

**Submission  
No 691**

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

**Name:** Ms Faye Galbraith

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## **The provision of education to students with a disability or special needs**

### **Jack and Ben Galbraith**

My two children, Jack aged 9 and Ben aged 7, have a severe physical disability, profound hearing impairment and moderate vision impairment. They are very bright, intelligent and determined little boys with a great capacity and ability to learn. They should have every right and opportunity to maximise their learning potential, unfortunately however, we live in NSW and they have been written off by DET. Due to their severe physical and sensory disability DET has labelled Jack and Ben as severely intellectually disabled. This is not the case, Jack and Ben are unable to be assessed adequately via the standardised 'psychometric' assessment process, and I would never consent to them being given this assessment by DET – given the choice that is. That choice was denied to me in 2009 when they were assessed without my consent.

This submission is not a critique of teaching staff, many of whom are wonderful, talented and dedicated to the students they work with. Any problems we have encountered are a direct result of poor leadership and poor ethical standards within The Department of Education and Training (DET).

As DET have let down children with disabilities they have also let down their teaching staff and created an environment that is demoralising and oppressive.

### **Poor Schooling Options**

Finding a school that will cater to Jack and Ben's complex needs is impossible. Jack and Ben have a great capacity to learn, however they need intensive classroom support and therapeutic intervention in order to access an education. There is no school in existence in NSW where Jack and Ben would be adequately enabled to access an education, the level of support and specialised assistance is simply not available anywhere in NSW.

The babysitting service that children in NSW receive in lieu of an education should be called for what it is – childcare. DET and the NSW Government should be transparent about their refusal to adequately provide an education for children with disabilities and explain why this is the case.

A few years earlier we had tried to gain admission to the only school where we felt some confidence that Jack would receive the support he needed (RIDBC's Alice Betteridge School), unfortunately it is impossible to prove, due to Jack and Ben's physical and sensory impairments that they do not have a severe intellectual disability (they are unable to be 'scored' by conventional, outdated modes of testing). The Alice Betteridge school has a full complement of therapists, a hydrotherapy pool and most importantly provided a proper education to children with disabilities. Unfortunately, these resources are shared with only a few children each year - those lucky enough to gain entry.

There were no other choices available to us in the non-government sector, the only other option, Inala Steiner school, had recently closed down. If we chose to send our children to a mainstream school they would probably each receive a full-time aide but have no access to specialised facilities.

I believe that The NSW Government has implemented an unspoken policy of writing children (with high needs) off, this has resulted in disability discrimination. In NSW, children with high needs do not have equitable access to an education as their neuro-typical or 'less disabled' peers. They have the legal right to attend school and that is it.

This is discriminatory. All children should be given the opportunity to fulfil their potential despite their additional needs and requirements.

### **Inadequate teacher to student ratio**

For the first couple of years of education Jack and Ben were in a class of 4 students with a teacher and an aide, quickly this increased to a class of 6 children, without any increase in support. The mix of children was inappropriate, an example of this – one year Ben was in a class with 6 children, all wheelchair users. The children had previously enjoyed community access, although this has now ceased altogether. It would be quite a challenge to take six children (all with severe disabilities) on an excursion with only 2 staff.

A teacher (at Jack and Ben's school) informed me that DET were 'putting pressure' on the school to increase class sizes. Another teacher told me that since the class sizes increased, they are 'lucky to get half an hour a day to teach the children', she said that most of the teacher's time is now taken up fulfilling basic care needs (feeding, toileting). Many of these teachers are talented, wonderful teachers what a waste to have them changing nappies rather than educating children, and how utterly demoralising for someone who has chosen this career to have little opportunity to utilise their skills.

I wrote to the Education Minister about the increase in class sizes, I received no response. I went to see The Education Minister and Director-General at the Community Cabinet in Penrith, they both assured me following our brief meeting that I would receive a 'detailed written response' I received no response at all.

There has been a noticeable drop in standards since class sizes increased. DET are failing to provide a safe environment that is conducive to learning, they are failing in their 'duty of care' to students with severe disabilities. Seemingly no-one in the department or NSW government cares very much about this.

### **Lack of therapeutic intervention**

Moving therapists out of schools many years ago was short-sighted. Now, most children receive far less, if any, therapy support at all. Ageing, Disability and Homecare provide far less than an adequate service. An example of this – Ben has been waiting around 6 years for a Speech Therapist, at the age of 7 he has never, despite his need, received any speech therapy.

The answer to this is not re-locating therapists back onto school grounds, the answer lies in a more progressive, cost-effective model - self-directed funding, a model where parents can control (with teacher input), the therapy their child receives and when they receive it ([www.in-control.org.au](http://www.in-control.org.au)). Other developed countries are adopting this person-centred approach and other states have started to implement differing models of self-directed funding. It's value lies in the ability for parents and others who know the child, to target specific therapeutic input where the child needs it most, as opposed to the current one-size-fits-all approach of traditional service providers.

