



New “Mission: I’mPossible” programme enables preschoolers with developmental needs overcome learning hurdles

Lien Foundation (LF), KK Women’s and Children’s Hospital (KKH) and PAP Community Foundation (PCF) successfully pilot programme to bring specialist care to 22 preschools

First integrated, community-based and family-focused support programme of its kind

Singapore, 6 July 2010

1. The **Lien Foundation (LF), KK Women’s and Children’s Hospital’s Department of Child Development (KKH-DCD)** and **PAP Community Foundation (PCF)** are spearheading the **Mission: I’mPossible (MIP)** programme to address the need for greater early childhood support for preschoolers with developmental needs in mainstream preschools. A first of its kind, the MIP takes a community-based and family focused approach to improve these children’s school-readiness.
2. MIP is the first proactive early detection and intervention programme to screen, diagnose and help preschoolers with mild developmental needs – a group of children whose gaps in learning go easily unnoticed. The MIP programme uses an integrated, community-based and family-focused approach to provide crucial support for these children. It seeks to improve their readiness for primary school and chances of success. MIP also trains and equips preschool teachers with the right skills to support the preschoolers and parents in this area.

3. The Lien Foundation has committed \$2.5m to the three-year programme, of which about 40 percent goes to establishing and maintaining a multi-disciplinary clinical team comprising a pediatrician, psychologist, speech language therapist, occupational therapist and learning support facilitator. The team not only provides teachers with skills and knowledge, it also provides therapy to the preschoolers, and involves the children's parents and caregivers. The clinical team works closely with the Learning Support Educator (LSEd) to integrate therapy goals into classroom routines. The LSEd plays an important role in bridging and embedding intervention goals into classroom routines. The LSEd facilitates the interaction and communication between all parties – the children, teachers, parents and therapists - a crucial factor to the effectiveness of the community-based programme.

4. The MIP programme started its pilot run in July 2009, targeted at 22 PCF centres under the Pasir Ris–Punggol GRC. To date, 980 preschoolers have been screened and 92 children have successfully completed the programme.

From impossible to 'I'm possible'

5. "We have gone upstream in dealing with the areas of need for preschool education," said **Mr Lee Poh Wah, Chief Executive Officer, Lien Foundation** "What makes MIP different is the way the entire community is involved. This new service delivery model brings specialist care right into the pre-school, where it is most needed. A seamless network of support is woven, where parents, teachers and therapists work hand-in-hand to turn the child's difficulties into new possibilities for learning."

Why this MIP model

6. "In every cohort of preschoolers, at least five to six percent have developmental needs that could have an impact on their learning. Early identification followed by timely early intervention is the key to helping these children minimise or overcome the impact of some of their developmental problems. MIP provides a model of

integrated care for right-siting some of these pre-schoolers, improving their skills and getting them ready for mainstream schools,” said **Professor Ho Lai Yun, Senior Consultant and Advisory Board Director, Department of Child Development, KKH and Director, Child Development Programme, Ministry of Health.**

7. Under the MIP, each child has an individual education plan (IEP) customised to aid his or her learning growth. He or she receives ten therapy lessons and five in-class support sessions, providing general learning support, speech and occupational therapy. All sessions are conducted during school hours in the familiar environment of his or her school and classroom. This has led to better teacher-parent collaboration and resulted in a zero dropout rate. To ensure that therapy remains affordable and accessible to all, fees are heavily subsidized. Financial aid is also available to those in need.

A new 'breed' of preschool educators

8. 70 percent of the kindergarten teachers at the 22 PCF centres have been trained to screen and detect students with developmental needs, and provide them with better support in class. Three senior teachers from PCF have also taken on new roles as Learning Support Educators (LSEds). They are equipped with enhanced skills to support preschoolers with developmental needs, playing an important role in bridging and embedding intervention goals into classroom routines. They also support the teachers in class when necessary. In future, the LSEds can also provide in-class support to preschoolers who do not have developmental needs, but may benefit from some extra attention.
9. “Teachers are well placed to notice if a child is not meeting the typical developmental milestones through their daily interactions and lessons,” said **Mr Tay Swee Yee, Group Chief Executive Officer, PCF**, “With better training through MIP, our teachers are now more confident and better able to help this group of children.

LSEds play a crucial part by supporting the teachers and children, be it complementing with therapy during class time or by assisting the teacher to integrate the child into classroom learning.”

Capacity building for the preschool sector

10.To grow the number of LSEds, Lien Foundation is funding ten scholarships for students pursuing the Diploma in Child Psychology & Early Education at Ngee Ann Polytechnic (NP), or the Bachelor of Science in Early Childhood Educational Studies and Leadership at NP’s affiliated Wheelock College. NP has also started an Educational Resource and Therapy Centre for the students.

