

**Submission
No 66**

**INQUIRY INTO STUDENTS WITH A DISABILITY OR
SPECIAL NEEDS IN NEW SOUTH WALES SCHOOLS**

Organisation: Northcott

Date received: 16 February 2017

The Hon. Michael Gallacher, MLC
Chair
Legislative Council General Purpose Standing Committee
Parliament House
Macquarie Street
SYDNEY NSW 2000

Dear Mr Gallagher

Inquiry into the provision of education to students with a disability or special needs in government and non-government schools in NSW

Thank you for the opportunity to make a submission to the General Purpose Standing Committee Inquiry into Education for Students with Disability or Special Needs.

Northcott is a client-centred, value-based organisation and is one of Australia's leading disability services organisations. We support over 14,000 people with disability to reach their full potential and fully participate in their communities. We work in partnership with clients, stakeholders and other service providers to assist people and their communities to achieve their goals.

As well as understanding the substantial evidence base that supports mainstream inclusion as the best driver of good outcomes for children with disability, our values are that all people should be able to live in an inclusive society and live the life they choose. We view mainstream inclusion for children and adults as a human right and this belief permeates all of the work that we do in all our services.

We provide over 100 different services and programs across all life stages from newborns to older people. We strongly support and demonstrate innovative approaches to ensuring that children and young people can access their full potential through the education system from early childhood to adulthood.

Should you or your team require further input in relation to our submission please contact Judith Carl Senior Manager Stakeholder Relations

Yours sincerely

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16th February 2017

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NORTHCOTT'S SUBMISSION TO NSW LEGISLATIVE COUNCIL GENERAL PURPOSE STANDING COMMITTEE NO. 3

**Inquiry into the provision of education to students
with a disability or special needs in government and
non-government schools in New South Wales**



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About Northcott

Northcott is a leading service provider in NSW and the ACT, providing services and support for people with disabilities, their families and carers. For over 85 years, we have supported children, young people and adults with disabilities to develop life skills, build confidence and become active participants in their communities. Today, we help more than 14,000 people, including many families and carers, driven by our purpose to build an inclusive society where people can live the life they choose.

As well as understanding the substantial evidence base that supports mainstream inclusion as the best driver of good outcomes for children with disability, our values are that all people should be able to live in an inclusive society and live the life they choose. We view mainstream inclusion for children as a human right and this belief permeates all of the work that we do in our early childhood services.

Our commitment to innovation and person centred practice allows us to tackle challenges that create barriers to people with disability to meet their potential. We work with young children with disability or developmental delay and their parents and carers to improve learning and develop capability to enhance transitions to their next stage of life such as school or work.

Our services also include providing care for children and young people in outside school hours care and during vacation times. At other times our team of fully accredited occupational therapists, physiotherapists and social workers provide therapy assessments and intervention. We work with individuals, families and staff to understand behaviour as a communication and to develop effective strategies to reduce behaviour that other people may find concerning. Our services include individual behaviour support, restrictive practices authorisation support and training and workshops to customers, families, carers and staff teams.

Many of our programs provide services to pre-school and school aged children and we work closely with the Department of Education in delivering these programs. In particular, Northcott delivers the Preschool Disability Support Program on behalf of the Department of Education. Our broad and lengthy experience shows that systemic barriers remain that make it difficult for children with disability or special needs to access education. While there have been some improvements since the 2010 Inquiry, support services remain fragmented, poorly coordinated and under resourced.

Northcott continues to support increased funding, better coordination and allocation of resources, clearer and consistent information dissemination and systematic development of broad educational resources and supports and strategic collaborations across the education system.

