

2005

Goonellabah Transition Program: final evaluation plan

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Publication details

Newell, S, Austen-Baker, K, Graham, A & Ward, M 2005, *Goonellabah Transition Program: final evaluation plan*, report prepared for Commonwealth Department of Families, Housing, Community Services & Indigenous Affairs (FaCSIA), Canberra, ACT.

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Goonellabah Transition Program

Final Evaluation Plan

October 2005

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Abbreviations used throughout this plan:

B RTP	Box Ridge Transition Program – the program on which the GTP is based
CCYP	Centre for Children and Young People, Southern Cross University – the local evaluator
CDEP	Community Development Employment Program
CHEGS	Community Health Education Groups Inc. – the Invest to Grow fundee
DET	Department of Education and Training
DoCS	Department of Community Services
GTP	Goonellabah Transition Program – the Invest to Grow program
NCAHS	North Coast Area Health Service
PS	Primary school
SES	Socio-economic status

Note: Throughout this document, the word *Aboriginal* refers to both Aboriginal and Torres Strait Islander peoples.

PROGRAM INFORMATION

Program Rationale

National and international evidence

An extensive national and international body of literature has demonstrated that the early years of life have a substantial impact on a child's social, emotional, physical and cognitive development and wellbeing throughout their life course. Similarly, it is clear that various aspects of a child's environment, from socioeconomic factors (eg: poverty), through to community factors (eg: violence, social cohesion) and family factors (eg: parenting styles, intra-family conflict), all impact greatly on educational outcomes and are vital determinants of a child's long-term health and wellbeing.

There is clear evidence that well-founded and well-implemented universal and targeted prevention and early intervention programs, starting early in life, can lead to improved cognitive, social and emotional functioning of preschool-aged children. This results in a positive influence on readiness to learn in the school setting and improves educational, social and health outcomes throughout the life course. Cost-effectiveness analyses have demonstrated that such programs more than pay for themselves, by reducing the later need for government-funded services. As well as these positive outcomes for children themselves, there are also "ripple" effects across a range of outcomes for their families and communities generally.

Consequently, major international reports [*Start Right: Importance of Early Learning* (UK), *Rethinking the Brain: New Insights into Early Childhood Development* (USA) and *Reversing the Real Brain Drain: Early Years Study* (Canada)] have identified the need for early childhood development programs, that improve educational, health and behavioural outcomes, thereby improving children's transition into Kindergarten.

Needs & local experience

Unfortunately some children do not get the best possible start to life. Aboriginal children and children from lower SES groups, in particular, have markedly poorer health, social, mental, emotional and educational outcomes throughout their life course. These children are less likely to have access to early childhood education and more likely to enter the school system ill-prepared.

Therefore, a need for such a program was identified in 1997/1998, through a round of community and stakeholder consultations, initiated by DoCs, as part of the Far North Coast Area's Integrated Community Services Planning process. While appropriate preschools were available, Aboriginal and other disadvantaged children were identified as also needing a more structured, multidisciplinary and intensive program to help them prepare to enter Kindergarten on a more level playing field. However, the importance of children also attending preschool, which assists them in a number of other areas, was acknowledged – hence the Box Ridge Transition to School Program (BRTP) was set to run for two days/week, leaving the children free to attend preschools on the other three days. The BRTP served children and families living in Coraki and Box Ridge communities.

The Goonellabah Transition Program (GTP) developed from expressions of concern from some principals in the Lismore/Goonellabah region that many Aboriginal and low-SES children were entering their schools at a significant disadvantage compared to most other children. Aware of the positive responses from families and school staff, these principals liaised with BRTP staff regarding establishing a similar program for their students. Therefore, the GTP also draws on the experiences and lessons learned during the development, ongoing refinement and evaluation of the BRTP.

