REPORT OF PROCEEDINGS BEFORE

STANDING COMMITTEE ON SOCIAL ISSUES

INQUIRY INTO TRANSITION SUPPORT FOR STUDENTS WITH ADDITIONAL OR COMPLEX NEEDS AND THEIR FAMILIES

CORRECTED

At Sydney on Monday 10 October 2011

The Committee met at 9.45 a.m.

PRESENT

The Hon. N. Blair (Chair)

The Hon. G. J. Donnelly
The Hon. K. Faehrmann
The Hon. N. Maclaren-Jones
The Hon. H. M. Westwood

CHAIR: Welcome to the second public hearing of the Standing Committee on Social Issues inquiry into transition support for students with additional or complex needs and their families. Today we will be hearing from TAFE NSW, the New South Wales Parents Council, Autism Spectrum Australia and National Disability Services, as well as a number of parents who have children with additional or complex needs. We will also hear from witnesses from the National Disability Coordination Officer Program and New South Wales government agencies.

I will outline the broadcasting guidelines. The Committee has previously resolved to authorise the media to broadcast sound and video excerpts of its public hearings. Copies of the guidelines governing broadcast of the proceedings are available from the table by the door. In accordance with Legislative Council guidelines for the broadcast of proceedings, a member of the Committee and witnesses may be filmed or recorded; people in the public gallery should not be the primary focus of any filming or photographs. In reporting the proceedings of this Committee the media must take responsibility for what they publish or what interpretation is placed on anything that is said before the Committee.

Witnesses, members and their staff are advised that any messages should be delivered through the attendants or the Committee clerks. I also advise that under the standing orders of the Legislative Council any documents presented to the Committee that have not yet been tabled in Parliament may not, except with the permission of the Committee, be disclosed or published by any member of such Committee or by any other person.

In camera deliberations: If you should consider at any stage during your evidence that certain evidence or documents you may wish to present should be heard or seen in private by the Committee the Committee will consider your request. However, the Committee or the Legislative Council itself may subsequently publish evidence if they decide it is in the public interest to do so. Finally, I remind everyone to turn off their mobile phones for the duration of the hearing.

SUSAN JOHNSTON, Disability Teacher-Consultant for Students with Neurological Disability, TAFE NSW, Sydney Institute, and

TINA BINEPAL, Disability Teacher-Consultant for Students with Intellectual Disability, Sydney Institute, affirmed and examined:

CHAIR: Would you like to make an opening statement? There is no requirement to do so but if you are happy we can move straight into questions.

Ms JOHNSTON: I would like to clarify that we are representing the disability teacher-consultants at Sydney Institute as opposed to TAFE NSW generally.

CHAIR: Thank you. If you do not want to give an address we will go into questions. If you want to you can take questions on notice if you do not feel you can provide an answer now.

The Hon. HELEN WESTWOOD: Thank you for appearing today. I understand that this experience can be a little nerve-wracking for people for the first time but it is great to have the information that you have, particularly as practitioners. No doubt if you are representing other consultants for students with disabilities you will have some of their experiences to draw on as well and that is great for our purposes. In our last hearing we were talking about older students. Not all witnesses had a lot of experience in that area so it is great that you are here with us today. Can you tell us in your view what are the key elements of successful transitions from secondary school to TAFE and to the workforce?

Ms BINEPAL: From our experience, one of the key elements that we need is collaboration and planning between school and post-school services. That is a real gap we have found. Through that collaboration and planning we need some strong case management for the individual because once they leave school they have lost the 12, 13 years of structure that they had prior to that. Then there is a kind of fractured services providing—if they come to TAFE they might only be with us for six months, and then what? There needs to be some overall plan to assist them on the path to employment. For that person within case management there is a strong need to have people outside the education system who are trained and qualified to meet the needs of a person with complex needs. In school you have trained teachers. At TAFE you have trained teachers. But in a lot of other organisations there is a rapid turnover of staff. They are often dealing with people who have no formal qualifications to address these issues.

Ms JOHNSTON: In addition to that, it is important to recognise that different areas of disability have different needs in terms of the support that the students require. So there is not a one-size-fits-all across the board. We work with students on spectrum disorders. There are people who have really mild disabilities and people who have very complex needs. One service does not fit all of that. So there needs to be an incredible amount of flexibility in the service providers and I think that is probably one of the things that I find most difficult about some of the transition to work programs that are operating at the moment. There is a lack of flexibility in terms of the way they meet the needs of students. Another thing is it makes a huge difference if students come in with some kind of vocational experience or work experience or an idea of what they might be able to do. Often we get year 12 leavers who come in and say, "I want to do animal attending" but they have never been in a vet practice, they have never had any sort of work experience, and after a day cleaning out dog kennels they decide they do not want to do animal attending.

Disability support in TAFE NSW is quite expensive and we are under increasing pressure in terms of our budgets because of the changes in the funding in vocational education and training [VET]. It makes a big difference for us if we get students who go into programs that they are not suited for. Often there is a tendency for students to be placed in programs without any of that consultation that Ms Binepal was referring to. So there are students who do not even meet a disability teacher-consultant, who are just placed in a program; then we are informed that they are there and we have a responsibility to provide their reasonable adjustment. If that program is not suitable for that student or the student is not ready for that program for whatever reason, it can be very wasteful. There are personal costs to that, of course. That is probably it.

The Hon. HELEN WESTWOOD: What is the process for that placement that then facilitates students being placed in a program without consultation with specialist consultants such as yourself?

Ms JOHNSTON: There is a process in that we get referrals. We get parents who refer students to us. We get students who self-refer. We get agencies that bring students. But there are many agencies and parents who do not come through our unit, who just choose a program from the TAFE website and help their child or client enrol in that program. It is only after they have started that we even get to know that they are there. Of course, that seems to happen more for people who have moderate disabilities as opposed to people who have very complex needs.

Ms BINEPAL: To clarify, any student can enrol at TAFE. That includes any student with a disability as well.

The Hon. HELEN WESTWOOD: Is that for the service provider as well as for a work placement with an employer? Are employers as flexible as they need to be?

Ms BINEPAL: In a lot of our courses, especially with students with intellectual disabilities, we have specially designed courses for them which we call access courses, and as part of those courses we do on-the-job training through work placement, which is an integral component of that course. We rely on goodwill and contacts to get employers on board to provide a placement for a student. I am not sure if I have answered your comment. The flexibility comes through the employer knowing that the student that they are accepting will be supported by us. Often there is a period of time where before the employer might feel comfortable, yes, the student can do this job, and be prepared to have them there as we fade out our support. But if someone has got some disability or has some special needs they do require further support.

The Hon. HELEN WESTWOOD: Is that part of your role, to do that liaising with employers, to find appropriate placements for students?

Ms BINEPAL: Yes—when 'workplace' went as one of the units within a course—yes, that is our role to do that.

Ms JOHNSTON: The transition to work providers often place students or people in work experience. For instance, I had a young woman with autism who was referred to me recently—or six months ago I met her—and she expressed an interest in doing animal attending. Her transition to work provider actually organised a work experience placement and she very quickly changed her mind. She then decided she wanted to do something in business admin and again the transition to work provider organised a work placement. So that is what she is going to be doing next year, probably something in business admin. But there is great variability in transition to work providers and there is great variability in employers. I think one of the great frustrations that we have is that we get people through training and they cannot get a job. You know I have a young man with autism who completed a diploma in library practice and must have gone to 60 interviews but just could not get placed in a position, and he would have been a brilliant employee. There are lots of frustrations for us. As a general part of our role we do not actually have an employment placement responsibility.

Ms BINEPAL: Can I just clarify one point there: when a student is enrolled in a mainstream course work placement might not necessarily be a part of that course. We had an instance recently where a student enrolled in a mainstream course—it was in the area of hospitality—and we recommended that she be funded through the Transition to Work Program, that a transition to work service provider provide her with some relevant work experience to complement the TAFE part of her course. In that case the service provider set up a placement for her in a cafe but without actually doing any negotiation and support with the employers. So within the first day the employers gave the young lady some money, feeling sorry for her, and said, "Look, we can't really have you here," and that was the end of the placement. So, yes, we cannot always control that side of it. It is only when the work placement is a part of a specially designed course that we support them in work placement.

Ms JOHNSTON: Just a comment in terms of flexibility of the Transition to Work Program: different providers have different models for doing their Transition to Work Program. I think Tina was talking about one earlier where all of their transition to work funding goes into individual workplace support and they work with people with intellectual disabilities. There are other providers who run maybe three-day employability skills programs and all students have to go and do those three days in employability programs, whether they need that or whether they do not. One of the difficulties that we have around some of the provision is that it is locked in by the organisation that provides the Transition to Work Program and there is no capacity or maybe a reduced capacity for us in TAFE to actually get the kind of support that the student might need for the TAFE component in the TAFE program because they have to do stuff with their transition to work provider.

The Hon. GREG DONNELLY: Thank you for coming along and giving us a chance to ask you some questions. You have provided a very good submission. On the bottom of page 1 you say:

> There are a growing number of students who attend TAFE and have been assessed to be eligible to access funding for additional support which is provided by the Department of Aging, Disability and Home Care, Department of Human Services, NSW through the Transition to Work program.

Are you able to give us any sense of what that increase has been with your experience? Are we seeing a rapid increase taking place now or is it part of a long-term gradual increase? What is your general sort of assessment of what is the trend?

Ms JOHNSTON: I work with students with neurological disability and there are two teacher consultants at Sydney institute, or three actually, who work with neurological disability. Two of us are based at Ultimo and we have a 30 per cent increase annually in our numbers.

The Hon. GREG DONNELLY: Thirty per cent year on year?

Ms JOHNSTON: For the last couple of years we have had that. We have seen huge increases. A lot of students who sit on the autism spectrum, particularly Asperger's syndrome, are coming into TAFE. Acquired brain injury is fairly stable, I think, but students are more complex and we are getting more and more students with multiple disabilities and really complex needs, so probably neurological disability. I work with learning disability, attention deficit disorder, autism spectrum disorder and acquired brain injury plus a multitude of other syndromes that are not all that common. I would say learning disability is also on the increase. That manifests primarily as dyslexia. So reading and writing issues and maths issues and autism spectrum disorders would be the two in my area that are rapidly increasing.

The Hon. GREG DONNELLY: Does that increase come about, are you aware, because TAFE is perhaps promoting itself as an opportunity for people with disability to obtain further training and education or is it just that people are becoming aware or parents are becoming aware that these are perhaps possibilities for their children to sort of attend TAFE and do some training?

Ms JOHNSTON: My response to that would be that TAFE is the only DET provider that offers any kind of quality for school service in terms of vocation education and training. For example, I had a student last year who came into TAFE to do a diploma in community welfare and she had done a certificate IV in community welfare through a private provider. She did that course over six weeks. In TAFE it is a 12-month program with compulsory work experience. I think off the top of my head it is about 108 hours of compulsory work experience. She had no work experience. So she came into TAFE to do a diploma and had quite severe and significant disability issues and had to do not only the diploma requirements but she had to do the 108 hours of compulsory work experience to be able to do the TAFE diploma, because it was a pre-entry requirement. So the adequacy of her training in terms of the certificate IV was extremely questionable and she had no disability support whatsoever. So the whole training came under question really and she ended up not continuing in that program, which was really quite sad. But she did not have the pre-requisite skills to do a diploma course.

The Hon. GREG DONNELLY: Could you elaborate on that? We hear from time to time about a question mark over non-TAFE training providers and a question mark over the bona fides of the qualification that they may provide to people enrolling in courses. Are you saying in that example there was a real question mark over the qualification that had been awarded to her?

Ms JOHNSTON: Compared with TAFE training I would say yes, there were massive questions. I mean this young woman had quite severe dyslexia, so her reading and writing skills were very poor. She had co-morbid mental health issues. I mean the suitability of her working as a community worker anyway needed to be determined in some respect or in some sort of negotiation and that is certainly part of what we do as disability teacher consultants when we do have the opportunity of meeting our students. It is a question of determining how suitable this is for her as a career choice. There is a process that we work through. We all work very much on a rights model so students have the ultimate decision about what they do but we all greatly believe that information is power really, isn't it, and getting as much information as you can about what your options are really helps. Quite often people with disabilities have not had the same kind of exposure. You know kids now get part-time jobs from the time they are 15. People with disabilities quite often come to TAFE as year 12 school leavers, never having had a part-time job. So there is all of that sort of disadvantage that just goes completely unseen when you are working with people with disabilities.

