

Submission
No 316

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

Organisation: The Spastic Centre of NSW
Name: Mr Christopher Campbell
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**INQUIRY INTO THE PROVISION OF
EDUCATION FOR STUDENTS WITH
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**General Purpose Standing Committee No.2
Legislative Council
NSW Parliament**

Submission by

**The Spastic Centre of NSW
19 February 2010**



Overview:

Access to a quality educational system is a fundamental right and expectation of all Australians. The NSW Department of Education and Training (DET) have the legislative requirement to ensure that all school aged students receive access to an educational environment that enables them to learn, grow and participate. Students with disabilities or special needs and their respective families have the same right to expect DET to provide the necessary supports to enable an inclusive educational experience.

The provision of a quality educational system is not easily attainable in everyday circumstances. DET staff, principals and teachers are confronted with numerous challenges. These challenges relate to the everyday mainstream student population. However, when a student has additional support requirements due to their disability or special need, the educational system struggles to respond adequately. The greater the complexity of support needs the more difficult the challenge.

On occasions, the educational system does respond to the needs of students with disabilities, but other occasions, the response fails to include them in a successful learning environment. The causes of these failings are systemic and relate to a lack of resources (e.g. funding, staff expertise, equipment) compounded by existing administrative processes that are implemented inconsistently across NSW primary and secondary schools.

The Spastic Centre has been operating since 1945 and provides a range of services, including therapy, family support, accommodation and employment to almost 4000 children and adults with cerebral palsy and other disabilities. These services are provided throughout NSW from 70 locations.

Last year The Spastic Centre provided early education, therapy and family support to 1910 children and teenagers under the age of 18 years. Of these 1666 were attending primary and secondary schools operated by DET, Catholic Education Office and a range of independent schools.

Due to the scope and range of services provided by The Spastic Centre, our early education and allied health staff are in an advantageous position to observe and interact with the education system in schools (mainstream and special) in all regions (metropolitan, regional and rural) across NSW. As a result of this experience, The Spastic Centre is able to highlight the issues that could assist in the improvement of educational opportunities for students with disabilities.

The core expertise of The Spastic Centre staff is responding to the variable and complex needs of children with physical and multiple disabilities. We provide therapy services to children on the full range of functional ability (i.e. GMFCS 1-5). Our areas of expertise are primarily with children with motor and communication disabilities. Due to the degree of their cerebral palsy the students may also experience a level of cognitive impairment and/or executive functioning. For the purpose of this submission, The Spastic Centre does not hold itself as having expertise in the core areas of intellectual disability and/or conduct disorder. There are more appropriate organisations that could comment with greater accuracy on support needs of these students.

Terms of Reference:

1. *The nature, level and adequacy of funding for the education of children with a disability*

On one level it is difficult to comment on this term of reference as the quantum of funding available to students with a disability or special needs is difficult to quantify. The Spastic Centre staff report a variable response by school within and between regions regarding enrolment processes, level of support and engagement by staff and principals. As a consequence, parents who communicate with each other can experience a range of responses from positive to negative. This consequently generates frustration. The frustration experienced by students with disabilities, their families and staff of external agencies occurs at critical points, such as enrolment to transition to high school, classroom support needs and educational plans, and access to equipment for curriculum and participation in general school activities.

From The Spastic Centre's perspective there are insufficient funds within the DET system to support students with disabilities, in particular students with significant and complex physical and communication needs.

At each of these 'touch points' the experience can be advantageous or detrimental to the learning of the student. Access to funding for support staff, equipment and physical modifications can lead to positive experience for the student, family and school.

However lack of access to funding and inconsistent and variable administrative processes have resulted in less than satisfactory experiences for a significant number of families.

Given their range of direct and indirect sources of funding within the education system it is not possible to make a comment on the relative adequacy of funding compared with other state and international programs.

2. *Best practice approaches in determining the allocation of funding to children with a disability, particularly whether allocation should be focused on a student's functioning capacity rather than their disability.*

The Spastic Centre does not believe it has the appropriate knowledge to provide an analysis of interstate or international comparisons of "best practice". However it is aware that in Queensland the Education Department employs its own therapist to assist teachers and principals to support students. This appears to enhance their engagement and integration.

The Spastic Centre would agree that resources should be focussed on the functional abilities of the students as these abilities will vary between students. An example is a student with cerebral palsy may be unable to verbally communicate, however have the cognitive ability to engage in the curriculum. The resources could focus on augmentative assistive communication and technology for the student and training in its application for the teachers and support staff. Within the broad classification of a disability type there will be a range of ability and functioning amongst the students.

3. *The level and adequacy of current special education places within the education system.*

The Spastic Centre acknowledges the attempt by DET to focus support services to students through the recently released "School Learning Support Program". It is hoped by providing additional support and flexible responsiveness to the school principal will result in a more responsive the learning environment for students.

There is concern regarding students who have high physical support needs not having access to both physical care and teacher's aide support to access the curriculum.

There is also concern that students with complex physical and communication requirements will be excluded from mainstream school options in favour of special schools or support classes within local schools. Parents and students should be given the choice within their local areas between the different options

Parents of a child who requires physical support to participate within the school environment they may opt for a special school or support class as they may be concerned that a mainstream school will not have sufficient resources and/or modified accessible environment to accommodate their child. It is the view of The Spastic Centre that the choice of school should not be based on the issue of appropriate support being or not being available at their school of choice.

4. *The adequacy of current special education places within the education system.*

Parents need the reassurance that an appropriate support system will be established and maintained within the educational system of their choice. The availability and predictability of an integrated support system within the mainstream setting is essential to good learning outcomes. In conjunction with this, the school needs to proactively engage the student and parents in the establishment of this support system. The Spastic Centre has numerous examples where mainstream local schools have not successfully engaged parents in negotiating the necessary support system for their son/daughter. Equally there are numerous examples where school staff, parents and external agencies has developed positive and responsive support systems that have resulted in an integrated participation learning environment. The level of funding and its planned coordination can influence the success of an integrated support system.

