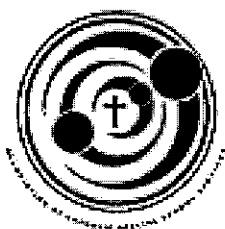


Submission
No 206

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

Organisation: Association of Catholic Special School Services

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Association of Catholic Special School Services

Submission to the NSW Legislative Council's Enquiry

The Provision of Education to Children with a Disability or Special Needs

On behalf of the Association of Catholic Special Schools and Services, NSW

About the Association of Catholic Special Schools and Services (ACSSS)

The Association represents 7 Catholic Special Schools with a total enrolment of 430 school age students with a range of disabilities and disorders, including sensory impairment (vision and hearing), intellectual disability, mental health disorders and conduct disorder. The seven schools have each been founded by a religious order of the Catholic Church and share a long history of providing for children who for many years were excluded from any educational provision at all, before the NSW Government acknowledged the educability of children with disabilities. 6 of the 7 schools are located in Sydney, although some provide an outreach to children with special needs in remote areas of NSW. Although Catholic in commitment, the 7 schools enroll children of all faiths and none. Some students travel long distances to receive the education offered by the schools because they have not been able to obtain the same quality of education in any other institution. The Association comprises the Principals of the 7 schools who together endorse this submission.

Funding of the Catholic Special Schools

- (i) Recurrent Funding: each school is funded for the purpose of recurrent grants from Commonwealth and State at the highest rate available to non-government schools, viz. 70% of the cost of educating a student in a Government school. **It is our submission that this should be 70% of the cost of educating a student in a Government Special School.**
- (ii) Most students are also eligible to receive Student With Disability grants from the Commonwealth and State Governments. In the two schools which provide for young people who have been suspended or expelled from all their other schools, including Government Behaviour Units, only some students receive SWD funding.
- (iii) In the five schools that provide for students with intellectual disability and autism and sensory impairment, a proportion of students also receive a

- Supervisor's Subsidy from the NSW Government, for which the criterion is a moderate intellectual disability or autism.
- (iv) The 7 schools also receive a proportion of Commonwealth funding under the category of 'targeted funding' which is distributed by the Catholic Education Commission. This funding was cut without notice in 2009, with reductions of up to \$90,000 in each of the schools' funding.
 - (v) One of the schools, Boys Town, is funded in part by contracts with the Department of Community Services
 - (vi) Fees in those of the 7 schools that charge fees, are benchmarked to the systemic Catholic schools, a relatively low charge designed to ensure no child misses out on an education for financial reasons. Fees are not charged to low income families. This policy is based on recognition that parents of students with disabilities have many other expenses that mainstream parents do not.

Operating Costs

Education of students whose disabilities warrant a segregated environment is costly because of the high adult to student ratio (3:1 or 2:1) and because these small schools suffer diseconomies of scale. School staff include professional therapists (psychologists, speech and occupational therapists, social workers) as well as trained aides to assist the teachers. Duty of care and legal precedent requires a minimum of two staff members in each class. Professional training is intensive, including annual mandatory training in professional response to assault, first aid and CPR, child protection, and specialist training in augmentative communication, sensory disabilities, Braille and so on.

Deficits

Each of the 7 schools incurs an annual operating deficit of between \$200,000 and \$600,000 which is covered by fundraising, grant applications, donations, bequests and income from investments where available. When the Commonwealth targeted funds were cut without notice, some schools were obliged to cut programmes because it was not possible to carry an increased deficit.

What the Catholic Special Schools provide

1. Parental Choice
2. Professional specialized therapies
3. Inclusion opportunities through partnerships with mainstream schools
4. Acceptance of students who are rejected by other schools
5. Concentration of expertise which can be made available to mainstream schools
6. Innovative programmes
7. Individualisation of the curriculum
8. A community of belonging
9. Family support
10. Advocacy for students and parents
11. Preparation for work programmes and introductions to potential employers
12. Catholic education for those who seek it

Trends

1. Significant growth in numbers

The number of students seeking a place in the Catholic special schools has increased steadily over the past 20 years. Total enrolments in the 7 schools is double that of 10 years ago and the demand for places is growing.