The Hon. Cate FAEHRMANN: Thank you very much for your submission. As Helen mentioned, it was really good to be able to get something that explores the school to post-school option a bit more, because we had some questions about that at the first hearing a couple of weeks ago. I just want to explore a little bit more about the 30 per cent increase in students with complex needs or disabilities. Clearly your funding has not increased by 30 per cent each year to cope with that increasing demand. Can you tell the Committee how it impacts on the work you do and on students as well and whether their needs are being met at the moment through the system. Of course, these are the students that are enrolled, not the ones that do not make it.

Ms BINEPAL: Do you want me to say something too?

Ms JOHNSTON: Yes, probably both.

Ms BINEPAL: I guess the 30 per cent increase, just to clarify, is really in terms of students with a neurological disability and autism spectrum disorder. I mean across all disabilities there is not a similar increase but there is generally an increase in numbers of students who are accessing disability services so in that term, yes, it is. We are a government-funded organisation. We struggle to meet the needs of our students and there is a best practice which we know but there is the reality of what we can offer. We try to meet the needs of all the students but, speaking for myself, I do not necessarily always feel I am doing the utmost for every student who comes through my door in terms of meeting all their educational needs. But you do what you can within your budgetary constraints.

Ms JOHNSTON: I think the nature of disability provision is different within each category as well: Different disabilities have different kinds of programs and different kinds of support requirements. In my area, there is a lot of need for mentoring. I do a lot of mentoring. We are under a lot of budget pressure. I do not know; I mean, I do not think there is any student that comes to Sydney Institute that has at this point been turned away or whose support needs have not been met, but as our budget situation becomes tighter, maintaining that level of service becomes more difficult.

I encourage students to study part time as opposed to full time. I can provide this level of support for you, which will get you through this load, basically: so there is quite a bit of that. The other thing is that there is an increasing push in vocational education and training to high-level courses—this is both Federal and State government funding heading into certificate III courses and above—and quite often people with disabilities do not have the entry skills that are required to study at that level. We are constantly trying to get students to upskill before they move into their desired vocational program, so there is a lot of that stuff as well. We are getting people into foundation skills programs first, particularly in my area. I have a lot of students with literacy issues. But, it is a balancing thing, you know.

The Hon. CATE FAEHRMANN: Now with Transition to Work [TTW], in your submission you mention a few problems with it and also you talked about different models provided by different providers. What specific recommendations do you have, particularly in relation to TAFE's involvement with TTW, to make that a more effective program?

Ms BINEPAL: One of the first things, as I mentioned before, is having a plan and having some kind of collaboration between services so that when a student comes to TAFE we can really target and meet the specific needs that have been identified rather than flounder over the two years before you find that maybe this is what is more suited to the student.

The Hon. CATE FAEHRMANN: Do you mean a transition plan? They all have transition plans, do they—or do they not?

Ms BINEPAL: As a disability consultant at TAFE, who interviews a lot of students who are receiving Transition to Work funding, I have occasionally, very occasionally, seen a short six months plan or some kind of plan that the student comes with, but in most cases there is no plan.

The Hon. CATE FAEHRMANN: So it is not a requirement on service providers, who get the funding, to ensure that every student has a plan?

Ms BINEPAL: I am not sure what their funding requirements are, but I have not seen those plans. I ask for them, but they do not seem to be there, readily available. Sometimes that is part of the problem because within the TTW you are dealing with a lot of different services. I am not saying what works or that the effect of one service compared to the other is the same; some services are more proactive and planned in what they do. But certainly the planning is an issue.

The other thing is that sometimes it almost feels like students are dumped at TAFE as opposed to attending TAFE as part of a two-year transition plan. They are actually receiving funding for those two years. We are here providing them, as with all students regardless of whether they are TTW or not, but do not charge them for the service we provide. We are providing them with that service.

The Hon. CATE FAEHRMANN: Again just to clarify that, TAFE does not receive funding from the service providers who are receiving funding from the government for the TTW program when the students come to you.

Ms BINEPAL: No. There is a memorandum of understanding between Ageing, Disability and Home Care [ADHC] and TAFE saying that we will provide them with a free service.

The Hon. CATE FAEHRMANN: Wow.

Ms BINEPAL: Yes. It is certainly an issue for us.

The Hon. CATE FAEHRMANN: Absolutely.

Ms BINEPAL: We are looking at these students, who are funded, and providing them with this service. But we provide a free service to any student with a disability who comes to TAFE. They are entitled to one free course per year and another one at a reduced cost. They receive that same funding.

Ms JOHNSTON: But in addition to that, they also receive their reasonable adjustment, and that is what costs TAFE. For instance, if you have a student who comes in to do a part-time IT program through a Transition to Work provider, the Transition to Work provider does their stuff and the student comes to TAFE, and we provide all of their reasonable adjustment. If they have a two-hour-a-week tutorial or if they have a note taker, that is all funded by TAFE. That is a little bit of an issue. Some of that reasonable adjustment really could perhaps be provided through the Transition to Work program, particularly the tutorial stuff.

I have worked with Transition to Work providers who have done that. They have sent to the provider what the student is working on and they work through the notes. They might attach pictures, or whatever the student's reasonable adjustments are, but there are the providers who do not do that. There are other providers who say, "That's your problem. You deal with it." And they do whatever they do, which we do not actually even know. We do not know what it is they do. That is quite a significant problem for us.

Ms BINEPAL: Another thing is that we had a student who was doing a course in panel beating and spray-painting. The student had fairly complex needs. We wanted the TTW service provider to provide that person with a work placement. They would have needed a lot of supervision for that work placement, but the TTW service provider said, "No, the only work placement we have available for that student is in retail." Now, they are doing a course in panel beating and they are providing them with work experience in retail. That is not really meeting the person's needs. This person is receiving this funding for giving service to that person, but it is not the best outcome for that individual.

Ms JOHNSTON: We had another situation in which a student was doing a three-day program in TAFE and one of those days clashed with the Transition to Work provider's program at their location. It was just a dogfight trying to negotiate for the student to be able to attend their TAFE program. That kind of stuff is not supportive. You cannot just not attend one day of your program. That was a really huge problem as well.

CHAIR: Can I just pick up on the TTWs as well. Is the funding for those time-limited, or does it cease once they are transitioned into a workplace?

Ms BINEPAL: No, it is limited to two years with a possible extension for another six months.

CHAIR: Picking up on the point where you said there is a feeling that students may be dumped into the TAFE system, if a student passes a course within six months, from your experience is there a case of maybe the service provider is encouraging them to go on further at TAFE to continue their funding? What I am saying is: Is there an experience of the providers trying to keep them in the system to maximise the funding for the two years, rather than the main focus being to get them into the workplace?

Ms BINEPAL: We have had that instance where a student might have done a course in the first year of the Transition to Work and the funding is for two years, and at the end of that first year the student may be ready for work—they have done a work placement, which has been successful, and they have successfully completed the course—but we have had a couple of instances, that I know of anyway, where the student has then been held back in the Transition to Work because they are there for the two-year period.

In fact sometimes we suggest to the Transition to Work service providers that the student is better doing the course in the latter half of the two-year period so that at the end of the course they can go on into job seeking. Remember that often with our students, once they have done a course and then they go and do something else, those skills are not necessarily maintained. I guess that is the case for any student, but for a student with a disability that is a major issue.

Ms JOHNSTON: Given the lack of exposure that a lot of young people with disabilities have in terms of work force engagement, perhaps using that first 12 months in a variety of work-based placements in a variety of industries and locational areas would give the student a bit more information in terms of choosing a career option so that in the second year of their program, they come to TAFE knowing, "Yes, well okay, I want to do retail."

CHAIR: But surely that would come back to the main point that you made earlier—that a proper transition plan that may suggest that the training is held off until latter part is key. The only way to make sure that that would be successful surely would be to have the educator, which is the people from TAFE, involved in the development of that plan and not just the service provider.

Ms JOHNSTON: Well, to be quite honest, the difficulty there is that I have something like at the moment 110 students that I case manage. My colleague has approximately 120. If you want me to be involved in the Transition to Work meetings on top of my educational load, that would kill me.

CHAIR: Sure.

Ms JOHNSTON: I have colleagues who work in mental health who have double my caseload. It is just not possible for us to do that.

CHAIR: No, but a perfect solution would be to have someone from your organisation involved in at least the development of the plans. Would that be a better scenario?

Ms BINEPAL: As long as there is a plan that involves people who know that person and can case manage. That could be from the school perspective as well. Transition to Work kicks in when the student leaves school and they have had a history of knowing that person. There are other people out there who know that person. When the student comes to TAFE, we have not had a history of involvement with them, but we can be part of that plan if there is an overall plan, yes.

CHAIR: You identify their special needs at the enrolment stage, if they tick the right boxes.

Ms BINEPAL: Yes, or they organise an appointment and come and see us. Quite often the service provider, the parent, or the school might organise.

CHAIR: Or the teacher?

Ms JOHNSTON: Yes.

CHAIR: Maybe someone involved in the class identifies the special needs?

Ms BINEPAL: Yes, definitely.

Ms JOHNSTON: Yes. We get a lot of referrals from school transition officers.

The Hon. NATASHA MACLAREN-JONES: I have a question relating to access courses. In your submission you mentioned that places are limited. How many places are available? On average, how many applicants are turned away?

Ms BINEPAL: We do not have a set number of places. You see, what happens at TAFE is that when a student enrols in a mainstream course, they are entitled legally to receive reasonable adjustment as part of that course. An access course is specifically designed for students with disabilities. They are very resource-intensive. They are expensive courses to run, there is no doubt about it, but for some students that is their only option. We run those courses. For next year, I am looking now at what kind of interest and inquiries I am getting, and we will run a course in that area. But we cannot run a course in every area. For example, I have a lot of students who are interested in business administration and office skills, and I have students interested in retail and students interested in a panel beating and spray-painting course. They are all access courses. Really, I do not have a budget that can meet all those, plus all my mainstream students. I have to pick and choose and say, "Okay, we will run this one according to meeting maximum student demands." There might be others who cannot access courses. I could not really say how many numbers we have.

Ms JOHNSTON: Could I just make a comment about access programs as well? If I can put it in context for you, an access program for a person with an intellectual disability is like a deaf interpreter for a deaf person. People with intellectual disability quite often require a different sort of presentation of material and a different sort of teaching. An access program for someone with an intellectual disability is like technology if you are blind or is like an interpreter if you are deaf. In addition to the access program, quite often people with intellectual disability still require reasonable adjustment in terms of additional learner support or other things. The access program is purely that: It is like a point of access to TAFE.

Because probably 99 per cent of my students are involved in normal mainstream programs, I run one access program for people with an acquired brain injury in computing. That is purely financial because it is much better to run a small group of six for people with an acquired brain injury on basic computing than to have them spread across six mainstream classes where they would need a lot more support. So the programs that I run in that respect are slightly different to the ones that Tina runs. But it is about access and I think a lot of times that is missed when we talk about intellectual disability because it is as vital for a person with an intellectual disability as a deaf interpreter is for a deaf person in a mainstream classroom.

Ms BINEPAL: To clarify that, with access courses, many of my students, if there was not an access course, it would mean no TAFE at all for them. That is the only option for them.

CHAIR: Thank you very much for your submission and coming along this morning to give evidence.

(The witnesses withdrew)

ROWENA STULAJTER, NSW Parents Council, Community Development Manager,

SHARON, Parent, and

AMBER, Student, affirmed and examined:

CHAIR: Would anyone like to give a short opening statement? You do not need to repeat anything that is already in your submission, and please try to keep it brief, to approximately five minutes.

SHARON: We can give an overview of Amber's experience of transition today because Amber has had lots of experiences with transition. Amber is currently at a satellite class which is part of St Lucy's Special School in Wahroonga. We have experienced transition at various stages of Amber's life. I think the experience to start with was moving from preschool to primary school. It was a really difficult time because Amber had attended five preschools between the age of 18 months and five years. Part of the reason for that was because we could not get a place in a community-based preschool. There were really long waiting lists. We waited two and a half years to get a place at a community preschool.

We ended up getting two days a week, although we had applied for five days but we took what we could at the time because you take what you can. But the preschool at least had some funding which offered Amber support. So she had to attend a private preschool as well, three days a week. We trialled Amber going to Cromehurst, which is a special needs school in Lindfield. They have an early intervention program but that did not work. Amber started regressing and the school was more moderate to high support needs while Amber's needs are quite different. So, going to school, we had been through a lot of services. The other thing that Amber did was, we were lucky that my mother-in-law was well enough at the time, Amber went to a Social Skills Group. Do you want to talk a bit about what you got out of the Social Skills Group, Amber? That was an eight week program with Ian, your OT. What did that help you do, the Social Skills Group?