Program Description

Based on the BRTP, the GTP is an early learning program developed to support children and their families during the transition period from the home and preschool settings to the formal school setting of Kindergarten. It aims to provide a holistic, flexible early learning program that builds on the strengths of children and their immediate environments. It will provide a strengths-based, early intervention program, using a developmental, health, linguistic and social framework. It will identify factors impacting on each child's ability to learn and interact socially in order to implement individualised support programs. It will work in partnership with and across sectors to provide a culturally-sensitive program within a culturally-sensitive, family-friendly learning environment. It is located within the grounds of the Goonellabah Primary School and will work with lead agencies to secure enrolments and refine the holistic approach to addressing the educational and health needs of the children attending.

The GTP will target children and families needing additional support with their transition into Kindergarten. Many, but not all, of these children and families will be Aboriginal. It is anticipated that approximately 10 students, aged 3.6 to 5 years, will commence the program in September 2005 (Term 3). Another 20 children will be enrolled at the beginning of each of the 2006 and 2007 school years. Children will attend the GTP for two days per week during school terms in 2005.

The GTP's staffing will consist of one Coordinator/Teacher, a second Teacher, Aboriginal Support Assistants and an Administrative Assistant. A Management Committee will oversee the financial management of the program. A multidisciplinary Advisory Group will oversee and support program implementation and a Working Party will provide operational support to the Coordinator.

Program Objectives

The GTP aims to:

- Provide developmental, linguistic, health and social support through a strengths based approach within an early learning environment;
- Identify factors that impact on children's ability to learn and socially interact before they enter Kindergarten, in order to put in place individual programs to support those in need;
- Work in partnership with families in identifying and meeting the needs of the individual children attending the program;
- Work in partnership with other services and sectors that support early intervention;
- Develop positive partnerships and networks with staff of local Community Preschools, Day Care Centres, Community Playgroups and Families First Supported Playgroups; and
- Provide a culturally sensitive program in a family friendly learning environment.

How GTP Targets National Agenda for Early Childhood Key Action Areas

Healthy Young Families

The GTP will focus on this key action area by:

- **Using Individual Health Plans for children** (developed through the BRTP) – to record a family’s identified goals and priorities in relation to their child’s health needs, using a strengths-based, family-focused approach that actively involve parents/carers and acknowledge the integral role they play in the management of their children’s health.
- **Using existing and developing additional culturally-appropriate health resources** (developed through the BRTP) – which are used as a visual guide to provide information to Aboriginal families and children about local health services. Photos of local resources and health professionals make up the core component of the books, supported by explanations using Aboriginal English.
- **Providing an introduction and / or access to health services** within the GTP setting – as a non-threatening environment in which families can be introduced to health professionals and services.
- **Implementing health programs as developed by Community Health Therapists** – who will train GTP staff in implementing programs developed for individual students, as well as working directly with children, either individually or in small groups, within the GTP setting.

Early Learning and Care

The GTP will focus on this key action area by:

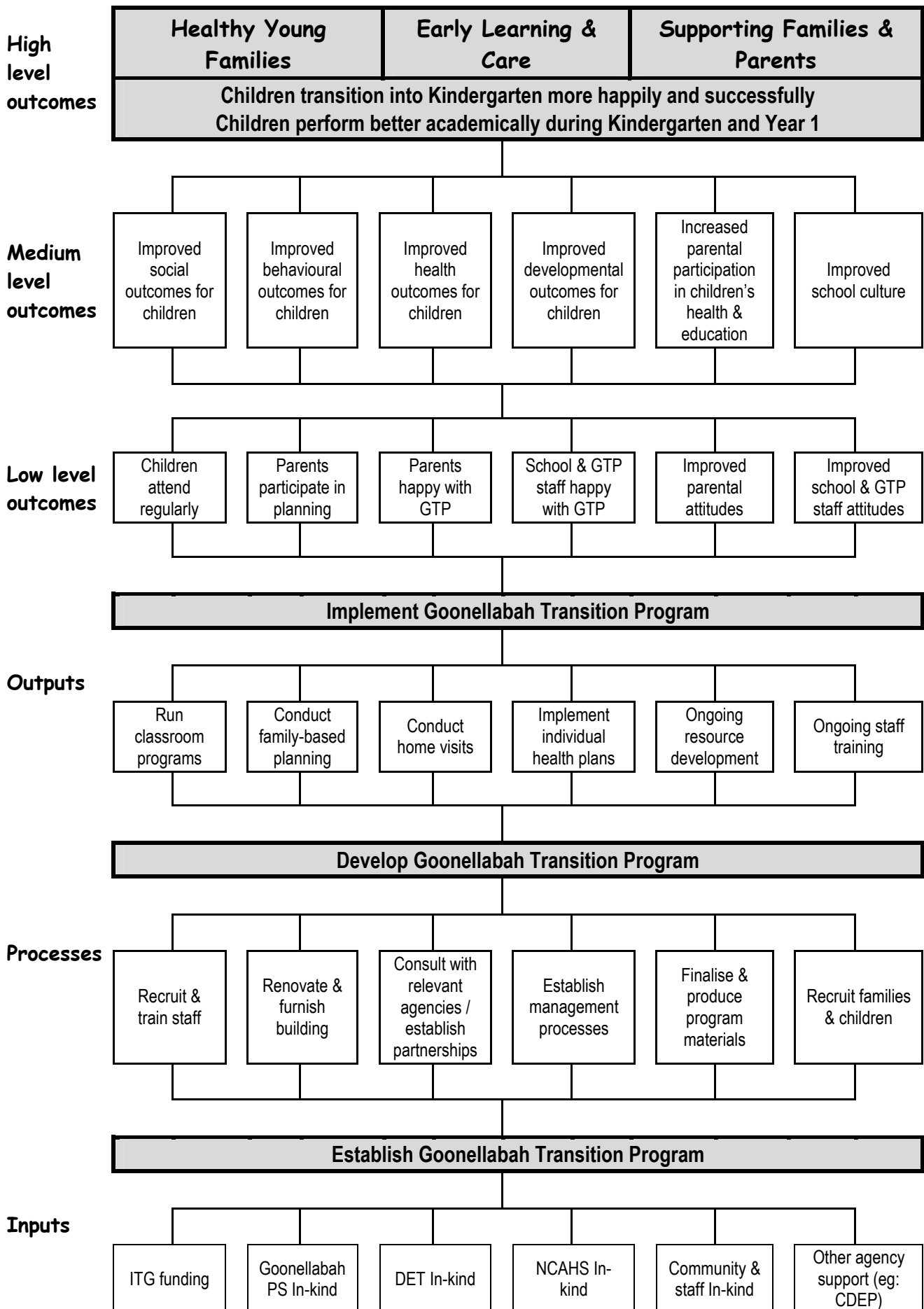
- **Developing further and implementing the ‘School Talk’...Transition Language Program** (developed through the BRTP) – which is a strengths-based approach that views Aboriginal English as a language with its own linguistic, semantic & syntactic structure, while acknowledging that the language of schools is Australian Standard English.
- **Using Early Literacy and Early Numeracy program and resources** (developed through the BRTP) – these were recognised with a School’s National Literacy Award (1999) and included in Department of Education and Training ‘Specialised programs to support learning in Mathematics’. These resources seek to move beyond the symbolic representation of Aboriginal culture to reflect the *contemporary* local Aboriginal communities, its members and culture within the literature and resources used within the GTP.
- **Using Early Literacy and Early Numeracy bags** (developed through the BRTP) – which are fun learning tools that provide parents/carers with an opportunity to expand their knowledge of early literacy and numeracy development. Each bag contains a supply of games and books based on early literacy and numeracy outcomes. Each child takes home a bag for a week and parents are encouraged to play and read with their children. The games and books are created using digital photographs of the children enrolled in the GTP.
- **Using Social Stories: An Introduction to the Routines of Kindergarten and the People we Find in our School!** (developed through the BRTP) – which use sequencing games involving digital photographs of GTP children and school staff to introduce children to the staff of Kindergarten and the routines of school.

Supporting Families and Parents

The GTP will focus on this key action area by:

- **Basing all programming on Individual Family Service Plans**, otherwise known as Family Team Meetings – a family-based planning process, whereby the family’s goals and priorities for their child are discussed at the beginning of each school term regarding a range of learning areas – including cognitive, fine motor, gross motor, expressive language, receptive language, early literacy, early numeracy and social skills.
- **Visiting children’s homes once every fortnight** – to provide an informal opportunity to develop the relationship between families, school and Transition staff, by creating a ‘yarning’ or narrative type of interaction through which information can be verbally shared.