2. Significant rise in the level of disability of students enrolled

As mainstream schools become better able to enroll children with disabilities, those seeking a place in a special school present with increasingly severe disabilities that include high physical care needs as well as challenging behaviour.

3. Rise in students presenting with autism and behaviour problems

This rise has been very noticeable in the past 7 years. As organizations with long experience in disabilities, we are confident in describing this as an increase in incidence not just in diagnosis.

4. Growth in research-based expertise and specially trained staff

5. Partnerships with mainstream schools and community organisations

6. Outreach to rural and remote schools and students

Terms of Reference: discussion

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

The nature and level of funding has been dealt with above to some extent.

We would draw to your attention to

- the economy of providing therapy and other specialist support on one site and of garnering expertise in, and sharing it from, specialist schools; and
- secondly, the high infrastructure costs of special schools.

It is essential that proposals that aim to *fund the child 'regardless of setting'* take into account the infrastructure costs of necessarily small special schools that do not have a more economical mainstream school to support them administratively and financially.

The cost of administration is much higher in schools for children with special needs because of the level of parental support required, the incidence of children at risk requiring intervention and referrals, and the extra medical support needed in schools where approximately half the students may be on medication and/or health alerts for seizures or other emergencies. What is an exception for mainstream schools is a regular occurrence in special schools.

The level of supervision in the classroom and also in the playground is much higher than in mainstream schools because in a special school all the students have difficulties with self-control and impulse-control and are less able to protect themselves from others' challenging behaviour than in a mainstream setting.

Maintenance is more costly in special schools, relative to their size, because of the high security needs, the incidence of students tampering with equipment, and the higher level of sophisticated equipment required.

Reporting is considerably more onerous and hence more costly than in mainstream schools because of the Individual Profile requirements, the grant applications and the child protection requirements.

Special schools rely a lot on volunteers to supplement their staff. Recruitment and supervision of volunteers working with children with special needs is another significant cost.

Small schools such as special schools still have to meet all the compliance requirements, provide all the services including maintenance of grounds and equipment, and meet all accounting, Board of Studies and other obligations under the legislative frames that pertain to schools, but with a very small student body to financially support (through fees and funding) the infrastructure required.

Any funding model that is used must take into account the extra costs of running a special school, in addition to the costs of providing for children with varying special needs or disabilities. The small special schools make mainstream schools workable. Mainstream schools would not cope if they had to accept the students 430 who are enrolled in the seven Catholic schools, especially as many have a succession of previous failures in the mainstream.

Our experience has often been that mainstream schools are challenged by those students we integrate into mainstream. Those that return to mainstream tend to be our most socially adept students. We frequently accept students who have been asked to leave by their mainstream Government or Catholic schools, or who have been refused enrolment because they present too many challenges. The current funding is not meeting the costs of special schools. Eventually the struggle to cover the deficit in operations each year becomes too much and the school closes, as has happened with the Early Intervention Centre at St Gabriel's and is shortly to happen with Kingsdene. NSW cannot afford to lose its non-government special schools.

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

There are certain needs that tend to cluster in incidence and degree with specific disabilities. For example:

- (i) Children with language disabilities such as dyspraxia need intensive language programmes and may need voice output devices, picture exchange communication or Makaton
- (ii) blind children require instruction in Braille and/or assistive technology in order to read
- (iii) children blind from birth or infancy require concept development programmes in order to understand the world
- (iv) children who are hearing impaired from birth require specialised intensive language programmes and may use signing
- (v) Down Syndrome children are said to read best by learning sight words rather than decoding instruction
- (vi) Down Syndrome children have a higher than average tendency to escape
- (vii) Children with Prader Willi syndrome have to be protected from their drive to eat, which leads to stealing food etc.

- (viii) Children on the autistic spectrum generally require predictable routines, use of visual schedules and specialised sensory programmes
- (ix) Children with moderate to severe intellectual disability have high personal care needs including toileting, that may continue into their adult years.
- (x) Children with cerebral palsy, physical mobility challenges or motor problems may need wheelchair access, regular tube feeding, monitoring of sugar levels etc.
- (xi) Children with behaviour disorder are more likely to need psychotherapy or counselling, or social worker support, depending on the cause of their behavioural issues, than other students with special needs.

