On the move to a new Royal Children’s Hospital

Opening in late 2011, the new Royal Children’s Hospital will provide world-class facilities befitting of our great hospital for children, families, visitors and staff.

With the building of our new hospital, we have taken the opportunity to create an environment that is uniquely designed for children and adolescents—creating spaces that are fun, stimulating and take healing beyond the bedside.

The design reflects growing evidence of the importance of nature and environment to the healing and learning process and there is an overwhelming sense of colour and light throughout the building, with beautiful artwork designed to appeal to and interest children of all ages. Our patients have been actively involved in the design process and, like us, are excited about the move to our new home...it’s not long now!
Our 2010–11 research program spanned 13 projects conducted in collaboration with research partners including The University of Melbourne, Murdoch Childrens Research institute, the RCH Centre for Adolescent Health, the RCH Centre for Community Child Health, and others. Translating the evidence of these projects for use in policy, programs and day-to-day practice is a growing focus of the Education Institute.

A flagship research project for the Education Institute is Children’s Learning at the RCH (CL@RCH), which is scheduled to report at the end of 2011. We’re anticipating this research project will result in a policy and procedure that will embed an innovative and high quality model of education support for children and young people at the RCH.

The work of the RCH Education Institute is enabled by funding provided by the Department of Education and Early Childhood Development (DEECD). Other partners in our commitment to delivering exceptional education support to young people in hospital and supporting our research program include the Fight Cancer Foundation, the Foundation for Young Australians and the National Health and Medical Research Council. We are also grateful to KOALA Foundation and KOALA Kids for the thousands of dollars of teaching resources they have donated for use with children who have cancer.

These funding partners have, like our Board, staff, teacher volunteers, health and education colleagues and supporters, a shared commitment to our goal to provide children and young people in our care with high quality, evidence-based and innovative teaching and learning and ensure they remain connected to their schools.

The RCH Education Institute was awarded the hospital’s 2010 CEO Award for its exceptional contribution to the strategic goals of the RCH and its part in cross-departmental initiatives. The Education Institute is regarded as a valued member of The Royal Children’s Hospital family, helping to realise the hospital’s vision as a great children’s hospital.

The Royal Children’s Hospital Education Institute is a company limited by guarantee. We are governed by a Board of Directors that oversees management’s implementation of policies, strategic plans and priorities. Members are elected to the Board following nomination.

GOVERNANCE

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OUR BOARD

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Executive Director, Operations, The Royal Children’s Hospital

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MBBS, MD, FRACP, DCH

Director of The Royal Children’s Hospital Centre for Community Child Health, Professor of Paediatrics, The University of Melbourne

Director since August 1998
“We proudly support the work of The Royal Children’s Hospital Education Institute in its commitment to keeping students engaged with their learning when a health condition disrupts their formal education. I am delighted that the RCH Education Institute has joined the Department’s Ultranet, a statewide, secure online learning environment that students, parents and teachers can access. This technology has the potential to greatly enhance the connection between students in hospital, their teachers and peers. We are excited by the impending move of the hospital to the new RCH, which will provide rich opportunities to create new and innovative learning spaces for the benefit of all Victorian children and young people.”

The Hon. Martin Dixon, MP
Minister for Education

“For more than 140 years, our hospital has provided outstanding care for young patients and their families. In providing care, we not only consider children’s clinical needs but also their emotional needs and are committed to creating as much as possible a sense of normality about the hospital experience. Keeping children connected to school is imperative to this and is why the work of the RCH Education Institute is so important. With the generous support of the Department of Education and Early Childhood Development, the RCH Education Institute provides personalised learning opportunities for children and young people and allows them to continue their learning whilst in our care. I feel incredibly proud of the work of our teachers and teacher volunteers in creating an innovative and child-centred learning environment for our patients.”

Professor Christine Kilpatrick
Chief Executive Officer
The Royal Children’s Hospital

“We at the RCH Education Institute have a shared moral purpose: to provide high quality, personalised education support to children and young people associated with the hospital and beyond. Our teachers and researchers are a wonderful group who work in partnership with the broader hospital community and campus partners to provide evidence-based practice in a unique learning space. We celebrate all children and young people as learners and work hard to keep them connected to their schooling. It’s a privilege to work as part of such a great organisation.”

Glenda Strong
Executive Director
The Royal Children’s Hospital

“We celebrate all children and young people as learners”

Glenda Strong, Executive Director
Providing learning opportunities for all children

RCH teachers provide inclusive learning opportunities across the hospital for all children and young people who visit.

For children who are identified as ‘priority patients’, that is, children with ongoing chronic health issues and/or long stays in hospital, a personalised learning program is developed and direct education support is provided by our teachers. Establishing connections and consulting closely with children and young people, families, schools and health professionals is an essential part of this service. On discharge from hospital, children and young people who are identified by teachers as requiring ongoing education support are referred to the relevant education authority for follow up.

During 2010–11:

1. 1,590 children and young people received direct education support at the RCH
2. 23 Indigenous students received direct education support
3. 89 students were referred to relevant education authorities – of these, 27 per cent were enrolled in years 9 and 10

Additionally, our teachers play an important role in a number of clinics and services across the hospital, collaborating with a team of professionals to ensure appropriate health care is provided. These include the Victorian Paediatric Rehabilitation Service, the Paediatric Integrated Cancer Service, ADHD Assessment Clinic, RCH Immigrant Health Service, Rheumatology Outpatients Clinic, Neurobehavioural Clinic and the Wadja Health Clinic for Aboriginal and Torres Strait Islander children.
A place for the creative arts

RCH teachers and education support officers use art to engage and connect young people during their hospital stay.

