Submission No 647

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

Organisation:

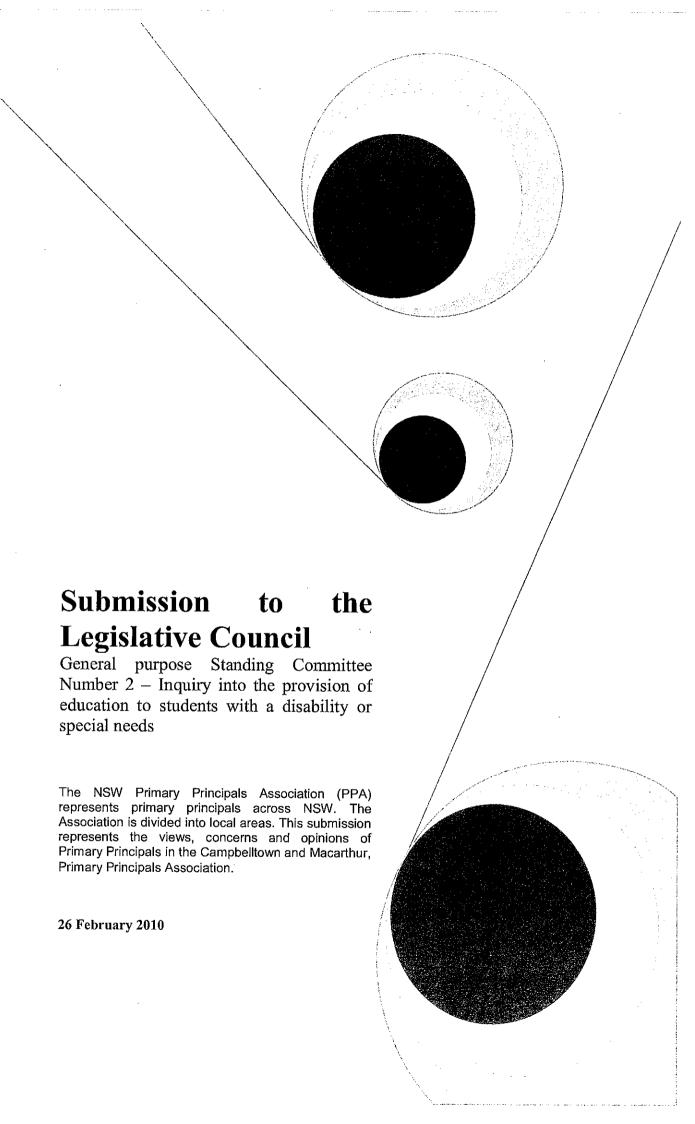
Primary Principals for Campbelltown/Macarthur .

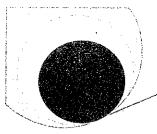
Name:

Mr Keith Wray

Date received:

2/03/2010





#### Introduction

The NSW Primary Principals Association (PPA) represents primary principals across NSW. The Association is divided into local areas. This submission represents the views, concerns and opinions of Primary Principals in the Campbelltown and Macarthur, Primary Principals Association.

This submission has the authorisation of Mr Keith Wray, President of the PPA Campbelltown Local Area.

#### Email- Keith.wrav@det.nsw.edu.au

Campbelltown and Macarthur School Education Area is located in South Western Sydney Region of the Department of Education and Training. The area is identified as a low socio economic area. The area caters for large numbers of students with wide ranging disabilities and special learning needs. The area has a range of educational facilities for students with special learning needs including

- · Juvenile Justice School for Specific Purpose.
- Schools for Specific Purpose (SSP) that caters for students with moderate and severe intellectual disabilities.
- Support units in mainstream schools; including specialised autism classes, emotionally disturbed classes and classes for students with moderate and severe intellectual disabilities.
- · Schools for Specific purpose (SSP) for behaviour disordered students.
- Schools For Specific purpose (SSPs) for students suspended from mainstream settings.

Many students in school settings, however, receive no additional funding or access to special education settings and services. They are maintained in mainstream educational settings.

Special needs learners are diverse in nature and need. The challenge remains to address educational needs based on equitable systems that target student support to access curriculum.

#### Terms of Reference

**Term of Reference One:**-The nature, level and adequacy of funding for the education of children with a disability.

**Term of Reference Two-** 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.

Term of Reference Three- The level and adequacy of current special education places within the education system

**Term of Reference Four** -The adequacy of integrated support services for children with a disability in mainstream settings, such as school classrooms

**Term of Reference Five-** The provision of a suitable curriculum for intellectually disabled and conduct disordered students

Term of Reference Six- Student and family access to professional support and services, such as speech therapy, occupational therapy, physiotherapy and school counsellors



**Terms of Reference Seven-**The provision of adequate teacher training, both in terms of pre service and ongoing professional training

#### Methodology

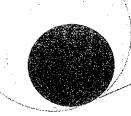
The submission was a collation of responses to the terms of reference by principals in the Campbelltown Education area. A zoomerang survey was distributed to all principals for their nominal responses. The paper contains facts, opinions, experiences, arguments and recommendations for action.

The submission responses represent issues raised from principals across the educational area of Campbelltown and Macarthur.

1.Term of Reference One: The nature, level and adequacy of funding for the education of children with a disability.