Program Logic



PROGRAM EVALUATION

Evaluation Aims

Performance Monitoring & Process Evaluation

Comprehensive performance management processes and process evaluation will monitor:

- The quality of implementation and delivery of the program – including ongoing reflection about factors (positive and negative) impacting on the program's success, implementation quality, efficiency, consistency with program logic and adequacy of documentation.
- Children's and families' participation in the program, overall and in the various program components – this will include assessing its success at reaching the target group and how any barriers are addressed.
- Families', students' and GTP and school staff members' attitudes towards the GTP, with the aim of incorporating constructive criticisms, wherever possible.

Impact and Outcome Evaluation

Comprehensive impact and outcome evaluation will assess the GTP's impact across the following broad range of indicators and target groups:

- School staff members' attitudes towards, understanding of, and perceived confidence in meeting the special needs of Aboriginal students' and families' within the education system.
- Students' families' attitudes towards, and confidence in dealing with, the health and education systems.
- Children's attitudes toward, and confidence in dealing with, the health and education systems.
- Children's developmental, educational, social, behavioural and health outcomes throughout their transition to school and their early school lives.

Evaluation Design & Methods

As many of the children and families involved in the GTP will be Aboriginal, our evaluation has been designed to make use of routinely-collected data, wherever possible – in order to minimise the need for direct question and answer processes and/or written surveys for children and their families. Where we feel a need to gather additional information that only children and their families can give, we will be using less formal, more narrative methods to gather that information.

Performance Monitoring & Process Evaluation

A comprehensive Access database has been developed to manage the following information about each child participating in the GTP:

- Their families' / carers' contact and demographic details.
- Details about any other preschool / day care services they attend.
- Dates and reasons for absences from the GTP.
- Their developmental progress assessments – throughout their time at the GTP.
- Their parents' participation in their regular program planning.
- Details about any referrals made – and their outcomes.
- Details about any assessments / reports by the school counsellor.
- Details about any hearing assessments.
- Details about any assessments / reports by the Itinerant Support Teacher.
- Details about any reports made by their teacher.

In addition, The GTP Coordinator will keep an ongoing reflective journal throughout the program's development and implementation – providing a detailed record of the successes achieved, the challenges faced, the lessons learned and the changes made to the program. The minutes of the regular Working Group, Management Committee and Advisory Group meetings will also provide information about the program's development and implementation.

Between them, the Access database and the Coordinator's reflective journal will provide the data to answer the questions raised in Tables 2 and 3 of the *Invest to Grow Local Evaluation Framework*.

Finally, detailed feedback about the GTP will also be collected from the children, their families and GTP and school staff. These process data will be collected during the interviews and surveys described below.

Impact and Outcome Evaluation

Children's Outcomes

This evaluation is quasi-experimental and will involve prospective assessment of participating children's preschool development and comparison of their early school transition and achievements – as detailed in the table summarising the evaluation tools. These results will be compared against those of two comparison groups of students drawn from the partner primary schools: Aboriginal and non-Aboriginal children enrolled in Years K – 2 at the schools during 2006, without having attended the GTP.

While it is yet to be developed, a children's survey process will be developed, using novel, narrative techniques (eg: using pictures of GTP activities, puppets, etc) – this will be used to gather children's feedback about the GTP and about their attitudes towards and transition into school.

Families' Outcomes

Families' outcomes will be assessed in two ways. Firstly, ongoing feedback will be collected regarding their expectations, likes & dislikes about the GTP, their suggestions to improve it, their knowledge and attitudes about the health and education systems, their level of engagement in their children's health and education and their perceptions of the GTP's impact on their children, themselves, other family members, school staff and the overall school culture. This information will be collected, using semi-structured feedback sheets, during the GTP staff's visits to families' homes and conversations during family members' visits to the GTP.

Secondly, parental interviews will be conducted at the end of the first and last school terms. These interviews will explore parents' perceptions about their children's transition into the school setting and how the GTP may have helped or hindered this. The interviews at the end of the first school term will also ask parents for their feedback about any of the feedback sheet themes where they have no comments recorded.