11.A group of researchers from Nanyang Technological University-National Institute of Education, Monash University and UniSIM will also conduct an evidence-based examination of MIP’s strengths and weaknesses to bolster the effectiveness of the programme.

Majority of children improved after MIP

12.Mr Tay from PCF, added “To date, more than 90% of children who have undergone MIP have shown improvement. Parents have told us they greatly appreciate the convenience and the effectiveness of MIP.” On the future of MIP, Mr Lee Poh Wah, LF said, “We hope MIP’s cost effective and community-based model of care can be further replicated, spelling new hope for this group of children.”

~oOo~

About Lien Foundation

The Lien Foundation is a Singapore philanthropic house noted for its model of radical philanthropy. It breaks new ground by investing in innovative solutions, convening strategic partnerships and catalyzing action on social and environmental challenges. The Foundation drives institutional capacity building to address crucial community needs, and empowers individuals to reach their full potential. It seeks to enhance educational opportunities for the disadvantaged, excellence in eldercare and environmental sustainability in water and sanitation.

About KK Women's and Children's Hospital

KK Women's and Children's Hospital (KKH) has evolved over the decades, since its founding in 1858, into a regional leader in Obstetrics, Gynaecology, Paediatrics and Neonatology. Today, the 830-bed hospital is a referral centre providing tertiary services to handle high-risk conditions in women and children. More than 400 specialists adopt a multi-disciplinary and holistic approach to treatment, and harness the latest innovations and technology for the best medical care possible.

As an academic healthcare institution, the Hospital has adopted a culture of innovation as it strives for world-class clinical leadership. KKH also aims to provide a pleasant hospital experience – one where patients receive seamless service and enjoy the warmth of compassionate care in a healing environment.

The KKH Department of Child Development (DCD) with its multi-disciplinary team of paediatricians, psychologists and therapists seeks to deliver integrated holistic services with compassion, to children with developmental needs, supported by clinical excellence, education and innovation. DCD sees about 1800 children annually through the Child Development Programme, MOH.

KKH DCD is part of the Child Development Programme (CDP) established by MOH since 1991, and CDP provides children with mild-moderate disability with the appropriate initial diagnosis and extensive medical intervention at the critical period of 0-6 years of age followed by ongoing therapeutic support that would enable them to function in the mainstream environment.

About People's Action Party Community Foundation

The People's Action Party Community Foundation (PCF) was established in 1986 as a non-political charitable organisation which runs social, educational and welfare programmes and activities for the community. Its mission is to enhance the well-being of the community, by providing quality educational services at affordable cost, as well as through welfare and community services.

PCF focuses on pre-school education and it now has more than 300 kindergartens, student care centres and child care centres strategically located throughout the island to serve the needs of the community. As the leading provider of pre-school education, PCF continually seeks to improve its standards by staffing centres with better qualified teachers, offering diverse learning programmes, improving the curricula and facilities, while keeping fees affordable to ensure that every Singapore child has access to good pre-school education.

Recognising that some preschoolers may need learning support or early intervention programmes for their developmental needs, PCF HQ has established a small team of Social Workers and Learning Support Coaches to provide first level support to teachers, parents and children requiring interim services while children and families wait for specialist services.

For media enquiries, contact:

Lien Foundation

Genevieve Kuek
Qeren Communications
gen@qeren.biz
Tel: +65 97633110

Joanne Lee
Qeren Communications
Joanne@qeren.biz
Tel: +65 90027696

KKH

Ichha Oberoi
Ichha.Oberoi@kkh.com.sg
Tel: +65 63942016

PCF

Raymond Pang
Raymond.PangWM@pcf.org.sg
Tel: +65 62444764
+65 96935710

MISSION: I'M POSSIBLE

Mission: I'mPossible is an early detection and intervention programme to help preschoolers with developmental needs. It has a distinctive integrated, community-based and family-focused approach.

The Lien Foundation spearheaded the MIP programme for preschoolers in close collaboration with the KK Women's and Children's Hospital Department of Child Development (KKH-DCD) and PAP Community Foundation (PCF).

This programme is the first of its kind that screens, flags out and addresses the needs of preschoolers with developmental needs in mainstream preschools. MIP not only provides screening and therapy but also equips preschool teachers with the right skills to help these children.

The MIP is a three-year community programme that seeks to:

- a) Provide early detection, intervention and support services to preschoolers with developmental needs**
- b) Boost capabilities in pre-school sector**
- c) Conduct Research**

How does MIP work?

Preschoolers under the MIP will attend ten therapy sessions. To adequately address the child's developmental needs, each child undergoes a maximum of two out of the three types of therapy available: 1) Learning support, 2) Speech and Language and 3) Occupational Therapy.

