



Review of Best Practice in Early Childhood Intervention

PRECI Round 3 Consultation Report

Version 1.0, February 2025

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Three online consultations were facilitated by Denise Luscombe and Kerry Bull in January 2025 as part of the Review of Best Practice in Early Childhood Intervention (ECI). Professionals who participated in the first and second rounds of consultations in July-August and December 2024 were invited to this third round. Professionals who had not previously participated in consultations were also invited to attend in order to provide an additional opportunity for engagement in the project. 150 professionals attended, including allied health practitioners, early childhood educators and teachers, academics, managers and paediatricians. They represented service providers (private, not-for-profit, government), early childhood education and care services, peak bodies, professional bodies, advocacy organisations (disability-specific, family, siblings), health (hospital and community health) and education departments.

Participants received pre-reading material that included a discussion paper on frequency, duration and intensity and a draft template of the teamwork principle and associated practices to support the consultation.

The following is a summary of what we heard at the three January consultations.

1. Aims and outcomes for ECI service providers

Participants were pleased to see that there was consideration of a separate aim and outcome for service providers in the framework: *“To contribute to, and be part of, a collaborative and integrated network of holistic support for children, families, communities and colleagues”*. There was recognition that the language used for the aim and outcomes was clear and concise. Specific recommendations were provided on the wording of some outcomes that will be considered.

Recommendations included:

- to consider points about ‘measurable change’ in the final outcome and the need for ‘meaningful’ change, child and family outcomes, and the tools used to measure outcomes
- to review what was perceived as ‘deficit language’ when referring to children with developmental concerns with alternatives provided such as ‘developmental difference’, ‘children with additional needs’, ‘developmentally vulnerable’ or ‘a range of developmental needs’
- to consider child voice and goals and the need to build child agency
- to keep inclusion support programs in mind and the importance of capacity building for ECEC educators
- to ensure a focus on building family capacity to support their child's development in natural interactions across multiple settings - with the parents

and the child as part of the team - based on goals determined by the child and their family

- to include an outcome on the ECI system that upholds integrity and provides evidence-based practice
- to include an outcome that focuses on ensuring that all involved - including other ECI service providers – understand and are aware of systems and how to navigate them
- to consider including aims on advocacy, service navigation and collaboration with other services, and standards to ensure services are safe

2. Teamwork

Participants provided feedback on the pre-reading document provided on Teamwork. There was favorable feedback about the Looks like/Doesn't look like section and the proposed addition of 'How we know when it's working well'. There were specific recommendations made about wording and order. When discussing the terminology, many had a preference for the term 'teamwork' whilst others preferred 'working together'. 'collaborative practice', 'collaborative care', 'partnering together' or 'collaboration and coordination'.

Other recommendations included:

- to strengthen language about multiple professionals/services as essential members of a team
- to consider the challenge of who leads the team and their competing priorities
- to consider private practices and sole providers that work together but provide separate services based on their discipline and scope of practice
- to include how the model might work in regions where there are few practitioners and how holistic practice might be implemented (telehealth etc)
- to strengthen communication and collaboration
- to include child's voice and rights of the child as a team member
- to capture the importance of feedback from the child and parent/carers
- to ensure similar look like/doesn't look like resources for families
- to ensure supervision and mentoring is included
- to strengthen the value of working alongside, rather than "for", children and families
- to add gaining informed consent to communicate amongst the team
- to acknowledge that what collaboration with children and families looks like will depend on their specific needs, preferences, and circumstances

3. Frequency, duration and intensity

There was overwhelming agreement on the need for a decision-making tool to be developed to support parents/carers and professionals work collaboratively to determine the frequency, duration and intensity of services.

There was general agreement about the proposed questions and specific suggestions about wording. Many suggested that an introduction to the resource that highlighted the dynamic nature of dosage decisions due to the changing needs, priorities and circumstances of children and families. They also highlighted the impact the current service system has on dosage decisions and the prevailing family perception that 'more is better' that needs to be challenged. They called for a flexible and family-centered approach, where therapy complements, rather than dominates, the child and family's daily life.

Other recommendations included:

- to highlight collaboration in decision-making
- to shift the value of 'between-visits' being just as important as the practitioner visits
- to consider that dosage will be different for different services, changing child and family priorities, circumstances, capacity, lifestyle and goals, changes in child function, and different stages in the ECI journey
- to consider terminology such as goals (hopes, needs and abilities) and capacity (value-laden)
- to edit into plain language
- to add a question related to specific interventions and recommended dosage (e.g. stuttering, CP or Co-Op)
- to align the questions with the EYLF Planning Cycle to be supportive to ECEC providers
- to consider adding – 'What learning opportunities or practices are already being accessed by the child and family in achieving their goal?'
- to add who the family identifies as being the best-fit for their family to support their needs and help meet their goals
- to add a question on how the dosage could detract from the family's quality of life and participation
- to consider adding to child family goals – 'What is the priority of the family?'
- to consider the importance of joint planning in the process
- to ensure a focus on developing a trusting and respectful relationship first and the importance of parents/carers and professionals discussing these questions together
- to include specific wording about mainstream settings (ECEC, school etc.) providing learning opportunities
- to include discussion on any barriers /challenges

- to provide a recommendation on celebrating success, checking-in on expectations and guidance on when to start the process and how often to review dosage decisions
- to consider adding 'collaborative consultation and assessments' (before point 1)
- to consider what environments and where can the learning be generalised? (point 2)
- to change 'learning' to 'functional' (point 3)
- to consider the big leap from point 4 to point 5
- to add a reference to evidence-based practice, reviewing and understanding
- to consider the ICF framework
- to include data-informed decision making and outcome measures (e.g. GAS-Lite, COPM)

Participants provided examples of formats such as a decision-making tree, the F-Words Life Wheel, AI tools and Apps.

4. Further considerations

Finally, when we checked in again about whether we were on the right track, there was overwhelming support for the current direction being taken.

The project team will consider all the comments and questions for the final Practice Framework.

Further professional consultations, led by PRECI, will be held in February 2025. They will focus on topics including:

- everyday settings (including practices)
- cultural safety and diversity affirming principle
- working in rural, regional and remote/very remote locations
- working with school-aged children

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