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Diversifying Early Years Professional Learning – One Size No Longer Fits All

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The very subject of professional development (PD) for early years practitioners is fraught with controversy and contradictions. Policy makers from peak early childhood national bodies (Australia: Early Childhood Australia; US: National Association for the Education of Young Children) continue to maintain a central component of PD is the educators application of the knowledge acquired in their own practices, student learning outcomes, resulting in paradigm changes. Attendance in PD programs is linked to deepening professional pedagogy, resulting in improvements and advancements in educational programs. The implementation of these programs has the potential to influence student learning outcomes. When these outcomes are positive, the mindsets of practitioners engaging with the PD are supportive of the value of the PD. This position and these policies are based on the contention that the most significant factors influencing quality early years PD are the changes in practitioners practices and changes in student learning outcomes, resulting in changes in paradigm, principles, beliefs and values (DeBord, 2002; Guskey, 2002; Rabab, Nolan, Waiganayake, Brown & Deans, 2007).

Traditional models of PD in early years education have included generic PD workshops, conferences, seminars, and staff meetings. The content in these models has been driven by (1) identification of the topic and (2) selection of the speaker. This form of PD, referred to as the ‘front-end loading’ model, is one in which professionals are taught identical knowledge and skills by experts in order to become effective professionals (Foley, 2001). This deficit model reinforces three positions: (1) educators are viewed as consumers of professional development, a homogeneous professional group; (2) academic knowledge from PD can simply be transferred and applied as named in the research; (3) educators lack knowledge and skills that can be magically fixed by generic, usually one off, PD sessions.

Whilst acknowledging that early years practitioners do possess group characteristics, they do not come as members of a homogeneous group. There are no homogeneous groups. In fact, there are as many differences and sometimes more differences,
within groups as between groups. Early years practitioners are theoretical practitioners who reflect, inquire, plan, implement, monitor, analyse, critique, evaluate, and change their practices in response to the differentiated needs of students.

The structure of PD as a one stop shop, originally created to serve an industrial society, has not kept pace with new challenges and new directions created by the needs of our information society. Designing and leading individualized and differentiated PD reflective of changing times, resulting in changes in practitioners practices and changes in student learning outcomes is a significant task for educators today.

An alternative approach to PD for early years practitioners is the participant driven approach. This approach focuses on process driven reflective practice and capacity building of participants. It is an intentional shift away from the ‘one size fits all’ approach towards a constructivist approach to PD, placing the educator as practitioner and researcher at the centre of the PD with the focus systematically being on change in practitioners’ practices influencing change in student learning outcomes, culminating in paradigm change for practitioner (Guskey, 2002). Practitioners are supported in constructing their own knowledge, competencies, and capacity in PD sessions. This knowledge is built upon during action research projects, resulting in capacity building of practitioners. Practitioner narratives of their reflective practice provides the platform for capacity building. The importance of changing practices and processes is the implementation of learning’s highlighted in PD sessions. The focus is on experiential based learning processes - continuous learning for continuous improvement.

Resonating with this shift towards a reflective model of change, practitioners engage in reflective action: to build on and from their experiences; to be actively engaged in developing theories that they can use in their practice (Gould & Baldwin, 2004); successfully implementing these changes in practice and process, resulting in changes in practitioners mindset. Reflective action concentrates on integrating new learning’s from PD settings into specific work contexts. It is an ongoing process that includes high quality planning and follow up support in the form of ongoing coaching.
(Cox, 2008). It is research informed and research orientated: research informed in the sense that educators draw on systematic reflection of the teaching and learning process; research orientated in the sense that teachers' embark on an action research process of inquiry and implementation in their work place, monitoring and evaluating student learning outcomes. This form of PD is designed to build participant knowledge, skills and practices. The key element is significant change in practitioners attitudes and beliefs based on the significant growth and development in the learning outcomes of students.