Recommendations

- 1 Delays in diagnosis and targeted therapy supports substantially disadvantage children with disability and special needs from fully accessing the education system. These negative impacts are particularly acute for the early years of education and need to be urgently addressed.
- 2 It is recommended that alternative strategies such as building teacher capacity and the use of technology that can be easily implemented be used to support children with disability or special needs to better access their education.
- 3 Undertake a targeted availability of collaborative school based therapy service programs in specific locations e.g. through the Connected Community schools that provide education to Aboriginal and Torres Strait Islander children.
- 4 More opportunities to be made available to raise awareness of the CATS program to drive a higher use of the program within NSW schools. While the CATS program use has increased following the 2010 Inquiry, extending its use further will better support children with disability and special needs.
- 5 There is an urgent need to prioritise and resource the development and implementation of a National Framework relating to the regulation of restrictive practises for children with disability or special needs within the NSW school system. Northcott is aware that current practises are not consistent with good practice and the introduction of this framework could substantially improve inclusion and the educational experiences of children with disability or special needs.
- 6 Positive behavioural support strategies are being successfully used in the disability sector and should now be used in the education system to better support children to access their education.
- 7 There is a need to establish a process for students with disability or special needs to access at pivotal transitional stages e.g. at Years 6 and 10, formal assessment from an occupational therapist to identify a student's personal goals and strategies towards further independence. This should be part of the formal school to work/further education transition planning for students with disability or special needs and ensure the career planning resources and supports are specifically tailored to help shape both parents and student's realistic future goals and aspirations.
- 8 In response to education experiences as detailed in the Case Studies schools conducting investigations into incidents or complaints about staff behaviour need to keep parents informed of progress. This is essential, particularly if the child is still attending the school.
- 9 Processes need to be established to ensure that parents of children with disability or special needs, particularly non verbal children, are given adequate feedback on any

injury that their child experiences while in the care of the school. All incidents should be recorded and include the staff involved in the incident.

- 10 When there is an investigation into the behaviour of an individual staff member, appropriate strategies need to be in place to ensure the child's ongoing safety and that the concerns of the parents are met during the investigation process.

Responses to the Terms of Reference

1. The equitable access to resources in regional and metropolitan areas

Northcott's submission to the 2010 inquiry highlighted access to therapy services as a key obstacle to children with disability being able to access their education. Our continuing experience at providing early intervention services indicates there has been little or no improvement since 2010. It remains an ongoing concern as it directly impacts the opportunities for children with disability or special needs to access their education and the resources needed to obtain an education. The implementation of the NDIS is unlikely to significantly address the issue, particularly for children who do not qualify for the scheme.

The Department of Education (DoE) acknowledges the importance of equitable access to allied health support. However, as with many other health related services, there are limited services available outside of inner metro areas, directly impacting the critical timing of diagnosis and follow up support, particularly in the early education and school years for children with disability or special needs.

1.1 Restricted access to relevant health professionals across NSW

Access to professionals for timely diagnosis is an ongoing and urgent need, particularly in regional NSW. A formal diagnosis is essential before children and their families can access necessary supports in the education system.

An inability to access relevant qualified health professionals can delay diagnosis and access to essential supports. An early diagnosis means that a child with disability or special needs can be supported to have positive learning experiences particularly in the early years which can substantially impact their later education experiences.

Northcott has experienced these issues in our role as the administrator of the NSW Department of Education funded Preschool Disability Support Program (PDSP). This program supports children with disability or additional needs in NSW community preschools. Regional community preschools frequently advise that due to the insufficient or delayed access to relevant health professionals for a formal diagnosis, children with disability or special needs are unable to access PDSP funding to support the child's early education needs. This in turn can lead to exclusion and/or greater financial burdens on families.

Community preschool funding in NSW is also restricted to four year old children unless they are of Aboriginal background or low income families. Evidence based research shows that children with disability and special needs greatly benefit from additional early years education. Funding three year old children with disability and/or special needs would help to reduce the disadvantages they experience in the early years education system and provide opportunities for staged introductions to the learning environment.

1.2 Restricted availability or access allowed to allied health professionals

Even after diagnosis, there are often further delays in obtaining therapy services caused by limited availability and/or access to allied health professionals. Some schools have 'closed door' policies that do not support a child's access to therapy within the school environment even though this is essential for the child's access to education and their ongoing educational needs. In many outer metropolitan and regional areas there are insufficient therapy services in local areas. This means that young children and their families have to travel long distances to access therapy services at a major centre, which can lead to extended absences from school.