AMBER: Nothing.

SHARON: Yes it did. It helped you tie your laces up, didn't it?

AMBER: But I didn't know then.

SHARON: No, but it helped prepare you for school, didn't it? So they did a little bit of showing her how to get her lunch out of her bag and all those sorts of things. But we were only able to get Amber there because my mother-in-law was available, so she could transport her there and back, otherwise we would have basically had no transition support planning into primary school. We were lucky that we secured a place at St Lucy's Start Right Program, which was fantastic. I had to fight, scream and jump up and down to get Amber into one day a week at our local mainstream school while she attended the St Lucy's program. The reason I had to fight for that was, I wanted Amber to have the experience of a mainstream setting to see how she went but also to make friends locally because the kids at St Lucy's are from all over Sydney Metro region and we felt it was important that Amber have local friends and have networks that are created and also just to see how she would go in a mainstream setting. At the time I was working with the Catholic education, I worked at Centrecare, so I knew all the people and the networks but I still had to sort of jump up and down screaming, more or less, to get her into that one day a week mainstream.

Over the time, there was a plan to transition Amber back into mainstream school, back into St Thomas school at Willoughby. I think it was more of a shock than we thought when she did move back into mainstream. I was talking to Rowena about some of the issues, one of which was that there was no monitoring of how she would go back in a mainstream setting. We were quite devastated really because when you would pick her up from after school care, you would find out that she had no-one to play with in the playground. Amber also was bullied at St Thomas quite severely by a girl and that further alienated her from her peers. We noticed the gap was getting bigger academically. Amber could not read or write by Year 4.

What other things Amber, do you think, at St Thomas? I had an idea to set up structured activities for lunch time, so kids that were like Amber that were alienated would at least be part of a program. We had an art club, a chess club, so that is something that is still going at St Thomas which was set up because of Amber. That seemed to work really well. The learning support teacher only had two hours a week to offer Amber, which just wasn't enough. She was in a class of 32, and Amber being quiet and shy, she basically just fell by the wayside. She is so quiet, she got lost in the system more or less. As they said, she was never any trouble, she was always quiet. But "quiet" was often the fact that she was not able to, as you said, you couldn't do the homework, could you? And self-esteem was just, by the end of Year 4 her confidence had gone, her self-esteem had gone. We made a decision that was really hard and I remember crying, going to St Lucy's to the Principal and talking to her about Amber going back into Aim High at St Lucy's for Years 5 and 6. I remember having tears rolling down my face saying, "Well, what option have we got academically?" You could see she was struggling, she was falling further and further behind. Socially she was struggling. Her self-esteem and her whole sense of self was just going. So we made the hard decision to go back into St Lucy's. But I have to say that the Aim High program has been phenomenal. Since going back to St Lucy's and we transitioned back into a satellite class this time, so not a mainstream but a satellite class, so we have had all experiences within the education system. But Amber's self-esteem and confidence—she learned to tie her shoelaces up within one term, which was just amazing, we had been working on it for the previous twelve years, since she was about two. So it was just amazing to see the charge in confidence. Academically, she is now reading at, what level are you at?

AMBER: Level 22.

SHARON: Level 22 with reading. She has started reading everything. We have to be careful now because you cannot leave notes around the house. But she reads everything, even signs. It was like this little light globe came on and she just had this spark of wanting to read, wanting to learn and it was just amazing. So I think transitioning back into that satellite setting, again we have been lucky. At St Lucy's it is embedded within the school culture and planning. I think part of our problem at St Thomas was, there was no monitoring or no seeing how Amber was writing. She just, it was a bit of a roller coaster, going back into mainstream. I think having that support at St Lucy's definitely, for us, has been a saving grace with Amber. Just seeing her confidence—she is now in Scouts and just so confident with life.

And we are now in the process of planning for high school, as Amber goes to high school next year. To be honest, high school is like a black hole. You ask families what is out there. We were fortunate that we managed to get a place that someone else declined. They have a couple of places at Brigidine College in St Ives for special needs and they have a special needs unit. It was just like the stars aligned. Someone gave up the place, that is how we got it. Otherwise, to be honest, I still would not know where we would be sending Amber next year. It terms of mainstream, there is one school perhaps in the whole region that Amber could go to, which is Chatswood, which has a special support unit. But I know that school and there is a lot of bullying and other issues within it.

It is a great school, don't get me wrong, but it is not the school for Amber. It is too big, she would get lost. So Brigidine for us is, you know, an option that we are going to trial. We do not know how it will go. It is just like St Thomas, we tried that and it did not work. We are hoping that Brigidine can work for us. But it is one of those things, you have just got to see how your child goes and what support is available. But high school for a lot of families is just scary because there is nothing out there, there is no funding. We are having to pay $14,000 plus a year in fees because we cannot find another place in a public sector school. So for us, they say people have choice in schools, which we all should have, but a lot of families do not have the choice because you have just got to go where the support is and where the need is. So I guess we are now embarking, which is scary, on high school. We are starting to try and pressure the school because we have not heard anything yet. It is getting to term four and we are worried about transition planning. Amber's biggest fear is getting lost within the school. My husband's and my fear is about the academic situation and—

AMBER: Road safety.

SHARON: That is one of my huge fears. Amber has to catch a train and a bus to school and I am petrified. She is not the best with traffic. I do not know how we are going to work that one out. It is a 45-minute trip. Then we have the issue that I always worry about; that is, bullying. Amber experienced quite severe bullying at St Thomas.

AMBER: She called me names, locked me in the bathroom and hit me against walls and all that.

SHARON: Amber talks quite calmly about it, but what she went through was horrendous. Our big fear for high school is the bullying and whether she will be targeted. She is quiet and has a very gentle nature. We worry about that because often the quiet ones are targeted. We have been through lots of transition, mainly because of the amount of change we have had to go through to find the right services and supports for Amber. It has not been easy. Many families struggle, particularly depending on where they live and what is available. It also depends on who screams and jumps up and down. Those people often get the places, services and supports.

We have had to subsidise a lot through outside activities with schools. We paid for 10 years of speech therapy, which cost thousands of dollars. We went to an occupational therapist for many years from when Amber was three until she was ten. That was seven years of occupational therapy. Many families have to substitute. We tried some different programs. Unfortunately the Opening-The-Door Program closed down. As families do, we have tried different programs to help Amber. Parents provide what they can to ensure their child has the best chance of succeeding. Amber is an all-rounded child and we are very proud of her. She has turned out to be a wonderful, all-rounded sort of person. We have already started to plan for post-school. Amber and I went to the employment expo. Amber loves animals and animal care.

AMBER: That is one of my badges.

SHARON: She received a badge recently from Scouts. Was that on the weekend?

AMBER: No, I already had it.

SHARON: That badge was for animal care. We are trying to increase her independent living skills as well through things like Scouts, which has been great. She has just been on a three-day camp. We are planning post-school and looking at the different options available. One is the TAFE animal care course. We have also begun talks with a disability employment provider about a part-time job when Amber is 15. Many jobs come up through word of mouth and networking.

AMBER: It is 14 and nine months.

SHARON: Amber is right; you can be 14 and nine months when you join a disability employment provider. We have already started planning. Best practice is to start post-school planning at 14. Most kids have decided what they want to do by then or they have an interest. Amber certainly does; she is obsessive about animals. You can ask her any animal fact and she will tell you. She spends hours researching animals and her favourite television show is the RSPCA rescue show. She is obsessed with anything about animals. That is the path we have started mapping for her. It is important to get in early and to start planning now. Many families leave it to the last minute and many schools do not help with post-school planning pathways. Parents can be career guides for our kids. It is really important to support them now.

CHAIR: Thank you. Are you happy for members to ask questions?

SHARON: Yes.

The Hon. HELEN WESTWOOD: Thank you Sharon and Amber for coming in. It is lovely to have you here. We do not often have the opportunity to speak to young people, so this is a great privilege. Sharon, this issue is very broad and regrettably we will not be able to ask all the questions we would like to ask in this session. In the submission from the council, your evidence today and evidence we have received previously there has been reference to the importance of planning. From your experience do you believe there is a model that is really successful; that is, is there an ideal way to approach planning for students with special needs?

SHARON: A lot of kids have individual education plans [IEPs]. That seems to be a good point for discussion. With Amber going to high school we have used her IEP to talk about some of my concerns, such as the travel training and how she will follow timetabling. They are my main concerns, as well as academic support. The IEP can form a good basis for discussion. Amber has dysphagia and dyspraxia, so she has swallowing problems. She has a bit of a cough, which she gets now and again. The main thing is having a person who will hopefully follow and track the child for as long as possible. Amber has been lucky at St Lucy's with Start Right because she had Jade Bowlett, who is her teacher now. That is unusual. It has really helped because Jade knows Amber better than anyone and she has followed her progress. She is a great advocate for Amber going into mainstream next year. Having a person who is a pivotal point in the child's life who can follow through over time is important. It does not matter who it is—it might be an Ageing, Disability and Home Care [ADHC] worker. The problem is staff turnover in government jobs. We really need a key person responsible, even within the school. We need someone who will follow through and follow up even after the student moves into the next environment. We need that person as a critical point.

The Hon. HELEN WESTWOOD: Do you have a case manager?

SHARON: No, I am Amber's case manager. You will find that many parents are advocates, case managers, counsellors, therapists and teachers. We take on the whole role. When Amber was about three and a half we had a case manager through ADHC. My background is in social work, so I am one of those parents who knows the system—as fragmented as it is. I understand what is available. I cannot imagine what it is like for parents from a non-English background. I struggle and I am a professional with 20 years of experience of the system. Despite that, I still find the system very disjointed and very hard to navigate. I am a professional who also happens to be a parent.

The Hon. HELEN WESTWOOD: I also have a child with a disability who is now an adult so I know what you mean about being the advocate, the speech therapist and so on. Many parents have said the same thing. Unfortunately, 30 years on the experience does not seem to have changed much from mine. That is extraordinary and very disappointing. You talked about the travel training, and I absolutely understand your concerns about that. Is the issue that there is no-one to approach about providing transport services for Amber? I understand the issue about high school, but there are some students with special needs who are provided with transport in the high school setting.

SHARON: We currently have Department of Education and Training [DET] transport. That transport is contracted out and we have been using that system for a while. Our main issue is that Amber does not qualify for after-school care because she is 13. We have to have someone at the door every afternoon by 3.15 p.m. and we both work full time. We are struggling with that with the help of neighbours and friends around the corner. We are also using other parents who use the system. Sometimes we cannot be there because of work commitments. The school has suggested that it would be better if Amber could develop that independence. Being 13 it is less embarrassing if she can get herself to school rather than be dropped off in a taxi. They said it would not matter as much in the first or second term, but as she gets older it will become more embarrassing for her. She is trying to learn those life skills and not be different from everyone else. They are our goals for her. She knows that I am petrified about her travel sense. She is not the best; look left, look right, look left does not quite happen.

AMBER: I just run across the road.

SHARON: We are aware that we can continue with the transport service. It is really hard for many working parents. We juggle probably 10 people who can be at my place with a key. We often have work commitments and it is a real struggle.

The Hon. HELEN WESTWOOD: Is there no flexibility within the program to move from a transport service to doing the travel training?

SHARON: No.

The Hon. HELEN WESTWOOD: That does not exist.

SHARON: We were told the Guide Dogs Association does travel training. That should be discussed in the transition meeting. We tried to get a transition meeting with the school all last term. It has not happened because the school had other commitments. I do not want to be too pushy. As Rowena said, you are then seen as a nagging, harassing parent. I am starting to get worried because this term is short and I am petrified about how Amber will get to school next year and what will happen. The idea was to get someone nearby to buddy up with who can travel with her to school. That way Amber would feel more confident. It is a catch-22 because you want them to become independent and to develop those skills. She will have to have them sooner or later. At this stage she cannot even go to the local shop. I am petrified about her crossing one road, but as a parent you have to let go. That is why she is involved in the Scouts. She has been at camp all weekend.

The Hon. HELEN WESTWOOD: Is there no-one at the school who has responsibility for transitioning Amber from primary school to high school? Can you not organise a couple of days a week to help her go to high school and sit in the class with her?