### **Our DET Experience : The neglectful treatment of Jack in 2009**

Last year was the worst year for my family, the direct result of a negligent and incompetent department and government.

- On around 10<sup>th</sup> June 2009 Jack arrived home from school, he was very unwell, breathing very shallow and very distressed. I usually empty Jack's bag when he arrives home from school. This day I was so

occupied seeing to Jack and calling my husband home from work (as I was so concerned that Jack would need to go to hospital), that I did not empty Jack's bag until the next day. I discovered that Jack had been given no fluid all day, his tube feeds were still in his bag. Jack has his last fluid at 8pm, then is given fluid at school and again at home at 6.30pm and 8pm, this effectively meant Jack had gone from 8pm the previous night to 6.30pm that night without hydration, almost 23 hours without hydration.

I called the school immediately (this was not the first time I had phoned for this reason, the school had failed previously to give him part of his fluid intake, never all of it).

I was told by the Principal that the union (PSA) had given a 'directive' to teacher's aide's that tube feeding was 'optional' and this directive resulted in a lack of available teacher's aide's that will undertake this duty, it had been 'overlooked.' I accepted this explanation, although I was concerned, particularly at such an irresponsible directive.

Jack is on minimal fluid intake and missing this much of his daily intake can dehydrate him very quickly.

- Jack has a custom made tray that attached to his wheelchair. Due to Jack's severe physical restrictions in his movement, he requires this tray to access most of his IEP goals, switch use, technology, communication, etc. It enables him partial use of his hands and gives him stability.

At the end of June 2009 we discovered that the tray had been missing for quite some time, at least all year. The school were less than honest and transparent about this. I called the Principal and asked if he would meet with us, he said he would rather we met with the deputy principal. I said I was dissatisfied with this however agreed to meet with the deputy principal. We wanted to discuss how we felt Jack was being treated, first failing to supply him with any hydration all day and now they had lost a vital piece of his equipment.

At this meeting stories had now completely changed, it was no longer a case of Jack's tube feeding being 'overlooked', now they were saying that Jack had been given no fluid all day as he had been asleep and because I had not written in his *Health Care Plan* that Jack is to be given fluid whilst asleep. A clear case of 'blame shifting'. I know many children that are tube fed, their parents have never been asked to specify in a *Health Care Plan* that their child is to be given their tube feeds. It is such a basic requirement of life.

When we asked what they were going to do about the tray that Jack requires to access just about any activity, the response was shrugged shoulders. I was really alarmed by this stage, this school claims to be specialised for children with Jack's needs, yet they were not at all concerned that they had lost a piece of equipment so fundamental to his physical needs. I went home and lodged a complaint with The Human Rights Commission and eventually, reluctantly the tray was replaced by DET.

- On Thursday September 24th Jack was attacked at school. The school were going to call an ambulance, however on this day my husband was working locally. We were reluctant for Jack to be taken in an ambulance alone as this may frighten him, my husband went straight to the school and took Jack to hospital.

Jack was bleeding heavily, he had a number of very deep bite wounds, his injuries were so severe that he needed x-rays, Dr's thought the attacker's teeth had broken through bones in Jack's foot.

By Monday I still did not know what had happened, Jack was in hospital. I called DET head office and asked to speak to Mr Coutts-Trotter, I was told I could not speak to him as he was 'too busy', I was promptly put through to the Disability Consultant. From the outset she was very abrupt and unpleasant in her manner towards me, in fact the first thing she said to me was – 'I'm representing DET against you at The Human Rights Commission,' this was not said in a pleasant manner.

I went on to explain that I had not been informed about the details of the incident and therefore felt unable to send Ben back to school - I was not confident that he would be safe there. She became angry at this and said 'I don't know what you mean! Why wouldn't he be safe?!' She was clearly very agitated that I had requested an explanation about what had happened to Jack. I was shocked when she said to me 'I don't know what YOUR problem is.' I asked to speak to her supervisor, she refused to put me through to them or give me any contact details. I asked for the name of her supervisor and she refused to give me this information. Exasperated, and in tears by this stage, I put the phone down.

- DET has, to this day, refused to provide my family with a formal apology, according to DET they 'have done nothing wrong.' They will provide a 'statement of regret' but will not apologise, and will only issue a 'statement of regret' if I sign a release form. Releasing them of any further action.

DET refuse to acknowledge there was inadequate supervision on the day Jack was attacked, yet this was a savage, sustained assault, indicating that there was improper supervision for some time. Jack cannot protect himself, he would have been screaming and the child who attacked Jack had removed his shoes and socks. The school acknowledged that the other child had 'biting behaviours' and that they usually put the brakes on his wheelchair, however another child had removed the brake and this allowed him access to Jack. DET have refused to tell me who attacked my son and I do not believe their explanation of the assault. They have said that the child had as severe disability as I was initially denied a copy of the incident report by the Principal, it was provided at a later date by a DET solicitor. There is clearly a lack of understanding of privacy laws and freedom of information, I should have been provided this document when I requested it.