Art provides teachers with a creative medium to stimulate young people’s thinking and explore new understandings. RCH leading teacher Ross Dullard uses art to allow young people to create, participate and think about things that have meaning to them. “Through their art they have a voice; they are able to use a different language to say what they think and feel,” Ross said.

Creative arts resources are useful in the creation of learning experiences that cater to children’s particular abilities and needs. The introduction of digital-based music technology in 2010—Soundhouse Rockhubs, as well as iPads and Flip digital video cameras—has resulted in RCH teachers being equipped to facilitate hospital-based experiences that motivate, educate and entertain children and young people.

Using the Flip cameras, children at the hospital have worked together to create claymation videos. Our young learners have also worked in cross-age groups using artistic skills such as story-boarding, illustration, music arrangement and hands-on character and scenery modelling.

With the Rockhubs (portable music hubs that are customised for the hospital setting) young people are exploring composition and arrangement of music, integrating music making and technology. In the hospital’s outpatient areas, RCH teacher Mikaela Little enjoys using the Rockhub with children while they wait for appointments.

“Having the Rockhub in Outpatients, you can see the children immediately interested in the possibilities of making music. They love exploring the sounds created by the different instruments and composing music with other children. It’s sparking valuable snapshots of learning in a waiting room environment,” Mikaela said.

The arts hold an important place in a health setting: they connect people through a common language socially, historically and culturally. These connections are especially important when supporting children and young people from a variety of backgrounds and experiences of learning. We are seeing how the creative arts allow children and young people to explore their environments and build meaningful understandings of themselves. Art at the RCH is increasingly emerging as a medium for expression and a launching pad for inquiry-based learning. Its success in engaging young people in the hospital in meaningful learning is evident every day in the hospital.
Many of the thousands of school-aged children admitted to The Royal Children’s Hospital (RCH) each year are found to experience significant disengagement from school and disruption to family life. There is a risk that ‘out of sight, out of mind’ may contribute to their disconnection with school.

During 2010, researchers from the RCH Education Institute and the Department of Information Systems at the University of Melbourne were awarded funding by the Institute for a Broadband Enabled Society to develop and test the use of ambient orb technology for hospitalised children to create a presence of themselves in the school classroom. The child in hospital controlled colour changes in a friendly-faced ambient ‘orb’ that resided in the child’s regular classroom. Classroom-based students were reminded of the hospital-based classmate when the orb lit up or changed colour. The ambient technology captured the imagination of children at school and in hospital.

“If you didn’t have this [orb] you wouldn’t be thinking of Jerry that much,” Jerry’s classmates said.

A hospitalised child may not feel well enough or ready to have a physical presence among their peers through other technologies, so the ambient technology proved to be a subtle, non-intrusive way of creating a classroom presence without having to interact with their classmates. Essentially, the orb promoted an awareness of the absent child, something that RCH patients, including Felix, valued immensely.

“I think it [the orb] is a smart idea because it’s like I’m in school, when I’m not at school, and they can know I’m thinking of them, and they can think of me. And that’s good. It’s a good idea,” Felix said.

For students in the classroom, the orb encouraged speculation on the absent child’s wellbeing and progress in hospital. Students discussed what the changing colours might represent for their classmate in hospital. The technology also had an impact on the child’s teacher.

“It gave me a sense that Felix was around... Other days when Felix is away, I know he’s away, and I mark the roll, and that’s it. But with the orb in the classroom, and the change of the colour, it just has more presence about it,” Felix’s class teacher said.

Keeping hospitalised children socially connected to family and peers is critical to their continued engagement with learning.

In 2011, the RCH Education Institute continues this research partnership, embarking on the next phase of research with broadband-based ambient technologies by exploring the potential to connect children to their school communities and to home.

“Sometimes children don’t necessarily want to be visual with their classroom. This is simply a bit of an on/off switch, it’s just ‘please think of me’”

Dr Amy Nisselle, Research Fellow
For young people in the senior secondary years, chronic illness can result in frequent interruptions to their schooling. The demands of undertaking the Victorian Certificate of Education (VCE) while in and out of hospital can be particularly challenging for students with a health condition. Managing a heavy study workload while away from school support and also undergoing medical treatment for a health condition has the potential to compromise a student’s engagement in learning.

Many young people admitted to the hospital are in their final year of schooling. RCH teachers make direct contact with these young people on admission and identify the support the student needs to fulfil VCE requirements, like SACs (School Assessed Coursework) and exams. An RCH teacher will also provide advice to VCE students undergoing hospital treatment, on provisions such as special exam arrangements, time extensions and Special Consideration of final VCE results. Discussion of tertiary education goals and transition to continued education and training may also play a part in an RCH teacher’s engagement with a VCE student in hospital.

Natasha is currently studying for her VCE at a large regional secondary college. Her health condition means that stays at the hospital are frequent and sometimes lengthy. Already this year, Natasha has been admitted to hospital four times, and while she usually schedules her treatment to coordinate with school holidays, there are times when Natasha misses important VCE classes during term.

