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The Director
General Purpose Standing Committee No. 2
Parliament House
Macquarie St
Sydney NSW 2000

Monday, 24 May 2010

INQUIRY INTO THE PROVISION OF EDUCATION TO STUDENTS WITH A DISABILITY OR SPECIAL NEEDS

Thank you for the opportunity to make amendments to the transcript and respond to questions taken on notice. Northcott makes no request to amend the transcript of the evidence we provided at the hearing on Monday 10th May 2010.

Please find enclosed our written response to the questions on notice.

In addition to Northcott's written submission and oral evidence provided at hearing, we would also like to provide the Committee with the following supplementary information:

1. **Case studies** (attached)
2. The World Health Organisation's (WHO) **International Classification of Functioning (ICF)** - Australian Institute of Health and Welfare (AIHW) Brochure (attached). Northcott recommended that allocation of funding to children with a disability should be determined by a student's functional capacity, and proposed the WHO's ICF as a best practice framework for assessment and evaluation of functional improvements in a child's achievement of participation within the home, school and community environments. The AIHW Brochure summarises the ICF and supports the use of the ICF in the Australian context.
3. **Western Australia (WA) Department of Education & Training (DET)** – Northcott's submission pointed to the WA DET as an example of good practice in certain areas. We would like to draw the Committee's attention to the WA Education Department's website (<http://www.det.wa.edu.au/inclusiveeducation/detcms/portal/>), which contains information about the department's strategies and initiatives to support inclusive education practices.

The WA education system underwent a review in relation to meeting the needs of students with disabilities, and the recommendations and actions that resulted from this review could be potential areas of learning for the NSW education system. Specifically:

- The 10 point action plan (attached) and report – *Pathways to the Future: A Report of the Review of Educational Services for Students with Disabilities in Government School (2004)*:
<http://www.det.wa.edu.au/education/disrev/finalReport.htm>
- Centre for Inclusive Schooling (information attached):
<http://www.cis.perthwa.net/>
- Building Inclusive Classrooms and Building Inclusive Schooling:
<http://www.det.wa.edu.au/inclusiveeducation/detcms/navigation/building-inclusive-learning-environments/>

Thank you for providing Northcott with the opportunity to contribute to this inquiry

Should the Committee require clarification or any further information on these issues, please contact Liz Forsyth (Manager, Service Development & Government Relations) on (02) 9890 0153 or email liz.forsyth@northcott.com.au

INQUIRY INTO THE PROVISION OF EDUCATION TO STUDENTS WITH A DISABILITY OR SPECIAL NEEDS

Question on notice – Northcott Disability Services

In response to the question on notice regarding VISTA and collaborative frameworks for inter-disciplinary teamwork:

VISTA – Vermont Interdependent Services Team Approach:

This is a comprehensive manual about how to coordinate the support services needed for a student - including speech pathology, occupational therapy and physiotherapy, special educators and other specialist services which may be needed.

The VISTA process includes four major activities:

- a. general preparation (e.g., forming a team, learning about team members' skills, getting to know the student, reading the VISTA manual),
- b. getting ready for the VISTA Meeting (e.g., determining the components of the student's educational program),
- c. having the VISTA meeting (e.g., considering potential support services as a team, evaluating suggestions based on criteria, reaching consensus on educationally necessary services), and
- d. next steps after the VISTA meeting (e.g., subgroups do more refined planning, implementing team decisions, evaluating the impact of support services) (Giangreco, 1996).

More information about VISTA can be found on The University of Vermont website: <http://www.uvm.edu/cdci/rsrp/rsrpvista.html>

VISTA has been developed by Michael Giangreco (Professor at the University of Vermont), who has published widely on inclusive education and educational curriculum planning. The Committee may be interested in accessing further information and resources from Prof. Giangreco on these issues from his website: <http://www.uvm.edu/~mgiangre/>

Northcott Disability Services

Case Studies

Inquiry into the provision of education to students with a disability or special needs

The following are case examples based on Northcott's experiences working within and alongside the education system in providing services to school aged children.