These remain serious issues for many families even if a child is able to access services under the National Disability Insurance Scheme (NDIS). Children who do not qualify for the NDIS have even less access to services that can support their ongoing learning and education needs.

Northcott has developed and/or worked with three potential long term solutions to address these needs.

1. **Quarterly school health clinics** such as the Specialist Disability Health Team (SDHT) that is currently funded and delivered through NSW Health and the Department of Family and Community Services. This team is a combination of health and allied health professionals who visit regional schools on a quarterly basis. The teams are able to provide timely advice to both parents and teachers with opportunities to follow up each quarter.
2. **The implementation of collaborative school based therapy services program in areas of acute professional shortages** such as in Western Sydney, regional and rural areas. Northcott has delivered the Speech Pathology and Occupational Therapy (SPOT) program in 15 Western Sydney schools in collaboration with the schools and WentWest, the local area health service. The program was developed in response to acute shortages of speech pathology and occupational therapy in Western Sydney schools.
3. **'In-school' programs** where therapy is delivered either as a regular 'roadshow' or with dedicated school therapists. 'In-school' therapy programs provide improved access for outer metropolitan and regional schools. A demonstration of the success of this model is where Northcott is working in collaboration with Redfern Jarjum College to provide therapy supports to work towards reintegration of the children back into mainstream schools. This collaboration is achieving outstanding results for the children with some in 2016 achieving Naplan results for the first time.

The aim of the SPOT program is to enhance teacher capacity to tailor the curriculum to the communication and fine motor skills of the children in their classroom. This program involved allied health professionals visiting classrooms and holding staff workshops with the aim of building teacher capacity to develop more tailored learning goals and actions for their students with disability or special needs within the mainstream environment.

An evaluation of the program showed that teacher confidence had increased substantially. Before the project, 38% of staff reported feeling “very confident” or “quite confident” to tailor class programmes to suit children who have additional needs. After completion of the program, 87% of the teachers indicated feeling very confident or quite confident at tailoring programs and the curriculum to suit children with additional needs.

Teachers most valued the project’s relevance for the whole class, the practical suggestions and transferable strategies, i.e. strategies in SPOT can be used with future class groups and various age groups.

There were also significant successes for the children who participated in the SPOT program. Of the total number of 126 speech pathology goals that were set for 48 children, all but two of the goals were met or were greater than expected. Of the 87 Occupational Therapy goals that were set for 32 children all but five were met or were better than expected.

Parents involved in the capacity building sessions reported that they welcomed the opportunity to learn more about service availability and to have examples of what they could do at home with their children.

Recommendations

- 1 Delays in diagnosis and accessing targeted therapy supports substantially disadvantage children with disability and special needs from participating in the education system. These negative impacts are particularly acute when trying to obtain specialist diagnosis to establish eligibility for support during the early years of education and need to be urgently addressed.
- 2 It is recommended that alternative strategies such as building teacher capacity and the use of technology that can be easily implemented be used to support children with disability or special needs to better access their education.

2. The impact of the 'Every Student Every School' policy in NSW public schools

The 'Every Student, Every School' policy indicated that it would build on:

'funding agreements with non-government disability services for the provision of specialist assistive technology services'.

While this policy has improved the focus on students with disability or special needs, Northcott's experience, obtained from delivering collaborative school based therapy services, is that the policy outcomes need strengthening to ensure children can access necessary therapy services and supports within the school environment.

2.1. The need for improved teacher training, resources and tools

Recently, Northcott has delivered in collaboration with the Hunter and West Health Services and local schools, two school based therapy services programs. Both of these programs were designed to build teacher capacity to support the educational needs of individual students with disability or special needs. The programs are:

1. 'Partnership in Inclusive Learning project' (PILP) in Hunter/Central Coast
2. 'Speech Pathology and Occupational Therapy' (SPOT) in Western Sydney

Prior to the teachers participating in the programs, their confidence to support children with additional needs was low. Some spoke about the growing number of children who need additional educational support, with '**many more children coming into school with speech difficulties**' so they were always looking '**for more ways to help the kids**'.