SHARON: No-one has contacted us yet. Amber is going to school with a friend who is a classmate. Vicky rang the mother. I suggested that if we went together they might see that it would be easier for them and fewer resources would be required. It would be better for them doing it together. That might have led to a meeting sooner rather than later. I tried earlier this term and Vicky got the same answer. They were busy with year 10 subject selections and the school was snowed under. At this point we do not have a transition person or a contact person for next year and it will be November soon.

The Hon. HELEN WESTWOOD: What is the situation with the Catholic education system? Does it have someone at head office?

SHARON: St Lucy's is wonderful. It is very good with transition. People could learn from its practices. Transitioning is embedded in every IEP you discuss. We have talked at length about my concerns and their concerns and the school has said that it will follow up and meet with the teachers next year and see how Amber is going. They are very good. Amber, who did you meet? A person from Brigidine went to Amber's class to do an assessment.

AMBER: She was there to see Juliette, but she was not there at the time.

SHARON: She saw a different student, but Amber identified herself. She said, "I'm going to your school next year." That was good. They had a chat with her, but that was not planned. Amber was clever enough to identify herself. Transition support to high school is critical. Many developmental and emotional changes happen. Amber has become a young woman in the past year and young women experience changes in their body and many other changes.

For us, this is a really critical point. It is probably as important as, if not more important than, post-school. I guess my next tactic is to try to pressure the school a little bit more. I will end up jumping up and down and probably making some noise, which parents always have to do, because if you do not then nothing gets done. To be honest, I thought I would give them a chance to respond. They had not, unfortunately. Vicki, Juliette's mum, said that they were too busy. But now, we are going to have to jump up and down. But that is the story and the cycle of a parent with a child with a disability; at every turn you have to jump up and down and make noise. Unfortunately, that is the way it is. As Rowena said to me, at what point do you jump up and down? You do not want to be seen as "that difficult, noisy parent", but sometimes you just have to be.

The Hon. GREG DONNELLY: Thank you for coming along and providing evidence to complement the submission. Looking at independent schools broadly, could you tell us of the work done by schools that are part of the association in the disability area, the scope of the work that they do for students with a disability, specifically St Lucy's, which appears to be a school that specifically provides for children with a disability, through to larger schools which perhaps have specific programs?

Ms STULAJTER: I will start off and then Sharon could speak from her experience as member of the students with disabilities team at the council. The very clear message that we receive from principals and from parent associations within the non-government school sector is that they have an enormous inadequacy in funding to enable them to provide a lot more for their students with complex and special needs. Every year they are receiving more enrolment applications for these children to be mainstream. It is an excellent plan that these students be inclusive across the sector. Every principal that I speak to recognises that they are taking on these students because they want to offer the families an education that fits well with the family, whether the education is based on religious or philosophical bases. But many of them say that they need to do that on compassionate grounds, that they do not receive the funding to enable them to provide more for their students.

They are trying to extend their learning department, in which they have somebody employed full time to try to ensure that each student receives as much one-to-one attention as possible within the classroom. But they are also using money from their school budgets to provide on-campus speech, occupational therapy and counselling. This comes back to what Sharon was talking about: all the social issues that arise with these students when coming into high school in particular. We all know that high school students can be extremely nasty, and if you are a little bit different it becomes even harder. The examples that Sharon has spoken about today would be common for many parents. I am sure many schools would be happy if they were able to provide a teacher who would be responsible to monitor and report back to the parents, so that they will have that peace of mind. So I think it really comes down to the current inadequacy of funding for students with disabilities and special needs in the non-government school sector.

The Hon. GREG DONNELLY: Is the increase in applicants for enrolment at these schools being driven by anything in particular that you are aware of? Are there causes for that happening as far as you can tell?

Ms STULAJTER: We understand that being able to mainstream students who have special needs is beneficial for everyone involved, whether the school community, the wider parent community or the community in which we live. It enables that transition to be made easier because students are already used to being part of an environment in which they are forced to learn new skills, the living skills that we were talking about. I personally think it is a great idea to be able to transition and mainstream as many of these students as possible, but with the correct support that is needed.

SHARON: I agree. I recently went to a workshop about inclusion where a graph was shown of students who had not mainstreamed and what their opportunities for post-school outcomes were. The graph showed that most of them ended up in day programs or community participation. Those that mainstreamed ended up with some form of employment, or undertaking some form of TAFE education. To be honest, I do not know where my daughter would be if we had not insisted and put up the fight for her to go into mainstream. Even though we tried it and it was not necessarily working for her because of the lack of funding—if we had the funding, believe me, it would have worked wonderfully—she had to go back into a satellite class. The satellite class options, as Rowena referred to, being offered by a lot of schools have been great, because it means that the students can still go on the playground and do particular curricular activities and subjects with the rest of the school.

I cannot imagine where Amber would be if we had held her back and put her somewhere that was not suitable to her needs. For example, Cromehurst is a wonderful and beautiful school, but it was not suitable to Amber. She started regressing there. If we had held her back and not allowed her to mainstream, I can only imagine the difference compared to where she is at today, everything from her speech, her confidence and outgoingness. She has definitely decided on a career path, and I can see her there in a few years. I do not think she would ever have had the opportunities that she has today if we had not insisted on giving her that mainstream option. Jade, the teacher who has followed Amber since she met Amber at age 4, said that mainstream high school next year is the most suitable, that she could not imagine Amber anywhere else but in a mainstream high school. And Jade has been following Amber's progress for years. These students should have the option for inclusion; parents should have that choice. But, as Rowena said, there is not the necessary funding. St Lucy's is an example. They had to subsidise by fundraising and getting grants.

AMBER: From the community.

SHARON: They do, don't they, Amber? That is because they just cannot afford to pay for the speech therapy and the occupational therapy. It might seem insignificant to some, but we tried for years to get Amber to tie her shoe laces. Within one term at St Lucy's she was tying her shoe laces; that was through the occupational therapy at St John's Narraweena, where Amber goes to school. You should have seen Amber's face when she came home having learned to tie her shoe laces. You were so happy, weren't you, Amber? She was beside herself when she came home and could do her shoe laces up—just full of confidence. She had to do it 20 times that night, just to show us that she could do it. Things like that might seem insignificant for some, but for our children it is amazing that they can do these things.

The Hon. CATE FAEHRMANN: Thank you all for coming along, particularly Amber and Sharon. I want to talk about the Parents Council submission. In it, the importance of person-centred planning was discussed. As Amber is part of that, particularly in the new transition to her school next year, could you give me an idea of how much she has been involved in that?

SHARON: Amber was very involved in choosing a high school. We went out and looked at the school a couple of times, we talked to students at the school on open days over a couple of years, and we went to the recent open day at Brigidine. Amber got to go around and see whether the school felt right for her. What did you like about the school the most?

AMBER: It was very friendly.

SHARON: And what else was there?

AMBER: Rabbits.

SHARON: They have an animal welfare group.

AMBER: And I have a pet.

SHARON: They have special groups within the school, and a very strong animal component. They have a regular club, I guess you would call it, and Amber loved that part of it. What else did you like about the school?

AMBER: Horses.

SHARON: Amber is horse-obsessed, and the school has a massive animal component. They do events and all sorts of things, but horse-riding is a big part of the school culture.

AMBER: That they own.

SHARON: They own a lot of them at Terrey Hills. So as soon as that came out, it was, "I'll be there." It was, "Where can I sign up?" She could not wait to get in there. We tried to match the school to her interests. I know a lot of it was based on what support she has, but much of it was to do with Amber's personality. Would she fit with the school? And what sort of interests did they have? I think that is really important. It is so hard to find something that matches your child, particularly when there is not much out there. There are a lot of gaps with education, particularly if your child is not moderate. If they fit in between, they often fall through the cracks, and there is not much out there for them. If you are mild to less than mild, there is nothing—if you have ADHD, or you have a learning difficulty. My youngest daughter does not get any support. She has severe learning difficulties, but because she does not tick an intellectual disability box there is nothing for her. She is really struggling at the moment. So now we are working with her on the sensory and other issues that she has. Those children fall through the cracks in the system; there is just nothing out there.

The Hon. NATASHA MACLAREN-JONES: I have a question in relation to the international best practices to which you refer in your submission. Is there a particular program or couple of programs that you think could be implemented here in New South Wales that would be of benefit?

SHARON: We were talking about the Ontario model. Some of the ideas that seem to be best practice internationally are around having proper transition plans in place, where there is a circle around the child or young person, so that the young person can be the driver if they decide to be. It is where you have a proper team around the young person. We talk a lot about circle of support in my area of work, and I think it is the same sort of thing for a child with a disability. That circle of support is really important, even if it is a neighbour, a local priest or a community person. It can be a wide circle of support. It could be people who know the child and young person really well and can be involved in the planning. You need to always have a person who is the critical point of contact and is the person who more or less follows through with things.

In New South Wales it is very disjointed. For a lot of families, the services they get depend on where they live, or even depend on what school sector you go to. The Department of Education and Communities has transition advisers. In other school sectors, it is not clear who the transition point is. Even in post-school planning, it is not clear who in the Department of Education and Communities does that. It is very fragmented and disjointed. We need a streamlined approach so that a person is appointed to be the transition person—whether that is a family member or the young persons themselves. There needs to be a case management type of approach whereby people sit down as a team and map and plan with the young person, and as early as possible. Fourteen seems to be recommended internationally. We are planning now—I can see why we are already planning—because we need to be thinking about educational pathways that will lead to Amber's future career.

Ms STULAJTER: It is interesting that under the Ontario model a staff member within the school environment was nominated to make sure there was that connection between the school and the home, and to encourage the building of a good relationship. As parents, if a child is happy and being looked after, as well as meeting education outcomes and other outcomes within the school environment, you feel a lot more supported and ready to deal with all the other issues which, as a parent with a child with special needs, you must deal with.

SHARON: School staff are not well equipped either; they are often not trained. In my other job I work with career advisers and not many of them would know about disability employment services. I recently ran a forum and I was quite shocked at how many did not know about post-school options like disability employment and job services. I think that there should be training and education within the school sector and staff should be properly resourced. One of the problems too with staff development is that the teachers, or whoever should be nominated within the school, cannot even attend something because of school timetabling. Schools need proper resourcing. Schools need to allow their staff to go to professional development to find out about transition support and best practice. I have never met a transition advisor yet in DEC and I work with the school sector. I know they are out there, but I am not sure where they are. I have heard they are out there. It is a real issue.

Recently I ran a transition forum for parents—I had over 80 turn up for the first time of this event—and the amount of parents that had never heard of a transition advisor from government and non-government schools—we had a mixture. I think Rowena is right: schools would be an ideal place if you had the resourcing and the staff knowledge and you could have some best practice operating within schools—maybe at schools like St Lucy's where they do it well, where it is embedded and where they have good practices already. I think the other issue is that not everyone gets an IEP. People say they do, but I know a lot of kids that do not have IEPs. In my last job I worked with kids with autism and the amount of calls that came through from regional areas of New South Wales about school issues—they were the main calls—and the number of families that had to fight and jump and down for an IEP. It was amazing how many families do not have IEPs. It is not necessarily part of a school's practice because it is not mandated or they do not have the resourcing or they do not have the staff knowledge. Some IEPs are all about the school's directive; they are not about talking to the family and looking at a more person-centred approach. I think it is a huge issue that it is not person-centred; it is just about what the school's academic or other—maybe they have behaviour as a key focus because they want a child to be quiet. There are all those sorts of issues.

CHAIR: Amber, I am glad you like horses. I have horses at my house and my little boy rides them. Amber, what else are you looking forward to when you go to high school other than the horses and the rabbits?

AMBER: Friends.

CHAIR: That is fantastic. I think making friends is the best part of school.

SHARON: What else are you looking forward to? Don't be shy. Is there anything else you are looking forward to?

AMBER: Better subjects.

CHAIR: Because they will be all different from primary school.

AMBER: Yes.

CHAIR: On behalf of the Committee I thank you all for coming along this morning and for your submission. It is very beneficial to have heard both the professional side and the real case study that you have experienced. Your contributions to this inquiry have been very valuable.

SHARON: We are happy to help.

(The witnesses withdrew)

(Short adjournment)

DEBRA COSTLEY, General Manager, Education Development and Research, Autism Spectrum Australia (Aspect), and

TREVOR RAYMOND CLARK, Director, Education and Research, Autism Spectrum Australia (Aspect), affirmed and examined:

CHAIR: Would you like to make a short opening statement? There is no need to repeat anything that is in your submission.