Case study 1: Aide Time

A young 5 year old with a physical disability needed to go to the toilet every 1-2 hours. She required aide time for toileting, but not for anything else in the school day. Aide time was allocated for twice a day at 20 mins. The school was unable to recruit anyone to come in for that time. This was also inadequate as she needed to go to the toilet more frequently than twice a day (related to her disability).

Case study 2: Planning a Regional High School

A regional primary school with an enrolment of two students with a spinal cord injury was being developed into a central school, with the immediate addition of Years 7-10, and possibility to be extended to Years 11-12. Declining involvement and recommendations from the students' Occupational Therapist, a lift that had been designed to take students from the ground level to the first floor was removed from the building plans, and an external ramp constructed instead. Whilst this ramp did comply with Australian Standards, it formed an environmental barrier to participation within the life of the school for these students. Being an area prone to ice and snow, the outdoor ramp (albeit covered from above) posed a risk to the students with a disability and their peers. In addition, both students were so fatigued by use of this ramp, that they found it easier to remain upstairs and not on the playground in break times, or ate in the corridors of the building. This was a significant problem for integration and inclusion as it served to isolate the students and accentuate their disability.

Case study 3: Sensitivity

A female student returning to school following a period of home schooling after acquiring paraplegia was provided an "accessible bathroom" so that she could complete catheterisation. The demountable bathroom was a modified container that was placed in the centre of the grassed area where her male teenage peers played sport. Whilst the internal room was "accessible", there was no ramp provided to get over the 15cm lip at the door. As the school was small, there was no alternate play area for the students, and they continued to kick balls around, over and into the area where this shy young 13 year old was supposed to use the bathroom. She ended up deciding to go to the primary school next door to use the bathroom.

Case study 4: Reintegration

A 17 year old fractured his cervical spine and acquired quadriplegia. After 6 months in-patient rehabilitation he returned to his home town and decided to complete his education. The school determined that he should use the space within the separate bathroom currently designated for a support unit for students with moderate intellectual disabilities. This was a long way away from where his classes and his peers' bathrooms were located. In addition, the bathroom for the students with intellectual disabilities was a large open plan room with space for 2-3 students to go to the toilet with only curtains for privacy. A request was made for a separate space to be converted; this was not considered. A lock on the door was requested by the student

and the Occupational Therapist to ensure that the young man was not interrupted during his catheterisation program. This request was declined, and after he had had a couple of embarrassing accidents caused by the distance to the separate unit, he decided to leave school. This school also had a ramp from the ground floor to the first floor, which the student could not propel up and did not have the strength to safely come down. There was no feedback received from the school or DET with regards to the Occupational Therapist's recommendation that a lift be installed.

Case study 5: Starting School

A young 5 year old girl with a physical disability, great determination and independence was starting school at her local primary school. Her Occupational Therapist did make particular recommendations about this student's specific needs; however, these were not implemented. This student was very capable and independent, but the modifications that followed were designed to the Australian Standards for general access, not the Standards for Children. Long ramps were installed that she was unable to safely traverse – these were uncovered and frequently collected water and leaves. In addition, she was not strong enough to push up such a long steep ramp, and coming down she was unable to control her speed.

A larger than standard height toilet was installed in a previous store cupboard, with a heavy fire door and a sink that she couldn't reach her hands into or turn on the taps. At home this young girl was able to go to the toilet independently. At school she was unable to open the door into the bathroom, turn on the light, transfer onto the toilet, turn on the taps or wash her hands. She was being lifted onto the toilet by a teacher's aide. The Occupational Therapist strongly recommended that this situation be remedied to allow the student to be independent and remove the OH&S risk; however, these recommendations were not implemented.

Case study 6: Which classroom?

A student in a powered wheelchair with a ventilator was having difficulty entering and exiting the small lift with the carer required to be with her in case the ventilator failed. It was recommended that for the OH&S of the carer, the comfort of the student and for fire safety that this student's class be located downstairs. Despite these recommendations, for the following year, the student's class continued to be timetabled in an upstairs classroom.

Case study 7: Transition to High School

An example of a complex case is a girl with cerebral palsy, who required long term intervention to be able to access her curriculum and to communicate successfully. She moved from her hearing support class in a primary school to a hearing support class in a regular high school.