The difficulty with basing funding on the disability is that every child is different, even if they have the same disability. The level of disability makes a huge difference to the level of needs. Home environment and parents' gene pool impacts on the personality and behavioural patterns of children with disabilities just as much as their able peers. The diagnosis for some syndromes such as autistic spectrum disorder throws a wide net and includes children with very varying behaviours and needs. Even a narrowly identified syndrome for which the diagnosis is based on identification of a specific chromosomal abnormality, may present differently in different children.

For these reasons, there are benefits in a funding instrument that identifies the needs of the child rather than the disability. The instrument developed by the Catholic Education Commission in NSW which has three levels of need for 5 areas: language, access to curriculum, mobility, personal care needs, safety and social development, has been well-tested and appears to measure needs of students in mainstream settings well. It has not been successfully validated for students in special schools because it does not discriminate at the high end of need.

The difficulty with funding based on the level of need is primarily the problem of objectivity, especially when funding is attached. There would have to be an on-going monitoring and verification check. Also children present differently in different contexts. We can cite several examples of a student needing very high levels of supervision (even 2 adults to 1 child) in one setting and that changing to a lower level of supervision (1 adult to 3 children) in a more appropriate setting or with a more appropriate management plan.

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

As stated above, enrolments in the Catholic special schools have doubled in the past 20 years. This has been made possible by some of the schools expanding their facilities in order to accept more students. This growth has been driven by demand. That demand for places in special schools has grown despite the huge increase in acceptance of students with disabilities in mainstream schools reflects changes in the profile and frequency of disability. The Committee of Inquiry will hear many explanations of the increase in numbers of students with disabilities. From our research, networking with international centres for disability, experience within our own schools and from interview with parents who seek places in a special school, we understand the following:

- (i) the incidence of some disabilities has reduced thanks to medical science eg. causes of blindness such as rubella and over-oxygenation of humidicribs have been eradicated
- (ii) genetic science may in time reduce the birth of children with chromosomal abnormalities
- (iii) advances in medical science can also increase the frequency of developmental defects eg. disability is more common in premature babies who now survive from an earlier age; some early research suggests a possible correlation of higher incidence of autism with IVF interventions
- (iv) some evidence is emerging that environmental chemicals may be linked to an increase in autism; this is still contested.

- (v) an increase in diagnosis, and at an earlier age, results from better medicine eg. the SWISH test for hearing impairment in babies; the move to identify autism in children under 2, contrary to previous practice
- (vi) an increase in diagnosis due to funding. It is pretty evident that Government funding for therapy for children with autism will increase, and is already increasing, diagnoses of autistic spectrum disorder. However, it must be noted that the diagnosis does not create the symptoms that lead to the autism label. The need to address presenting symptoms with essential and expensive interventions leads to the diagnosis of autism in preference to an unfunded diagnosis.
- (vii) increases in disabilities in children due to alcohol and other substance abuse by parents, especially mothers
- (viii) social breakdown and dysfunction creating home environments that are conducive to anxiety, substance abuse, violence and behavioural disorder.

The seven Catholic special schools are not able to meet the demand for places despite the expansion in the number of places we have on offer. Most of our special schools turn away many anxious parents and needy children every year. Many parents who come to us report that they were unable to obtain a place for their child in their local school. Those of our schools which seek to integrate students into mainstream are finding that mainstream schools are less willing to accept even students whom we believe are well-suited to mainstream. It appears that as the number of children with disabilities rises in each class, the teachers and Principals are becoming reluctant to take a risk with children who are more needy. It is relatively easy to place quiet, compliant children with disabilities in mainstream but there is a silent, cloaked discrimination practised against children whose disability makes their behaviour unpredictable.

