask him to choose an experience that he and an educator can do together, such as kick-to-kick, reading a book or watering the garden.
- During the experience, engage Joshua in conversation by asking open-ended questions, for example, 'I wonder what will happen when...?'. Invite other children to join in and ensure that you use their names. Point out to Joshua what his peers are doing and set up a dialog between them, for example, 'Joshua what do you think Henry is doing?'.

Reflect/Review

Reflect back on the aims of this individual learning plan to guide your reflection/review:

- Joshua is still presenting with separation anxiety at drop-off time but we have found the duration is decreasing. We have found that he has responded well to his grandmother or aunt showing him the daily schedule and he often refers to this throughout the day, for example, 'After lunch we will do activities and then I go home'.
- Joshua is beginning to use educators' names throughout the day and is engaging with his peers a lot more. He is developing friendships with Jamal and Sienna and this is through their shared interest in football and barracking for Essendon. They spent a great deal of time attempting to handball the football into a bucket.
- Educators have been spending time with Joshua either one-on-one or in small groups reading books. Joshua will sit and look at the book but doesn't engage in the conversations that educators are encouraging. We wonder if this is a fear of getting it wrong and would like to ask his grandmother and aunt if he discusses the content of stories at home. Does he answer open-ended questions at home?
- To consolidate this learning, we will continue to offer comfort and reassurance at drop-off times and other times of distress.
- We will continue to update and use the daily schedule as a means of reassurance.
- We will build on Joshua's developing friendships and explore the possibility of making a handball target. This could be a group project that the children work on together.
- We will discuss with his grandmother and aunt his ability at home to answer open-ended questions and any other ways to engage Joshua's interest in books.