#### Themes identified

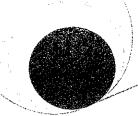
- Levels of funding for students with disabilities and special needs is inadequate to meet their educational needs. Many students with special learning needs receive no additional funding at all.
- Categories or processes used by administrators to "identify" or "label" the disability does not adequately capture level of support required by the child in the educational setting.
- Funding to improve literacy and numeracy under National Partnerships is attached to NAPLAN data. Many students in SSPs and support units are unable to access NAPLAN at all or their parents withdraw them. Thus the school has no access to National Partnership funds and other supports.
- The paperwork required by administrators to access additional funding for the child is repetitive, frustrating, depleting of time, exhaustive and generally based on inadequate time frames.
- Family dysfunction impacts on advocacy and skills that would otherwise support the child to gain access to funding and services not otherwise provided through school personnel.
- The provision of equipment for students with special needs is burdened by time delays, lack of funding and lack of access to personnel to assess and allocate equipment. Requests for property modifications can take years or never eventuate.
- Students with high order assaultive and challenging behaviours require far higher levels
  of long term ongoing staffing to implement behavioural support programs and move
  them toward engagement in meaningful curriculum.
- We operate a system as a deficit model and not a functional model. We see the
  disability rather than the functionality of the student. Determining functional needs will
  represent a significant challenge if the student is not assessed in respect to
  environmental impacts on schools, students and staff and resourced accordingly
- Secondary aged students with disabilities in SSP are funded as primary school students. Equity needs to prevail.
- There are no training and development funds allocated for School Learning Support Officers in school global budget.
- Regional allocations for flexible funding to address additional needs of special learners needs to be increased and not reliant of long processes of paperwork and allocation.



Significant disruptions to educational programs occurs when funding is not available to
put appropriate interventions is place to monitor and maintain student presenting with
significant learning challenges.

#### Submission responses

- 1. Children with disabilities are underfunded or not funded at all. Over the last two years I have completed over 20 applications to infant, adolescent mental health unit as school counsellors cannot cope with work load. The outcomes of these applications often is that the parents declines the help offered. Students at my school are struggling with violence, drug abuse, neglect and domestic violence. Many families live in caravan parks, have limited parenting skills and lack access to quality life skills. I am concerns for future generations.
- 2. Funding is often based on the diagnosis of a primary disability. Many students have secondary and multiple disabilities that are never accounted for.
- Funding does not meet the needs of students where property modifications are required. I have waited for two years for modifications to be funded. Some schools wait for years and it never occurs. The property needs of students should be funded during the placement process.
- 4. There does not appear to be a consistent sign off for physically disabled students, as evidenced at my school. The level of support for one of my students, who has severe diplegic cerebal palsy, is 2.5 hours per week. Some of my students with aspergers and challenging behaviours gain no additional funding.
- 5. The frame of reference for seeking funding is inadequate. With autism a child can be categoriesed as and A1 (autism 1) to A3. This system does not adequately indicate the needs of the student to access learning. The funding descriptors in the funding guidelines for students in mainstream schools do not allow for necessary scope to address learning needs.
- 6. Funding is inadequate and limits student's rights to access the curriculum with levels of support that are commensurate with needs. Representation to the funding committees is done through committee members who have no real contact with the student and who are restricted by categories. The child becomes a series of numbers that fit categories.
- 7. Funding applications are delayed by red tape and time frames of administrators. Educators in the mean time struggle to address need.
- 8. Students assessed as IM received no funding, but are clearly operating at an intellectual level below their peer. Students in my school with oppositional defiance disorders (ODD) are very poorly supported with little or no funding which results in behavioural impacts on the school and subsequent low levels of engaged learning.
- Categorising a student into a disability does not recognise their capacity to cope in a classroom.
- 10. As a principal of an SSP and a long term special educator, I believe, the level of global funding is inadequate. We are funded as primary schools even though 50% of our population are secondary school aged student. This eliminates our access to careers advisors, head teacher allocation and periods off, none of the secondary teacher have any periods off even though they are completing school certificate and higher school certificate. This places pressure on our global budget to provide any time to meet high school deadlines. Equity is a major issue.



- 11. I have several high levels violent and assaultive students at my school. Their levels of disability and violence requires extremely high levels of staffing (which is not available) to ensure any level of OH&S for others students and staff. I would like to offer a small case study to exemplify the inequity in funding and the philosophical challenge of inclusion for students with high order assaultive and self injurius behaviour. Student X is severely intellectually disabled, non verbal and violent towards staff and other students. She has assaulted staff up to 50 times a day. X removes faeces from her bowel and smears and consumes it. X headbutts windows till they smash. X bites, and uses reverse headbutts to assault staff. X urinates herself. She is staffed at the same ratio as any other student with a severe disability, despite a far higher need. Her access to curriculum that is meaningful to her mandates a level of support that has to be "fought" for every semester and competed with by others students across the region. The finiteness of this resource bears direct correlation with the schools capacity to cope and to implementing quality special education programs for the student. For the students to "progress", we navigate unprecedented violence, OH&S, staff welfare, policies that struggle in their application to students like this, parent contentment and the need to continue to work with the student to address challenging behaviour in order to engage them in meaningful learning. The DET policy on suspension and expulsion would effectively exclude the child from the educational setting for violence and thus the students program would never progress, not to mention the relationship with the family. The struggle to ensure a level of staffing that I believe we need to maintain her at school with a manageable level of safety is exhausting. Her needs are long term and the funding needs to reflect this. Many special educators have the skills to work with students of this level, but require flexible and long term funding to maintain the student.
- 12. Students with disabilities who are withdrawn or exempt from NAPLAN testing do not register with EMSAD or on the My School web site and thus there is no data available. Subsequently many student populations, all of whom full below any state averages, received no federal government funding. These students are the lowest performing in literacy and numeracy due to intellectual disability received no funding under National Partnership. The cohort has been missed completely.
- 13.1 have an aboriginal student with a severe intellectual disability and a severe physical disability. She is 5 and still does not have a wheelchair. She requires a walker, but does not have one. Her disability has been present since birth. How does a student arrive through a process of assessment at a school with no equipment in place and no funding tagged to meet her needs.
- 14. One principal noted-My school currently has enrolled a six year old student with cerebral palsy, a mild intellectual disability and suspected epilepsy. The student is in a wheelchair and has limited upper body strength. He is unable to toilet himself. It is unsafe to leave him without care. He is unable to move his wheelchair himself. Currently funded for four hours a day. There is no one to toilet him for the two hours a day that support is not provided, nor is there a specific staff member employed during this time to push him and ensure his safety in the school grounds. I am being asked to be creative and flexible but am unable to come up with an entirely satisfactory solution apart from partial attendance at school while support is being provided. Far too often it is up to the school to organise and chase resources. These should be provided and the onus should not be on the school to lobby for the necessary resources to meet the child's needs.
- 15. I have a newly enrolled student that left the private system because of his high level challenging behaviour and their failure to be able to manage him. He has a severe intellectual disability and autism. He head butts people and objects till his head bleeds. I have no additional funding for him. His needs where know by the placement panel that allocated him to my school. High level self injurious behaviour requires 1:1 teacher support till the behaviour can be modified and engagement in meaningful learning established.



