Royal Far West
Children's health, country-wide

# Royal Far West and Narromine Public School

*Working together to improve outcomes for country children*

**DECEMBER 2022**

# Narromine Public School and RFW Telecare

In 2022, Royal Far West (RFW) and Narromine Public School celebrated an eight-year-long partnership which has delivered impressive educational outcomes and significantly improved the wellbeing and educational pathways of many students and their families.

RFW's *Telecare for Kids* program is a nationally recognised service that uses technology to connect skilled allied health professionals to children across regional and remote Australia. It delivers evidence-based therapy to children in their preschool, primary school or home.

Narromine is located in the central west of NSW. The closest major centre is Dubbo. Over the eight years of the program at Narromine Public School, over 100 students and their families have been supported, with:

## Over 1,700+

**sessions of speech pathology - screening, assessment, individual and group therapy linked to school curriculum, staff support and professional development**

## Approximately 200

**sessions of Occupational Therapy - screening, assessment, individual and group therapy and staff support and professional development.**

## Over 110

**overall assessments and screening sessions**

## Over 75%

**of students who participated are Aboriginal and/or Torres Straight Islanders**

In addition, as part of the whole school approach followed at Narromine Public School, capacity building workshops have been held for staff either as a group or individually.

Along with screening, assessment and therapy services for children, the program also offers support and training to teachers, parents and carers to help build their capacity and develop strategies and skills to better support children.

Narromine Public School Principal, Denise Toohey, who has been involved with the Program since its inception at the school, said:

*"The Telecare for Kids program is designed to address and support each child's individual needs which is a unique offering. We have seen very impressive results in terms of our students' overall development, self-regulation and resilience."*

# How does it work?

**Students are referred by teachers during the school's transition to kindergarten screening program or through the school's learning and support processes.**

**Therapy sessions are delivered weekly by telecare during the school term.**

**The School Learning Support Officer (SLSO) participates in sessions along with students and works closely with the Learning and Support team to embed strategies from the sessions into the classroom.**

**RFW clinicians provide regular follow up via email and phone to support teachers and families with strategies at school and in the home.**

**The program is funded using the school Resource Allocation Model (RAM) with no cost to families. (the cost is subsidised by RFW through its National Paediatric Telecare Service, funded by the Commonwealth Department of Health.)**

**The length of time on the program depends on the student. Some children may benefit from a short burst of therapy. Some receive longer therapy owing to more complex health needs that require in-depth investigation and assessment which in turn can provide opportunities for additional support, including school-based funding and NDIS.**

**The program also provides teacher education and whole of school support.**

# Why did Narromine start the Program?

**In 2014, Narromine Public School had a number of concerns about the development of some children starting school and then successfully progressing.**

As the Principal, Denise Toohey, put it:

*"The students struggled with engagement and learning activities. We could see in the teaching that there was good pedagogy occurring. There was great behavior management and students were participating in Positive Behaviour for Learning activities. However, student growth was not reflected in the results."*

Denise Toohey, Principal

Local families also faced the same problems many rural and remote parents have to deal with – how to get their child into scarce, sometimes expensive, allied health services.

*"...allied health providers didn't service Narromine, because Narromine was outside the Dubbo postcode. We were in this bubble that just wasn't getting any services. We had a local speech pathologist who was at capacity. Our families were trying to get in, they just couldn't get in. Plus, it is very expensive for many families."*

Denise Toohey, Principal

The program began at Narromine Public School following a pilot of telehealth-based speech therapy in a number of schools in NSW. Narromine Public School initially asked Royal Far West (RFW) to deliver speech pathology services such as screening, assessment, individual and group therapy and teacher professional learning.

Narromine Public School adjusted the mix of services throughout the time in discussion with RFW's therapists about the needs of the children. The school's initial focus was on speech pathology, including early screening of preschool students attending the kindergarten transition once a week. There was also a focus on capacity building for teachers and parents. Occupational therapy services began in 2019.

The school focused on intervention supports for children in their early years of learning. The focus on early intervention is based on research which demonstrates the early years are crucial in a child's development. The focus initially on language development through speech pathology is integral to classroom engagement, as one therapist put it, "every activity in the classroom is a language-based activity".