To help Natasha stay on track with her learning RCH teachers, Ross Dullard and Allesha Fecondo make contact with Natasha as soon as she is admitted for treatment.

“Working with Ross and Allesha is easy-going. School work becomes almost fun rather than a chore because it’s much more relaxed and made to be health first, homework later. The two of them are always friendly and easy to approach and talk to. Everything is organised so efficiently that when I return to school I don’t have all the catch up work that I could otherwise have,” Natasha said.

Surprisingly, studying at home and at hospital isn’t always that different for Natasha.

“I do most of my study and homework in bed at home, so I do much the same thing when I’m in hospital. It can get a bit distracting sometimes though, especially if there is a lot of activity in the ward. If it’s really busy, I’ll use one of the meeting rooms or in nice weather, sit in the garden to do my school work,” she said.

So where to after VCE for Natasha?

“After my VCE, I’m planning on a gap year to get my health on track and possibly save some money to travel. After that, I’d like to study Exercise Science at uni because it combines several of my interest areas; it’s a good mix of nutrition, psychology and fitness,” Natasha said.

“Most of my regular teachers will email me work when I am in hospital. The RCH teachers will help me get organised to study or to complete an assignment”

Natasha, 18

Supporting success in the senior years

The RCH Education Institute supports students so that they continue to engage in learning and remain connected to their school community throughout their health journey.

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“Supporting partnerships between schools, youth transition and wellbeing support agencies, and parents of young people with health conditions is a focus of recommendations from the Staying Engaged research undertaken by the RCH Education Institute and Researching Futures.”

Henry et al 2011, Young People with Health Conditions – Staying Engaged during the Secondary Years of Education

www.rch.org.au/education/research.cfm

RCH Education Institute Annual Report 2011 13
The Royal Children’s Hospital (RCH) Education Institute teachers are always on the lookout for new and innovative ways to engage children and young people in learning.

When the Department of Education and Early Childhood Development (DEECD) announced they were running an iPad trial, the RCH Education Institute welcomed the chance to be involved.

The trial is examining the impact iPads have on students’ learning as well as how this technology can benefit and transform teaching practice, in 10 educational settings across Victoria.

RCH teaches Allesha Fecondo and Kiri Kane have observed how the iPad trial is transforming RCH students and encouraging collaborative approaches to learning as part of the Trans-Tasman Project, an initiative being led by RCH patient Giuseppe.

“The Trans-Tasman Project encourages students to explore the real-world effects of the devastating Christchurch earthquake. Using the iPad technology and apps, RCH students on the adolescent and neuroscience wards have acquired a deeper understanding of the earthquake and even created their own blog,” Allesha said.

Relationships have also been established with Chisnallwood Intermediate School in Christchurch, providing valuable first-hand insights for students.

Through this process, one student in particular has been inspired by the Trans-Tasman Project to take learning to the next level.

A quiet achiever, Giuseppe became a key driver of a fundraising campaign to raise money to help Chisnallwood Intermediate students recover from the disaster.

Using the Walkie Talkie apps and the blog, Giuseppe led the team of students to generate ideas and make shared decisions about the direction of the campaign.

“Giuseppe’s project is an example of how iPads can help big ideas come to life. The iPads have enhanced and improved the collaboration among students,” Kiri said.

The project also demonstrates how iPads can be an innovative tool to engage students in a hospital setting, enabling them to collaborate wirelessly from different wards and floors where health conditions restrict students from working in a shared space.

“The iPads are fun and the students have really enjoyed using the technology. The trial has encouraged me to learn more about iPads too, and how to better use them when working with students,” Kiri said.

“The iPads helped us work together and make decisions”

Giuseppe, 16

Far left: Students involved in the Trans-Tasman Project organised fundraising merchandise like these ‘Help Fill the Cracks’ wristbands. Clockwise from top: Sixteen-year-old Giuseppe took on a leading role in the Trans-Tasman Project; Letters from students at Chisnallwood Intermediate School to Giuseppe are displayed on the Trans-Tasman feature wall at the hospital; The Christchurch Earthquake Fundraiser blog developed by RCH students; Peter and Jamie do some research on the iPads; Student investigations into the Christchurch earthquakes are displayed in the hospital’s adolescent learning space.
Partnering for better outcomes

"We wanted to help young people to explore their creativity and continue to achieve their educational outcomes" 
Michael, student, The University of Melbourne

Laugh Out Loud

Community involvement is key to providing children and young people with rich and varied learning opportunities in any educational setting.

Humour is a universal language. When a group of students from The University of Melbourne decided they wanted to work with the children and teachers at The Royal Children’s Hospital (RCH) to make a youth-centred magazine, humour was the key to the project. As Linda Trinh, one of the university students says, “Humour is a way to connect.” In fact, it’s this connection to the wider community that makes the educational experience for hospitalised children and young people much richer and more engaging.

The project, Laugh Out Loud, came about when a group of students were awarded a 2010 Dreamlarge Student Engagement Grant from The University of Melbourne, as part of the Student Ambassador Leadership Program. Michael Issa, another of the university students, wanted the youth magazine to highlight the creativity, imagination, and determination of the children at the RCH. Unfortunately illness, and more importantly time spent in hospital, can have a considerable effect on young people’s learning and development. We wanted to help these young people to explore their creativity and continue to achieve their educational outcomes,” Michael said.