Post-completion evaluation of the programs showed enhancement of participating teachers and parents' capabilities. Teachers' initial low confidence rating at supporting children with additional needs had increased significantly and they found the skills they learnt applied to all children not just those with special needs.

These programs were very effective at building teacher and parental capacity in the small number of schools that participated. However there remains a large unmet need for these types of programs in both outer metropolitan and regional schools.

A regular review of the existing resources, training and tools is required to ensure efficient and effective educational support of children with a disability or special needs, with targeted availability of collaborative school based therapy service programs for locations where there is a long standing lack of access to individualised therapy services as has been identified in outer metropolitan, rural and regional areas.

2.2. Encouraging collaboration in schools with an Aboriginal and Torres Strait Islander focus

Northcott is currently working with Redfern Jarjum College, a unique school that mentors, educates and assists local Aboriginal and Torres Strait Islander children who are failing at, or not attending, school. This partnership, which has been funded by Northcott fundraising efforts and private philanthropy, has provided therapy support to enhance the children's learning skills and educational development through school

based speech and occupational therapy. The partnership is successfully reintegrating Jarjum children back into education and their mainstream schools and actively pursues long term partnerships with families and the community to build capacity within families and the broader school community to achieve sustainable outcomes.

The Department of Education has created 15 Connected Community Schools in NSW to focus on the specific educational needs of Aboriginal and Torres Strait Islander communities. Aboriginal and Torres Strait Islander children aged 0–14 years are more than twice as likely as non-Indigenous children to have a disability¹. Many of these students will face similar educational difficulties as the children attending the Redfern Jarjum College children.

The Connected Community Schools offer opportunities to share educational challenges related to limited availability of therapy services. Providing opportunities e.g. collaborative forums, teacher capacity building and 'tele' strategies for sharing educational challenges and successful solutions offer alternative ways to provide scarce services and educational supports for children with disability or special needs within the Aboriginal and Torres Strait Islander communities.

2.3. Further promotion and use of existing student support programs

Northcott jointly manages the Computer Assistive Technology services (CATS) for the Department of Education in partnership with Cerebral Palsy Alliance. This program offers training and professional support for school staff on assistive technology, review of existing school technology as well as reviews for individual children.

Northcott is successfully using tele-therapy to deliver therapy services to customers in rural and regional areas and this is helping to overcome some of the chronic therapy shortages in western Sydney and regional and rural areas.

As indicated in our submission in 2010 NSW Inquiry, the existing CATS program budget is underutilised for its key purpose, with the volume of annual referrals declining in recent years. Some improvements have occurred, but opportunities remain to further raise awareness of the program to increase its use to better support children with disability and special needs within NSW schools.

Recommendations

- 1 Undertake a targeted availability of collaborative school based therapy service programs in specific locations e.g. through the Connected Community schools that provide education to Aboriginal and Torres Strait Islander children.
- 2 More opportunities to be made available to raise awareness of the CATS program to drive a higher use of the program within NSW schools. While the CATS program use has increased following the 2010 Inquiry, extending its use further will better support children with disability and special needs.

¹ Australian Bureau of Statistics 2014, *Aboriginal and Torres Strait Islander People with Disability 2012*, cat. no. 4433.0.55.005 ABS Canberra.

3 Developments since the 2010 Inquiry and implementation of recommendations

3.1 Urgent need to prioritise a Framework for Reducing and Eliminating Restrictive Practices

There is an urgent need to prioritise and implement the National Framework for Reducing and Eliminating Restrictive Practices in the Disability Services sector. All Australian Governments agreed to this National Framework in 2014. The National Framework focuses on the reduction of the use of restrictive practices in disability services that involve restraint, including physical, mechanical, chemical, or seclusion.

The National Framework is being successfully implemented across Australia and each state and territory regularly reports on progress in reducing the use of restrictive practices. The National Framework aims to contribute to the promotion and full realisation of all human rights for people with disability. The implementation of positive behavioural support strategies have been very successful across the disability services sector and they are substantially reducing the frequency and severity of restrictive practices. This in turn is improving the quality of life for people with disability.