Dr CLARK: I will emphasise a couple of issues that were in our submission. First, it is important to recognise, from our point of view as well, that today we are speaking on behalf of school-aged children with autism spectrum disorder. In the submission we highlighted that across Australia we are using very recent prevalence rates of one in 110 equates. We are actually talking about a rather large population of school-aged children of about 53,000. I guess this inquiry and the importance of transition to this particular population is extremely important, and we will point that out as well. Autism Spectrum Australia, we also represent our organisation and in our submission so we will briefly touch base on what we consider are appropriate supports and, I would like to think, best practice in terms of transition that we currently have in place across our service.

It is important that the panel here understands that when we talk about transition for students with an autism spectrum disorder it is not just talking about preschool to school, primary school to secondary and then to post-school. Transition is a major feature of everyday life for people on the autism spectrum. So from hour to hour in a school session, lesson to lesson, morning tea, back into class causes issues for our children. Of course, that goes into year by year, when you move from one year group to another, again major issues around supporting that. That relates to autism, which is a disability that affects people's ability to communicate, to understand the world around them, to socialise and to interact as non-autistic people do. It also impacts on behaviour. Many of our people tend to be very rigid in behaviour, so when you are talking about a change you are talking about a transition that can, more often than not, create anxiety and distress for our population.

So we think this inquiry is very important to this particular population of people with autism spectrum disorder. We will make the point that successful transition involves collaborative planning between all professionals but in particular family first and the student. I guess we need to make sure that the families understand and are buying into that transition process. Again, in terms of Aspect, in the submission we outlined a whole range of supports that we put in place, preschool to school from our early intervention program into our own schools or our own network of Aspect schools. Again, I guess even though, in terms of Aspect, we support the transition of our students, I guess our experience, working across a range of other educational stakeholders not just in this State and other States as well, it is not always the case.

Often it is the experience, and in the submission the recent report from the Australian Bureau of Statistics that was released this year, in July 2011, reported that 88 per cent of children with an autism spectrum disorder in a school are experiencing difficulties. Sometimes that results in suspension, exclusion, bullying, anxiety, stress and many are underperforming compared to their potential; they do not reach their academic potential. That is an issue. We think there is a lot to be done, particularly as the disability standards for education are not always applied in the support of children on the autism spectrum.

Dr COSTLEY: I will not repeat what is in the paper because no doubt you will ask specific questions on that. We have standards for transition into school and we work really hard with parents and communities to ensure that children have a good experience of starting preschool and then school. Research shows that a positive start to school makes a big difference later in life to the outcomes that people can expect. So we have that in place and we can talk to you about what the steps within a quality transition program into school would be. As part of our school program, we have the Aspect comprehensive approach to education and transition planning is a huge part of that. So through individual education plans we are working with parents right from the moment they enter school to think about what their transition plan will be later, whenever that will be for their child. Again, we have a series of steps within our transition process that we are happy to share with you.

The core steps, whatever stage, are always that parents and caregivers are involved from the beginning; wherever possible the child themselves is involved, where they are old enough and able to be involved in decisions; and other professionals are involved, particularly when they are transitioning to another setting. We do a lot of work with people in mainstream schools to ensure that they have an understanding of the child they are receiving and what they might need to put in place for them. So again we have a list of what the mainstream school might need to think about before they accept a child with autism. We have prepared booklets and flyers and all sorts of things for mainstream schools to try to give them a start, to give them as much support as possible. Through our educational outreach service, which is an itinerant service, we continue to support children once they are in mainstream schools.

That ongoing support is what we have found, through the research, has made the difference to enable children to stay in the placement that they first move to. Once we think they are ready and the successful transition has happened, very few find that placement breaks down and they have to move on somewhere else. So the things we have in place hopefully work. We continue to build on that, obviously, but at the moment we find what we have in place works very well. So I think it is probably better if you let us know which bits of those you would like to explore further and then we have the evidence to give you.

The Hon. HELEN WESTWOOD: Thank you for joining us this morning and for your comprehensive submission. It certainly helps us in our task in this inquiry. One thing you have mentioned, along with every witness we have had so far, is the importance of planning and involving family, student and service provider. Given the very high number of incidents where students are not having a successful outcome or not having a good experience in the system, it would be fair to say that the sort of plans that you think should be prepared are not happening. Can you give us some idea of why you think the planning is not adequate and how that could be improved?

Dr CLARK: I made the comment in relation to the disability standards for education. It is important to remember we are non-government and independent in terms of our education network. We provide eight schools, with 814 students enrolled. I guess we are an interesting special school program because even though we run eight what we would call special schools—in the Department of Education and communities they call them Schools for Specific Purposes—we also run classes embedded in mainstream schools. We have 87 classes—we call them satellite classes—in Catholic, independent and education department schools spread through the State. I guess we are in an interesting position where we support children with high support needs within the special school environment but we are very much focused on transitioning children, if possible, through one of those 87 satellites so they have a mainstream school experience. The teachers are ours, the children are ours in those classes. Even though they are in other schools, we administer and run them. The whole aim is that they can transition one day, if possible, back to their local mainstream school.

I guess we have learned, by working closely with all the different educational sectors, that many students with autism who are not supported—when we are talking about that, often many schools try to do what they think is a good job and quite often that means that the child with autism must fit into the regular school curriculum. When that is the case, that is when it breaks down. The schools may not always make the necessary accommodations and adjustments, and that is around transition. The point of entry where they may arrive in that mainstream school setting, no matter what sector it is, if those plans have not been put in place, if the curriculum has not been modified, if there are not particular strategies that support learning for children with autism that are well researched now. I guess part of the key issue also I think we mentioned here is around the need for teachers to be trained in mainstream and I am not sure where they made reference but the national parents and teacher training program the lead agency, Aspect, has the purpose in mind to improve the skills and knowledge of autism spectrum disorder teachers in schools throughout this country.

So sometimes it is the two things. There is a lack of knowledge of teachers in the school and the school learning support team on dealing with this particular population, and sometimes the disability standards are not implemented, and the curriculum needs to be modified and adjusted. So when those things do not come together you have the 88 per cent who are experiencing problems. Our experience has been because we have a very supported education program. As Dr Costley said, we follow-up for a 12-month period and we do research and collect information around how the children are going. We are finding they are highly successful. We believe they were successful because of that intensive collaborative planning around transition. So when you put it in place, we have got evidence to show that for this particular group of children this works really well. The success rate is 94 to 95 per cent of children after 12 months are still in that mainstream class and are doing well. That is not always the case for other centres.

Dr COSTLEY: Just to follow on from that, the issue that we find, particularly with the educational outreach team who do go and work with a lot of mainstream teachers, is that they can spend a day in the school, meet the child, the teachers, the parents. We tend to run it like a case conference so everybody hears the same thing and they get a very comprehensive report with things that can be done. Some of them are pretty simple things that, if everybody put them in place, the child with autism would find the structure and be able to manage the mainstream environment much better, and so would everybody else. A lot of the things that we suggest are useful for children with autism would benefit all children, especially when they go up to high school for the first time, make that a lot more understandable. However, what we find is that some of those things are not followed through, because when it gets to the classroom teacher they think, " Oh, that doesn't make sense to me. I don't really want to spend my time doing that," or they try it once and it does not work so they do not try it again.

There are some really simple things that people could do, such as giving children extra supervision and support during break times or giving them somewhere safe to go where they feel they can go and do something they are interested in with a like-minded group of other children, or just be quiet and be on their own. There is a list of really basic things that all teachers could do and, as Dr Clark said, the 'Positive Partnerships' training hopefully is starting to get through to teachers—it has been very successful—but all schools could only send two or three teachers, so you are relying on those two or three teachers to cascade through to everybody else. That all takes time. One of the issues is with preparing staff and the other issue is with preparing the other students. I think that is really important: if a child with autism is about to join a class the other students have some preparation. Again, when we transition students our school staff go and run programs like Carol Gray's *Sixth Sense* program. I do not know whether you are aware of that but it talks about what is different about the child with autism, how they see the world, and how we might understand them and work with them. It is one of the programs that our educational outreach team does a lot in mainstream schools but they will work with the whole class. This is to get them to think about how they sense the world and how it might be different for someone else. Again, that is really important, that the other children understand and are accepting, because then that gets over a lot of those initial issues around being different and maybe being bullied eventually and those sorts of things.

The Hon. HELEN WESTWOOD: Are students referred to you? Is there self-referral for your organisation or both?

Dr CLARK: Both.

The Hon. HELEN WESTWOOD: Are you able to provide those plans for each of your students?

Dr CLARK: Absolutely. Every child in our school system has an individual education plan and that is the primary way we support the program and, as part of that, if a child is preparing for transition a transition plan is built into their individual education plan. Of course, that is working with the parents: they support and have input into the individual education plan. We do write a separate transition plan with all the steps and what is required within that, as the child is about to transition.

The Hon. HELEN WESTWOOD: Where perhaps that plan is not being implemented by another service provider what options do you have then for the child or for an alternative service provider if that particular one is not following a plan or not able to resource it?

Dr CLARK: I guess that is where the cut-off comes because in the big scheme we are a relatively small independent education network and so we have not got jurisdiction in what is going on in education department schools or Catholic schools even though we do have a very close working relationship with both of those sectors. We are just in the final stages of working with the Department of Education and Communities to sign off on a memorandum of understanding between Aspect and the DEC. You will be interested to know that there is a whole section of the memorandum of understanding that talks about transition and its importance. As we transition our children from an Aspect school into a Department of Education and Communities school there is a process and we have actually documented the process into this draft memorandum of understanding. We are just about there, waiting for the final tweaking and then we can hopefully get that signed off. That is important because, even with the DEC schools, that goes to every department school region throughout the State and gives the permission and the guidelines to educational department or regional staff to be working very closely to improve the transition and support it, even for children coming from our small sector. Again, as Dr Costley said, some of the strategies, the ideas, apply across disability or to other children. They are very clear guidelines about how can you make transition work for a child with a disability.

The Hon. HELEN WESTWOOD: Have you found that in particular the department of education and I guess the other organisations as well are willing to accept your advice and your professional knowledge about education for children on the autism spectrum and are they then willing to look at their own practices or policies or approaches that you think are not going to get the best educational outcome for that child or for children on the spectrum?

Dr CLARK: Yes. How to answer that? It is a mixed picture. Sometimes some schools, some regions are extremely receptive and open to supporting the enrolment of a student with autism spectrum disorder. Other times and generally, the experience is that where the school has a lack of knowledge of this disability and how to support the child's education there may be some resistance. That may cross into the Catholic sector or the independent sector. This disability is now of major importance, across not just educational sectors, and I know other government departments are grappling, particularly with the high prevalence rate of this particular disability. I think it is becoming a major issue and therefore schools are finding, because their enrolments are increasing and many children are coming straight into mainstream education without any specialist help, that they really need to learn and understand. But again, as we speak today, it is a variable kind of response.

Dr COSTLEY: It is the same with the educational outreach team as well. We cannot go into a mainstream school unless the school allows us to, obviously, so there are instances where parents contact us and want support for their child but if the school will not equally support that then we cannot do anything to help, which sometimes is a bit difficult. You get some very upset parents who cannot understand why we cannot just come in, but we do not run the school, so we cannot just walk in. It can be difficult in some instances, but certainly most of our educational outreach is paid for by the schools. Our target for this year was 350 new children, so most of those schools will be paying. There are obviously schools that are supportive and the experience is that they get us back and so they appreciate the advice. Whenever we go in to work with a child we very often work with their staff team as well, so there are those positive examples.

The Hon. GREG DONNELLY: We appreciate your detailed and comprehensive submissions. Are you able to provide us with a bit more information about the Aspect Building Blocks Program and how it actually operates, perhaps in a summarised form, as best you can?

Dr COSTLEY: We might have to because we are from the schools sector, but building blocks basically has two variants. There is a home-based program where a particular practitioner makes contact with the parents. After they have put in the referral form they will go to the parents' house and do an assessment with the family and child to see what the needs are and then they deliver one- or two-hour weekly sessions in the parents' home and that is often for very young children and those who are not ready for a more group-based program.

The other alternative is that there is a centre-based program that is run by two of the early intervention practitioners. They will get a number of children together, so they get some more group interaction while the children are in-group. Then there are also workshops and other things for parents as well. We did some research which finished a couple of years ago which was an Australian Research Council funded research project with the University of Sydney and that basically found—it might seem like common sense—that the children in the group centre based programs actually make greater gains in social skills and communication. It sounds like common sense but to have the research to back it up is very helpful. However, the building blocks team like to have the two options because there are always some children who are just not ready for group; they need to have a bit of work at home to build up their social skills and their communication and confidence and things like that before they move into the group setting.