- 16. It is not the curriculum that engages the child's, it is the child's capacity to manage their behaviour and approach that ensures the curriculum is accessible to them. The decision to own the behaviour that allows engagement is the child's. We can merely support environments, content and conditions to maximise the likelihood. Many student require high levels of staffing support to ensure we are managing those conditions effectively.
- 17. SSPs require a notional additional allocation for SLSO support to cope with immediate and emergent need i.e. a students' physiological condition changes due to tumor growth or seizures and requires immediate additional support at school. A student returning from hospitalisation may require additional support. Severely medically disabled students may require additional suctioning whilst recovering from medical issues.
- 18. Administrators, who allocate funds, use documentation in an attempt to establish need, but generally no working knowledge of the child's impact on a school or the support level required to engage the student in curriculum.
- 19. Disability confirmation sheets (DCS) and disability "labels" do not reflect level of need for educational purpose. This is a narrow frame of reference.

#### Discussion

The increase in students with special learning needs is placing increasing pressure on teachers and schools. All respondents in our survey noted concerns in relation to low levels of funding for special needs students across all settings. They noted that many students with complex needs continue to remain unfunded or funded at levels that precluded any "reasonable" level of support. Schools also noted the difficulty in employing staff when funding was provided in minute amounts.

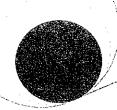
It was noted that funding is tied up in red tape, paperwork and time delays. With many schools having limited counsellor support, the burden of completing application for funding falls to principals (in the case of SSPs) and learning support teams in mainstream schools. Students with immediate needs or changing needs do not have access to support and may need to wait till funding panel meet and coordinate responses. In one instance a Year 1 student with violent and disruptive behaviours is attending school for 1 hour a day until our placement panels procedures are complete and a suitable placement in a more appropriate setting can be found. In the interim his disruption to learning of peers and to management of the school is significant.

Many students remain unlabeled or labelled incorrectly. Often the "label" becomes the focus of the entitlement to funding. Levels of support needs vary across settings and are impacted on by personnel not working with the student and who are reliant on quality of paperwork. Multiple disagnosis needs to be considered in funding support.

Whilst many parents work tirelessly with schools to address the needs of special learners, other parents reject advice to have assessments completed on their children. They simply do not realise there is a problem or lack the skills to access additional support. Funding is thus limited. This was identified as a frustration to many schools.

The Disability Standards for Education Act cannot be implemented consistently when access to suitable levels of funding to support curriculum access is limited.

Additional funding sought to address the needs of some students with high levels needs, whether they be medical or behavioural, may be required for long periods of times to adequately support change in behaviours and engagement in learning. The constant reapplication for funds when the student's needs are clearly understood is a source of discontent for educators. The inconsistency of funding means programs are stopped and started depending on availability of funds. Changing the way students with complex disabilities behave in educational settings is long term and complex. These students often



require the support of very experienced special educators. The battle to "win" funding to do this can be exhaustive.

All principals clearly expressed a need to have flexibility in the use of funding at the coalface to address imminent and emergent need.

Funding for executive release is inadequate as it does not take into account the high level of support required of staff to support the needs of students with disabilities, mentoring and supervising new staff, assisting teachers planning for individualised plans for students, coordinating transport and funding applications.

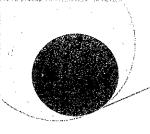
2. Term of Reference Two- Best practice approaches in determining the allocation of funding to children with a disability, particularly whether allocation should be focused on a student's functioning capacity rather than their disability.

#### Themes identified

- Use a functional model not a deficit model to fund student needs. The needs of students and the funding allocated need to be correlated with risk associated with the individual and the support required to access learning. Functional assessment of students should be driving funding.
- Funding students is complex. It is agreed that the largest percentage of students with disabilities are in mainstream settings, but also understandable that some of the most complex are in SSPs. There needs to be due diligence around establishing a system of assessment and determination for funding that meets the needs of many diverse settings.

#### Submission responses

- 1. It is noted that parents and advocacy groups with the "loudest" and "smartest" voices are heard and receive funding. It is also noted that litigation by parents or advocates usually gains swift action and results in funding increases for that particular students. Alternatively many parents and many organisations do not know what to do to gain additional funding to support the child. Funding needs to be distributed based on functioning capacity e.g. A child hearing voices and hitting their head continually requires more than \$2000 a year.
- Many students are funded by written applications without rigorous assessments of the students in question. This may be due to lack of availability of counsellor's time, reticence of doctors to sign off or lack of parent support. This can hold up correct funding allocations and provisions.
- There is an apparent focus on how well a doctor can write the diagnosis. If it is well
  written the consenting placement/ funding panels may agree to sign off the disability
  or funding.
- 4. We need to move away from a deficient model to a functional needs model. Functional assessment of the student and a school based assessment to determine risk associated with the school environment and the student impact on the school and learning of others students. This cannot be done by people who do not work with the student. Currently a district counsellor comes in to assess and confirm classification of disability (that we have requested higher levels of need for) and



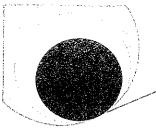
subsequent staffing allocation. This is totally not viable for the more complex students.