She was an unusual student for a hearing support class, as she had a physical disability. She had athetoid cerebral palsy, a binaural severe hearing loss and a visual impairment. She was short sighted and wore glasses. She was able to drive her power wheelchair, using a joystick. Developmental assessment indicated that her cognitive skills were within the average range. She had no speech and had eating and drinking difficulties, due to her physical disability.

Communication

After a long period of trying out different communication systems, the most successful was using Auslan signs. Her signs were physical approximations, which could be understood by familiar people. She was always highly motivated to communicate. It was felt that she would have most chance of success to learn and participate in a classroom where signing was used. This has been very important to enable her learning and language development and the school has been wonderful in accommodating this student.

A multi-level communication book was developed to supplement her unaided communication. An electronic voice output communication aid was recommended, after assessment by an assistive technology service, involving a process of trialling devices. There was a long delay in funding for this device and then a long process to set it up and to provide support to family and staff in how to program and support this student to use this device. The work on communication was aimed at providing this student with means to communicate with the wider community once she has left school.

There were ongoing difficulties with programming of this student's communication device, as this required access to a computer with adequate memory for updating the programming. The computer the School's Support Unit had was too old and slow. This was a barrier to efficient use of the teacher and speech pathologist's time and slowed progress significantly.

Curriculum Access

This student had appropriate computer equipment set up at her primary school, involving special switches to enable her to access specialised software programs. The process to set this up took a lot of time and effort. However, when she moved to high school the equipment needed to stay at the primary school.

The high school spent two years (Years 7&8) trying to obtain funding and support through DET to obtain the recommended equipment again, so that this student could access her curriculum, to enable her to write and use software programs that would make it easier for her to do her academic work. Eventually the money was provided at the end of Year 8. There was a need to purchase the equipment in a hurry, before her needs could be reassessed properly by her assistive technology team. This meant that some of the equipment purchased was not suitable. There was a need to do further assistive technology assessment and prescribe the equipment more accurately in Term 1 of the following year.

Overall, staff were very helpful and worked very hard to try to make things work, but there were delays and difficulties which could have been avoided if DET was better set up to cater to the needs of students with physical disabilities and complex needs.

ICF and Australian national data standards

Quality data are needed for a wide range of purposes in the health and community services fields. The basis of good data is well-defined data items. The ICF provides a framework to support the development of quality data items on functioning and disability and improve data reliability between administrative and population data collections.

National data dictionaries are crucial for achieving quality and consistency in national data. They provide a menu of standard data elements from which minimum data sets can be developed. The development and revision of data definitions involves consultation with national information experts and data committees such as the Advisory Committee on Australian and International Disability Data and the National Community Services Data Committee. A set of 15 disability data items based on the ICF are now in the National Community Services Data Dictionary and are being proposed for inclusion in the National Health Data Dictionary.

Consistency across administrative and population data collections is crucial for the development of meaningful policy and appropriate service delivery. Administrative data are more powerful when they are comparable across time, location, and service program areas. Similarly, when statistics produced from administrative sources are comparable with those from surveys and censuses, information on the needs and characteristics of particular population groups can be related to information on relevant service programs.

Achievements and applications of the

ICF in Australia

- Improved consistency of data relating to support needs for people with disability between:
 - Australian Bureau of Statistics
 - Survey of Disability, Ageing and Carers
 - Commonwealth-State/Territory Disability Agreement National Minimum Data Set
 - The National Community Services Data Dictionary
 - 2006 Census of Population and Housing
- Use in an allied health outcome measure: Australian Therapy Outcome Measures (AusTOMS)
- Inclusion in allied health teaching curricula to assist students in their understanding of disability
- Use in Rett syndrome research to identify factors most likely to optimise quality of life of affected children
- The unification of classifications used in disability athletics
- Use in oral health measures to effectively capture adverse impacts of oral health on wellbeing

For more information:

- The WHO ICF site is at:
www3.who.int/icf/icftemplate.cfm
- The ICF Australian user guide:
www.aihw.gov.au/disability/icf/index.html
- The National Community Services Data Dictionary Knowledgebase online:
<http://www.aihw.gov.au/knowledgebase/index.html>

Introduction to the International Classification of Functioning, Disability and Health (ICF)



The collaborating centre for the WHO Family of
International Classifications in Australia



Australian Government
Australian Institute of Health and Welfare

What is the ICF?