Jack was in hospital for a week and has been intermittently unwell since this attack. Jack has very poor immunity due to his disability and human bite wounds tend to become infected, Jack developed a severe infection in the wound requiring such massive doses of antibiotics for a protracted length of time, Jack lost over 3kg, he was underweight and is now very underweight. He has had sleeping problems since the attack and wakes screaming regularly.

DET have lied at every available opportunity and we have been treated very badly, all for seeking some answers from them about how they have treated Jack. The level of dishonesty and complete lack of accountability has shocked and appalled us, DET just 'closed ranks'.

Ironically, one thing that struck me was that part of the curriculum is teaching Values such as integrity and respect, this module is called 'Rediscovering Values'. It seems that DET need to rediscover their's and that this should be mandatory learning for DET management. Ethics were certainly absent in the treatment my family has received.

### **The DET Psychologist**

Following all of this I requested to explore other school options. In December last year I received a phone call from a DET Psychologist, she was calling to inform me that she had just completed psychological assessments on Jack and Ben. I was puzzled, I had never consented to anything of this nature. She asked if I wanted the results and said she was recommending that Jack and Ben stay placed at the current school.

I was stunned. Not only had she assessed my children without my consent but surely she could not undertake such an assessment without the input of the people who spend the most time with Jack and Ben – us, their parents.

I told her we were in the process of arranging private psychology assessments and that I could not understand her not requesting input or obtaining parental consent. I said that we wanted private assessments as we were trying to gain admission for Jack and Ben into a particular private school. She told me that they wouldn't fit the eligibility criteria judging by her assessment. Most alarmingly, she said that Jack and Ben 'should not have another psychometric assessment carried out within 2 years'.

I had already called several private psychologists and they had all told me that any assessment required our input, and that this was crucial, given Jack and Ben's disability. I told her this and made it clear I was very unhappy with the ethical issues involved in assessing a child without first informing the parents and gaining parental consent. She then began to tell me how she had had two recent deaths in her family.

When I read these assessments I was further shocked and appalled, the reports are of the lowest professional standard, so many details are wrong, date of birth's are wrong, ages are wrong, our address is wrong, diagnoses are wrong (one diagnosis does not even exist), physical details are wrong. An example of this – the report states Ben is 5, he was 7 at the time. It states Ben has breathing difficulties, he has never had breathing difficulties. It states Ben has reflux, he only ever had reflux when he was a few months old. The report is too full of inaccuracies to list and I have lodged a formal complaint with an external complaint body (having learnt from experience that it is a bad idea to complain within DET). These reports are obviously a result of not involving parents in the assessment process.

The psychological assessments breach DET policy, which states parent involvement is part of the process, it also states that psychological reports should be of the highest professional standard. These reports certainly are not of a professional standard.

### **Lack of Transparency and Accountability and The My School Website**

I would like to see the *My School* website expanded to include much more information about schooling for children with disability. In particular, there needs to be a facility for parental feedback about a school. Given the recent treatment my family received, I am of the firm belief that DET are incapable of transparency and openness and that this needs to be mandated as soon as possible. If we have more transparency we will have more accountability. The *My School* website is the perfect vehicle for this as it is accessible to all. For the welfare of all students, the current culture within DET needs to end. I will be writing to the Deputy PM about the need for more information on the *My School website*.

### **Education in other developed countries**

There is a discrimination going on in this country, admittedly other states are providing better education for children with disabilities than NSW is, but on the world stage we are embarrassing in relation to how we treat children with disabilities. There is open discrimination, if a child does not have a disability there are a variety of choices available for their schooling. If the child has a disability there are very few choices available. None of those choices are very good.

### **Human Rights**

It should be a basic human right for all children to be enabled and supported to fulfil their potential. The current 'education' system for children with disabilities in NSW is merely tokenistic. There is no investment in the education of children with high needs. If more investment is made in the formative years, children with disabilities achieve more independence and quality of life later on. This is also more cost-effective.

Tragically, Jack and Ben's disability will become more profound due to an absence of adequate education. Surely this is a human rights issue.

### **The overseas model**

The UK invest in quality education for children with special needs. The teacher to student ratios are much higher and each classroom has a specially trained Therapy Aide. Technology used in classrooms is much more advanced and all teachers are trained to use it. Equipment is provided when the child needs it, not years later.

In the UK all children have an 'Assessment of Educational Need' completed prior to starting school. The assessment highlights what the child will need in order to access an education equitable with their non-disabled peers (supports such as Physiotherapy, technology, specialised equipment, etc) and the local authority (council) must provide these things by law.

There are a growing number of people referring to themselves as 'Disability Refugees' or 'Education Refugees', they are parents who are relocating their family overseas in order for their child with a disability to be educated.

And we have the audacity to call ourselves a developed country.

Faye Galbraith