- 5. All SSPs who cater for high level violent and medically fragile students need a staff member off class to deal with crisis and be proactive in support. We, as principals, cannot lead and manage schools whilst having to respond to violent incidences, resuscitations, damages caused by students, attend regional commitments etc etc without having another executive off class. We are not funded to replace ourselves in these instances. Executives can then offer proactive and positive interventions to accommodate change and best practice for teachers dealing with complex students. There is currently no executive release time allocated.
- 6. The uncertainty around the success of funding and the associated time delays means we are unable to notify and employ the person trained and best suited to understanding and working with the child with the disability. Many of these positions are casual or temporary. It is difficult finding and completing contracts for staff who are skilled in management of students with complex disabilities and serious medical conditions when funding is last minute and intermittent. With no promise of work until the last minute, when funding is approved, many SLSOs move on seeking certainty in employment.
- 7. Equipment should be allocated with the student on placement. Placement panels should be assessing equipment needs and funding these before an application to place the students at the school occurs. Once the students is placed, access to funding for equipment such as walkers, standers and voice output devices is hard to access and there are exceedingly lengthy delays. Eg One principal stated an application for a stander was rejected by the panel, despite support and recommendations from a DADHC occupational therapist and pediatrician. The response from the panel- "we don't support standers anymore as they do not increase access to curriculum" "The OT on the panel said research does not support their use". Conflict in professional opinion and panels challenging need, when they do not know the student or the context are evident.
- 8. Due to complex medical needs of students who require tube feeding, suctioning, seizure management, medication etc. Suitable resourcing need to be available to schools to manage, train and implement health care plans when required.
- 9. The level of funding is grossly inadequate. The funding is limited and stretched. The staffing implications at the school level when funding trickles in is complex as we try to piece together support positions.

#### Discussion

The ultimate goal is to prepare students form life beyond school and there is no substitute for individual attention and engagement in a appropriate setting that is well resourced physically and financially. Even though there is a strong emphasis on functional assessment, no doubt this is a huge challenge. The functioning capacity for students needs to be an essential component of the criteria. One child's needs can be poles apart from another child's needs even though they both have the same disability sign off and thus the same assumed level of support need. Functional assessment needs to be objective and comprehensive of everything that is impacting on a student's capacity to learn and the rights of others to learn.

Best practice would support the regular and ongoing funding for learning support teams to meet regularly to monitor and plan for educational provision for students with special needs. This planning would involve parents, teachers, regional consultants and other relevant staff.



Flexibility in use of funds by schools at the school level needs to be a key consideration in best practice. This allows school leaders to accommodate needs and support systems into broader school management planning. This would also mandate that schools have forward notice of funding availability prior to plans being developed to support the disabled population and identified needs in the specific school. It would also allow collegiate arranges to flourish between communities of school.

We have a very reactive system when it comes to funding disabilities. If a parent proceeds with legal action or formal complaints, then action is usually swift. We need to take a proactive approach to ensure our system of funding allocation responds to the identified student need to engage in curriculum and not reactive litigious responses.

Staffing schools based on students functioning and factor of need is useful if assessments are broad enough to capture the impact of various disabilities and special needs. Counsellor allocations need to increase to allow for this work to be completed effectively and funding needs to address the identified need of the student. The notion of capacity building at school level is desirable, however can only be addressed if executive release is increased to allow for planning, mentoring and intervention.

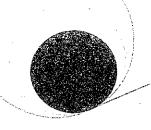
### 3. Term of Reference Three - The level and adequacy of current special education places within the education system.

#### Themes identified

- In SWS region demand far outweighs available places. The need is ever increasing but the places are ever decreasing along with access to appropriate levels of funding. This theme was evident in every response provided by principals in our survey.
- There are restrictions placed on specialist programs that further hinder access to those programs. e.g. access to some programs are for students over a certain age or under a certain age. These restrictions hamper access to much needed support services.
- There is no support available for many students with specific disorders e.g. significant language disorders. Access to other support services for these students can be impacted on by lengthy waiting lists.
- SSP are increasingly catering for extremely complex students and continue to have strong demand for placement.

#### **Submission Responses**

- Current DET placement practices for placing students in settings are lengthy and poorly communicated. They are also so vastly different across regions. There are inadequate places available. Many principals have offered to take support classes in schools and have been declined.
- 2. At times the placement panel processes are repeated several times with no change in outcomes No place available!
- 3. There are insufficient spaces for IM students entering high school and primary school. Their additional needs are not being acknowledged or addressed.
- Current DET practices of student placement have poor communication about histories of violence. They have endless form filling and can create headaches for



parents wanting to enroll their child in the most appropriate setting to meet their child need.

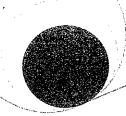
- 5. Geographical restraints limit access to certain suitable programs for students.
- 6. There is a huge increase in students being diagnosed with disabilities over the last 10 years but a disproportionate amount of special education places. The impact of students with mental health disorders on schools is increasing.
- 7. Due to lack of facilities for students with special learning needs, there has become and increasing cost associated with transporting students long distances to access facilities. This adversely impact on the special education budget, provides less funding for disability programs and severely impacts on the wellbeing of students. This needs to be considered before offers of placement in special settings are made.
- 8. Inadequate places available especially for Yr 3/4 level. One principal reported having a child in Yr 4 who couldn't be contained in mainstream. There were no suitable places locally. He has to travel more than an hour each way to access an appropriate setting for his severe behaviour disorder. Other students who may be diagnosed or move into the school in Yr 4 are too old for a local behaviour program class and too young for another behaviour program setting.
- 9. There are not enough places available. Its that simple. One principal stated it had taken them over 3 years to get a child into a special ed placement. The parent, staff were frustrated and in the meantime the child was continually being suspended and simply managed by the school the best way possible. Other children in the school also suffered. The child is now finally in a place and it has been a great result for all. Too few places, too much continual paperwork when there is no chance of getting a place. Staff feel they spend time "playing the system" when there isn't a place anyway. In regards to behaviour students, recent research (Steve Dinham) shows absence of disruptive students has a huge impact on student learning and achievement. This area is critical.
- 10. One principal stated they had put forward numerous students for support class placement. Placement is allocated dependent upon vacancies. Their experience is that there is never enough vacancies to meet existing demand, therefore resulting in the inappropriate placement of students and the resulting pressure and stress for all concerned, e.g. an autistic child waiting 18 months for a placement and a behaviourally disturbed child waiting three terms for placement. Students are integrated into mainstream settings not as a result of need but policy, which sets up a four day one day model irrespective of student need.