The International Classification of Functioning, Disability and Health (ICF) has been developed by the World Health Organization (WHO) for use in describing functioning and disability. In May 2001, the World Health Assembly endorsed the ICF.

The ICF is now recognised as a reference member of the World Health Organization Family of International Classifications, and complementary to the International Classification of Diseases and Related Health Problems (ICD). The ICF is also a member of the Australian Family of Health and Related Classifications.

Components of the ICF

The ICF defines functioning and disability as multi-dimensional concepts, relating to:

- The body functions and structures of people;
- The activities people do and the life areas in which they participate; and
- The factors in their environment that affect these experiences.

For each of these components, the ICF provides a hierarchy of classifications and codes. In the ICF, a person's functioning or disability is conceived as a dynamic interaction between health conditions and environmental and personal factors (Fig 1.1).

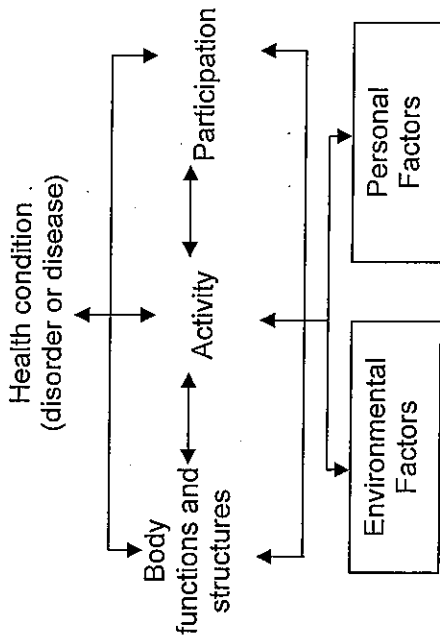


Figure 1.1: Interactions between components of the ICF
Source: WHO 2001, International Classification of Functioning, Disability and Health

Value of using the ICF in Australia

The ICF provides a common framework and language to support the development of better policies and services to meet the needs of people with a disability. The ICF:

- combines the major models of disability, recognising the role of environmental factors in the creation of disability and the importance of participation as a desired outcome, as well as the underlying health conditions;
- is in tune with current trends towards a greater focus on long-term health and functional outcomes in the health and community services fields;
- presents an overarching conceptual framework for the development and analysis of 'joined up data' to support whole-of-government policies;
- incorporates key concepts from a wide range of fields relating to human functioning, and offers an extensive 'menu' from which suitable topics can be selected for the design of information systems, or for targeted clinical or research applications; and
- provides detailed, hierarchical sets of codes to assist in the collection of data.

Definitions of components

Body functions are the physiological functions of body systems (including psychological functions).

Body structures are anatomical parts of the body, such as organs, limbs and their components.

Impairments are problems in body function and structure, such as significant deviation or loss.

Activity is the execution of a task or action by an individual.

Participation is involvement in a life situation.

Activity limitations are difficulties an individual may have in performing activities.

Participation restrictions are problems an individual may experience in involvement in life situations.

Environmental factors make up the physical, social and attitudinal environment in which people live and conduct their lives.

1. Additional targeted support for students with disabilities and diverse learning needs to benefit from improved school support, up to 200 FTE

- Allocate an additional 38.5 FTE to schools across the state for 2007
- 188 schools receive additional FTE for a Learning Support Coordinator (LSC) in 2007

Better design and delivery of educational programs for students with disabilities and diverse learning needs