The project has resulted in the collation and publication of a youth-friendly magazine, full of jokes, stories and artworks created by the children and young people in the hospital. RCH leading teacher Tara Linke says community involvement adds an important dimension to education programs at the RCH. “Having members of the community, like The University of Melbourne students, participating in educational programs here, enables us to provide a greater scope of educational opportunities to young people at the RCH,” Tara said.

It is this connection to community, linked to engaging subject matter that really encourages young people to achieve educational excellence in a non-traditional educational setting.

onTrac@PeterMac

The RCH Education Institute supports the learning of adolescents and young adults involved with onTrac@PeterMac through provision of a part-time education and vocation teacher.

This teacher works as an integral part of the onTrac@PeterMac team providing education and vocation support and advice and guidance to young adults, their families, education providers and employers.

The teacher’s role with the team is to develop partnerships with education providers, employers and community organisations to ensure that learning opportunities continue throughout a young person’s cancer journey.

Services offered include consultation, advice and guidance, provision of professional development to education providers and employers, assistance with Special Consideration applications, collaboration with Local learning and Employment Networks and access to netbooks and direct education support for inpatients at Peter MacCallum Cancer Centre.

“We wanted to help young people to explore their creativity and continue to achieve their educational outcomes”
Michael, student, The University of Melbourne
A health place as a learning space

A site for health and education

The Royal Children’s Hospital (RCH) is more than a hospital, it’s also a potentially rich learning environment, not in a traditional sense, but much more exciting than that.

Each year, more than 11,000 school-aged children and young people are admitted to the hospital. What they find when they get here is not only outstanding health care, but an environment that increasingly speaks to them as ongoing learners. It is a place that has teachers, education support officers, teacher volunteers, books, netbooks, iPads, interactive whiteboards, etc; in fact, all the things that they would expect to find in their schools and early childhood settings.

The hospital also has displays of children’s work that makes their learning visible, such as the celebration for NAIDOC Week, Children’s Book Week and National Science Week, all reminding children and young people and the RCH community that although the reason for children attending the RCH is due to a health condition, they don’t stop being learners.

Teachers constantly use areas within the hospital setting that can facilitate a group discussion, individual work, social interaction, peer support and family involvement. These spaces are found in Outpatients, at the bedside, in the garden, in play/activity rooms, even in the in-house television studio.

The use of technology is increasingly the means by which teachers, children and young people connect—across and between wards, with their homes and schools and with the relevant education authorities.

The ins and outs of Outpatients

For the tens of thousands of school-aged children that attend regular or occasional appointments in RCH Outpatient Clinics each year, time in the hospital is time away from school. Hospital appointments may be as regular as weekly, fortnightly or monthly for many young people with chronic health conditions and this absence from school can cause significant barriers for continued education. Out-of-school learning environments like the hospital can provide opportunities to maintain children’s learning identities during school absences.

Historically, Outpatients in the hospital was perceived as a ‘health space’. These days, the presence of families and staff that includes paediatricians, nurses and allied health professionals, but also play therapists, music therapists and teachers, make the Outpatient waiting room a dynamic shared learning space. Equipped with an interactive whiteboard, tables and chairs, iPads, netbooks and numerous learning resources, the space promotes activities that are designed to be informal, loosely structured and fun.

Chantel Scrimshaw aims to make Outpatients just seem like another learning environment.

“Okay, so the student’s not in school, but while they’re here they can have a learning interaction, they can feel like they’re normal. They’re not missing out,” Chantel said.

Unlike in schools, parents are constantly present with their children in hospital, particularly in the earlier years. This unique setting fosters shared experiences of learning between children and their parents. While conducting a learning project that explored the many backgrounds and cultures of young people that visit the hospital, Chantel was struck by the level of engagement of parents in their child’s learning.

“During the Around the World project I received lots of positive feedback from parents and families...Sometimes the parents got so interested! I had one student and her dad was talking to her about the flag, pointing out the map, showing me [where their family came from],” Chantel said.

Chantel says catering for a variety of age groups, learning styles and interests is all part of the challenge of teaching in Outpatients.

“Some kids are visual, some like to listen, some are hands-on and most kids have a bit of everything. The students are all different ages, I might have a prep and a year 12...the prepie might be drawing while the other student is looking up the capitals of countries on the interactive whiteboard,” she said.

A child or young person may spend minutes or hours waiting for their appointment in Outpatients. RCH teachers ensure that every moment of this time becomes a valuable learning opportunity in a stimulating and child-centred environment.

“Above Ruby stays connected to her learning even while she awaits treatment, with the help of RCH teacher Chantel and RCH nurse Jess.

"Hospitals can be a vehicle for traditionally held ‘health’ spaces to become re-conceptualised as shared spaces to accommodate the multiple identities of children”

A community for quality learning

The Royal Children’s Hospital Education Institute works towards developing inclusive partnerships that support learning in a hospital environment. We work with families, schools, education systems, teacher volunteers, community support groups and local cultural and education institutions to achieve positive learning and wellbeing outcomes for children and young people in the hospital.

Families
The RCH Education Institute acknowledges the significant influence of families in the growth, development and educational success of their children.

“The teachers’ passion for teaching comes through in the way that they engage with students and their families...they take the time and make the effort to get to know Jordan and how he learns.”
Sarah, Jordan’s mum

Teacher volunteers
Our teacher volunteers come from a range of teaching backgrounds and lend their expertise at the RCH on a regular basis.