To enhance cultural sensitivity, Aboriginal Health Promotion Officers from the North Coast Area Health Service will conduct the parent and child surveys. They will be familiar to families as they will be helping with the home visiting component of the project. Results from the BRTP demonstrated that, within such a process, parents were willing to comment about improvements they would like to see, as well as about aspects with which they were satisfied.

Staff Outcomes

There will also be a pre-post evaluation of the GTP's impact on GTP and partner primary school staff. Staff will be interviewed regarding their experiences, understanding and confidence in dealing with families identified as requiring additional support during their children's transition into the school system. As teachers are often rotated across school Years, baseline school staff surveys will be collected from all teachers across the five partner primary schools. However, the follow-up school staff surveys will be collected from only those teachers and support staff working directly with children in Years K – 2.

Data Management

A comprehensive Access database has been developed to manage and allow cross-referencing of all child-related data collected – during children's enrolment in the GTP and in any of the five partner primary schools. Additional Access databases will be developed to manage all parent-related and staff-related data collected.

Ethical Approval

Ethical approval for the entire project will be obtained from both Southern Cross University and Department of Education and Training Ethics Committees. Both approvals will be sought in stages – addressing the annual data collection needs. For example, the initial ethics applications will primarily address the data to be collected through the GTP itself, with only the children's aggregate and school staff survey baseline data covered in relation to school-provided data. Consequently, a two-staged consent process will be used – whereby, initially, parental consent will be sought for only the GTP-collected outcomes. Then, at the end of each year of the GTP, additional parental consent will be sought for access to children's school-collected data.

Evaluation Tools

The table overleaf summarises the various evaluation tools proposed for use in assessing the GTP's acceptability to all target groups and its impact across the broad range of outcomes detailed in the *Evaluation Aims* section above. As indicated, most of the data will come from tools already routinely collected by the GTP or the partner primary schools. School data will be provided by the five partner primary schools named in the funding application – Goonellabah Public, Lismore Heights, Lismore Public, Albert Park and Wyrallah Road. These schools have the largest numbers of Aboriginal child enrolments in the Lismore/Goonellabah region. Negotiations are underway with these partner primary schools and may result in some adjustments to the actual measures collected, or their scheduling.