Within that setting they are working with the parents and looking at the child's skills and building those up so they are ready for transitioning to school. They start that process six months to a year before the child would need to go to school and then they carry on supporting that child in the mainstream school setting for probably two terms once they have transitioned. At that point the education outreach team would come in and support, if need be. So they do have a very clear program that they work through.

The Hon. GREG DONNELLY: Can I just go back to the question of the individualised education plans? We have had some witnesses to the inquiry indicate that as far as they were aware these programs were not mandated or required; they were occurring and being done in some schools in what might appear to be a better fashion than in others. What are the requirements?

Dr COSTLEY: Does it go with the funding?

Dr CLARK: No, it does not. Private schools and independent private specialist schools, such as our own, go through a process every six years of registration and accreditation by the Board of Studies. When they are looking at special schools like our own, yes, that is a requirement that children do have individual education plans that are actually linked into the mainstream curriculum here in New South Wales, the key learning areas. Now we are looking forward to the inclusion of the national curriculum into that as well. So there are requirements and accountabilities through the Board of Studies here.

Dr COSTLEY: What about mainstream schools though? In mainstream schools were you asking generally?

The Hon. GREG DONNELLY: Yes, I was asking a general question.

Dr CLARK: No, not that I am aware. There will be guidelines through the Department of Education and Communities in supporting students with disabilities and how they are programmed but I really cannot speak on their behalf.

The Hon. Greg DONNELLY: This question is to do with coordination. This is one of the pre-prepared questions. I will ask it to you. In your submission you state that successful transition is more likely when families, early childhood services, early intervention programs and schools work together to share information, plan and collaborate to make decisions about appropriate strategies and support. Are there some good case studies or examples that we could look at that in fact demonstrate how this works well? Have you got some particular scenarios you would direct us to look at to see how these things seem to be working if done properly?

Dr COSTLEY: We have just completed a manual based on the Aspect Comprehensive Approach for Education. There is an element within that approach which is around. There is one around transitions, supported transition and inclusion, and one around family involvement and support. In each of those we have written up case studies. So from our programs we have evidence of how those things work.

The Hon. GREG DONNELLY: Is that annotated in your submission?

Dr COSTLEY: No, not necessarily, but we would be happy to pass some of that on if that would be useful.

The Hon. GREG DONNELLY: Yes. That would be great, thank you.

The Hon. CATE FAEHRMANN: Thank you very much for appearing and for your very comprehensive submission, which I found most useful during preparation for the inquiry. I am particularly interested in the school to post-school transitions and want to ask a few questions about young people with autism spectrum disorder [ASD] transitioning. What programs and services are available? For students who are accessing Autism Spectrum Australia [Aspect], what programs and services are they able to access during that time? Are there any for students with ASD?

Dr CLARK: To post-school?

The Hon. CATE FAEHRMANN: Yes, post-school options like TAFE and other options.

Dr CLARK: Oh, absolutely. I guess because autism spectrum disorder is a spectrum, that in itself implies that there is a whole level of support and ability. I guess the challenge, even with the way our schools are set up structurally, is that we will have the special schools for children with more high-support needs or more severe levels of autism and/or intellectual impairment, and you can go up to children who fall in the normal range of intellectual development and sometimes into the gifted range as well. Really it depends on what level of autism or disability the person has. I guess it kind of gives a hint to what post-school program they might be able to access.

We transition students from our secondary satellite classes who generally are more high functioning or who have Asperger's disorder into TAFE programs in many cases—again, with support. They go into supported TAFE programs where they have supports for people with disabilities. Some of our people move on who may have integrated into local mainstream high school. Academically, if they have done well, they will go on to university education. Then again, others with more high support needs will access others run by other agencies, although we have some post-school adult options and programs. Really it is a whole sweep.

The Hon. CATE FAEHRMANN: Do you work with service providers who have the Transition to Work program?

Dr CLARK: We do, absolutely.

The Hon. CATE FAEHRMANN: What are your views on the different models being offered by different service providers with TTW funding? We heard from some participants this morning who were saying that the different models are quite confusing and frustrating. Do you find that?

Dr COSTLEY: I cannot speak really from an educational perspective, but only from staff of ours and people we have contact with who have just been through that process with their own children and have related to us how difficult it was to find their way through. It is very complicated. It depends, obviously, on the abilities and time that parents have to work their way through that. I know that one of our staff members particularly, whose daughter has had a great outcome, had to work really hard to ensure that happened. One of the things we have just done is complete a manual for mainstream high school teachers on how to work with children with autism. That also has a big section at the end on all the post-school options, and how they might navigate those, so that the teachers have the information to try to support parents as well.

The Hon. CATE FAEHRMANN: I notice that you are doing some research into high-functioning autism. Have you had any findings from that research? The question is around whether there is enough recognition by mainstream service providers of autism, the growing rates of autism and the growing need. Have you had findings come through?

Dr COSTLEY: It is too early. The questionnaires are out there now. We are getting good numbers back from the adults themselves. There are two questionnaires—one for the adults with autism, and one for their parent carer. We are starting to get the data back but it has not been analysed yet. That will be really interesting to see.

Dr CLARK: Absolutely.

Dr COSTLEY: They are the people who can tell us what the experiences really like. We are looking forward to that.

Dr CLARK: I think this is the first one in Australia. This particular research project is the first time it has been undertaken. Again I guess it was initiated from our board of directors at Aspect, who are very concerned about the Asperger's high-functioning population. When they are supported through transition and educational programs can actually do pretty well as school-age students, but then the wheels can fall off post-school. It is a myth to believe that Asperger's high-functioning people are fine because they have higher IQs, et cetera, and they will do fine in life. The experience is quite the reverse, and we have many. We hope this research will give us a lot more data about that.

It would appear that there are many people on the autism spectrum at the higher end who are out of work, unsupported as adults, and do not have a social connection. Often they are living at home with families who are at a loss to know what to do with them, and they are our very bright people in the spectrum. Sometimes the higher the support needs, the more supports that are available as they go into adulthood. It is a very big population of autism spectrum who fall into that high-functioning range. We cannot wait to get the results of the study. Again we will very much be taking the results back to government around that as well. We are very keen to do that.

The Hon. NATASHA MACLAREN-JONES: Thank you again for your submission. Following on from your comments about support services, how do parents find out about the services that are available? How could it be improved?

Dr CLARK: In terms of our services?

The Hon. NATASHA MACLAREN-JONES: Your services as well as services on average, or in general. How can that be improved—through departments or through schools—to provide that information?

Dr CLARK: I guess really in terms of our own program, as part of the individual education plan [IEP], particularly when it comes to options and preparing them for high school, we are working very closely with the family to give them access. Each of our schools has a psychologist or family counsellor who will be working with a family to give them as much information as they can. I know some of the other Transition to Work programs are in place within secondary schools in the State. The department in particular does a lot of supportive work around that and providing information to families. Is that what you meant?

The Hon. NATASHA MACLAREN-JONES: Probably more broadly, how do parents find out about the services? What do you do to advertise more broadly? What could non-Aspect schools do to notify parents about services?

Dr COSTLEY: Listening to some of the questions, I was just thinking that we have put a lot of things in place to support parents through training around what ASD is and what they can do. We have done a lot for teachers, but I think maybe the group that we have not done things for is school counsellors in mainstream schools. Certainly they are the people that parents of a child with a disability would go to, and if they are not fully across the needs of all the different disabilities and what services are available, then they will not be able to advise accordingly. I think that may be one area where improvement could occur across the board probably. Obviously parents will initially go to the service that their child is currently in, which is their school, and would expect them to be able to give them the information they need. As I say, there are lots of things out there to support people, but it is bringing all that together, is it not, and knowing where it all is. Maybe that is somewhere that we could think about improving service perhaps.

Dr CLARK: I think, too, at the point of diagnosis. With disability, the health professionals have a big responsibility to make sure that there is information available at that point and what disability services families can access up front. Sometimes that does fall over. It does not always happen that smoothly. I guess you are right at the very point. Whatever the diagnosis and at whatever the age or stage that may occur, it is important that those services—child and family clinics—have access to that information, and that it is accurate.

CHAIR: Just in relation to diagnosis, one of our earlier witnesses made the comment around practitioners' reluctance to diagnose early, particularly with autism, and that a later diagnosis could make developments of the transition plans difficult, particularly to primary school from preschool or in preschool. Do you have any comments on that?

Dr CLARK: Overall, I think nowadays the general experience is that the case you have explained is becoming rarer and rarer.

CHAIR: The perception was that an early diagnosis was not being given for fear of stigma, et cetera, with labelling the child.

Dr COSTLEY: I suppose if they cannot be sure, that is the thing.

CHAIR: Sure.

Dr CLARK: That is often the case.

Dr COSTLEY: Yes. Assessments are better guided towards the needs of children with autism. The practitioners have had more training. The paediatricians, the clinical psychologists and other people know more and so I think they are more willing to make a decision where they can make a clear decision. But nobody would want to give a child a label if they were not sure.

Dr CLARK: Sometimes I think there has been confusion, particularly in the upper high-functioning autism and/or Asperger's disorder. Sometimes I think paediatricians may in the past have been reluctant to give the label too early. I guess sometimes there are overlays of ADHD/conduct disorder, et cetera, that the paediatrician may see and that also form part of the overall picture of an Asperger's diagnosis or high-functioning autism. As Debra says, there are a lot better early screening tools now—some that are being developed in this country at the moment through Latrobe University—going down to even 12 months of age to do early screening and diagnosis for children on the spectrum.

CHAIR: What are the review points of the IEP? Are their set review points at each transition or at age points? Are their review points?

Dr CLARK: Yes, all the way through. Generally they run for a 12-month period. In our school system, it is not necessarily the calendar year because children will enter a school at any stage or any term during the year. But generally they run until the end of the calendar year, the school year, and if there is transition again we would start planning 12 months out in advance and work with the Department of Education or the Catholic system—wherever the parent sees that might be the next step for that particular child. Again, that is built into the individual education plan [IEP] program. That is reviewed four times a year. It is reported to families how the child is going and sometimes that involves a face-to-face meeting on the child's progress—at least two during a 12-month period for families—and again to talk about that transition and the steps involved.

CHAIR: Let us say a child from one of your schools moves to a mainstream school and let us say it does not have the satellite services. Is the IEP still reviewed, or is it up to the school? Is that the point you were making earlier—that it is up to the school?

Dr CLARK: It is up to the individual school. Our aim—and the aim of the service that Debra looks after as well, the education outreach service—is to train and upskill the receiving teacher and the school. That will also be passing on the individual education plan to make sure that the teachers have a copy and they understand, but also pulling out of that what are the key strategies to support a child in a mainstream setting. I guess we have some of the documentation that we developed as the transition support booklet. For every child that moves to a mainstream school, the teacher and school are given a copy of this which really is autism-specific. It is one of the key elements that will support the transition of that child.

We developed that a few years ago now, but because we transition so many children annually we thought it was a really important message that teachers and schools have a clear understanding of what are the key strategies. I think there was an earlier question about where things fall down. Our experience is that when the key strategies outlined in the booklet are not in place, that is when it falls down. The transition placement and the actual education realm for that child come to grief.

CHAIR: Thank you very much for your evidence today and your submission. There was a question taken on notice to provide a supplementary response. The Committee has resolved that answers to those questions be returned within 21 days. The secretariat will contact you in relation to those. There also may be some supplementary questions that we may like to put to you. The work you have done is fantastic, but unfortunately perhaps we have not been able to get through all the questions we wanted to ask today. Could we have a copy of the booklet?

Dr COSTLEY: We have both got one, so you can have one.

Document tabled.

CHAIR: Thank you for your submission and for your time this morning. It has been very valuable for all of the Committee members.

Dr COSTLEY: Can we ask when you will be reporting?

The Hon. HELEN WESTWOOD: It is a movable feast.

Dr COSTLEY: I am just interested to know what happens next.

CHAIR: We have hearings listed for December as well. We will be expecting to report probably in March or April next year. We will certainly keep you informed of the outcomes.

(The witnesses withdrew)

KATE AMELIA KENNEDY, Parent Council for Deaf Education, Coordinator of Information and Advocacy, and,

LEIHANA MAHE, Parent Council for Deaf Education, parent member, affirmed and examined:

LEESA JANE CLUFF, Parent Council for Deaf Education, parent member, sworn and examined:

CHAIR: Would any of you like to make a short opening statement? If you would, please try to keep it to no more than five minutes. There is no need to repeat anything from your submission.