“I’m scheduled to visit once a week, but we have had lots of Maths students in recently that have needed my expertise. It’s very rewarding.”
Geoff Ausdenberry, RCH Teacher volunteer

Teacher trainees
Since 2009, the RCH Education Institute has partnered with a number of teacher training universities including Deakin University, The University of Melbourne, RMIT University and La Trobe University.

“To create meaningful learning opportunities in the hospital, you need to really think outside the square. It has been a great challenge for me both professionally and personally.”
Naomi McCrindle, teacher in training, Deakin University

Schools
The partnerships that are formed between hospital teachers and school-based teachers are critical to ensure that individual learning plans reflect the needs of children and young people.

“We have been given excellent assistance from the RCH Education Institute regarding the best way to inform other parents and children at the school, as well as information about symptoms and behaviours we might expect. The Individual Learning Plan has also been most helpful.”
Liz Deroy, Deputy Principal, St Mary’s Primary School, Bairnsdale

Thomas Carr Secondary College
Year 11 students from Thomas Carr have visited the RCH as part of a community-based school elective. They have developed a series of resources to assist young people to keep up with school work.

“Our students get a lot out of this elective. The whole process really engages our students and teaches them a lot about the importance of education for everyone.”
Kylie Cox, teacher, Thomas Carr Secondary College

Our Lady of Sion College
Sion College’s Year 9 community service program provides students with learning experiences to encourage them to develop a greater understanding of self, their community and of their world.

“This experience is a life-changing one for our students, allowing them to see a great organisation at work and to develop their skills of empathy and communication.”
Lisa McLean, Middle Years Program Coordinator, Our Lady of Sion College

North Melbourne Primary School (Errol Street)
Siblings of patients from the hospital can be greatly affected when their sister or brother is hospitalised for an extensive period. North Melbourne Primary School has, on numerous occasions, enrolled children for short periods, particularly those from regional Victoria and interstate.

“The staff and school community at Errol Street believe it is a privilege to be involved in a sibling partnership program with the RCH. The reciprocal learning that takes place as our students learn about the unwell siblings and ‘happenings’ at the RCH is incredibly valuable.”
Sally Karlovic, Principal, North Melbourne Primary School

DEECD regions and CEO dioceses
Collegiates from education regions across the state partner with the RCH Education Institute in supporting children and young people who, on discharge from hospital, are identified as requiring additional education support.

“The RCH Education Institute collaborates with schools and regional staff to ensure appropriate and effective transition and pathways support and advice is provided.”
Gary Buckenmiller, School Development Officer, Student Learning Unit – Youth Transitions, Eastern Metropolitan Region, Department of Education and Early Childhood Development

Local cultural and educational institutions
We celebrate major education events such as National Children’s Book Week, Children’s Week, Science Week and NAIDOC Week. We are supported in this by cultural and educational institutions such as the State Library of Victoria, Museums Victoria, Scienceworks, Zoos Victoria, Koorie Heritage Trust and the Australian Centre for the Moving Image.

“There is great synergy between the work of the RCH Education Institute and the State Library’s education programs. We’re both working to foster literacy and learning where access to regular programs is compromised. It’s a great collaboration.”
Pippa Kelly, Reader Development and Offsite Learning Manager (inc. Centre for Youth Literature), Learning Services, State Library of Victoria.
Research is an integral part of The Royal Children’s Hospital (RCH) Education Institute. Among the busy research agenda this year, two prominent projects are influencing future pathways for children and young people’s learning in school and out-of-school settings such as hospitals.

The Staying Engaged study looked at the issues associated with keeping up with the demands of schoolwork and access to pathways into further education and employment for young people with health conditions who are in their post-compulsory years of schooling in Victoria. Funded by the Foundation for Young Australians and completed in March 2011, the research particularly focussed on the experiences of young people and their parents to identify best practice and the critical factors that successfully keep young people with health conditions actively engaged with their senior years of secondary education. The research is being translated into resources for education and health professionals working with and supporting young people.

The Children’s Learning at the RCH (CL@RCH) study seeks to examine a whole-of-hospital approach to promoting children’s learning and providing stimulating learning environments as an important dimension to their health. The study is understood to be the first of its kind internationally and is an integral part of achieving the hospital’s strategic objective of “Creating a world-class precinct that facilitates learning.”

The 2010–11 year has marked the start of this flagship piece of research that will drive the direction of children and young people’s learning in the new RCH.

The CL@RCH will address several significant gaps that exist in education-health research. It will be an important blueprint for education professionals, health care providers and policy makers from both the health and education sectors here, and internationally.

“Interest in innovative learning spaces is high, both here in Victoria and internationally,” Julie said.

“We’re interested in examining how the hospital environment speaks to children’s learning—through its physical spaces, its creative arts, how health professionals and parents advocate for learning and how a hospital community and partnerships can enhance learning.”