The intention is to motivate, inspire and support effective practitioners to become reflective teachers – educators who are inventive and thoughtful, planning, implementing, observing, data gathering, monitoring, reviewing and evaluating what they do and why they do it with. This equates with building capacity - the intention of adding on and upon existing practices (Riley & Roach, 2006).

Characteristics of building the capacity of educator as practitioner and researcher include:

- Critically engaging in the learning process and amending practices accordingly.
- Continually engaging with educational research over an extended time period.
- Being involved in frequent and thoughtful self evaluation, using it to inform pedagogy and practice.
- Having opportunities to systematically apply new found knowledge in an inquiry focused work context.

These characteristics, supported by adult learning principles, forms the constructivist approach to PD. Referred to as the ‘principle of congruity’, this active learning approach recognizes that practitioners instigate action research projects seeded in PD sessions.
Kemmis and McTaggart (1988), McMilan (2008), and MacNaughton (2009) maintain that reflective teacher practitioners are effective educators. They assert that systematic action research is one proven example of a powerful capacity building process empowering practitioners to transfer learning from PD sessions into work contexts, for the purpose of adding valuing to existing pedagogy and practice. Gusky (2002) deepens this position maintaining that the real value of the action research are the sustained changes in practitioners attitudes and beliefs evidenced by improvements in the learning outcomes of their students. Practitioners believe the PD works because they have seen it work, and that experience shapes their mindset, attitudes and beliefs.

Action research takes many forms and employs a range of methodologies. The key to coherent, effective action research are the questions educators research, the hypotheses they formulate, and the applications of their learning’s to their daily practices. Action research stems from practical problems and encompasses a series of cycles involving systematic planning comprising observation, implementation, data gathering, monitoring, analysing, reviewing, reflecting, and renewing. Translating learning’s from each cycle in the action research process to professional practice is one key indicator of capacity building. Tangible evidence of changes in practices and changes in the learning outcomes of students are additional key indicators.

The National Child Care Accreditation Council (NCCAC) (2007) supports the action research reflective practice paradigm for Children’s service staff, suggesting that engaging in professional self reflection is one key way for staff to improve and advance their pedagogy and practice. This self reflection cycle is intertwined in each cycle of the self study framework. This approach has been illustrated in Ackerman’s (2008) study: Continuity of Care, Professional Community, and the Policy Context: Potential Benefits for Infant and Toddler Teacher Professional Development. The study, set in a military child development centre, recorded the translation of professional learning’s gained in PD sessions to improving staff knowledge about infant and toddler development and classroom practice.

Throughout 2007-2009, the Bond University Research Team was involved in a two year Commonwealth grant for PD in the sphere of Guiding Children’s Behaviour. This
team comprised Dr Margaret Anne Carter and Assistant Professor Caroline Fewster as team leaders and designers; Lisa Northcott and Aniela Heditch as research assistants. The PD program was funded by Families, Community Services and Indigenous Affairs (FaCSIA), administered by Professional Support Co-ordinator Queensland (PSCQ) and Workforce Council delivered by Bond University. PSCQ is a project of the Health & Community Services Workforce Council. The Australian Government, through the Minister for Families, Community Services and Indigenous Affairs (FaCSIA); funds the Professional Support Co-ordinator initiative as part of the Inclusion and Professional Support Program.

This PD program was delivered across 13 metropolitans, regional and remote areas of Queensland to a total of 2,205 early years practitioners. These practitioners were employed in Long Day Care centres, Out of School Hours Care services, Family Day Care schemes, In Home Care schemes, Inclusion Support agencies, and Occasional Care services across Queensland. A small number of participants were employed in kindergartens, prep, primary schools, and child health services. Communities such as Weipa, Cooktown, Gayndah, Julia Creek and remote regional areas were offered this program and in these locations all Children’s Services’ staff attended. Access to PD in these areas was non-existent or problematic in the past. An outstanding number of participants (99-86%) throughout Queensland indicated that the program was relevant to their work in Children’s services.