Programme goals are customised according to the developmental needs of each child.

For the convenience of the child and parents, therapy sessions are held during school hours and within the preschool. This reduces dropout rates and enables better teacher-parent collaboration. A multi-disciplinary clinical team, based in the community, work hand-in-hand with the preschool teachers and LSEs to support the child's development.

Additionally, costs are kept affordable and financial assistance is available for those in need.

For more details, please refer to the MIP Walk-Through.

Benefits of MIP:

Timely detection and intervention

1. Early detection and one-on-one early intervention therapy support produces optimal outcomes for preschoolers with developmental needs. It also greatly improves their primary school readiness.

Right-siting

2. MIP's community-based model brings specialist care to the preschool, providing therapy and educational support in the most appropriate and inclusive environment for preschoolers with developmental needs.

Better training and knowledge

3. Trained preschool teachers and enlightened parents can make a difference in the lives of children with developmental needs, helping them learn and stay in mainstream education.

Affordable and accessible to all

4. Therapy sessions are heavily subsidised to ensure it remains affordable and accessible. MIP financial assistance from the Lien Foundation grant is also available to families in need.

MIP AT A GLANCE

As at July 2010

1.	Started	July 2009
2.	Where	22 PCF centres Punggol-Pasir Ris GRC
3.	PCF K2 enrolment in 2010	1530
4.	Number of preschoolers screened by MIP	980
5.	Number of preschoolers undergoing/undergone therapy	92
6.	Cost to parents for one MIP therapy cycle of 10 sessions	\$300
7.	Percentage of K1 & K2 teachers undergone MIP training and trained to conduct MIP classroom screening	Over 70%
8.	Number of LSEds	3
9.	Projected number of MIP beneficiaries by 2012	Preschoolers to be screened: 4000 Number of recipients of MIP therapy, LSEd in-class support and family support: 1100 preschoolers and their families Teachers trained under MIP: All K1 & K2 teachers
10.	Lien Foundation's three-year commitment for MIP	\$2.5 million About 60% goes to manpower costs, and the rest to: MIP subsidies to families, scholarships, research, and other start-up costs.

MISSION: I'M POSSIBLE

Case Study of MIP Programme Participant

Allan (not his real name), Age 5, K2

"Come, Allan, your MIP teacher is here", said Allan's class teacher. And she took him by his hand, leading him out of the class door. With his head hung low and dragging his feet, a forlorn Allan allowed himself to be led out the door. Once outside, he refused to move and pressed himself against the wall. He burst out crying and uttered not a word.

That was Senior Learning Support Facilitator, Jenny's, first meeting with Allan. Allan was selected for the Mission I'mPossible (MIP) programme because of his teacher's concern about his passiveness in class and poor reading skills. Allan was not participating in class discussions, and hardly interacted with his classmates. He also gave only minimal responses to his teachers. *"We don't play with him because he doesn't want to play or talk to us",* were the constant refrains from Allan's classmates. He could not name all the alphabets and letter sounds, and could not write the alphabets well.

So Jenny's first priority was to build up rapport with Allan. Otherwise, Allan could continue to "build a wall around himself" and any intervention efforts would be futile if he was not willing to be engaged. To coax him out of his shell, Jenny often persuaded him, *"Okay, tell me what you want and I will listen to you".* This constant reassurance bridged the gap and in a short time, Allan was communicating spontaneously with Jenny and the therapy went on smoothly. The kindergarten's principal commented, *"I've never seen Allan like this, talking so much and he's even excited about the therapy sessions."*

As a result of the MIP therapy sessions, Allan began to feel that he had more control over his circumstances and this boosted his self-esteem. He became more confident and responded well during his literacy assessments. In Allan's case, he actually knew all the 26 alphabets. It was his unwillingness to respond that got in the way, rather than a lack of ability.

Once settled into the MIP therapy sessions, Allan learnt at a fast pace – he picked up letter sounds, read simple sight words, and wrote the alphabets and short sentences with proper punctuation. His progress was boosted by his family's support. They earnestly completed the MIP Home Program with him, which comprised worksheets and activities to reinforce the concepts he had learnt during the therapy.

Jenny also organised educational games in Allan's class. He started playing with the classmate he was most comfortable with, and later progressed to group activities. These games were carefully chosen to challenge Allan's reading level and to give him opportunity to experience success. Allan's teacher was also taught how to implement the games, so that she could facilitate his interaction with his peers.

"Hey, I want the scissors", said Allan to four other classmates as they worked together on a project. The once quiet child now bubbled with enthusiasm as he interacted with his classmates. "I paste the cow, then I paste the dog. You paste the cat, ok? ...Why you write 'b-o-g'. It's 'd-o-g', not 'b-o-g'".

MIP Walk-Through