RCH Education Institute research and project summary 2010–11
www.rch.org.au/education/research.cfm

Researching practice, pathways and places

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<td>Using broadband-enabled technology to create a presence in classrooms for children who are absent due to health conditions</td>
<td>Institute for a Broadband Enabled Society, The University of Melbourne</td>
</tr>
<tr>
<td></td>
<td>iPads for Learning Trial</td>
<td>DEECD</td>
</tr>
<tr>
<td>Inclusion and connections</td>
<td>Staying engaged: the education needs of young people living with health conditions in the post-compulsory years of schooling</td>
<td>Foundation for Young Australians</td>
</tr>
<tr>
<td></td>
<td>Australian Early Development Index (AEDI) language and cultural diversity study</td>
<td>AEDI National Office</td>
</tr>
<tr>
<td></td>
<td>Utility of AEDI in identifying children at educational risk at the RCH</td>
<td>Postgraduate student project</td>
</tr>
<tr>
<td>Children and communities</td>
<td>Improving communication approaches in the early years across the home-school-early years settings</td>
<td>National Health and Medical Research Council</td>
</tr>
<tr>
<td></td>
<td>An Adolescent Friendly Children’s Hospital: Quality Improvement Survey</td>
<td>Adolescent Model of Care, with RCH Centre for Adolescent Health</td>
</tr>
<tr>
<td>Health and wellbeing</td>
<td>The knowledge and practices of education and support staff concerning mental health conditions among senior secondary students</td>
<td>Department of Education, Employment and Workplace Relations through National Disability Coordination Office, Inner VET Cluster</td>
</tr>
<tr>
<td></td>
<td>African youth and obesity: The role of the intergenerational acculturation gap</td>
<td>ARC Discovery Grant, with Deakin University</td>
</tr>
<tr>
<td></td>
<td>Parents’ experiences of health service delivery: Doctoral research investigating parents’ experiences of health service delivery within an educational setting for adolescents with chronic disease</td>
<td>Australian Postgraduates Award scholarship</td>
</tr>
</tbody>
</table>
Youth Advisory Council members meet regularly to have their say about the hospital experience for young people. In August 2011 the Y@K will host the first RCH Youth Forum.

Since 2009, The Royal Children’s Hospital (RCH) Education Institute has partnered with the RCH Centre for Adolescent Health to establish a youth advisory council in the hospital known as Youth at the Kids, or Y@K.

In the context of an RCH policy of being patient and family-centred, Y@K members actively work towards injecting youth consumer voice into discussions and decisions affecting children’s and young people’s hospital experiences.

The Y@K members, aged between 12 and 20 years, have experienced the RCH for many different reasons. They are, or have been, inpatients, outpatients, siblings or friends of patients. And they have a common goal—to influence policy and procedures at the RCH.

Young people who join Y@K have the opportunity to gain skills in public speaking, events management, website design and leadership, just to name a few.

In 2010–11, Y@K members were invited to have their say on various aspects of the RCH. These included major decisions around design elements of the new RCH, development of information brochures and a website, input to the RCH response to youth rights and patient surveys and provision of general information.

In August this year, the Y@K, with support from an across-hospital working group, will host the first RCH Youth Forum. This event, which aims to attract approximately 150–200 12–20 year olds, will provide an opportunity for participants to contribute their ideas to make the RCH a more child and youth-friendly hospital and to identify youth health issues in 2011.

Any young person, who is involved with the RCH and would like to have their say, is welcome to join Y@K.

Mary’s experience with Y@K has helped to clarify her goals in life.

“Being a Y@Ker has helped me to realise what I want to do after university. It has given me confidence to strive for higher goals and achieve more than ever,” Mary said.

For further information visit: www.rch.org.au/yac

Creating a more youth-friendly hospital

Youth at the Kids (Y@K) is a group of young people that comes together to share ideas, thoughts and advice about how to make The Royal Children’s Hospital a better place for all children, young people, families and staff.

“It’s important that our voice is taken into account when decisions about us are made”

Brooke, Y@K member
Moving forward on a learning journey

A parkland setting, world-class facilities, interactive displays and an abundance of outdoor spaces are just some of the features that will enrich the learning journeys of children and young people in the new Royal Children’s Hospital.

ON THE MOVE
The move to the new Royal Children’s Hospital in November 2011 holds wonderful opportunities for children and young people to be exposed to an innovative and creative learning environment. A parkland setting, world-class facilities, interactive displays and an abundance of outdoor spaces are just some of the features that will enrich the learning journeys of children and young people. We are in advanced stages of planning for our teacher resource area and the different uses of activity rooms across the new hospital to inspire children and young people to encounter new possibilities for learning.

Our partnerships with our colleagues from Educational Play Therapy and Travancore School continue to strengthen as we explore how we can work together in different ways that make the most of what the new hospital has to offer. Excitement is building as we negotiate the creation of a Scholastic Book Bunker and identify the capacity for the educational benefits of the creative arts in learning and creating greater participation and connections for children and their families. We are continuing to strengthen our links with the education authorities and the region-based offices and are looking to develop new partnerships both internationally, such as with Hanoi University, and closer to home, for example through our discussions with Apple, United Way and Fuji Xerox.

CHILDREN’S LEARNING
Underpinning the work of the RCH Education Institute is a commitment to the building of rich learning opportunities, where children continue to make connections to learning and encounter stimulating environments. Refining our pedagogy is an ongoing process. Everything in a child’s immediate environment affects how a child grows and develops. Our pedagogy is influenced by a deep commitment to children as active learners, so our teaching and learning is based on children making meaning. The new hospital is a catalyst for us to continue to develop an environment in which children can continue to carry out their investigations, building on their knowledge within their social and cultural contexts, including the hospital. The hospital lends itself to teaching practices based on personalised and inquiry-based pedagogy. Each child brings a unique set of learnings and experiences to the hospital. It is our task to build on these in order to support the child’s development and progress. This work speaks to Loris Malaguzzi’s image of the child as competent from birth and the importance of valuing the ‘hundred languages of children’. This is the task we are setting ourselves for the year ahead.