#### Discussion.

It is evident that the level and adequacy of special education placements in SWS is limited. Places for students with disabilities are limited and many specialised settings have long waiting lists. Whilst ever funding to support students in mainstream settings is limited, the pressure shall always be transferred to access for other specialist settings.

It appears that there is inconsistency in placement panel processes. It is evident that some principals have a "say" in the placement panel process e.g. which students are placed at their schools and whether the students needs can be safely accommodated in the setting, others simply get the offer once parents have been advised. This lack of consultation has profound impacts on schools where vulnerable medical students are matched alongside violent and aggressive mobile students. This issue is particularly present in SSP settings and provided extremely challenging strategies for leaders to address their responsibility for workplace safety for everyone. All placement panels need consistent accountable processes.

The impact of students with mental health on the educational opportunity of all students is significant and ever increasing. There is currently a lack of suitable educational



placements for mental health students. We require an increase in facilities that are jointly run between health and education.

SSP Behaviour schools are staffed at 7 students to 1 teacher and 1 SLSO, yet behaviourally disordered and intellectually disabled students are staffed at 9 students to 1 teacher and 1 SLSO in SSPs for moderate and severe intellectual disability. There are huge inequities just like this one across the system.

So many complexities in one setting combined with lack of funding, no release for executive and volatile combinations of students' places incredible pressure and strain on a school and the delivery of quality education for all.

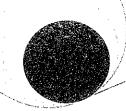
### 4. Term of Reference Four - The adequacy of integrated support services for children with a disability in mainstream settings, such as school classrooms

#### Themes Identified.

- The time allocated to students from itinerant services is minimal and rarely results in measurable student outcomes. Interventions for many students require longer periods of support to sustain change. The level of professional expertise of itinerants varies hugely. Many do not have the skills to work in more complex disability settings.
- We are increasingly reactive and not proactive in supporting students with itinerant services.
- The waiting list for services is long. Often expertise exists within the school with the teachers and support staff who know the child best. Additional funding for human resourcing at the school level to support the intervention programs and strengthen engagement in learning is what is required.
- · Current systems of support are built on form filling and lengthy time delays.
- Service providers available to work in schools are governed by different policies and practices that are often in conflict with DET policy. Waiting lists for these services are long and schools do not receive funding to operate case management processes.

#### Submission Responses

- 10. There is too much paperwork to complete to access itinerant support teachers with the knowledge and skills required. Many itinerant teachers do not have the practical understanding of the diverse settings and thus have limited impact. There is also a lack of time for teacher and counsellors to meet to devise strategies. Teachers are on class fulltime and not available the few days you may have a counsellor at your school, the waiting time between doctors visits, counsellor's reports and placement panel processes make the wait prohibitive and in the meantime the students is struggling with limited support.
- 11. Current DET itinerant services are based on form filling and clerical type duties. One principal indicated that have never had a consultant actually work with or support a students, or provide advice to a teacher.
- 12. It is very difficult to get support for a student in a mainstream setting. There are inconsistent levels of support from district office personnel. One principal had been informed by district office to" just manage the child". There are many impacting factors to managing a child with complex learning needs. Appropriate consultancy and support is essential.
- 13.1 have not experienced any integrated supported services for any of my disabled students in my 17 years as a principal unless the parents have organised it.



- 14. One hour a week support from an integration teacher per week does not constitute support in my view.
- 15. Students with language disorders are often not supported at all by additional services.
- 16. In my view integration does not occur. It is extremely rare to see a case conference involving multi disciplinary teams meet to discuss student needs unless things are absolutely falling apart and then they invariable do not consist of the specialists required nor the staff with expertise required to address the students needs.
- 17. Vacancies in support personnel positions impact negatively on consistency of services at school level.
- 18. Despite the best efforts of teachers and School Learning support Officers the funding allocation and support services allocated for disabilities like autism spectrum is not adequate to make sufficient difference for students. Put bluntly, it is a service that costs money and more needs to be spent.
- 19. Often we request support or are invited to attend case management for complex students. With no funding at the school level to release teachers or replace principals who are out of the school, leaves schools in volatile situations.
- 20. Increasingly the role of district or regional Disability Programs Consultants is increasing with excessive paperwork. The need for consultancy support at the school level is thus compromised or nonexistent.

#### Discussion.

The successful integration of students with disabilities into mainstream classroom is dependent on successful planning, monitoring and human resourcing to maximise engagement. Time for educators to meet and discuss support strategies and adjustments to curriculum are essential to maintenance and progress of the student.

Increasingly schools are receiving students with highly disruptive and challenging behaviours that result in huge disruptions to the learning of others. Whilst suspension of disruptive students is possible under DET policy, the strategy rarely results in lasting change, once the student returns. Case management of these students supports change, but without allocated release and funding to support consultation, the outcomes are limited.

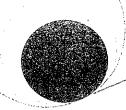
Funding support mechanisms are lengthy and dependent on the availability of counsellors and learning support teams to meet. The categories used to assess Funding support levels are limited and do not capture the level of supports required to engage the student successfully in learning.

There is inadequate support to allow successful re integration of a student moving back to a mainstream setting following inclusion in a specialised behavioural service.

### 5. Term of Reference Five - The provision of a suitable curriculum for intellectually disabled and conduct disordered students

#### Themes identified

- There are no suitable curriculums that meet the needs of students with severe and moderate intellectual disability. National testing also does not address their learning needs.
- Curriculums do not address the learning needs of many students with disabilities and teachers are struggling to continually modify and adjust learning. Whilst the curriculum can be adjusted with allocated time, delivery of programs is often inadequate due teacher constraints and availability of SLSO support.



- There is a lack of consistent information on what constitutes an Individualised Education Plan and how it integrates the need to address all curriculum access under the Disability Standards Act.
- The flexibility to control the environment for many of our disabled students is increasingly challenging in mainstream classrooms.

#### Submission Responses

These are comments or statements from the responses to the survey.