5. *The provision of a suitable curriculum for intellectually disabled and conduct disordered students.*

As mentioned, The Spastic Centre's expertise is within the domain of cerebral palsy and other like disabilities.

The Spastic Centre has awareness and understanding of the needs of students with an intellectual disability or conduct disorder, it does not feel confident to comment on what the functional support needs of these students are and how a support system is



developed to promote access to the curriculum and the development of a successful learning environment.

There are more knowledgeable and appropriate agencies that can provide accurate responses to this term of reference.

6. *Student and family access to professional support and services, such as speech therapy, occupational therapy, physiotherapy and school counsellors.*

This term of reference is the most relevant and critical within the relationship between the student, parents and school staff. It is also the area which The Spastic Centre is heavily involved.

The Spastic Centre is the third largest employer of allied health professionals, (occupational therapists, speech pathologists, physiotherapists, social workers and psychologists), behind Department of Health and Ageing Disability and Home Care (ADHC).

The annual Spastic Centre budget for therapy for children and family support is over \$11 million. The majority of funding is derived from ADHC with The Spastic Centre contributing over \$4 million (30%) from its discretionary fundraising activities each year.

Annually DET contributes \$242, 564 which is 2% of the annual budget. Based on the number of school age children seen in 2008/2009 (i.e. 1666) this equates to \$145 per student or approximately 2 hours of support per student per year.

The contribution of The Spastic Centre's staff time with students within schools far exceeds the current financial contribution provided by DET. Our staff are actively involved in a range of activities to support families and students. Our staff are also involved in a range of activities that would be deemed the responsibility of DET to perform to meet their own internal process and administrative proceedings.

These include:

- Functional reports in preparation for transition to primary and high school
- Reports to support access to school based support (e.g. teachers aid, personal care support)
- Reports for appropriate equipment (e.g. mobility, hoists, classroom aids, assistive technology, augmentative communication)
- Psychology reports for cognitive and behavioural functioning
- Recommendations for school modifications, including the provision of draft structural plans
- Request for training DET staff in the application of equipment
- Recurrent requests for staff training due to staff turnover
- Recommendations for solutions to access the curriculum

The staff at The Spastic Centre respond to these requests to ensure the students are not disadvantaged while in the classroom and school environment. However there are many areas where the investment of therapy time is wasted or becomes ineffective.

These situations include:

- Reports being provided to schools and then ignored or challenged by DET staff who are not qualified
- Spastic Centre staff being asked to advocate on behalf of parents/students due to the non implementation of report recommendations and the failure of the school to implement recommendations.
- Spastic Centre staff being asked to “Project Manage” building modifications at schools
- Recurring training of DET staff on mobility, transfer and equipment applications for individual students
- Expectations of schools to respond to their time frames when allied health staff have waiting lists for priority issues that are non school related
- Poor communication and coordination systems between school and parents
- Inconsistent implementation processes/procedures between schools and DET Regions on DET Policy
- Students not be able to access equipment (e.g. computers, communication aids) outside of school environment

In response to the range of requests from schools and parents, The Spastic Centre has developed a position paper outlining the responsibilities of the various stake holders (DET, Parents and Spastic Centre staff). This was presented to central office of DET and communicated to parents. The initiative was to provide a framework based on clear expectations and actions.

From the perspective of parents and students it is essential for allied health professionals to provide a coordinated response which is necessary in developing an effective support system. It is also critical that the plan is engaged by the school.

If this coordination between the stakeholders is difficult to achieve and maintain then an alternative system could be the direct employment of allied health professionals within the DET system.

7. *The provision of adequate teaching training, both in terms of pre-service and ongoing professional training.*

The Spastic Centre recognises the challenge of maintaining knowledge and expertise in the additional support needs of students with disabilities. It also respects the challenge of the legislative requirements that DET has to provide appropriate support to these students. As an employer DET is required to provide training in the essential skills required of staff to perform there essential duties.

The Spastic centre has continued to provide training to DET staff on the needs of the children with cerebral palsy because it is important to meet to the needs of the child.

DET should make additional funding available that helps maintain the skills of staff.



Suggestions for Improvement:

1. DET should review its current policies and procedures to identify opportunities to reduce administrative inconsistencies between DET regions.
2. Provide transparency of all funding available for students with special needs and disabilities.
3. DET to undertake research into the "best practice" support systems available to students with disabilities and special needs nationally and internationally.
4. Develop case study examples of successful integration of students with complex needs within mainstream schools. Identify characteristics that enabled the successful outcomes to occur. Promote and implement these characteristics throughout the DET school system.
5. DET to review its processes/procedures to ensure that access to allied health staff from external agencies is maximised and effective
6. DET to consider employing internal therapists to assist with internal training and professional advice on school modifications for students.
7. DET to engage in negotiations with Enable (Dept of health) to identify methods of funding equipment that can be used by students across the whole day and their whole of life activities.

Conclusion

It is the belief that DET has a challenging role to play in the development of an educational environment for students with disabilities and special needs. However as a government organisation it is legislated to respond to these needs. It needs to commit resources and their energies to ensure that this student population has access to a quality education system, similar to their able-bodied peers.

The Spastic Centre would strongly support an increase in funding to ensure students have an education support system that is proactive, reliable and predictable.

The Spastic Centre will also continue to work collaboratively with DET to identify solutions to the issues raised in this report.

A handwritten signature in black ink that reads "R White". The signature is written in a cursive, slightly slanted style.

Rob white
Chief Executive Officer
The Spastic Centre