NATIONAL YEAR OF READING 2012
The RCH Education Institute is proud to partner with the National Year of Reading 2012. The partnership means that children and young people at the RCH will have the opportunity to participate in nationwide literacy programs and events, just like their peers in school. The National Year of Reading 2012 provides a wonderful opportunity for RCH teachers and education support officers to promote the benefits and love of reading to young people who are often challenged by literacy due to periods of absence from school. The RCH Education Institute aims to engage the entire RCH community in reading through a series of structured programs and events in the lead up to and throughout 2012.

AMBIENT TECHNOLOGY
Using ambient technology to create a presence at home and at school for hospitalised children. In 2010, we created and tested the use of ambient orb technology to help absent children create a presence for themselves in their school classrooms, thereby alerting their teacher and schoolmates to their desire to be ‘present’. During 2011–12, we will continue our ambient technology research and investigate how an awareness of the absent child in the home and the classroom can lead to an increased sense of belonging and enhanced connection to children’s core communities. In collaboration with colleagues at the Department of Information Systems at The University of Melbourne, we will explore the ways in which broadband-based ambient technology is useful in promoting awareness of children absent from home and school and the role of this technology in creating a greater sense of connection.

RCH JOINS THE ULTRANET
The Ultranet is a secure online student-centred learning environment that supports high-quality learning and teaching and connects students, teachers and parents. The RCH Education Institute is looking forward to becoming an Ultranet site for Victorian Government schools. This will enable our teachers to link to a child or young person’s school to support their ongoing learning needs while they are absent. Access to relevant information at the child’s school will assist hospital teachers in developing Individual Learning Plans and communicating effectively with classroom teachers. RCH teachers will be able to develop online collaborative learning spaces (open or private) and access a wide range of quality digital learning resources that can be used to enhance learning and teaching at the hospital.

The year ahead
# Financial summary

## Comprehensive Operating Statement for the year ended 30 June 2011

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
<td>$3,006,652</td>
<td>$2,733,866</td>
</tr>
<tr>
<td>Employee benefits</td>
<td>$(2,357,321)</td>
<td>$(2,028,358)</td>
</tr>
<tr>
<td>Depreciation and amortisation</td>
<td>$(81,938)</td>
<td>$(60,483)</td>
</tr>
<tr>
<td>Audit fees</td>
<td>$(6,800)</td>
<td>$(6,700)</td>
</tr>
<tr>
<td>Consulting costs</td>
<td>$(10,724)</td>
<td>$(5,000)</td>
</tr>
<tr>
<td>Repairs and maintenance</td>
<td>$(71,881)</td>
<td>$(126,084)</td>
</tr>
<tr>
<td>Rental expense</td>
<td>$(72,127)</td>
<td>$(70,555)</td>
</tr>
<tr>
<td>Website development</td>
<td>$(20,793)</td>
<td>$(55,075)</td>
</tr>
<tr>
<td>Professional development and learning</td>
<td>$(76,565)</td>
<td>$(25,667)</td>
</tr>
<tr>
<td>Other expenses from continuing operations</td>
<td>$(296,773)</td>
<td>$(381,939)</td>
</tr>
</tbody>
</table>

## COMPREHENSIVE RESULT FOR THE YEAR

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$11,729</td>
<td>$130,302</td>
</tr>
</tbody>
</table>

## Balance Sheet as at 30 June 2011

### ASSETS

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$564,097</td>
<td>$634,397</td>
</tr>
<tr>
<td>Trade and other receivables</td>
<td>$66,012</td>
<td>$135,909</td>
</tr>
<tr>
<td>Term deposits</td>
<td>$900,000</td>
<td>$850,000</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td>$1,530,109</td>
<td>$1,620,306</td>
</tr>
<tr>
<td>Non-current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plant and equipment</td>
<td>$135,358</td>
<td>$173,369</td>
</tr>
<tr>
<td>Intangible assets</td>
<td>$1,881</td>
<td>$1,881</td>
</tr>
<tr>
<td><strong>Total non-current assets</strong></td>
<td>$135,358</td>
<td>$175,250</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>$1,665,467</td>
<td>$1,795,555</td>
</tr>
</tbody>
</table>

### LIABILITIES

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade and other payables</td>
<td>$210,495</td>
<td>$401,581</td>
</tr>
<tr>
<td>Provision for employee benefits</td>
<td>$230,106</td>
<td>$200,244</td>
</tr>
<tr>
<td>Revenue in advance</td>
<td>$32,530</td>
<td>$22,495</td>
</tr>
<tr>
<td><strong>Total current liabilities</strong></td>
<td>$473,131</td>
<td>$624,320</td>
</tr>
<tr>
<td>Non-current liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provision for employee benefits</td>
<td>$30,067</td>
<td>$20,694</td>
</tr>
<tr>
<td><strong>Total non-current liabilities</strong></td>
<td>$30,067</td>
<td>$20,694</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td>$503,198</td>
<td>$645,014</td>
</tr>
</tbody>
</table>