- There are no K-6 curriculums for students with moderate a severe intellectual disabilities that address their learning needs. Many students with complex intellectual disabilities may remain on Early Stage 1 outcomes for the years of their schooling.
- 2. Current curriculum is geared for mainstream students. It does not differentiate the needs of students with special learning needs or disabilities.
- There is a lack of consistent information on what constitutes an Individualised Education Plan and how it integrates the need to address all curriculum access under the Disability Standards Act.
- 4. A curriculum for students with disabilities is urgently needed in mainstream schools as many teachers are at a loss as to how to address their needs.
- 5. The Special Education Handbook is grossly out dated, leaving schools with without clear guidelines on how to access services and meet needs.
- There is a lack of specialist knowledge in how to formulate Individual education Plans. Funding is not allocated to make this task meaningful to teachers and learning support teams.
- The curriculum in its current form may address the needs of a conduct disordered child if it is presented in a manner that is individualised focused, intensive and meaningful, but this requires additional staffing to do effectively
- 8. Teachers do their best to modify and water down curriculum to meet the needs of these students.
- 9. One principal reported they had recently referred a boy on a 20 day suspension to a suspension centre. There he worked well because they were able to offer him 1:1 support, curriculum that addressed his needs and flexibility to control the environment to suit him.
- Specialist spaces need to be available to address learning needs in all schools.
- 11. It is often difficult to explain to a parent that their child needs extra specific assistance and adjustments to curriculum but that you are unable to provide that effectively when you have limited funding support.
- 12. NAPLAN testing does not cater for many students with complex intellectual disabilities, thus no reliable data is available to reinforce the quality educational work being done for these students in specialised settings. It needs to be acknowledged that the 'educational achievement' of students look different and for students with multiple and complex disabilities. Standardized testing may never capture the achievements of this cohort if our measure continues to be based on NAPLAN type testing. Curriculum Directorate and EMSAD have a responsibility to address the curriculum needs and educational measurement needs of all students including those with multiple and complex intellectual disabilities.

Discussion.



Existing curriculums do not meet the needs of all learners. Students with significant intellectual disabilities have been excluded from access to meaningful curriculum and national testing. The Disability Standards for Education state that we are to make adjustments and accommodations for students with special learning needs. It seems the adjustments and accommodations are so stretched that a meaningful curriculum is lost in translation and resulting workloads on teachers are increased.

Curriculum Directorate and ACARA need to pick up the responsibility of creating curriculum documents that address the learning needs of all students. Life skill curriculums in Years 7-12 are meaningful for many students with disabilities and used extensively in many educational settings.

The K-6 Curriculum does not meet the needs of many students operating below Early Stage one. Assessment tools are inadequate. Best start rarely results in meaningful assessment for many students entering schools with disabilities.

Teachers are working incredibly hard to address policy reform, change and student needs. To expect them to be adequately able to address the individualised behavioural and support needs of students with complex disabilities is unrealistic. Further staffing support is required in all schools if we are to continue the inclusion of complex students.

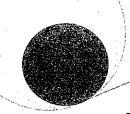
## <u>6. Term of Reference Six</u> - Student and family access to professional support and services, such as speech therapy, occupational therapy, physiotherapy and school counsellors

#### Themes identified

- Inadequate allocation of counsellor time across all settings. Counsellors are consumed by excessive paperwork and ongoing re assessment and application for funding supports.
- Long waiting lists for specialist therapy support.
- Access to therapy support limited by requirements for diagnosis or by lengthy waits for diagnosis to be established.
- When therapy services are allocated there is no funding entitlement at the school level
  to allow for effective consultation with teachers and support staff. With limited
  counsellor allocations, they are often not at the school on the days teams can meet.

#### Submission Responses

- There are limited access to services for students in mainstream schools, support units and SSP. The referral system is time consuming and dependent on the availability of school counsellors.
- 2. There are long waiting lists for limited services. Many parents do not realise that they need to access services and that the behaviors that their child is presenting is not acceptable in an educational setting.
- 3. School counsellor services are not sufficient to meet the needs of students. Schools compete against each other for additional counsellor services. School in high demand areas received comparative counsellor support to school with low demand. One principal commented that their time was reduced this year as it was perceived there were greater needs elsewhere when in fact the need at the school has not changed at all.
- 4. These services are usually only available if parents arrange these services themselves with private providers. These services also create issues in loss of learning time when students leave school to attend sessions.



- For most families private support for therapists is not an option due to financial hardship or lack of access to transport, so disadvantaged students are further impacted on.
- In low socio economic communities therapy support just does not happen unless it can be provided easily through the community health. Some parents will not access services when asked by the school further impacting on disadvantage.
- 7. This area is critical to special education. In NSW this service is provided by Aging Disability and Home Care. The waiting lists are too long, the services too infrequent and the intrusion on education times extremely hard to manage. We receive no funding to release staff to meet with therapists or attend case conferences in relation to students needs. Yet most would perceive this as critical to managing student's behaviour and well being. One principal stated that for 70 complex students, all with disabilities, they got one day per week of counsellor time. The counsellors are never at the school on the days required to cover the critical resolution meetings or respond to critical violent instances with staff. Counsellors are consumed by repetitive paperwork to ensure "classification" of the students' disability. Parents are crying out for therapy support for their children both at home and at school. A coordinated approach to therapy that is funded as a joint venture between DET and health is needed. Schools also need to be funded to release teachers to support case management with these services. It is critical to students' outcomes.
- 8. We need more school counsellor time it is that simple. It is ridiculous to think that a counsellor can effectively cater for learning and support needs of students and parents on the limited time they have. I am sure the new "Keep Them Safe" processes will only increase workload for counsellors. Many families simply cannot afford specialist help and the school counsellor has a vital role. 470 students in my school, approximately 300 families and I get 0.5 counsellor time. I maybe lucky compared to some but it is still far too little.
- The public sector should be a "one stop shop" for all of the above, with an integrated multi-agency approach.

#### Discussion.

There is inadequate counsellor time to successfully support students, staff and families in achieving positive outcomes for students K-12. Counsellor time needs to be increased across all settings. The role of counsellors could then be further extended to effectively support the coordination of multi disciplinary teams. Counsellor time is consumed by excessive re testing and red tape.