4. The adequacy of integrated support services for children with a disability in mainstream settings, such as school classrooms

Most teachers and parents of children with disabilities in mainstream classrooms, in our experience, think about support in terms of the hours of additional Aide time the child's disability attracts. The disadvantages of this approach are that it tends to segregate the child with special needs from the rest of the class, with the child becoming overly-dependent on the Aide for learning and socialisation. It is essential that the class teacher takes responsibility for all children in the class including the child with special needs. The Aide is better used, in our experience, as a tutor for the more able children in the class while the teacher works with the children with learning difficulties and/or special needs. We know of many cases where the parents are required to employ an Aide at their own expense. In effect the school as well as the teacher passes responsibility for the child's additional needs on to the parents. This is not inclusion.

One of the biggest challenges for a teacher who wants to provide for the needs of all students including those with disabilities is differentiating the curriculum for such a wide range of learning levels. A very cost effective way of supporting Primary classroom teachers is to fund the NSW Board of Studies to write detailed curriculum documents, supporting documents and teaching resources for students with mild to severe disabilities. The Board of Studies has prepared some documents of this kind but they are limited in the range of student they relate to and the ambit of their coverage. (see next item)

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

At present, special schools are all having to write their own curriculum because the curriculum of the NSW Board of Studies is not appropriate for any but the most able students with disabilities. The Life Skills courses provide a very good framework for varying the NSW curriculum in subjects currently on offer for secondary school students but there needs also to be the opportunity to provide courses better adapted to students with intellectual disability, autism or conduct disorder. Many of these students do best when studying practical courses that have an obvious

relevance to their life, in which they can learn skills which will make them marketable as employees. Many are kinaesthetic learners, unsuited to mainstream classrooms that are often geared to auditory and visual learning styles. The provision whereby in the past schools could apply to have school-based courses registered as Approved Courses was of great benefit to students with a disability or special needs. The abolition of Approved Courses was designed to prevent the dumbing-down of education in low socio-economic schools. We suggest that Approved Courses be re-instated for special schools and special units.

In subjects like English, Mathematics, Science and HSIE, the Board of Studies' curriculum outcomes need to be task analysed to a high degree to become measurable for students with moderate to severe disabilities. This is currently done by each school, which is a waste of resources. We recommend that the responsibility for this be taken on by the NSW Board of Studies and that the expertise and existing curricula documents of the special schools be drawn on to ensure that the range of abilities in special schools is provided for.

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

The Catholic special schools generally employ therapists needed by their clientele, to the extent that their funding allows this. The role of these therapists and counsellors is to make the teachers or other professionals on staff more expert. It is not possible in the school context to provide individual therapy support for students. Rather the therapist or counsellor advises or assists in assessment and in developing programmes for the teacher to implement. It has been our experience in the past that DADHC has then decided that children at our schools should not receive DADHC therapy services because they are 'getting them at school'. This is wrong, because they are not getting the individual intervention that they need. It also discourages us from trying to provide therapy support because it works to the disadvantage of parents and students.

It should also be noted that many children with behaviour problems, endure problems that are not primarily educational problems. They require extensive professional support. Often this is best achieved within a multi-disciplinary setting, where education is only one, albeit important, element. To consider that broad welfare and social issues can be solved in a mainstream education setting is naïve and special schools have an important role in developing plans and professional supports from a wide range of professions and services.

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

There has been an increased emphasis by most tertiary education institutions on requiring students to undertake special education units, although some universities satisfy this with minimal gestures such as a single talk by a visiting 'expert'. In general, there is too little practical content in special education units and too little 'on the job' experience of differentiating the curriculum to provide fully for students with special needs.

Most universities require their students to do their practicum in mainstream schools unless they are specialising in 'special education'. To our knowledge, students training to be Science teachers or English teachers have been denied their request to do their practicum at one of our schools. This is particularly true of the Masters of Teaching degrees. This discrimination needs to be addressed. It is the case that teaching methods that work with children with disabilities work also with mainstream children. Education students have much to gain from a practicum in a special school.

The same applies to on-going professional development. A week in a special school would enable teachers in mainstream schools to understand and adapt to students with special needs in their classes to a degree that no amount of theoretical professional development would provide.

Submitted on behalf of the Association of Catholic Special School Services

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