## NET ASSETS

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NET ASSETS</strong></td>
<td>$1,162,269</td>
<td>$1,150,541</td>
</tr>
</tbody>
</table>

### EQUITY

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accumulated surpluses</td>
<td>$1,162,269</td>
<td>$1,150,541</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td>$1,162,269</td>
<td>$1,150,541</td>
</tr>
</tbody>
</table>

## Cash Flow Statement for the year ended 30 June 2011

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash flows from operating activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$2,801,432</td>
<td>$2,719,838</td>
</tr>
<tr>
<td>Receipts from DEECD</td>
<td>$56,417</td>
<td>$27,472</td>
</tr>
<tr>
<td>Interest received</td>
<td>$203,884</td>
<td>$133,542</td>
</tr>
<tr>
<td>Education program fees received</td>
<td>$(2,218,086)</td>
<td>$(2,030,056)</td>
</tr>
<tr>
<td>Payments for employee benefits</td>
<td>$(623,760)</td>
<td>$(343,804)</td>
</tr>
<tr>
<td>Payments to suppliers</td>
<td>$330,103</td>
<td>$178,272</td>
</tr>
<tr>
<td><strong>Net cash provided by operating activities</strong></td>
<td>$21,749</td>
<td>$440,916</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash flows from investing activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purchase of other financial assets</td>
<td>$(50,000)</td>
<td>$(850,000)</td>
</tr>
<tr>
<td>Purchase of plant and equipment</td>
<td>$(42,947)</td>
<td>$(113,622)</td>
</tr>
<tr>
<td><strong>Net cash used in investing activities</strong></td>
<td>$(92,947)</td>
<td>$(963,622)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net increase/(decrease) in cash hold</strong></td>
<td>$(70,299)</td>
<td>$(532,708)</td>
</tr>
<tr>
<td>Cash at beginning of the financial year</td>
<td>$634,397</td>
<td>$1,157,103</td>
</tr>
<tr>
<td>Cash at the end of the financial year</td>
<td>$564,099</td>
<td>$634,397</td>
</tr>
</tbody>
</table>

The RCH Education Institute extends a special thank you to our major funder, the Department of Education and Early Childhood Development (DEECD).

We thank the DEECD central office and regions, as well as the Catholic Education Office and Independent Schools Victoria. Their ongoing support of our work and their commitment to the teaching and learning needs of children and young people with health conditions is greatly appreciated.

3P Learning (Mathletics)
Adam Scuff Foundation
Adam Smith
Apple
Association of School Councils in Victoria
Australian Centre for the Moving Image
BAE Systems Australia
Bakli College
Bill and Jenny Gordon
Book Bonding
Camp Quality
CarTeen
Carlton Football Club
Catholic Education Office – Melbourne, Ballarat, Sale and Sandhurst
Challenge
Council of Adult Education
Country Women's Association
Deakin University
DEECD iPads for Learning Trial
Department of Health, Victoria
Dr Anne Cloonan
Dr Anthony Jones
Dr Pamela St Leger
Dr Karina Wilkie
Dr Lyn Yates
Echuca College
Edsoft
Fight Cancer Foundation
Foundation for Young Australians
Hawthorn Football Club
Immigration Museum
Independent Schools Victoria
Jim Spinks
Kim Srinivasan
KDALA Foundation
KDALA Kids
Kyle Cox
Labor North Secondary College
Languages and Multicultural Education Resource Centre
Lenovo
Livewire.org.au
Mandy Mandie
Melbourne Aquarium
Michael Salmon
Mind at Work
Monash University
Morris Gleitzman
Munroch Childrens Research Institute
Museum Victoria
National Disability Coordination Office, Inner VET Cluster
National Gallery of Victoria
National Sports Museum
Netspace
North Melbourne Primary School
OfficeWorks
onTrac@PeterMac
Our Lady of Sion College
Paediatric Integrated Cancer Service
Professor Roger Slee
Redilite
Researching Futures
Richmond Football Club
RMIT University
Ronald McDonald Learning Program
Sally Rippin
Scienceworks
Sharon Turner, Scholastic Australia
Silvertown Primary School
Simon & Schuster Australia

Sister & Gordon
Smart Geelong LLEN
Soundhouse, Debney Park
South Gippsland Region LLEN
St Kilda Football Club
Stackeroos
Starlight Children's Foundation
State Library of Victoria
The R.E. Ross Trust
The Royal Children's Hospital Auxiliaries
The Royal Children's Hospital Family Advisory Council
The Royal Children's Hospital Foundation
The Royal Children's Hospital Research Development and Ethics
The Royal Children's Hospital Youth Advisory Council (YfY)
The Song Room
The University of Melbourne, particularly the Melbourne Graduate School of Education, the Department of Paediatrics, the Institute for a Broadband-Enabled Society, the Community Project Team and the Department of Information Systems
Thomas Carr College
Trararcore School
Treetop Development Group
Victoria Police
Victorian Auditor-General's Office
Victorian Curriculum and Assessment Authority
Western Bulldogs Football Club
Wooranna Park Primary School
Zokky the Kangaroo
Zoos Victoria
Zscaler

And our Board, staff, teacher volunteers, health and education colleagues and, most importantly, the children, young people and families we support.

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explore  
report  
lead  
support  
create  
connect  
study  
collaborate  
learn  
research  
experience