*"Narromine Public School works in prior to school settings to complete observations, identify possible needs and provide recommendations for referrals to allied health services and school counsellors to ensure students have a successful start to school. The transition process, along with the early screening through RFW, is integral to early detection and action for the best educational outcomes."*

Emma, Learning and Support Teacher

Kindergarten is often the place where behavioural issues are diagnosed, reflecting the need for speech pathology and occupational therapy support. If issues are not detected early, they can impact a child's trajectory through school and beyond including their mental health.

# Outcomes

The school reports that the program has delivered a range of positive outcomes, which have significantly expanded since its commencement, aimed at improving individual students' development. Alongside improvements in literacy and numeracy and improved wellbeing and social outcomes, the program has delivered whole school benefits. It is now considered in all areas of the school curriculum, as well as a part of professional development for teachers and community engagement for parents and families.

## Main benefits include:

- **80% of all GAS (Goal Attainment Scale) goals have been met or exceeded.**
- **Positive impact on attendance and classroom engagement.**
- **Improvement across the school in student outcomes.**
- **Improved student behaviour, wellbeing and social skill development for students.**
- **Increased parental engagement and education.**

Specific outcomes include:

## Clinical

The most common outcome measure for students is the *Goal Attainment Scale* or GAS. This assesses the extent to which a child has achieved their treatment goals. Over 80% of set GAS goals have been met or exceeded during the past eight years.

Every student on the program has specific goals developed in partnership with the student, teacher and parent to guide their therapy. The goals vary according to the needs of the student and may include expressive and receptive language, regulation and social skills.

Achievement in these areas are the building blocks of future participation and achievement in school. The Learning and Support Teacher and SLSO provide feedback from the school staff to RFW therapists as part of the clinical outcomes that are measured. Along with verbal discussions when required, RFW therapists also provide written reports to teachers and parents on a regular basis. These reports provide all stakeholders with critical information and recommendations for use at home and school. The reports have been beneficial in seeking further additional learning support for the student, including school based funding.

## Improved attendance at school

Feedback from Narromine Public School shows that there has been a positive impact on attendance and classroom engagement because of the program. There has been a significant increase in the proportion of students who understand the value of being at school, especially on the days that the sessions are held. The school communicates the session times to the parents to ensure that students attend school on the allocated day.

*"It's a good carrot for attendance. The students and the parents know that they need to show up because that's the student's allocated day for speech or occupational therapy."*

Denise Toohey, Principal

## Benefits for the whole school

Narromine Public School reports that the program has delivered benefits to student outcomes across the whole school because teachers have greater knowledge and access to strategies and resources.

*"It's been a terrific investment in student outcomes. It has given our teachers a lifeline when they have been struggling with a student who hasn't been able to master what they're trying to do. They are able to tap into the expertise of the RFW therapists and the Learning and Support Team and get some strategies, and it's done in real time."*

Denise Toohey, Principal

The program has been valuable to teacher professional learning at Narromine Public School. There has been additional learning through the Learning and Support team with RFW therapists. This has provided an opportunity for teachers to develop their knowledge regarding general speech and occupational therapy and more individualised professional learning on specific student needs. Regular consultation occurs with the therapists, school staff and parents, providing all stakeholders with a wealth of knowledge to support the student. Professional learning has helped with teacher retention by providing extra support for teachers around student mental health and complexity, which is an increasing issue in the classroom.

## Improved reading and writing for students

Teachers report significant improvement in the classroom in regard to levels of reading, writing and comprehension for students involved in the program.

*"In the classroom, the students who have participated in the program have shown an increased ability to engage with the content and along with that comes improved confidence. These students have started to take autonomy with their learning, rather than demonstrating task avoidance and relying on constant adult support ."*

Amanda, Classroom Teacher

## Improved wellbeing and social development for students

The entire school community and parents say improved wellbeing and increased confidence has been a significant outcome from the program.

*"We know from talking to parents, that one of the most important things, along with their children's learning, is their wellbeing. How they interact with their peers and participate in the school and wider community is vitally important."*

Crystal, Community Teacher

The success of the program at Narromine has meant students who previously were unable to express themselves clearly, are now part of the school leadership team.

*"Every year, when our senior students stand up to do their Prefect and Captain speeches, tears stream down my face. Seeing students who have struggled with their speech speak so clearly and with confidence is amazing. They are school leaders now."*

Kylie, SLSO

## Improved behaviour

Improved behaviour is reported as a benefit. The program has empowered students to make change themselves and given them a voice to express their needs and wants in a more productive manner. Students who cannot articulate what they want or cannot express their needs often become frustrated and display inappropriate behaviour in the classroom and playground.