- Implement Building Inclusive Classrooms (BIC) - Professional Learning Program 2005 - 2007
- Inclusive Education Standards Directorate (IESD) contributes to an inclusive approach to curriculum, assessment and reporting
- Trial and evaluate intensive early intervention education programs for students with diverse learning needs
- Develop and communicate models of informed practice for transition
- More help and advice on hand for classroom teachers at the local school level
- Principal Consultants Inclusive Education (PCIE) provide support and advice for schools through the Building Inclusive Classrooms (BIC) strategy
- Learning Support Coordinators (LSCs) work with colleagues to plan for students with disabilities and learning difficulties
- Establish Learning Support Teams (LSTs) in all schools to provide support for students with high support needs
- Building Inclusive Classrooms (BIC) supported through professional learning provided by Statewide Specialist Services (SSS) and allied agencies

2. New designs for facilities to support a range of students

New specialist facilities in schools for students with high support needs

- Implement staged capital and minor works programs for education support schools
- Progress plans for new co-located education support schools

Improved designs for local schools to provide better access for students with disabilities

- Implement new school brief to incorporate universal access principles, adequate land acquisition, collaborative learning areas and universal access toilets for students and community members with disabilities
- Project Officer Inclusive Education to work with Facilities and Services Directorate to ensure continuity of planning for schools and facilities for a range of students with high support needs

Continued provision of education support facilities and language development centres

- Maintain and improve the range of specialist facilities in the context of flexible models for service delivery

3. Improved information and support materials for parents and teachers

Better information for parents about schools and services available to students with disabilities and diverse learning needs

- Improve information to parents and school communities provided through local initiatives and interagency partnerships
- Implement communication strategies for stakeholders in relation to the key initiatives within the Building Inclusive Schools (BIS) strategy

Information about disabilities and students with diverse learning needs, as well as professional learning for teachers available online

- Activate and update Inclusive Education Standards Directorate (IESD) website
- Redevelop the Greenhouse Learning Difficulty Literacy website, an interactive website for teachers of students with learning difficulties
- Make Professional Learning for Learning Support Coordinators (LSCs) available through the Greenhouse website

4. Improved technology support for students with disabilities and diverse learning needs

Increased budget allocation for direct provision of computer based technology for use by students with disabilities

- Implement restructure of Centre for Inclusive Schooling (CIS) online Learning Teams
- Maintain adequate stocks of standard equipment to minimise delays in delivery
- Evaluate and upgrade Vision Education Service (VES) technology and equipment for students
- Develop a communication strategy about the availability of the captioning service at Western Australian Institute for Deaf Education (WAIDE) and the necessity for schools to implement captioning on all visual resources
- An expanded technology team to support schools
- Assistive Technology Visiting Teachers to negotiate agreed outcomes with the school and parents prior to working with the student
- Provision of training for schools when complex technical solutions have been prescribed for the student
- Support the Schools Plus website through the development of case studies
- Update Inclusive Education Standards Directorate (IESD) website for documented plans and the Count Us In! package
- Evaluation of software and information to schools on new technology
- Provide Professional Learning on request from the Centre for Inclusive Schooling (CIS) Assistive Technology Team

5. Enhanced skills and improved values education for teachers and education assistants

A focus on supporting teachers and education assistants through professional learning opportunities

- Refine curriculum, assessment and reporting materials, strategies and policy in order to ensure that all students are able to demonstrate the outcomes achieved across all learning areas
- Support school communities to develop an awareness of the Count Us In! curriculum support package and develop cross sectoral links
- Provide Senior Teacher Modules for the Professional Learning Institute (PLI)
- Develop a model of coordinated service delivery aligned to Service Areas, districts and specialist teams (Principal Consultants, Team Leaders, Visiting Teachers and Support Teachers Learning Difficulties [STLDs])

A comprehensive framework for professional learning, Building Inclusive Classrooms (BIC) for teachers and education assistants focussed on building skills in the local school