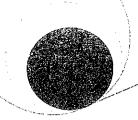
Current approaches do not facilitate effective integration of support services. DET needs to incorporate professional support services into each child funding allocation. Providing schools with funding to "buy" supports and services identified within the context of the school eg SSPs purchasing speech pathology support, would be ideal.

Students requiring speech pathologists and occupational therapists have long waiting lists. In one instance a student who was completely non verbal waited three years for a service and eventually left the school having received no support. These specialist position need to be filled by DET personnel on a similar basis as school counsellors. Programs in speech and fine motor skills need to be readily available through internet to assist classroom teachers and STLAs.

### 7. Term of Reference Seven - The provision of adequate teacher training, both in terms of pre service and ongoing professional training

#### Themes identified

Pre service training and ongoing professional learning for teachers working in the area
of special education is still inadequate. A great deal of success in both of these areas is

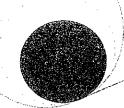


dependent on support at the school level, which requires an immediate additional funding.

- SLSOs receive no targeted professional learning funding and current Teacher Professional Learning funds do not adequately cover training needs for staff requiring specialist training in complex areas of disability.
- Distance to suitable training and availability of casual replacement of staff prevents access to many training opportunities.

#### Submission Responses

- 21. There were many comments that teacher training is grossly under catered for. It is apparent that there is little pre service training in this area. Many principals believe that training needs to be practical, proactive and supported in the school with appropriate release of executives and teachers to be able to provide mentoring support and planning time.
- 22. A lot of expertise in special education comes with extensive and supportive exposure to the coalface of education combined with training and continual professional learning. A great many special educators develop their expertise because they are a part of innovative focused teams of educators who adopt a model of collaboration in difficult work environments.
- 23. There is little meaningful training and development opportunities for special educators. It is also a very challenging responsibility to attempt to train a teacher once a student with complex needs is placed in the setting.
- 24. Some teacher courses are very good and if I could send teachers to all the courses that I think would really benefit them my professional learning funds would go nowhere else. These courses need to be run at DET expense so that students and teachers really benefit.
- 25. Some teacher courses are very good and if I could send teachers to all the courses that I think would really benefit them my professional learning funds would go nowhere else. These courses need to be run at DET expense so that students and teachers really benefit.
- 26. The cadetship program has operated for many years now and has produced many graduates. The pivotal thing for special education is the training on the job and the support that executive can provide to training teachers. Funding to support young teachers starting out in special education is critical. Executive release needs to be funded to provide for this. It is a complex field beyond the demands of mere curriculum.
- 27. The latest DET School Learning Support Coordinator Program proposal of having a specialist teacher with 110 hours of online training presents significant concerns. It is totally inadequate and unreasonable to expect a teacher to be the expert in the school on all things special education with this limited theoretical training. I am not aware of any adequate pre service training and I feel many new staff arrive in the classroom with very little real knowledge of special education needs in the mainstream setting.
- 28. Regional consultants rarely have the expertise to support SSPs e.g. the maths consultant has no expertise in adjusting curriculum to meet the needs of a severely disabled student. ISTB are often at a loss to address the behavioural needs of s high order violent students with medical needs and severe intellectual disability.



- 29. It is apparent that there will always be needs for the full array of educational environments to ensure every child is able to access learning meaningful to the student, with levels of support that ensure educational outcomes for that student. Whilst inclusion is the philosophical ideal, there are students with levels of behaviour and dysfunction not understood or seen by many educators. These students exist and needs extremely specialised settings to address their needs. We need to be conscious of not throwing away a diversity of educational settings to the whim of advocates of "inclusion" that maintain very narrow views of what "inclusion" actually means. America is viewed as very inclusive in their approach to students with disabilities. Reality is that the "Non public system" in America caters for students that cannot be effectively supported in mainstream settings due to complexity of needs. This "non public system" is funded publicly.
- 30. SSPs are centres of expertise in the education of students with complex disabilities in all areas. They are under utilised as professional learning opportunities for teachers moving into special education teaching.

#### Discussion.

The characteristics of special needs learners are wide reaching. There will always be philosophical debates that advocate full inclusion, partial inclusion or segregation. We need to maintain a child centered approach to what setting will ensure educational outcomes are maximised for the students in question. We support the rights of parents and educators to recommend suitable educational settings to ensure outcomes. We are committed to a shared responsibility for all students with funding levels that allows schools to support all students.

To expect teachers to work as Learning support coordinators and to adequately support all types of students with disabilities and special learning needs in mainstream settings with 110 hours of on line training is unreasonable. Application of teacher learning and ongoing support for teachers at the school level is paramount to capacity building and quality education.

There is a view that teacher training at university level should become increasingly specialised. This appears to be the case in other countries where university specialise in courses such as applied behaviour analysis or education of students with mental health disorders.

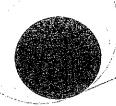
We require increased executive release to cope with the burden of paperwork, administration, learning support teams, risk assessments, access requests, behaviour support and response, assessments and monitoring of students with special learning needs. Learning support teams require budget allocations to be able to meet and plan for adjustments and accommodations of student programs.

#### **Executive Summary**

The provision of excellence in the education of all students is central to our core belief as educators. We continue to struggle with limited resources to address the needs of many complex students. On a regional and local level our achievements are commendable given the demands and levels of funding that exist. South Western Sydney Region is invariably an area of immense need and complexity in the area of special learning needs and disabilities.

It is clear that educational expertise is as critical to many students with special education needs as the fiscal funding is. However schools struggle to accommodate suitable training and development of expertise when funding limits exists and the demands of an ever increasing curriculum and educational role exist.