The program has provided opportunities for development of social skills where students have been able to learn and practise how to communicate effectively with their peers. Occupational therapy, along with embedded school programs such as the Zones of Regulation and Positive Behaviour for Learning, have also provided opportunities for students to develop their self regulation skills which has shown a reduction in inappropriate behaviours.

The program has assisted in developing the students' ability to engage in learning tasks by providing professional development for classroom teachers regarding regulation and individualised adjustments, including the use of specialised equipment and resources.

**An example of improved behaviour is a student who had 23 minor and seven major behaviours in 2021. This student began occupational therapy at the beginning of 2022 and has had no incidents this year. This student has weekly sessions with therapists from RFW, follow up sessions with the SLSO and ongoing consultation with the classroom teacher in regards to adjustments that will assist him to be able to engage and participate positively in the classroom and playground.**

*"A significant proportion of the behavioural issues that we see in the early years results from the inability of students to express their needs and wants. Inability to regulate emotions is often another precipitating factor for behaviour."*

Amanda, Kindergarten Classroom Teacher

## Increased parental engagement and upskilling

Teachers and the Learning Support Team (LST)report an increase in requests for support because of the success of the program being offered at the school. The parent community is aware of the supports that are available at the school and are actively seeking them out through discussion with classroom teachers and referral through the LST.

*"Parents have a greater awareness of child development, and through discussions with each other in the community, they know the services that are available to children with like needs. That means that the community is aware of what to watch for in early developmental stages."*

Kerrie Walden, Aboriginal Education Officer

# What makes the program at Narromine Public School so successful?

Feedback from the Narromine Public School community indicates the following key elements to the success of the program:

- Effective referral system – the school triages and prioritises students based on consultation with teachers, Learning and Support Team (LST), RFW therapists, parents and SLSO.
- The right staff – allocating staff who are invested in positive student outcomes, with a background and interest in learning and support. Good interpersonal skills, organisation and communication are vital.
- Adequate funding including SLSO time and a dedicated space for sessions.
- Dedicating time to allow for follow up therapy and production of resources for sessions.
- Effective scheduling – an active RFW Telecare Coordinator working with the school to schedule therapy in prime learning times, considering attendance and extracurricular activities and designating suitable therapists.
- Ensuring flexibility of sessions to minimise attendance issues and ensure consistency of one therapist working with a student with consistent practice.
- Strong school leadership.
- Availability and access to other wrap around services such as hearing, dental and other allied health professionals.
- Setting attainable goals to measure progress. Goals are set in consultation with the classroom teacher, learning and support teacher, therapist, parent and SLSO.
- Regular reporting on child progress from RFW to support the teacher in the classroom, parent at home, allied healthcare providers and to allow for acquisition of funding and support.
- Trust and relationships between the student, therapist and school team.
- Active community consultation with the community team, Learning and Support Team and the classroom teacher.

*"The program is meeting outcomes. It wouldn't have lasted this long if it wasn't getting the outcomes we needed. The achievements are not only in our curriculum, but also include the social and emotional aspects. The increased confidence in our students is paramount."*

Emma, Learning and Support Coordinator

# Staff and resources

Narromine Public School has allocated significant resources to the program through Resource Allocation Model (RAM) funding. They have allocated an SLSO, with a background and interest in Learning and Support, to work in collaboration with the Learning and Support Team to facilitate the program.

| The SLSO has been involved from the start, providing continuity of support. This role encompasses: |
|---|
| **Organisation of sessions with the Learning and Support Team.** |
| **Management of referrals in consultation with the Learning and Support Team.** |
| **Participating in sessions with the student.** |
| **Providing feedback to the classroom teacher and the Learning and Support Team.** |
| **Sharing of resources and adjustments for classroom use.** |
| **Completing a follow up session with student with resources provided by RFW clinicians.** |

This effectively means the program is encompassed across the curriculum, not just as a stand alone service for students with special needs. The program complements the learning support offered at the school. This SLSO staffing allocation has been vital to expanding the reach of the program to the classroom in collaboration with the Learning and Support Team.

*"The program is embedded in our school and is connected to everything we do."*

Denise Toohey, Principal

# The need in rural and remote communities

**The rates of developmental vulnerability continue to increase the further a child lives from a metropolitan centre, and the gap between city and country has widened in the past three years. The 2021 figures released by the Australian Early Development Census (AEDC), show the gap between children with developmental challenges starting school in rural and remote areas compared to their city counterparts has widened since 2018.**

In its 2021 national report, the AEDC said: "These changes can appear to be small, but they are significant, with real impacts at the community level. This highlights the fact that substantial support is still needed for these children to have the best chance of thriving through their school years."