- Present the Building Inclusive Classrooms (BIC) professional learning program to Learning Support Coordinators (LSCs)
- Engage in ongoing quality assurance of the Building Inclusive Classrooms (BIC) professional learning program
- Implement risk management for catch up Learning Support Coordinator (LSC) professional learning
- Establish Learning Support Teams (LSTs) in every school
- Identify and communicate effective collaborative models in the secondary context
- Develop Building Inclusive Classrooms (BIC) professional learning program with a secondary school focus
- Disseminate the Documented Plans Framework and Guidelines statewide
- Collaborate with Tertiary Institutions to ensure inclusive education principles are embedded in all courses
- Recognition and planning for diversity within Government schools as part of the Building Inclusive Schools strategy
- Disseminate the professional learning framework for education assistants
- Support training opportunities in districts for the Working in Harmony model



building inclusive schools

PATHWAYS TO THE FUTURE: BUILDING INCLUSIVE SCHOOLS
Strengthening the Capacity of School Communities to Provide Inclusive Learning Environments



DEPARTMENT OF EDUCATION AND TRAINING

6. Effective Statewide Specialist Services for students with disabilities and diverse learning needs

Increased access for students to specialist services

- Develop a communication strategy for Statewide Specialist Services (SSS)
- High specialisation teams (autism, disabilities high support, assistive technologies, speech & language, and learning difficulties) develop a sharper focus on quality assurance
- Explore options with Training for the extension of services to the post secondary sector
- Centre for Inclusive Schooling (CIS) Vision Education (MAIDE) and Hospital School Services (HSS) collaborate to provide improved coordinated services through a Service Delivery Framework
- Implement the Centre for Inclusive Schooling (CIS) Professional Learning Framework
- Improve referral processes to access services from the Centre for Inclusive Schooling (CIS)
- Place policy regarding the operations of Hospital School Services (HSS) on the website
- Explore education provision for school aged students in General Hospitals in the Perth CBD
- Publish research into Hospital School Services (HSS) collaborative models and outcomes

6. (cont) Effective Statewide Specialist Services for students with disabilities and diverse learning needs

Agreed protocols across agencies to provide coordinated services

- Develop Memoranda of Understandings (MOUs) Training and other key agencies for improved Statewide Specialist Services (SSS)
- Develop closer links with Tertiary Institutions through joint courses and accreditation
- Review service protocols for each Hospital School Department with the Health Department
- Improved speech and language services to students

All school communities have the capacity to enhance learning outcomes for students through planning for speech and language

- Develop and implement flexible models, policies and procedures to support improved educational outcomes for students K-12 with speech and language needs, including additional support in regional locations
- Review assessment procedures and protocols for access to early intervention programs in light of the re-aligned Statewide Speech and Language Service (SSLS)
- Provide a range of evidence based professional learning opportunities and support mechanisms in speech and language focusing on developing sustainable capacity of districts and school communities

7. Fairer and efficient allocation of resources for students with disabilities with disabilities will be made according to educational needs

- Continue a focus on educational programs to support requests for supplementary resources with good practice guidelines posted on the website
- Reduce by 90% the number of review applications sought
- Decrease by 80% the number of ineligible submissions in the area of intellectual disability and severe mental health
- Respond to national and international requests in relation to Schools Plus program
- Professional learning and support for school communities in carrying out educational needs assessments for students with disabilities
- Complete analysis of professional learning 2006 of current professional learning and future directions
- Complete a review of the Schools Plus website and produce a manual
- Develop professional learning in the category of severe mental health linked with risk management and extreme behaviour
- Develop professional learning for school psychologists about interpretation and ethical practice to ensure consistent assessments

8. Clearly defined standards of inclusive practice for schools and support services

Standards for schools and services to follow to ensure best practice in public schools

- Develop a framework for flexible models of service delivery for Education Support Schools
- Develop a framework for inclusive practice between Education Support Centres and their partner schools
- Develop a Standards Framework to support district directors and education support principals to achieve the outcomes of the School Review Framework, aligned to the Disability Standards for Education 2005
- Develop school self assessment tools for inclusive education cultures, policies and practices

9. Clear policies and procedures in schools

Guidelines provided to support school communities in relation to the inclusion of students with disabilities and diverse learning needs

- Develop policies, standards and processes in relation to enrolment of students with disabilities
- Attendance, Enrolment and Health Care Policies reflect the need of students with chronic long term illness and mental health needs
- Develop shared enrolment guidelines
- Audit central policies to determine compliance with the Disability Standards for Education 2005

