



Early Intervention Policy

1. POLICY STATEMENT

The Spark Therapy Services deliver evidence informed clinical services for children and their families. This policy outlines the best practice models and practice frameworks used in Early Intervention.

2. PURPOSE

This document outlines best practice procedures and considerations for The Spark early intervention service provision, based on the Early Childhood Intervention Australia Best Practice Guidelines.

3. RESPONSIBILITIES

The Director is responsible for all staff and contractors being familiar with The Spark Early Intervention model of practice.

All staff and contractors are responsible for following The Spark Early Intervention model of practice.

4. PROCEDURE

Best Practice Guidelines

[Early Childhood Intervention Australia Best Practice Guidelines](#), underpin our work with families and their children.

Quality Areas:

1. Family

- Family centred and strengths based practice
- Culturally responsive practices

2. Inclusion

- Inclusive and participatory practice
- Engaging the child in natural environments

3. Team work

- Collaborative team work practice
- Capacity building practice

4. Universal Principles

- Evidence based standards, accountability and practice
- Outcome based approach

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7 Key Principles

Principle	Key Concepts
<p>Infants and toddlers learn best through every day experiences and interactions with familiar people in familiar contexts.</p>	<ul style="list-style-type: none"> - Learning activities and opportunities must be functional, based on child and family interest and enjoyment - Learning is relationship-based - Learning should provide opportunities to practice and build upon previously mastered skills - Learning occurs through participation in a variety of enjoyable activities
<p>All families, with the necessary supports and resources, can enhance their children's learning and development.</p>	<ul style="list-style-type: none"> - All means ALL (income levels, racial and cultural backgrounds, educational levels, skill levels, living with varied levels of stress and resources) - The consistent adults in a child's life have the greatest influence on learning and development-not EI providers - All families have strengths and capabilities that can be used to help their child - All families are resourceful, but all families do not have equal access to resources - Supports (informal and formal) need to build on strengths and reduce stressors so families are able to engage with their children in mutually enjoyable interactions and activities
<p>The primary role of the service provider in early intervention is to work with and support the family members and caregivers in a child's life.</p>	<ul style="list-style-type: none"> - EI providers engage with the adults to enhance confidence and competence in their inherent role as the people who teach and foster the child's development - Families are equal partners in the relationship with service providers - Mutual trust, respect, honesty and open communication characterize the family-provider relationship
<p>The early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child's and family</p>	<ul style="list-style-type: none"> - Families are active participants in all aspects of services - Families are the ultimate decision makers in the amount, type of assistance and the support they receive

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<p>members' preferences, learning styles and cultural beliefs.</p>	<ul style="list-style-type: none"> - Child and family needs, interests, and skills change; the NDIS Service Plan must be fluid, and revised accordingly - The adults in a child's life each have their own preferred learning styles; interactions must be sensitive and responsive to individuals - Each family's culture, spiritual beliefs and activities, values and traditions will be different from the service provider's (even if from a seemingly similar culture); service providers should seek to understand, not judge - Family "ways" are more important than provider comfort and beliefs (short of abuse/neglect)
<p>NDIS Service Plan outcomes must be functional and based on children's and families' needs and priorities</p>	<ul style="list-style-type: none"> - Functional outcomes improve participation in meaningful activities - Functional outcomes build on natural motivations to learn and do; fit what's important to families; strengthen naturally occurring routines; enhance natural learning opportunities. - The family understands that strategies are worth working on because they lead to practical improvements in child & family life - Functional outcomes keep the team focused on what's meaningful to the family in their day to day activities.
<p>The family's priorities needs and interests are addressed most appropriately by a primary provider who represents and receives team and community support.</p>	<ul style="list-style-type: none"> - The team can include friends, relatives, and community support people, as well as specialized service providers. - Good teaming practices are used - One consistent person needs to understand and keep abreast of the changing circumstances, needs, interests, strengths, and demands in a family's life - The primary provider brings in other services and supports as needed, assuring outcomes, activities and advice are compatible with family life and won't overwhelm or confuse family members
<p>Interventions with young children and family members must be based on explicit</p>	<ul style="list-style-type: none"> - Practices must be based on and consistent with explicit principles
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<p>principles, validated practices, best available research and relevant laws and regulations.</p>	<ul style="list-style-type: none"> - Providers should be able to provide a rationale for practice decisions - Research is on-going and informs evolving practices - Practice decisions must be data-based and ongoing evaluation is essential - Practices must fit with relevant laws and regulations - As research and practice evolve, laws and regulations must be amended accordingly
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Ref:

<https://teamdsc.com.au/resources/early-intervention-7-key-principles-looks-like-doesnt-look-like>

<https://www.eciavic.org.au/resources/best-practice-information-sheets-for-families-practitioners>

Staff Training

All staff trained in **Early Intervention Coach Approach**. Coaching has emerged as an evidence-based practice based on key concepts and principles found in the early childhood education literature. It is as much a process as it is a practice. Coaching involves five key qualities or characteristics in practice (Rush and Sheldon, 2013):

- **Joint Planning** – an agreed-upon plan between the coach and coachee as to what they will work on and in what routines or activities
- **Observation** – examination of another person’s actions or practices to be used to develop new skills, strategies, or ideas
- **Action** – Spontaneous or planned events that occur within the context of a real life situation that provides the coachee with opportunities to practice refine or analyze new or existing skills
- **Reflection** – analysis of existing strategies to determine how the strategies are consistent with evidence based practices and how they may need to be implemented without change or modified to achieve the intended outcome(s)
- **Feedback** – Information provided by the coach that is based on his or her direct observations of the coachee, actions reported by the coachee, or information shared by the coachee and that is designed to expand the coachee’s current level of understanding about a specific evidence based practice or to affirm the coachee’s thoughts or actions related to the intended outcome(s)

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NDIS Care Pathway

NDIS	Parent	OCCUPATIONAL THERAPIST
Access/Eligibility	Support family to understand their eligibility for NDIS EI funding.	<i>If requested by family</i> Completes the needs assessment in the Access form or complete a support letter, including goals.
Planning meeting	Can occur in the family's home or the NDIS office or via phone Parent might like to think about asking for: <ul style="list-style-type: none"> ➔ support coordination ➔ key worker 	OT can attend the meeting at the request of the family.
Approved Plan	Parent receives a copy of their NDIS plan	Service agreement completed between parent and OT. Parent session to establish goals and priorities. If a new family to The Spark – complete the You and Your Family Questionnaire, Child Development Questionnaire Privacy and Consent form Go through Privacy Policy and Feedback and Complaints Procedure Talk through the way we work.
Developing OT NDIS Service Plan / Goals in collaboration with family.	OT and family make a plan and discuss goals and service delivery Goals developed in collaboration with family – based on their priorities.	Service plan developed with client after 1-2 sessions, listing specific goals under NDIS plan. These should be SMART goals. Service plan to include recommended number of sessions across the plan.

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		NDIS Service Plan completed as a Sign Request document as an agreed shared purpose for OT Early Intervention
Intervention	<p>Actively involved in OT sessions with their child</p> <p>Parent only sessions scheduled in addition to appointments with child to allow time for problem solving and capacity building</p> <p>Parent invited to share their big ideas following sessions</p> <p>Parents invited to provide feedback at any time.</p>	<p>OTs use coaching approach in sessions – working in partnership with the child’s carer. OTs to explain activities and intervention strategies to families within sessions</p> <p>Written feedback to be provided following each session and shared with child’s team (with consent from family). Notes to be recorded against the family’s goals.</p> <p>Capacity building ideas provided to allow family to integrate the ideas into their natural environments and everyday routines.</p> <p>Review and check in regrading goals during intervention</p> <p>Arrange and participate in meetings with child’s team as required.</p> <p>Kinder and school visits to be arranged as needed – to ensure strategies and advice integrated into child’s educational setting.</p> <p>Invite parent feedback throughout intervention</p> <p>Make referrals to other services as needed.</p>
NDIS Plan Review – occurs at anytime from 9 months into plan.	<p>Parent to meet with OT to discuss progress and future goals</p> <p>Parents can request an earlier review</p>	<p>OT to meet with parent to discuss progress and future goals</p> <p>Provide a draft report for parent to review – at least 3 days before meeting.</p> <p>Complete an OT review report.</p>
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	<p>Parents to review OT report and provide comment and feedback</p>	<p>This includes:</p> <ul style="list-style-type: none"> - Child's strengths and underlying difficulties - A summary of OT intervention - Barriers to intervention - Child's progress against their goals - Strategies used to meet goals, - Suggested future goals and intervention plan - Quotation for service and supports. - Recommended assistive technology - Recommended referral to other services <p>Complete the NDIS Early Childhood Provider Form</p> <p>Please see example report under Admin folder / Proforma Letters and reports / NDIS</p>
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4. FURTHER INFORMATION

For further information on this procedure, contact Tina Bruce Director The Spark Therapy Services tina@thesparkts.com.au 0431273352

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