*"Children in very remote areas are twice as likely to start school developmentally vulnerable compared to children growing up in the city, and they also face greater challenges accessing therapy services. Our Telecare for Kids program overcomes these challenges by delivering consistent and quality support services via video-link, without children and families needing to leave their local community,"*

Jacqueline Emery, CEO , RFW.

Evidence shows that early intervention services such as speech pathology and occupational therapy help a child overcome their developmental vulnerabilities by:

- Supporting speech and language development
- Developing skills to support learning and better learning outcomes
- Improving wellbeing and mental health
- Building confidence and resilience
- Improving social skills through broader language development

*"Speech and occupational therapy needs are becoming more and more prevalent. Student conversations are directionally based. I believe from my observations at school that students are only listening for instruction. They're not listening for pleasure. They're not listening for engagement."*

Denise Toohey, Principal

The further away from the city a child lives, the higher the risk of developmental vulnerability. In very remote areas, nearly one in two children are vulnerable in one domain (46.2%) compared to one in five children (20.8%) in major cities. Aboriginal and Torres Strait Islander children have high levels of vulnerability: 42.3% are vulnerable in one or more domains compared to 20.6% for non-Aboriginal or Torres Strait Islander children. Where you live makes a difference: —nearly half (46.2%) of all children from very remote areas and more than one quarter (26.4%) of children from outer regional areas are developmentally vulnerable, compared to one in five (20.8%) of children in major cities.

In 2020, RFW surveyed school staff–including over 220 principals from 382 schools in regional Australia- about what they need to help developmentally vulnerable children. The trends identified as most important:

- Support students' mental health
- Support students' social interaction skills and relationships with peers and adults
- Identify students who should be referred for assessment and then support any child with special needs or a diagnosis (e.g., ASD, ADHD, GDD, etc.)
- Specifically addressing behaviour and attention in children
- Facilitate trauma-informed classrooms

# The need at Narromine Public School

Narromine Public School is a NSW government primary school in the small rural town of Narromine, located in central western NSW, with approximately 275 students in years K-6. According to NAPLAN data, 60% of the student population at Narromine Public School is of Aboriginal and/or Torres Strait Islander origin.

Narromine is classified as a Modified Monash Model 5 area, being a small rural town more than 10km from the nearest large town with a shortage of medical practitioners.

The most recent 2021 Australian Early Development Census (AEDC) of children in their first year of school at Narromine found[1]:

**99%**
**of children were considered to be making good progress in adapting to the structure and learning environment of the school**

**23%**
**of children were developmentally vulnerable in at least one domain, with language and emotional maturity domains the most vulnerable**

**25%**
**of children required further assessment for medical, physical, behavioural, emotional or cognitive development**

Students at Narromine Public School are not unique in the challenges they face. Some challenges in rural communities can include:

**Frequent changes in family context or location.**

**Time spent in out of home care.**

**Presence of disabilities or mental illness in the family.**

**Presence of developmental delay in areas such as speech, fine and gross motor skills.**

**Late diagnosis of developmental delays and lack of access to follow-up services.**

*"... there is an urgent need for early intervention to focus on children at risk to ensure they have the best possible start in life."*

Denise Toohey, Principal

# Challenges

Many country schools in rural and remote areas have challenges such as:

**Limited or no access to transport.**

**Lack of consistent access to phones or internet.**

**Large families, limiting the attention that can be given to a child with additional needs.**

**Lack of finances.**

**Lack of allied health services and lengthy waiting lists.**

**Working families who may not have the time to attend allied health service appointments.**

The COVID-19 pandemic severely disrupted delivery of the program owing to the lack of reliable at-home internet. This impacted delivery of service as some students did not have access to a computer or the internet at home. Issues with consistent internet access is another reason why the program is best delivered through schools.