Ms KENNEDY: I thought I would give a bit of an overview and then turn it over to the mums to share their experiences. The Parent Council for Deaf Education is the peak body for parents of children who are deaf and hard of hearing in New South Wales. Our organisation supports families with information and advocacy services. As we said in the submission, a lot of our parents are grappling with, not just one disability but children with multiple disabilities. Leesa and Leihana will talk to you about that today. The presence of more than one disability makes the process of diagnosis and then the pathway onwards much more difficult and uncertain for the families. The waters are often muddied from the start, as they try to work out the priority of needs to be met and where to put the focus to ensure the best for their child.

Services are determined by a diagnosis of a primary disability and most often they fall short of meeting the needs of these children. In the case of a child, for example, who might have Down syndrome and who is deaf, he or she is funded for their primary disability, which is Down syndrome, and services then respond to that need and often may ignore the needs that relate to the child's sensory disability, such as a mode of communication, which is key. So I flag that. Leihana's story will flag that with you. I do not know if you want me to give a landscape of educating deaf students but certainly ask me more about that if you want to because I have information about that. It may be good to pass over to the parents to share their stories first.

CHAIR: Thank you.

Ms MAHE: I have a 12-year-old son: his name is Isaiah. He has Down syndrome and he is also hearing impaired. Next year he will transition to high school. We had him assessed by a psychologist who does Auslan earlier this year and her recommendation was to place him in a hearing support unit. We applied for a hearing support unit placement and we were told that there were too many applications and not enough placements. So he was given a placement at our local high school in an IO class. This school is a lovely school but has no support for any children that have a hearing impairment. We have approached the education department to see if he would be eligible for an interpreter. We were told that he would be fully funded, being in an IO support class. This would obviously stop him from being able to participate in normal curriculum activities. He does not speak; he can only communicate with gestures, Auslan, and with visual cues and he will be in a place where he will not have any communication partners, where he will not be able to access the curriculum and where he will not be able to have normal social interactions.

I am unsure of where to go or what to do from there. I approached the Parent Council for Deaf Education and they have written a support letter asking that he be considered to be placed in a hearing support class or otherwise that he should be eligible for an interpreter. We have got concerns for his behaviour, how that is going to impact him and for his future if he is not able to have a normal educational experience. I really do not know what we are supposed to do next. So that is why I am grateful for the opportunity to come here and share my story. I have found, as Kate has said, that he is just diagnosed as having Down syndrome, whereas the hearing impairment is what is going to have the greatest impact upon him being able to access an education. If he cannot understand, even in the simple form of having the curriculum simplified for him for an intellectual impairment, he is not going to be able to access that because of his hearing impairment and his inability to communicate.

I am also here to share a second story that is not to do with hearing impairment. I have a second child who is almost four years old. She was born completely blind and she is also diagnosed with autism. We have had a lot of early intervention services with her since she was born but now we are trying to find her a preschool placement and there is no place where she fits. She has had early intervention services through the Royal Institute of Deaf and Blind Children [RADVC], guide dogs and also Life Start and we have found that preschools are able to fit a child that has autism and they have a visual-based program. Unfortunately, RADVC have a premise that if a child has a sensory disability they can accommodate the child but if your child has a sensory disability and an additional need you do not fit their criteria for their preschool programs. So we are fighting for a place where she can fit in. In 2013 she will be required to start school and if she does not have the access to a preschool program over this coming 12 months I am worried for her welfare: how she is going to fit into a school and how the school is going to be able to take care of her. I do not know what else to tell you. Thank you. If you have any questions or you would like to ask me anything or if I can clarify anything further, feel free to do so.

Ms KENNEDY: You may want to hear Leesa's story before questions.

Ms CLUFF: We have a six-year-old son, David, who started transition to school from early intervention to school this year. David's primary diagnosis is profoundly deaf and, through years of occupational therapy and physiotherapy, he has also been diagnosed with mild cerebral palsy. We have been very fortunate in our story. David went to a beautifully supportive preschool. He had full-time access to an additional needs teacher at the school who fed us lots of information about how David was going, coping academically, as well as socially in the school. This year he has transitioned, gone across to a mainstream school that has again been very supportive. He has received ten hours a week of classroom support and academic support, all in the classroom, which has been wonderful.

What we were not at any stage made aware of was the social impact of taking a child with additional needs into a mainstream school. It has been the approach of other parents who, quite honestly, sometimes are jealous of the additional support that David gets inside the classroom. It would have been really helpful to our family at some stage in the process if somebody had flagged what could happen from a social point of view. David went to early intervention for six years and my husband and I, from the time he was 2½, started approaching the different styles of school, whether it was public schooling, Catholic education or independent schools. We went to lots of school readiness meetings, transition to school, and it was never really brought to our attention what impact it could have on David from a social point of view. I think that was something we would have loved to have been aware of and been ready for. We will cope with it but just to have been ready for it would have made the whole transition to school a lot more fluid for David and the family and also for the school and the other parents in the classroom as well.

CHAIR: Thank you. If you are okay, we might open up to the members to ask some questions.

The Hon. HELEN WESTWOOD: Thank you for coming along today. For my purposes it is great to actually hear your individual stories and your experiences, in terms of accessing educational support for your children. Ms Mahe, when you have asked for an Auslan interpreter for your son in the IO class has your request been rejected because no interpreter is available or because the school or the department is inflexible and will not provide that support?

Ms MAHE: Initially the request was made by the school to the Department of Education and Training and it was told he was fully funded and he did not need any additional help. That was the initial request put in by the high school for next year.

Ms KENNEDY: The family was told that because he was in an IO unit he had all the support he needed, but he was unable to communicate with his peers. He was in the classroom without an interpreter's support.

The Hon. HELEN WESTWOOD: What assessment are you aware of that details his needs and determines that they are being fully met? Has anything like that been shared with you?

Ms MAHE: No. I have had a meeting with our current primary school, the itinerant hearing support teachers and the head of support education at the high school for next year. The high school has said that it has made initial inquiries and that it cannot be done. I have gone back to itinerant hearing support and they have said that they will try to increase his hours, but that will be a maximum of five hours if he is eligible. At the moment he is eligible for only two hours anyway. Five hours a week within a school program is crazy; that is one hour a day.

Ms KENNEDY: For the rest of the time he is sitting in a classroom without the ability to experience—

Ms MAHE: Without the ability to understand or to communicate. I have since been told that his current school will make another inquiry on his behalf for next year. That is basically doing the same thing but coming from the opposite direction. I am yet to hear whether that is possible. Even so, it will be only a few hours a week; he will not necessarily get a full-time interpreter. A hearing support unit would be by far the best alternative, but I am told that there are simply not enough places for the number of children who need them.

The Hon. HELEN WESTWOOD: That is interesting. I will take that up in a minute because that is not often the information that is coming from the department. In fact, it is saying that fewer and fewer children need hearing support because of cochlear implants. That is very different from the situation when my daughter was going to school; it was not around then. I sense the numbers in these hearing support units dwindling. I am really surprised that the department is saying that there are not enough places.

Ms MAHE: The head of special needs at the high school told me that she took Isaiah on the premise that using an FM unit would be enough for him to be able to communicate in class. That is why she said they could take him, but an FM unit is not going to make any difference—

The Hon. HELEN WESTWOOD: Without oral communication.

Ms MAHE: Yes.

Ms KENNEDY: I would like to address the issue of hearing support units. That is something we want to flag with the Committee. There seems to be anecdotal evidence of waiting lists for some of these hearing support units, but that is not made public.

The Hon. HELEN WESTWOOD: That is interesting because some of them have closed down. St Andrews closed down.

Ms KENNEDY: That is right. There seems to be a systemic closure of hearing support units.

The Hon. HELEN WESTWOOD: That is true.

Ms KENNEDY: We think there is a policy that, again, has not been made public. We know that the Department of Education and Training says it is because the parents are choosing mainstream education over hearing support units.

The Hon. HELEN WESTWOOD: That is exactly right.

Ms KENNEDY: We know that in many cases that is true and that the outcomes for kids in those schools can be very good. However, placement in those units can really help these kids who are deaf and who also have additional needs. We know that there is a need for hearing support units or at least a choice for families. Some hearing support units are thriving and they are the ones that are in demand, but some of the classes are under review. However, the department does not seem to be opening them even though we know there is a waiting list and parents have been asked to go elsewhere. We do not know where they are unless they come to us; we do not know what choice they have made. We believe that their choices are being compromised and that they might be putting their children into a mainstream school situation that is not meeting their needs.

The Hon. HELEN WESTWOOD: If that is not working for them can they then transition back?

Ms KENNEDY: Again, they seem to be closing hearing support units, so there is not much choice. The ones that are open are full. I think they have spoken to Ms Mahe about the fact that they may transport Isaiah to a hearing support unit that might have a space, but that is a long way away. He might be travelling for an hour and half one way to get to school. That is not viable for him or his family. There needs to be some exposure about what is happening with hearing support units—where are they at and what are the policies and plans?

The Hon. HELEN WESTWOOD: Ms Cluff, do you have anything to add? Has David been in a hearing support unit or has he always been in mainstream classes with or without support?

Ms CLUFF: He is in kindergarten this year, so this is his first year at school. I must admit that we never considered a hearing support unit. We started David at school a year late; we applied to the Department of

Education and Training to hold him back. We went to the Royal Institute for Deaf and Blind Children's Garfield Barwick School at North Parramatta and fortunately we were told that he did not fit in. He is a bright little boy and they said that he would make it in the mainstream system and that that would be a better use of everybody's time and facilities. From an academic point of view, he is thriving at the mainstream school, but that is not the overall picture for a little child at school.

The Hon. HELEN WESTWOOD: What do you mean when you say that you were not made aware of the social issues he might face because of his hearing impairment? Was it the way he interacts with other children or the way that other children interact with him? You have referred to the attitude of parents. How does that manifest itself?

Ms CLUFF: In everything you have mentioned. We went through an early intervention program that really focused on where he was at that point and getting him speaking—using auditory and verbal communication. I must admit that it was only through luck that we found the Parent Council for Deaf Education [PCDE], which helped us to contact other families and hear about their experiences. At all the school readiness meetings we attended we were told what the Department of Education and Training, the Catholic education system or the independent schools would be able to provide help in the classroom. However, we were never told what not to expect in the classroom or in the playground. We were not told about David coping in the social environment at school. He plays by himself every day because he cannot hear or because the other children do not know how to deal with him.

I would have thought that somewhere along the line the Department of Education and Training would know how many hearing impaired children were going into the school system. Even a little newsletter would be helpful. There should certainly be a meeting of parents to let them know what to expect. You are not thinking on your feet in the playground when a parent says, "Why is your son getting support when my little Jimmy is not doing so well in reading and he is not getting support?" You are defending yourself the whole time. Speaking to other parents through PCDE has flagged some of the other things that might come up. That information would have been a helpful thing somewhere along the path, perhaps in the early intervention process. We get a very rosy picture painted for us showing that our child is going to do well, but no-one wants to say that we will have to keep an eye out for things that might go wrong along the way.

The Hon. GREG DONNELLY: One issue has been exercising my mind as we have heard evidence from parents with children with disabilities. I refer to the maintenance of up-to-date information about the child's disability and all the associated matters. There are so many organisations and people involved all generating a multitude of files containing information about the child, their disabilities and their progress. Some information held by one organisation or party is not known by another. There may be an argument that to assist in the child's progress and moving through these transitions that information should be consolidated, or at least one file should be up to date. I might be interpreting this wrongly and the information might be collected and maintained and pushed along in an organised fashion, and I stand to be corrected. However, using your own children's experiences, can you tell the Committee whether good information is maintained on an ongoing basis about the child? Do medical professionals, education specialists and so on, have access to agreed information about the child?

Ms MAHE: I will share my experience. I have been in contact with the Department of Ageing, Disability and Home Care [DADHC] to get help with case work and accessing funding. I have Aspect funding and support from the Royal Institute for Deaf and Blind Children, Guide Dogs Australia, Life Start and so on. I deal with a large number of those sorts of organisations and with medical professionals. I asked for a caseworker to help me consolidate the information and to make some sense of it, but I was told that she would be well and truly into primary school before I would be eligible for such assistance. There is a shortfall; no-one is available to consolidate that information. I would have thought that DADHC could offer me a caseworker. My request was rejected again just last week. I am not eligible and the waiting list is far too long. It is something we have to do ourselves. I have huge folders containing all that information and I take it around with me. Fortunately I have a good paediatrician who tries to keep on top of it with me, but it is not ideal. My experience is that I have consolidated all that information and make photocopies and provide all those reports to everyone.