As detailed in Northcott's submission to the 2010 inquiry, the education system is frequently experienced as punitive rather than educative for children with disability or special needs and has limited provision or supports to implement positive behaviour support. The implementation of the National Framework will reduce this punitive approach and instead help to focus on the educational needs of children with disability or special needs.

Northcott's experience working with students and families is that the approach to restrictive practices situation remains unchanged, with many schools still unable or unwilling to practice positive behavioural support strategies. Northcott offers individual support to parents with school aged children, and has supported parent complaints about the unacceptable use of restrictive practices on their children in school environments. The two case studies below indicate the typical experience of parents and children with disability and/or special needs within schools.

Case study 1: Boy, 14, metropolitan school - since 2015

Northcott's Behavioural Support team supports a teenager who demonstrates violent behaviour of hitting, pulling, and grabbing in response to feeling distressed or anxious. Recognised triggers are changes to his routine, sensory stimulation or social environment.

At his parent's request, Northcott developed a plan for the school to help keep staff safe, while at the same time encouraging the development of his communication skills.

The school disagreed with the strategies, stating that the immediate safety risks outweighed the gradual progression of the student's communication and coping skills. Instead, the school's response was to build a 5mx5m outside fenced area for the boy to use.

This approach may have been perceived as meeting the safety concerns for other students and staff, however it restricts the child's access to an inside environment, toilet, food and water and is an abuse of human rights. Northcott provided three further plans that had been developed with multiple specialists to support the child and keep staff safe.

Despite parental complaints about the treatment of their child and his access to education, the school continued to refuse to implement any of the alternative strategies. Eventually, the school requested that the child be removed from the school until he can receive disability support from the NDIS. In the meantime the child has no access to any form of education.

Case study 2: Boy five years old, regional school - ongoing

This five year old child has autism, is non-verbal and functions cognitively at the level of a 12-18 month old child. He attends the special educational unit attached to his local Department of Education mainstream primary school. An occupational therapist working with the child, witnessed the school using a belt to tie the child to a chair at times in the classroom. The therapist requested the teacher provide the paperwork associated with the use of restrictive practices for this child. The school did not respond to this request.

On another occasion, the teacher notified the little boy's mother that her son was tied to a chair 'for a while' as he was spitting. The teacher laughed about this during the notification process to the mother.

The mother has very serious concerns about her son's wellbeing at the school and since May 2016, there have been two meetings held between the boy's mother, the occupational therapist, the school principal and the Department of Education Regional Office.

Despite the mother's best efforts to find a resolution, she remains uncertain that the school is either able to keep her son safe or meet his educational needs. In response to her concerns and the lack of resolution from her complaints, the boy's mother has reluctantly withdrawn him from the school and is choosing to home school. The mother has submitted a formal complaint about the treatment of her child at the school.

3.2 Success of Positive Behaviour Support strategies

In 2009, the Department of Ageing Disability and Home Care introduced the *Behaviour Support: Policy and Practice Manual*². This effectively drove the implementation of a new approach to restrictive practices within the NSW disability sector and has resulted in a positive transformation of working practices within the sector. Not only have these practices improved the safety and work environment of workers, they have improved the quality of life and safety of people with intellectual disabilities receiving services and interventions.

The Behaviour Support Practice Manual offers resources, experience and models that could be modified for use in mainstream schools to immediately benefit children with disability or special needs.

Education staff are often aware of the management of risks in the workplace and classroom. Behaviour support practices to manage these risks without person-centred positive practices can impose an unacceptable and inappropriate level of behaviour

² Ageing, Disability and Home Care, 2009 *Behaviour Support: Practice Manual, Guidelines for the provision of behaviour support services for people with an intellectual disability*. NSW Family and Community Services.

support and reduce the capacity to effectively manage risks. Positive behaviour support also provides an ethical and resilient practice framework that could and should be actively pursued within the education system.