10. Processes established to monitor the implementation of Review recommendations

Guidelines that provide monitoring, reviewing and appeal processes to ensure good management practices and evaluation of the outcomes of the Review

- Conduct Phase 1 formal evaluation of Building Inclusive Classrooms (BIC)
- Implement a review of services consistent with the Service Delivery Framework
- Develop and implement a national and international benchmarking strategy to assess the quality of Statewide Specialist Services (SSS)
- Conduct an audit of schools' application and understanding of the Disability Standards for Education 2005 using the measures for compliance
- Develop and implement the Disability Access and Inclusion Plan

LEARNING DIFFICULTIES

The Learning Difficulties Team supports district services and provides statewide professional learning developed in response to evidence based research, national policies and reports.

The services of the Learning Difficulties Team consist of whole school planning with school leadership teams to support students with appropriate programs; small group collaboration with teachers in professional learning delivered to schools and at CIS; drop-in centres for teachers to access additional assistance at district offices; and information on tools available online in the One Classroom website.

ONLINE LEARNING

The Online Learning Team coordinates the development of online communities through the various CIS teams aimed at providing educators access to relevant, evidence-based content and professional learning in relation to students with disabilities and diverse learning needs.

Online learning opportunities can be accessed through the One Classroom website at:
www.det.wa.edu.au/oneclassroom/

One Classroom contains:

- discussion forums and collaboration;
- relevant links to services and support materials; and
- professional learning activities.

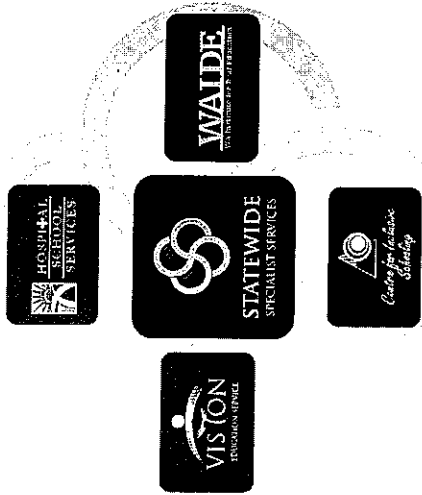
RESOURCE LIBRARY

The Resource Library provides library and information services to Department of Education staff and school based communities, including loans of research and teaching resources, and student equipment.

A collection of 16 000 titles consisting of two areas:

- educational resources and teaching materials with a focus on the special education, disabilities, curriculum differentiation, and inclusive practice; and
- items of specialised student equipment and assistive technology.

Resource Library catalogue may be accessed at:
www.cis.perthwa.net/rflb.html



STATEWIDE SPECIALIST SERVICES

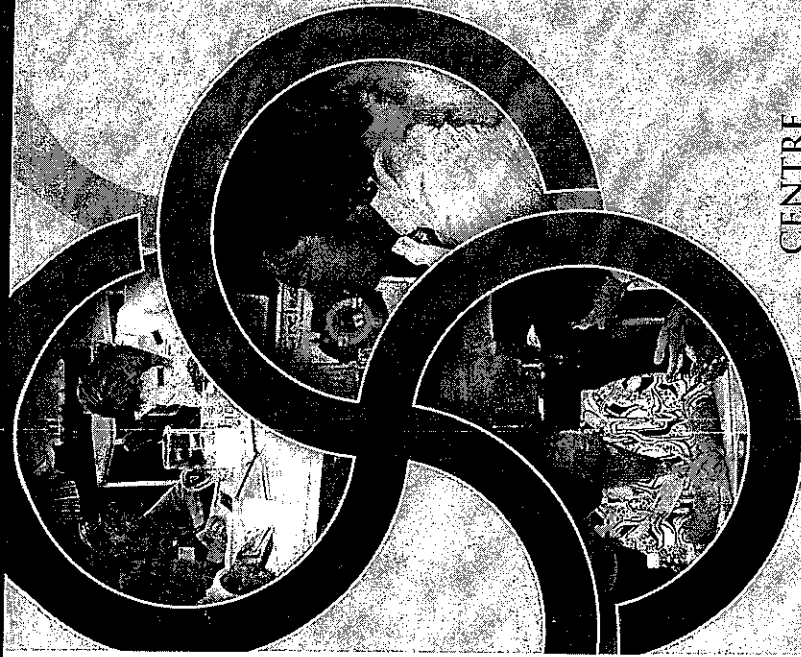
Centre for inclusive Schooling
Vision Education Service
The WA Institute for Deaf Education
Hospital School Services