Outcome	Evaluation Tool	Collected By?	Collected When?
Children's Education / Development Outcomes			
Literacy (reading & writing)	Child Observation Record-2 (COR-2)	GTP	Continually
	Starting With Assessment (SWA)	Schools (K)	Early Term 1
	Concepts About Print	Schools (K)	Early Term 1 & Late Term 4
	Syllabus Outcomes - English	GTP & Schools (K – 2)	End of each Term
Numeracy	COR-2 & Count Me In Too	GTP	Continually
	SWA	Schools (K)	Early Term 1
	Schedule for Early Number Assessment	Schools (1 & 2)	Early Term 1 & Late Term 4
	Syllabus Outcomes - Maths	GTP & Schools (K – 2)	End of each Term
Language skills (expressive & receptive)	COR-2	GTP	Continually
	Preschool Language Assessment Instrument-2	GTP	Early Term 1 & Late Term 4
	SWA	Schools (K)	Early Term 1
Positions & directions	COR-2	GTP	Continually
Measurements	COR-2	GTP	Continually
Fine motor skills	COR-2	GTP	Continually
	WAI	GTP	Early Term 1 & Late Term 4
Gross motor skills	COR-2 &/or Assessment, Evaluation & Programming System for Infants & Children	GTP	Continually
Learning Support needed	Individual Education Plans	Schools (K – 2)	Start of each Year
	School counsellor reports & referrals	Schools (K – 2)	End of each Term
Problem solving skills	COR-2	GTP	Continually
Children's Social Outcomes			
Communication skills	COR-2	GTP	Continually
Self-control	COR-2	GTP	Continually
Social cooperation	COR-2	GTP	Continually
Social skills	COR-2	GTP	Continually
Self-help skills	COR-2 &/or AEPS	GTP	Continually
Children's Behavioural Outcomes			
School attendance	Daily Class Rolls	GTP & Schools (K – 2)	Average each Term
Student engagement	COR-2	GTP	Continually
Student behaviour	Behaviour Reports & Suspension Records	Schools (K – 2)	End of each Term
Children's Health Outcomes			
Allied Health services accessed	Individual Health Plans database	GTP	Continually
	Paediatric Coordination Team records	Paediatricians (K – 2)	End of each Term
Children's Transition Outcomes			
Feedback about GTP	Children's survey	CCYP / GTP	Late Term 4
Feedback about children's transition into school	Children's survey	CCYP / GTP	Late Term 2 in Kindy
	Parents' survey	CCYP / GTP	Late Terms 1 and 4 in Kindy
	School staff survey (Kindy only)	CCYP	Late Term 4 in Kindy
Family Outcomes			
Expectations of & feedback about GTP	Parental feedback diaries	GTP	Continually
	Parents' survey	CCYP / GTP	Late Terms 1 and 4 in Kindy
Parental attitudes re: health/education systems	Parental feedback diaries	GTP	Continually
	GTP Staff and Parents' survey	CCYP / GTP	Late Terms 1 and 4 in Kindy
Parental participation in children's health/education	Parental feedback diaries	GTP	Continually
	Parents' survey	CCYP / GTP	Late Terms 1 and 4 in Kindy
Staff Outcomes			
Feedback about GTP	GTP and School Staff survey	CCYP	Late Term 4 in 2006 & 2007
	GTP Coordinator's Reflective Practice Diary	GTP	Continually
Knowledge & attitudes re: needs of high-risk children; expectations of GTP	GTP and School Staff survey	CCYP	July 2005 (baseline) and Late Term 4 in 2006 & 2007

Evaluation Time Line

The table below outlines the data collection schedule for each intake of children to attend the GTP during the study period. The actual tools to be used are those described in the above Evaluation Tools table.

Time		Routinely Collected Data			Project Collected Data		
		GTP data	School data	Comparison school data	Child surveys	Staff surveys	Parent surveys
2005	September	Intake 1 – 10 children				Baseline	
	October						
	November				Intake 1 – GTP feedback		
	December						
2006	January	Intake 2 – 20 children	Intake 1 – 10 children	Deidentified & aggregated data for children in Years K – 2 not attending GTP in 2005			
	February						
	March						
	April						
	May				Intake 1 – transition feedback		Intake 1 – GTP & transition feedback
	June						
	July						
	August						
	September						
	October						
	November				Intake 2 – GTP feedback		Post 1
December							
2007	January	Intake 3 – 20 children	Intake 2 – 20 children				
	February						
	March						
	April						
	May				Intake 2 – transition feedback		Intake 2 – GTP & transition feedback
	June						
	July						
	August						
	September						
	October						
	November				Intake 3 – GTP feedback		Post 2
December							
2008	January	Intake 3 – 20 children					Intake 3 – GTP & transition feedback
	February						
	March						
	April	Final analyses and report preparation					
	May						
	June						

PROGRAM REPORTING

Regular Progress Reports

The GTP Coordinator, with help from the Working Group and the CHEGS Coordinator, will prepare and submit the regular progress reports – addressing the program's performance management and process evaluation aims.

Interim Evaluation Report

The CCYP, with help from the GTP Coordinator and Working Group, will prepare and submit an interim report – addressing the program's performance management, process, impact and outcome evaluation aims during the period September 2005 to December 2006. The draft interim report, incorporating relevant feedback from the GTP Management and Advisory Groups, will be presented to the Department of Family and Community Services by 15th June 2007, with the final interim report presented by 21st September 2007.

Final Evaluation Report

The CCYP, with help from the GTP Coordinator and Working Group, will prepare and submit a final report, building on the interim report – addressing the program's performance management, process, impact and outcome evaluation aims during the period September 2005 to December 2007. The draft final report, incorporating relevant feedback from the GTP Management and Advisory Groups, will be presented to the Department of Family and Community Services by 18th April 2008, with the final final report presented by 30th June 2008.