One of the unique features of this PD program was that (1) eligible participants could enroll in the PD in their own local communities, very often for the first time; (2) participants engaged in action research projects back in their work contexts, monitoring changes in their practice, and changes in student learning outcomes; (3) a literature review of early childhood professional development informed the design of the program. The literature review included recent Australia research, current Government Initiatives in Early Childhood and, international literature in relation to early childhood PD. The timeframe of the literature review was 1970 to 2009.

The action research PD program for Guiding Children's Behaviour incorporated two streams and three phases:
• STREAM 1: Building the capacity of early years practitioners to lead the
development of children’s social competence and promote the contemporary
paradigm of the teaching and learning of social behaviours. A new paradigm
was introduced for staff to work with and respond to children’s challenging
behaviours (Leader: Dr Margaret Anne Carter).

• STREAM 2: Inspiring early years practitioners in designing social and physical
environments specifically organized for social opportunities and the
development of social inclusion and social competence (Leader: Assistant
Professor Caroline Fewster).

An outline of the three phases of the PD program follows:

PHASE 1: The role of the practitioner in guiding children’s social behaviour. Being
contemporary with practices and using the social learning paradigm as the
foundation of teaching and learning.

PHASE 2: Analysing the environment: examining routines of the day, guidelines for
children, opportunities for social inclusion, development of social competence and
social capital.

PHASE 3: Intentionally teaching social behaviours across the spectrum of multiple
intelligences; Generalization of social behaviours across contexts.

Participants attended consecutive PD sessions, the duration varying between 2
hours x 3 sessions to 1 day x 3 sessions. Sessions were located in the local areas
thus ensuring a high rate of attendance. Most sessions were conducted in the
evenings, some weekdays, and several weekends. Each PD session reflected a
specific phase of the program and the content of the session evolved in response to
participants needs. Researchers worked with participants on their agenda within the
specific stream and phase of the PD. They provided mentoring support, face to face
and online, throughout each phase of the program.

The reflective practice component of the PD program was introduced to participants
in phase 1 of strand 1. Participants were asked to identify what they do well and what
their perceived strengths were in relation to guiding children’s social behaviours.
They were then asked to identify situations they found difficult, and the environmental
systems, processes and strategies they had implemented to reduce these difficulties. They were asked to prioritize their difficulties from most intrusive to least intrusive in terms of teaching and learning. Participants were asked to nominate current instructional practices and processes used when guiding children's social behaviour. They identified the effectiveness of these practices. Content taught reflected participant responses. It was aligned with the teaching and learning paradigm, and reflected the stream and phase of the program.

Toward the conclusion of each session, participants engaged in the STOP-START-CONTINUE action research homework process. This was a key factor of the PD as it ensured transference of content from PD session into work setting. It also allowed for practitioners to know what changes they would be monitoring and evaluating in terms of their own practices and student learning outcomes.

An explanation of the STOP-CONTINUE-START process follows. Refer to Box 1 for an illustration of information communicated to participants regarding this process. Based on each PD session, participants reflected on systems, practices, processes and strategies they had been using when working with children in the area of guiding children’s social behaviour. They were asked to identify the paradigm upon which these practices were based. They were invited to bury the authoritarian paradigm and to align practices with the contemporary teaching and learning paradigm. Participants reflected on their practices and made conscious decisions as to stopping unhelpful practices (STOP), continuing with helpful practices (CONTINUE), and starting new practices that would add value to existing curriculum (START). Implementation was tracked via action research projects. Change in practitioner practices and student learning outcomes was monitored and assessed. These changes were then aligned with PD content in an effort to evaluate the potential of the original PD and the ongoing nature of the PD.
Box 1

Table 1 contains an illustration of STOP-CONTINUE-START voice of practitioners for each phase of the action research project carried out by Long Day Care (LDC) and Family Day Care (FDC) staff. The important part of this process is the follow up after each PD session – to ensure what practitioners actions were followed through within the work context. For the purpose of identifying success, participants monitored changes in their practices and processes in conjunction with student learning outcomes.
Table 1