Northcott supports the introduction of a National Framework relating to the regulation of restrictive practises within schools. This has been discussed in many forums, including the Australian Law Reform Commission³, which in 2014 released a discussion paper about the application of restrictive practices and people with disability.

A National Framework could positively impact a variety of contexts for children with disability and special needs particularly in schools and offer more ethical and resilient practice and risk management frameworks, and substantially improve the learning environment for children with disability and special needs.

To assist with the cultural change, Northcott recommends that schools immediately be offered behavioural support training to assist principals and teachers to learn and develop the capacity to implement alternative behavioural strategies. Northcott already offers this support through its SPOT programs and has found it highly effective at building teacher capacity.

3.3 Focus on independence for transition to further education or employment

Developing independence for the transition to further education and employment are key outcomes for all students within the education system. However students with disability or special needs are often overlooked in the development of these skills. A focus on independence and eventual employment is an essential requirement for all students as they transition into adulthood.

Northcott offers two year vocational skills training and employment services to support school leavers with disability to build their confidence and achieve their individual career goals. Our experience from the delivery of these programs is that some students with disability or special needs leave school with 'learnt helplessness' that does not support their transition to further education or employment. This learnt helplessness means that these young people are then excluded from taking up transition to work experience and programs and reduces their readiness for work or further education.

After the 2010 Inquiry, Northcott welcomed Recommendation 26 of the Inquiry report that recommended:

"The Minister for Education immediately pursue with the Federal Minister for Education the inclusion of Life Skills as an essential component of the new national curriculum".

Northcott fully supports the full implementation of Recommendation 26 of the previous 2010 Inquiry. To support students and avoid the concept of learned

³ Australian Law Reform Commission 2014, *Equality, Capacity and Disability in Commonwealth Laws*. Discussion Paper 81, ALRC viewed December 2016 <<https://www.alrc.gov.au/publications/disability-dp81>>

helplessness, at pivotal transitional stages e.g. Years 6 and 10, an occupational therapist assessment should be used to identify each student's personal goals and strategies towards further independence. This would provide a 'road map' to support the student to independence beyond the school years.

3.4 Tailored career advice for students with disability or special needs

Northcott believes that the Department of Education has a role, and should take a more proactive approach, to ensure that career planning and advice is available for students with disability or special needs. Additional tailored support will go some way to support students with disability or special needs to become 'job ready' and to better participate in the workforce as they transition from school to work.

Through our vocational skills training and employment services, Northcott works with school leavers on their individual career goals. For some students with disability or special needs, parents set unrealistically high study/career expectations, and others set too humble expectations. Schools play a vital role to shape a student's realistic future aspirations.

The latest statistics of disability and employment from the Australian Bureau of Statistics confirm lower rates of attainment of both secondary and tertiary education⁴ for people with disability. The labour force participation rate remains low for people with disability. In 2012, 70.5 % of young people without disability aged 15-24 were participating in paid employment. In contrast only 54.5% of young people with disability aged 15-24 were employed⁵.

This participation rate discrepancy increases substantially with age as people without disability increase their labour force participation rate up until the 45-54 age group. Whereas the participation rate for people with disability peaks at the 25-34 age group and starts to slip at the 35-45 age group. This lower labour force participation rate entrenches disadvantage for people with disability across the life cycle.

There is a clear link between educational achievement and workforce participation rates. A tailored career planning approach is vital for all students, and is even more important for young people with disability or special needs, to avoid the predisposition to unemployment that all too frequently characterises their experience.

The Victorian Government's Department of Education and Training has prepared resources to assist with tailored career planning and at other critical transition points⁶. The Victorian resources have an emphasis on early proactive discussions to help shape both the student's and parent's expectations.

⁴ Australian Bureau of Statistics 2015, *Disability, Ageing and Parents, Australia: Summary of Findings*, cat.no. 4430.0 ABS Canberra.

⁵ Ibid.