*"Speech really affects everything. If their speech is not up to scratch, it can really impact their mental health."*

(Lisa, Mother of James, Year 2)

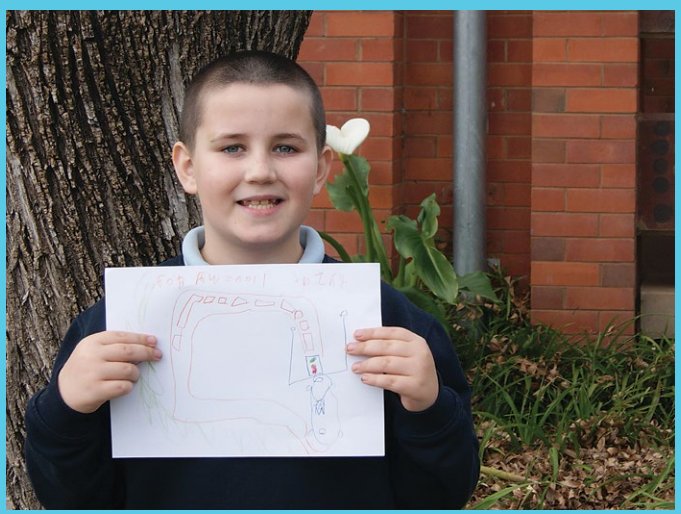
Workforce shortages and lack of access to allied health services remain significant challenges for communities like Narromine.

# The future

Narromine Public School is keen to continue the program and wants to expand the service offerings to include psychology.

*"We don't want the support to come and go, we want it to stay. Theories come and go, methodologies come and go, pedagogies come and go. RFW is part of the family, part of the fabric. For us at Narromine Public School, we've chosen to invest so much money because we can clearly see the connection between therapies, the classroom, student learning outcomes and teacher professional learning. I would rather RFW come in and go deep into our school's psyche, instead of spreading thin and going across the top. We don't want a crust. We want deep consolidation. It will continue now because it's so intertwined into everything. It is just our everyday practice."*

Denise Toohey, Principal



# Case studies

## Tanya (Mother) and twins, Skye and John

The twins began speech therapy in Kindergarten and are now in Year 6. Both have attained leaderships positions in the school in 2022.

**John:**

*"Starting school, Skye would have to say the words I was saying in class. But now, I can say it all properly by myself. I didn't need Skye in my classroom anymore. I feel better because I did the speech program. I don't need to be questioned in class and I can speak properly and don't mumble my words. I've got a bit more confidence."*

**Skye:**

*"I can say hard words now without struggling and I'm a school Prefect. I can speak in front of the school. I feel more confident about going to High School now and back when I started, John couldn't talk at all. So, I was like his talker. Now I don't need to do that."*

**Tanya, Mother of Skye and John:**

*"It's been life changing for our family, for the twins to have the confidence to achieve things they wouldn't have achieved – just from speech. It unlocks their potential. Our kids would not be where they are today without it. It's life changing."*

(*names changed to deidentify)