Perceptions of Early Childhood Education Practitioners in response to an Action Research Approach to Professional Development – Guiding Children’s Behaviour

**PHASE 1**

<table>
<thead>
<tr>
<th>SERVICE TYPE</th>
<th>STOP</th>
<th>CONTINUE</th>
<th>START</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Long Day Care (LDC)</strong></td>
<td>Stop sending children to ‘time out’  Stop being inconsistent as staff in guiding children’s behaviour  Agree on behaviour explanations in staff meetings every week</td>
<td>‘Continue to talk to children about behaviour expectations in the Service’</td>
<td>‘Gain children’s views about ‘time out’ and expectations’  ‘Observing and recording children’s behaviour episodes’  ‘Implement behaviour books for children’</td>
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<tr>
<td></td>
<td>‘Stop sending children to ‘time out’’  ‘Stop worrying about talking to parents about children’s behaviour’  ‘Stop using the Co-ordinator (FDC) to solve behaviour issues’  ‘Stop ignoring the children’s behaviour’</td>
<td>‘Continue to invite families to talk about certain behaviours and give them information about how to guide children’s behaviour’</td>
<td>‘Adopting a professional approach to guiding children’s behaviour’  ‘Start collaborating with other services to support the child’  ‘Start engaging management in understanding, investing and supporting children’s social development’  Sharing ideas and bringing new strategies to share with others</td>
</tr>
<tr>
<td><strong>Family Day Care FDC</strong></td>
<td>‘Stop sending children to ‘time out’’  ‘Stop worrying about talking to parents about children’s behaviour’  ‘Stop using the Co-ordinator (FDC) to solve behaviour issues’  ‘Stop ignoring the children’s behaviour’</td>
<td>‘Continue to invite families to talk about certain behaviours and give them information about how to guide children’s behaviour’</td>
<td>‘Adopting a professional approach to guiding children’s behaviour’  ‘Start collaborating with other services to support the child’  ‘Start engaging management in understanding, investing and supporting children’s social development’  Sharing ideas and bringing new strategies to share with others</td>
</tr>
<tr>
<td>SERVICE TYPE</td>
<td>STOP</td>
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<td>START</td>
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<tr>
<td>Long Day Care (LDC)</td>
<td>Stop blaming the child for the behaviour and began to examine their environment and their role in guiding children’s behaviour</td>
<td>Continue to link their role in guiding behaviour to promote social inclusion within their environment, e.g. encouraging children to include children in play-based learning</td>
<td>‘Introduce new social routines’&lt;br&gt;‘Children signing into the service’</td>
</tr>
<tr>
<td>Family Day Care (FDC)</td>
<td>Stop practices that hindered social mastery e.g. always playing rain forest music at rest-time as a ritual</td>
<td>Continue to use photographs of children to highlight social and emotional growth and development</td>
<td>‘Teaching in multiple ways (Gardners model) e.g. Using behaviour books for children and families; used photography to support children’s understanding of social expectations’</td>
</tr>
</tbody>
</table>
### PHASE 3

<table>
<thead>
<tr>
<th>SERVICE TYPE</th>
<th>STOP</th>
<th>CONTINUE</th>
<th>START</th>
</tr>
</thead>
</table>
| **Long Day Care (LDC)** | Stop ‘calling out’ to children and ‘stopped’ ignoring children's inappropriate behaviour  
Stop doing the thinking for children  
Stop being boss manager of children | Using photographs to highlight children’s growth and development  
Continue to be more consistent with behaviour teaching  
Continue to examine behaviour in environment and ‘MACA’ accordingly  
(MACA – refers to system analysis used in session) | Introducing system analysis for routines and intentionally teach children required behaviours for routines  
Start acknowledging children’s emotions and responding appropriately  
Start meeting with team members to establish the what, how, when, where of learning priorities for social learning e.g. “gentle hands” |
| **Family Day Care (FDC)** | Expect children to do what they told them to do  
Ignore developmental stages and ages as for behaviour teaching | Promoting social inclusion by staying respectful  
Continue to build relationships with children and families | Start promoting social teaching opportunities with families  
Start reviewing currency of the Service behaviour policy and procedures  
Explicit teaching of social behaviour across all ages in the environment home |
At the commencement of phase 2 and 3 of each PD sessions, participants reported back to the group their level of success with their STOP-START-CONTINUE tasks. The structure of this reporting follows:

- What worked in terms of (1) environmental and instructional change; (2) improvement in student learning outcomes
- What sometimes worked as far as (1) environmental and instructional change; (2) improvement in student learning outcomes
- What was ineffective in terms of (1) environmental and instructional change; (2) improvement in student learning outcomes
- What are my questions now regarding next moves including (1) environmental and instructional change; (2) improvement in student learning outcomes

Participants reflections as recorded in Table 2 are indicative of behaviour change in the area of guiding children’s social behaviour - growth and development in practices and processes for practitioners and students:

Table 2

<table>
<thead>
<tr>
<th>Early Years Practitioners Perceived Outcomes for Children</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase 1</strong></td>
</tr>
<tr>
<td>• ‘Acknowledging and reporting children’s views on behaviour expectations’</td>
</tr>
<tr>
<td>• ‘Children are now participants in decision making regarding the behaviour expectations in the service’</td>
</tr>
<tr>
<td>• ‘The children have more opportunities to learn expected behaviours – with many new strategies, e.g. visual posters made by children, e.g. what is respect?’</td>
</tr>
<tr>
<td>• ‘Children have their own individual behaviour teaching books’</td>
</tr>
<tr>
<td>• ‘Children and their families have the opportunity to gain access to inclusion support services, health and therapy sessions in our area’</td>
</tr>
<tr>
<td>• ‘Each child’s individual development is now considered as an important part of social inclusion’</td>
</tr>
<tr>
<td>• ‘Introduction of child and family learning of social experiences e.g. visual displays, meetings and teaching methods’</td>
</tr>
<tr>
<td>• ‘Child and family plans for responding to children’s behaviour at home and in the children’s services’</td>
</tr>
<tr>
<td>Early Years Practitioners Perceived Outcomes for Children</td>
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<tr>
<td>----------------------------------------------------------</td>
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<tr>
<td><strong>Phase 2</strong></td>
</tr>
<tr>
<td>• Children’s learning and engaging in routines (up to 70% of the day can be routine situations)</td>
</tr>
<tr>
<td>• Children experiencing social learning in multiple ways e.g. Gardeners model, e.g. quiet as a mouse</td>
</tr>
<tr>
<td>• Children learning desired social behaviours using photographic media.</td>
</tr>
<tr>
<td>• Children working with staff to contribute to planning their environment</td>
</tr>
<tr>
<td>• Children playing and learning in newly introduced social spaces within the environment</td>
</tr>
<tr>
<td>• Children continually experiencing different ways of learning e.g. social behaviours e.g. taking turn giraffe</td>
</tr>
<tr>
<td>• Children attending planning meeting each day to plan the program with practitioners (OSHC)</td>
</tr>
<tr>
<td>• Children taking home their social learning experiences e.g. “Guess who is on your back?”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Early Years Practitioners Perceived Outcomes for Children</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase 3</strong></td>
</tr>
<tr>
<td>• Children experiencing a sense of belonging to a group e.g. signing into the service, photographs of children on sleep boxes</td>
</tr>
<tr>
<td>• Children expressing their emotions in a supportive social environment</td>
</tr>
<tr>
<td>• Children contributing to the social teaching program of our service</td>
</tr>
<tr>
<td>• Children learning with families the expected social behaviour</td>
</tr>
<tr>
<td>• Children benefiting from contemporary policies and procedures in relation to social behaviour</td>
</tr>
<tr>
<td>• Children experiencing age stage teaching of social behaviours e.g. touch gently fish for babies; taking turn ticket and timers for younger children and the visual learning strategies for all children</td>
</tr>
<tr>
<td>• Children love playing with the learning resources</td>
</tr>
</tbody>
</table>
Practitioners perceptions of their growth and development as recorded in the STOP-START-CONTINUE framework provided evidence of the link between engagement in PD with practitioner capacity building and subsequently to positive learning outcomes for children’s social learning. Practitioners were committed to new and revised environmental systems and instructional approaches once they had evidence of seeing it work with their students. This evidence demonstrates that ‘new ideas and principles about teaching are believed to be true by teachers when they give rise to actions that work’ (Bolster, 1983, p.298).