⁶ Department of Education 2016, Victoria State Government Melbourne, viewed December 2016 <<http://www.education.vic.gov.au/school/parents/needs/Pages/careersupport.aspx>>

Recommendations

- 1 There is an urgent need to prioritise and resource the development and implementation of a National Framework relating to the regulation of restrictive practises for children with disability or special needs within the NSW school system. Northcott is aware that current practises are not consistent with good practice and the introduction of this framework could substantially improve inclusion and the educational experiences of children with disability or special needs.
- 2 Positive behavioural support strategies are being successfully used in the disability sector and should now be used in the education system to better support children to access their education.
- 3 There is a need to establish a process for students with disability or special needs to access at pivotal transitional stages e.g. at Years 6 and 10, formal assessment from an occupational therapist to identify a student's personal goals and strategies towards further independence. This should be part of the formal transition planning for students with disability or special needs. This will ensure the development of career planning resources and supports specifically tailored to help shape both parents and student's realistic future goals and aspirations.

4 NSW school systems complaint and review mechanisms for parents and carers

As a provider of therapy and behavioural supports to school age children, Northcott often supports parents who have complaints and have formally complained about the treatment of their children in the NSW education system.

The case studies, which are based on Northcott experiences, also reflect the experiences of many children and their families within the NSW education system. As the case studies indicate, due to the unsuccessful resolution of their complaints, many parents are forced to make decisions to move their children to either more distant but sympathetic schools, or resort to home schooling their children to ensure they have access to an education.

Case study 4: two children, 15, regional school, since July 2015 and ongoing

Both young people are non-verbal, with the ability of 18 month-2 year old child with either developmental or global delay. They attend the special unit of a mainstream local high school in a regional area and a Northcott Key Worker supports both students and parents.

At this unit, the students have experienced poor personal hygiene support, faced aggressive behaviour from staff, and been forced into care practices against their parents' wishes. The head of the Special Unit exhibits inappropriate behaviour and does not manage the poor behaviour of his staff.

One of the young people experienced a severe second degree burn on a community access event, with no explanation to their parents. Due to the poor follow up care, the burn has resulted in a significant scar. The young person often comes home with bruises and scrapes consistent with a fall. The mother has experienced the young person's reluctance to toilet train at home and they have returned from school with bruises and other injuries with no explanation.

The other young person has also experienced poor personal care practises resulting in further health complications and distress. The Unit Head tried to insist on the use of wheelchair when the young person does not need a wheelchair and the use of a pelican belt to manage the young person. The parents have these refused suggestions, as they are contrary to the wellbeing, educational and developmental needs and good personal care practices of the young person.

When an occupation therapist visited the school, they witnessed ill treatment in the classroom and subsequently prepared a mandatory report to the FACS Child Abuse hotline.

After a mandatory report was submitted, Northcott encouraged the parents to meet separately with the Unit Head and Deputy Principal to air their concerns. The school initiated an investigation into the Unit Head in July 2016. The outcome of this investigation is still pending, although the Special Unit head teacher is still in place.

Unfortunately there are no suitable alternative schools in the local area and the parents are forced to have their children attend this school while the investigation is taking place. The parents have reported slightly worse treatment of their children during this time with poorer physical care of their needs.

Recommendations

1. In response to education experiences as detailed in the Case Studies schools conducting investigations into incidents or complaints about staff behaviour need to keep parents informed of progress. This is essential, particularly if the child is still attending the school.
2. Processes need to be established to ensure that parents of children with disability or special needs, particularly non verbal children, are given adequate feedback on anyh injury that their child experiences while in the care of the school. All incidents should be recorded and include the staff involved in the incident.
3. When there is an investigation into the behaviour of an individual staff member, appropriate strategies need to be in place to ensure the child's ongoing safety and that the concerns of the parents are met during the investigation process.

5 Any other related matters

Northcott has no response on other matters.

Conclusions

Northcott welcomes this inquiry to provide continued focus on the quality of education for students with a disability or special needs in the NSW education system.

The fundamental change which needs to be considered is the prioritisation of the introduction of a National Framework for Restrictive Practices. We believe this will change the attitude and culture towards these students, and encourage positive behavioural changes.

Northcott's collaborative school based therapy programs are introducing this new mindset; however a National Framework will ensure consistent approach throughout a variety of contexts including NSW schools.