## Lisa (Mother) and James, Year 2

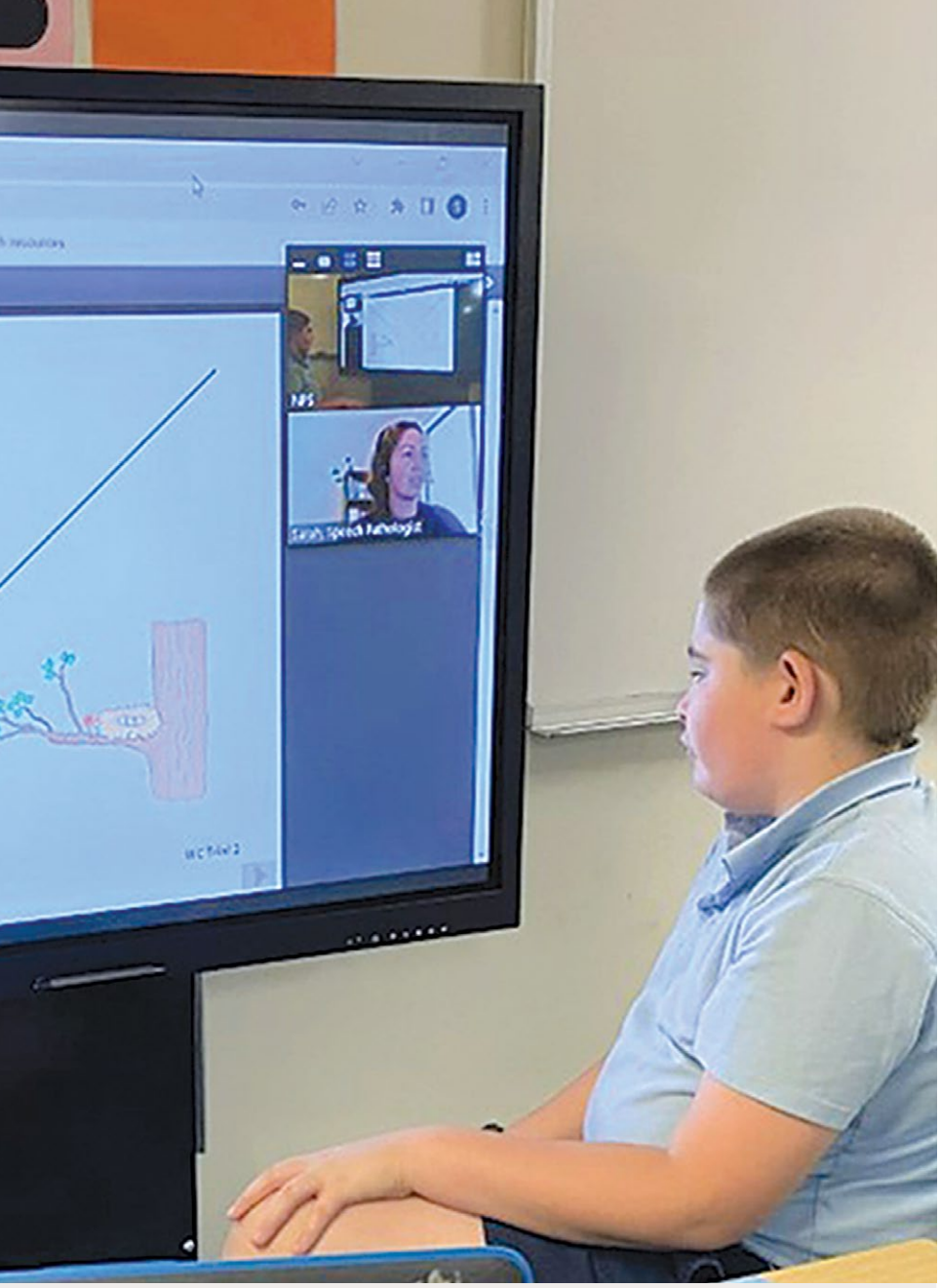
**James:**

*"It has really helped me communicate with my teachers more and talk with my friends in the playground. It has made me braver – to ask for help and meet people."*

**Lisa, Mother of James:**

*"James started school and his speech needed help. You couldn't understand what he was saying. So I took him to Dubbo for an appointment through Community Health. He would miss a day of school every week to go into Dubbo on the bus. That was 40 days of missed learning in a school year. He would get so tired and then not want to go to school. The teachers couldn't understand what he was saying and he was just getting so frustrated and losing all of his self confidence. James just wanted to be in his own little bubble, but since starting speech at the school he has thrived. He's met all these beautiful friends. It's amazing. It's so much better.*

*He does occupational therapy (OT) too. I say, "What's today?" He says, "OT. I'm going to school." James had really poor speech and now he's just thriving, thriving in everything."*



## Debbie (Mother) and Scott, aged 11

**Debbie, Mother of Scott:**

*"I saw immediate results from it. It's building his confidence up so that he feels more comfortable at school. If kids can't speak properly, they don't want to attend school because it can be hard to communicate with others. So, if they can feel like they're one of the crowd and they're holding their own, that's a direct result of the improved speech and it encourages them to attend school. It's working so well that I can't see a way to improve it (the program). I have seen changes in Scott and his confidence has improved. His speech has improved too."*

## Case study methods included

**Clinical data review 2016 - 2022**

**AEDC and other demographic desk top data review**

**Thematic analysis of semi-structured qualitative interviews and focus groups with 15 key stakeholders at the Narromine Public School Program, including:**

**4 Narromine Public School school staff**

**2 Narromine Public School community team members**

**3 parents/carers**

**5 Narromine Public School students who have participated in telehealth**

**1 RFW clinician involved in the program**

# *Children's health,* country wide

*Royal Far West is dedicated to improving the health and well-being of country children. We support children's developmental, mental and behavioural health so they can reach their full potential. We provide multidisciplinary health, education, and disability services for country children aged up to 12 at our Centre for Country Kids in Manly, in rural and remote communities and via Telecare.*

*Royal Far West has been delivering Telecare services since 2014 and today supports country children across three states and 230 schools, preschools, and kindergartens.*

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**www.royalfarwest.org.au**