CONTACT



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CENTRE FOR INCLUSIVE SCHOOLING

The Centre for Inclusive Schooling provides services to schools statewide aligned to the Classroom First strategy. The purpose of all teams of Visiting Teachers and Support Teachers is to provide practical, evidence based support that suits the local context. Our mission is to support school communities to engage in more effective whole school planning in literacy and numeracy for students with learning difficulties and to achieve improved educational outcomes for students with disabilities.



CENTRE FOR INCLUSIVE SCHOOLING

The Centre for Inclusive Schooling (CIS) is an integral part of the operational arm of the Western Australian Department of Education's Student Support Programs.

The Centre for Inclusive Schooling, together with Hospital School Services, Vision Education Service and the Western Australian Institute for Deaf Education, form Statewide Specialist Services. This service provides up to date support for schools to collectively improve educational outcomes for students with disabilities and special educational needs.

The Centre for Inclusive Schooling provides:

- services to schools statewide to support students with disabilities and learning difficulties
- contextualised professional learning courses and seminars to support working in schools; and
- online discussion, research, information and resources.

An ongoing professional learning program, provides district and school based personnel with evidence based knowledge, skills and understandings needed to ensure appropriate teaching and learning adjustments for students with disabilities and learning difficulties.

DISTRICT BASED DISABILITIES TEAMS

Four metropolitan district education office based teams support teachers and school communities in relation to students on the autism spectrum, intellectual disabilities or physical disabilities. These teams also provide support for schools in country districts. Locally based Visiting Teachers have been appointed in response to need. The Visiting Teachers (Disabilities) collaborate with Learning Support Coordinators, SAER Coordinators and other key personnel to strengthen inclusive cultures. District based teams provide customised professional learning for individual teachers, groups of teachers or whole of school. The Disabilities Teams, in collaboration with the school, may refer to CIS specialist teams when additional services are required.

CIS SPECIALIST TEAMS

CIS specialist teams support the following areas: assistive technology; autism intervention; disabilities high support and learning difficulties. These teams provide specialised professional learning, consultation and direct support services to school and district education staff. These services assist schools to implement strategies that maximise educational outcomes for students with disabilities and learning difficulties.

ASSISTIVE TECHNOLOGY

The Assistive Technology Team supports the application of emerging technology for eligible students in public schools. Services are provided to address curriculum access issues due to:

- physical disability;
- autism;
- intellectual disability; and
- vision impairment.

The Team also provides software and hardware consultancy to schools. CIS provides a loan bank of hardware and software as well as professional learning in the use of assistive technologies.

Services are accessed through Visiting Teachers in district based Disabilities Teams.

AUTISM EDUCATION SERVICE

The Autism Education Service (AES) provides a comprehensive education service in the area of autism.

The AES manages the delivery of direct support, facilitates communication across all elements of autism service delivery and coordinates support for the Secondary Autism Extension Program and Early Intervention Programs (K and PP) in education support centres.

The AES also provides interagency collaboration and rural support through a designated project officer. The service provides support and advice to parents and carers to ensure they have knowledge of and are confident in the public school provision for their children.

A central focus of AES is the Autism Education Team which provides schools with intensive support in relation to individual students and a statewide professional learning program to promote and support best practice in the teaching and learning of students with autism. Services are accessed through Visiting Teachers in district based Disabilities Teams.

DISABILITIES HIGH SUPPORT

The Disabilities High Support Team provides intensive support to schools for students with disabilities who require complex adjustments to access the curriculum.

These students may include those with significant intellectual, physical or multiple disabilities with possible sensory impairments; physical disabilities or medical conditions with associated curriculum access requirements. Services are accessed through Visiting Teachers in district based Disabilities Teams.