In consultation with 50 Children’s Services staff - 25 representing Long Day Care; 15 representing Family Day Care; 10 representing Outside School Hours Care - the researchers assessed perception of measurable changes achieved during the state-wide PD program and, at the completion of the program at 6 and 12 month intervals. The capacity building analysis of the PD was designed to link the PD with action research cycles with change in practice and student learning outcomes with sustainability at 6 and 12 month intervals. This monitoring allowed tracking the sustainability of the practitioners curriculum change in relation to their STOP-START-CONTINUE action research cycles, formulated initially during their attendance in the face to face PD sessions. The participant learning outcomes were assessed in relation to participant perceptions of their learning’s in the two strands, three phase PD program. This change was anecdotally recorded in focus groups and individual interviews. Refer Table 3 and 4.

Participants completed a four point scale Capacity Building Evaluation form. The majority of participants responses on the scale were very positive naming the link between participation in the three phase PD program and the implementation of the professional learning to their services, changes in their own practices and positives changes in learning outcomes for students.
**Guiding Children's Behaviour Professional Development Program.**

**Participant Learning Outcomes**

1. Introduce practitioners to a contemporary paradigm of teaching and learning social behaviour.
2. Enhance opportunities for the development of social inclusion and social competence for all children in eligible children’s services throughout Queensland.
3. Provide practitioners with an overview of children’s social and emotional development.
4. Build on practitioners existing theoretical and practical knowledge of guiding children’s behaviour.
5. Encourage practitioners to critically analyse social and physical environments and their influence on children’s behaviour.
6. Provide diverse and culturally social learning spaces and places.
7. Build the capacity of practitioners to lead the development of young children’s social competence, promote contemporary paradigms of the teaching of social behaviours.
8. Create harmonious environments in Children’s Services.

**Participants Perceptions 6 Month Interval**

**Summary of responses from practitioners**

1. Participants have introduced the paradigm of teaching and learning and discussed with researchers key concepts of their translation of learning to their work context: ‘I have totally re-designed my environment and introduced the behaviour teaching program and I no longer have the behaviour problems I had before.’ (case study OSHC) (Participant Learning Outcomes 1, 8, 7); ‘We use the system analysis to teach and have shared our knowledge with other services’. (Outcomes 5, 7)

2. Practitioners demonstrated between 6 – 14 changes to their environments in order to focus on the contemporary paradigm and intentional teaching of social behaviour. (Outcomes 7, 8) e.g. ‘We invite the children to take an active role in all of the routines based on Glaser’s theory and Gardiner’s theory this has worked so well – the children’s behaviour is much better. They love their photos being displayed in their routine charts’. (Outcomes 2, 4, 8, 6)
3. All practitioners reported that they are now using more than one way to respond to and guide children’s behaviour. Strategies reported by participants include: ‘We work with inclusion support agencies in our region now’; ‘We set guidelines for social behaviour with the children’; ‘We create visual records of social behaviour expectations, e.g. walking zone – Please Walk Carefully in This Area’; ‘We talk with families all the time about children’s behaviour – we are not afraid’; ‘We feel like lead managers now, we are not trying to hope the behaviour goes away or the child leaves the service’; ‘We have used all the ideas you gave us for the development of social and emotional competence – the children love the ideas’; ‘We have adapted many of the concepts given to us in the Professional Development Sessions to our service requirements. e. g. Instead of the conversation cards idea – we have a conversation every Friday with all of the children and we call it ‘please, cheese and thank you’.