School continue to require flexibility to use funding to address the specific needs of students in their setting



Students with disabilities are a diverse cohort. They can range from students with "normal" intelligence and impacting disorders such as language impairment and behaviour disorders, through to severe intellectual disabilities, multiple secondary disorders and high level behaviour disorders. To meet the diverse needs and range of special learners, we need to remain focused on

- individual functionality and the occupational health and safety risks associated with the student. Funding needs to match the identified needs.
- appropriate levels of resourcing that promote full access to learning.
- The implications of the Disability Standards for Education Act and the Disability Discrimination Act for schools and the resourcing required to ensure their implementation.
- Access to environments and provisions that best service the needs of the student.
- A parent's right to choose an educational setting with the full knowledge of provisions that will support their child. Many parents chose highly specialised environments such as SSPs whilst others choose mainstream options and support units. It needs to be noted that there are students in our educational system that cause significant and damaging impacts on schools despite the best endeavours of highly skilled and committed educators. These students exist and need to be funded accordingly.

At the core of these decisions should be

- the right of the child to access an educational environment or setting that best meets their needs.
- Equity, that ensures meaningful engagement in learning for all students with levels of funding that address their needs.
- The right of all students to have access to curriculum that meaningfully addresses their educational needs.

No one size fits all is possible if we are focused on the access to education as our primary goal. The Disability Standards for Education Act clearly outlines the requirement that students with disabilities should have the same educational opportunities to access learning as their peers of the same age.

Curriculums need to be extended to address he educational needs of all students regardless of their severity of disability or learning need.

There is no lack of commitment by leaders, administrators, parents, teachers ,SLSO and inter agencies to make a difference in the lives of students with disabilities across the Campbelltown and Macarthur areas. The issue is there is insufficient and inconsistent funding at the school level to make a difference. Principals are frustrated by barriers to effective support and funding.

#### **Future Directions**

It is evident that the increase of students with disabilities accessing mainstream school is placing new demands on perceptions of educational provision and on the demands of teachers to address an increasingly diverse population of students.

With no meaningful data from EMSAD for students who are unable to access NAPLAN and subsequently no options for federal funding under initiatives such as National Partnership, some students with disabilities are effectively excluded from significant opportunities and educational advantages. Special settings which arguable cater for some of the most challenging of students provide high quality educational programs, however currently the majority of those students are unable to access any national testing. This issue requires the urgent attention of DET.



Curriculum directorate and ACARA need to address their responsibility to create curriculums that effectively meet the needs and educational achievements of this student population.

Capacity building at the school level is essential, but this cannot be done with limited and ad hoc resourcing. Funding needs to capture the schools need for executive support to manage and monitor the systems that support students with disabilities as well as the funding to allow appropriate levels of SLSO support to implement programs. Additional teacher release is required to plan and adjust learning and meet with parents and inter agencies to accommodate best practice. Assessment and programming for students with disabilities and special learning needs is essential and as such counselor support and inter agency support is critical, but the most significant impact comes from the support that these students receive on a daily basis to implement programs and effect change. It is this process of support that achieves educational engagement.

#### Recommendations

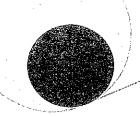
Fiscal provisions for special education are stretched to their maximum. Whilst it could be argued that Special education has a ceiling or a finite capacity to meet demand, it could also be argued that we are legislated by The Disability Standards for Education Act (2005) to act to ensure needs for students with disabilities and special learning needs are met in all settings and for all students. Research clearly outlines that quality teaching in this field will ensure quality educational outcomes for our students. We need to ensure our students right to a meaningful education that maximises their learning outcomes in environments that support need. To a large extent where that quality education is provided is secondary to the standard of education itself and the meaningful outcomes for children and families.

Entrenched in the notion of quality teaching is the provision for professional learning and training of staff to ensure delivery and accountability for education. Nothing can suffice for well educated and trained staff. Specialised expertise however is not gained by a university qualification or attendance at a training session alone. It is gained by the application of this learning in the field and it is here that schools need to be funded to release staff to mentor and work with teachers on the job to address the complexities and implications of disabilities. This ensures capacity building in the areas where it is most needed. Administratively schools are being swamped with excessive red tape to gain access to entitlements for students with disabilities and increasing demands to adjust and accommodate learning with no additional staffing support or release.

The goal of schooling is to maximise the educational achievements of all students. To do this many students require additional support and focus. For the non disables peer this means access to a huge array of extension activities, more equipment and programs. Equally students with disabilities require supports and resourcing to maximise engagement and educational achievement. The disruption to learning that students, presenting with behaviour disorders can have, can be detrimental to learning for all. For many students with disabilities support comes in the form of improved training for teachers to accommodate their disability, for others it means human resourcing to support access to learning or both. Provision of specialist programs is also essential in this consideration. The government needs to give these considerations their utmost attention in the funding debate.

Consensus Recommendation from submitted responses:

- That an investigation into the provisions of funding be conducted across all settings and that funding be increased. We need to avoid a one size fits all approach for all students. Equity comes through meeting the needs of all students not giving them the same.
- That if categorisation models continue that students are funded to the right categories and that multiple disabilities attract higher levels of funding. We also recommend that



all levels of disabilities be acknowledged for equity in funding and that this is not dominated by advocacy of the strongest groups. Equally we acknowledge that many students do not have disability "labels", yet their learning requires higher levels of support. Such is the case for many students with serious language disorders.

- That funding is increased to address the students' right to access curriculum for students with special learning needs. This is both financial funding and human resourcing allocations.
- That flexibility in funding at the school level is established and maintained to respond to emergent need.
- That regions be allocated increased funding to address emergent need and demand.
- That there be full and immediate implementation of the Disability Standards for education Act 2005 across all settings that cater for students with disabilities or special learning needs supported by meaningful levels of funding.
- That any investigations into funding ensure a full cross section of students is considered for the purposes of decision making.
- That curriculum be designed and implemented to address the needs of all students with disabilities, including moderate and severe intellectual disability.
- That an range of appropriate settings that cater for the specialist needs of students remain.
- That additional executive release be allocated to all settings catering for special needs students to address the burden of paperwork, risk assessments, applications and planning for modified programs.
- That student placement systems and administration be streamlined to avoid long and inappropriate delays in suitable placement of students.
- That EMSAD complete a full review of meaningful data collection measure that address the learning needs of students with disabilities and special learning needs.