4. We invite the children to request experiences for the next week, tell us what cheeses them off and thank one another for gestures of respect and kindness during the week’ (Case study, OSHC Brisbane); ‘We will never forget the concepts of Teaching Not Telling, Lead Manager and Boss Manager, Pearls of Wisdom, The Role Plays in the Sessions, the responses were wonderful’; ‘Quiet as a Mouse’ works so well – children create quiet spaces themselves; Red Boxes have given children a quiet transition to rest time. The Taking Turn Giraffe and Tickets provide children with the experience of taking turns; The ‘Touch Gently Fish’ is working well with toddlers. (Participation Learning Outcomes 1, 2, 3, 4, 4, 5, 6, 7, 8)
TABLE 3
CRITICAL DISCOURSE ANALYSIS CONDUCTED IN TWO LOCATIONS IN QUEENSLAND 6 MONTHS AND 12 MONTHS AFTER THE PROJECT WAS COMPLETED

Capacity Building Evaluation Summary (6 month interval)

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Degree of Understanding of PD Program</th>
<th>Relevance of PD Program to Participants</th>
<th>Translation of PD Program Learning to Work context</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High degree</td>
<td>Some degree</td>
<td>Small degree</td>
</tr>
<tr>
<td>LDC (25)</td>
<td>24</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>FDC (15)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OSHC (10)</td>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Participants Perceptions 12 Month Interval

Summary of responses from practitioners
1. Participants continued to value the behaviour teaching and learning paradigm. They were conscious of being a lead manager, of teaching respectfully with the children in their work context.
2. ‘I keep going back to Dr Gasser’s 5 needs and think about these needs motivating children’s behaviour. It is a much happier environment and we are enjoying being together – staff and children’.
3. Participants named intentional teaching as a priority.
4. Participants voiced the importance of developmentally appropriate experiences. They identified this area as one that they are conscious of, yet struggle with: ‘We struggle with making our environment developmentally relevant. We can do culturally responsive well and are getting better with developmentally responsive’.
5. Practitioners emphasized competency the theory with the practice in what is making a difference in their service ‘knowing the theory behind why kids behave as they do makes sense. We sometimes need reminding’.
6. Practitioners named the ongoing instructional system as a key to their sustained practice. ‘The system is part of our planning and practice. Cannot imagine not doing it, it gives us ownership’.

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7. Practitioners were continuing to respond to challenging behaviour with different degrees of success. ‘We are not responding to challenging behaviour as we did before the Professional Development sessions began’.

Table 4  Capacity Building Evaluation Summary – 12 month interval

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Degree of Understanding of PD Program</th>
<th>Relevance of PD Program to Participants</th>
<th>Translation of PD Program Learning to Work context</th>
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</thead>
<tbody>
<tr>
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<tr>
<td>FDC (15)</td>
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<td></td>
</tr>
<tr>
<td>OSHC (10)</td>
<td>9</td>
<td>1</td>
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</tbody>
</table>

The capacity building evaluation framework revealed the successful implementation of the content of the PD program was sustained in the work context at 6 and 12 months intervals. This evaluation was based on changes in work practices and changes in the learning outcomes of students. Participants clearly identified the link between the PD program and the changes to their professional practices, naming new and modified practices, processes and strategies implemented within their work contexts. Growth in professional confidence and capacity was described by practitioners. Participants showed a preference for experiential learning processes and activities as recorded in the action research and the capacity building analysis.

The participants commitment to the program and the evaluation of the program was excellent, with participants providing descriptions of noticeable changes to practices that occurred during the program and after the program was completed, due to the skills and knowledge acquired through the PD program. Many practitioners were able to demonstrate how they implemented the PD professional learning’s in their service. All participants agreed that changes in practice occurred more when the PD was ongoing, when mentoring was provided, when change occurred in practitioner practices and student learning outcomes. Once this change occurred then paradigm shifts did eventuate.
References


Foley, R. (2001). Professional development needs of secondary school principles of