The Hon. GREG DONNELLY: So the parent is the custodian who tries to keep the information as up to date as possible?

Ms MAHE: Yes. You are retelling the same story over and over again.

Ms CLUFF: That has certainly been our experience as well. We keep all the information and take it to the different agencies. We try to move David around as little as possible because we do not want to be retelling the story and involving a whole new set of people who have to get to know him—however long that takes. If you find an early intervention provider, a preschool or a school that is working well that is where you stay until it starts to fall apart.

Ms KENNEDY: I would like to flag something in relation to this move towards self-directed funding. This is a big move obviously not only in the State but also nationally with the proposed national disability insurance scheme. Families will be and already are grappling with how to spend the money they have been given. Much of the time they do not have all the information necessary to navigate services, especially if they have a child with complex needs. They do not know what services are best for their child or how to access them. We, as an organisation that tries to provide unbiased support and information to parent families, are really concerned that in that new environment whichever service provider sings the loudest or looks the brightest will attract the funding, and that may not be the best place for the child. So the whole idea of having someone to help them navigate, say a case worker or someone to be there as a sounding-board, is just all the more needed, and it is going to be crucial in this new landscape.

The Hon. GREG DONNELLY: Is there some person on whom you primarily must rely and trust essentially to provide the guidance to make decisions in the best interests of your child? Is it a medical person that you rely upon to give you advice on how to navigate the future for your children, or is it someone in the non-government sector? Do you rely on a person, or are you forced to rely on a number of people and try to come to your own considered decision?

Ms CLUFF: I do not think I am forced into it. I tend to speak to other parents to gather information. Again, we are fortunate; I have the time and resources to go out and look at a lot of different opportunities for David and then, on anecdotal evidence from parents, make a decision that way. For many years we relied on our neonatologist, who brought together a lot of the information for us and guided us through the next steps. We also approached the Department of Ageing, Disability and Home Care a while ago, and we were told about the waiting list. For someone like David, the waiting list was considerable. We were told we would be given some money in the meantime—$1,000 to go out and seek out our own services.

The Hon. HELEN WESTWOOD: You would get a lot for that!

Ms CLUFF: It is not the money; it is the provision of information.

The Hon. GREG DONNELLY: That is what you need.

Ms CLUFF: It was that sort of help that we were looking for. We rely on bodies like the Parent Council for Deaf Education and other parents to tell us. This worked for us.

The Hon. CATE FAEHRMANN: I want to ask first about the primary disability of Down syndrome and the secondary disability that your son is also deaf. Is there a problem with the assessment criteria? Could you expand on how he is assessed, and how it is that those disabilities are not given equal weight? Or is it the education system?

Ms MAHE: I am not fully aware of the way the education system works, but, from what I understand, there is one diagnosis and everything is based on that. If there is a second one, we have to see what we can do to work around that. I found that even with the psychological assessment, right from when he was starting kindergarten through to year 6, the assessment was oral, and it would always have to be abandoned after just a few questions because he could not participate in it. I had to plead with them to give him a psychological assessment this year with someone who could communicate with him using Auslan. I finally got that done at the start of this year, and that is when they said the best placement for him would be in a hearing support unit. Even on the evidence from that report, there still was not a right placement for him. So, from what I understand, it seems you get dealt one or the other. It is difficult, with a child with an intellectual impairment and a sensory disability, to say where they fit, and which one is to be dealt with first.

Ms KENNEDY: Even with diagnosis, there are many conflicting aspects. Leihana's daughter is a case in point, being blind and having autism. Leihana believes as a parent who knows her child best that even though the assessment has assessed her daughter as having severe autism, Leihana believes that in reality the blindness is a greater factor than perhaps came through in the assessment. So there is a lot of conflicting information in just getting a diagnosis or clear picture of the assessment.

The Hon. CATE FAEHRMANN: Does your son have an individual education plan? The Committee has heard a fair bit about the worth of those plans for students.

Ms MAHE: Yes. We sit down with the school every year and we make out an education plan. This year, we are in the transition period before going into the high school. The problem that we have now is that they do not have all the information they need to create a plan for him for next year, because they were not given the full picture on how bad his hearing impairment is and how much that impacts his ability to communicate. Therefore they cannot create a plan because they do not know his full story. They create a plan on the limited information they have been given. That is why they have gone to a planning panel of placements for children for next year. Even though we have got all those reports on what would be most suitable for him, they have just taken it that he can use an FM unit, so he will be fine.

The Hon. CATE FAEHRMANN: Does he have a transition plan?

Ms MAHE: Not that I am aware of.

The Hon. CATE FAEHRMANN: In your view, what is needed to make his transition to the new school as smooth as possible? Given that he is not going to a hearing support unit and that he is going to this school, what does the receiving school need to do, and what does the primary school that he is at now need to do to make the transition as smooth as possible?

Ms MAHE: The primary school is trying. I will give them credit for that. His primary school has been incredibly supportive of him through the whole of his primary school years, and they are trying to put visuals together for him. They have met with the teachers for next year to try to prepare them and to let them know what to expect with a blind child. The itinerary support teacher is going to the school, and at their staff meeting will talk to the whole of the staff board about how to interact with a deaf child. So they are doing the best they can at that level. So I give them credit that they are really doing their best to do the best for my son. But that still is limited, because the other school does not have the ability to communicate with him. So if they go to a one-day workshop, that is not going to be enough to give him full access to a curriculum for next year.

The Hon. NATASHA MACLAREN-JONES: How involved have both parents been in the transitional plan and the education plan for your children?

Ms MAHE: The transition plan does not really exist. I had to call a meeting with the staff for next year and with the staff of this year and his itinerary support. I demanded that we sit down together and make some plan for him. Because he did not get the placement that we wanted and that we thought was most suitable for him, we thought it best to sit down together and make the best of the situation. Usually we sit down in a meeting and they discuss what our goals are, what we hope to achieve and our greatest concerns for him. In previous assessments we would look back at what he had done in previous years, and then look forward to the next year, to see whether he achieved those goals or not. The IP meeting happens anyway. But, to instigate the two schools coming together, I had to initiate that to get it to happen.

Ms CLUFF: We were very fortunate. At David's preschool it was called the individualised family service plan, or IFSP, which is the same family service planning, and that happened six-monthly. I was able to bring into the preschool both David's audio verbal therapist and his occupational therapist, so there would be myself, his two preschool teachers and the additional needs teacher. So we had a very comprehensive plan every six months. Then, going towards school, I was able to take the additional needs teacher from the preschool into meetings at David's school, with the Department of Education and Communities, and make up a plan going forward that way. As well, we have had the IP at David's school now. So, as a parent, as long as you have the time and the knowledge to bring all of those people together, the school has certainly been very open to it. But I do not think you should have to rely on luck that the school is open to it and relying on the parents going out and finding out for themselves what they need to know and what they need to do. David will obviously benefit from all of this, but other children out there will fall behind because the parents have not had either the time or the resources to bring together all of the different therapists and initiate meetings.

Ms MAHE: In respect of my youngest daughter and trying to get her a position for preschool, I found it very difficult to get everybody to meet together to make some sort of plan for a preschool. We had made early intervention plans; but to transition her into a preschool program, I cannot get them together to find a place or to help me to find a place that we could confidently say we could work with and be a suitable position for her.

CHAIR: We have heard the term "luck" used quite a bit this morning. Where did you go to try to find this information? Did it come initially from your practitioners? Did you search on the internet? We have mentioned speaking with other parents. Where did you go? I am sure you have looked everywhere. Out of all the places that you have looked at, is there somewhere that you got most information from?

Ms CLUFF: Within days of David being born he was diagnosed as being profoundly deaf, and we were given a book called *Choices*, which highlighted many of the hearing impaired schools. We chose three, and visited those. From there, we spoke to parents and did our own research on the internet to find different facilities. We found the Parent Council for Deaf Education, and that has been very helpful from a deafness point of view. David's cerebral palsy came up; by the time he was about 3 or so it was obvious how much this was going to affect him. Again, we researched that ourselves. So there has not been one source. We did approach the Department of Ageing, Disability and Home Care, but we felt we were going to be waiting too long; David was approaching school and we felt we could not go on a waiting list and wait twelve months for someone to come and help us. We needed to get out there and do it now ourselves. We would just go to everyone, sit through meetings, and just find out the information ourselves and then bring it together and make choices ourselves.

Ms MAHE: I have only recently been in contact with the Parent Council for Deaf Education. I actually made my submission for this inquiry through the Down Syndrome Association, which since has linked me to the Parent Council for Deaf Education. I had no idea that organisation even existed. I wish I had known that a long time ago; I could have used their help several times over recent years. For Ariana, a Google search got me to the Royal Institute for Deaf and Blind Children. Within a few days of being born we knew that she had no vision at all. Initially, we were in contact with Vision Australia and the Royal Institute for Deaf and Blind Children. It has only been as time has gone on that we have had autism added to that initial diagnosis. So, again, it has gone back to what information I can get from talking to other parents and taking it upon yourself to advocate the best you can for the needs of your children.

CHAIR: In both cases, with the complex needs of both children, is there no centre point that you can approach to seek information about cross-agency inter-reaction and available resources? Do you have to piece everything together, starting at one point and moving on from there?

Ms CLUFF: I had assumed that DADHC would be the people to help us with that but they had such an enormous caseload that we were going to be waiting for at least 12 months for someone to come and work through David's case. He was off to school and we could not wait that long.

Ms MAHE: I am the same. Initially when Isaiah was just a little one—that is a good decade ago now—I approached DADHC previously for support but it is too hard. It is too long to wait to get support through them.

CHAIR: On behalf of the Committee I thank you for your time today and for your stories. This sort of information and evidence from people who are experiencing the systems will have a big impact on the committee's recommendations.

(The witnesses withdrew)

(Luncheon adjournment)

JAMES CAMERON MOORE, Chief Executive, Ageing, Disability and Home Care Agency, Department of Family and Community Services, and Acting Director General, Department of Family and Community Services affirmed and examined:

CHAIR: Would you like to make a brief opening statement?

Mr MOORE: I will make a couple of brief points. Firstly, Ageing, Disability and Home Care Agency is a very large agency, which spends in excess of $2.5 million per year on specialist services for people with disability and for frail, older people and their carers. We focus very significantly on people with very substantial disabilities and most typically those with an intellectual disability. We are not an agency that tends to provide all services to anybody who has got a disability. We have a very narrow focus on people who need extra special assistance in addition to what you could expect out of mainstream services. The submission that was provided by the New South Wales Government includes some indication of those parts of our activities that we think are particularly relevant to this inquiry.

Secondly, as a general perspective over the medium history there has been a great much greater emphasis on the placement of children with disability in mainstream schools, and notwithstanding all the difficulties that may very well have been presented to the Committee about the success of individuals in aggregate one would consider that significant benefits have flowed from being able to involve children who will have lifelong disabilities as early as possible in the education system as part of being able to bring them into the mainstream, and also as part of sensitising the mainstream to being able to support people with a disability.

Thirdly, the growing theme, which has been reflected in the major reform package for disability, is that the way in which we are now trying to target and build our capability to target and support people with disability is by person by person, not program by program. That is a reflection of the need not to be brought into trying to systematise what is good for one person into a broader response. We are trying to tailor things to individuals. That places a lot of weight potentially on individual funding arrangements and while having the capability of being well tailored to individuals that does raise the tension in terms of how mainstream services may adapt and adjust in effectively trying to start relying on individual funding in specialist services to do things that they should indeed be trying to adapt their own systems to respond to.

The main theme of where we are trying to take the disability system is fully supported by the Government, led through Minister Constance, as a year-long consultative process to try and sharpen policy settings where individual funding is person by person, but not allowing the rest of the community to drop the effort that it needs to make in order to ensure that people with disability get a good start in life and are able to make the best out of life that they can. Those three points might in some way become relevant as we have conversation.

The Hon. GREG DONNELLY: One of the concerns expressed by some witnesses who have given evidence to the Committee—I will frame it in terms of a complaint, if I could—is that when making contact with the department about matters involving their children they were told it would be sometime before someone could be sent to a school to make an assessment. The timelines set were some time into the future, which led the parents to decide that they would in a sense go alone and take it upon themselves to find out what they could achieve. How do we grasp the amount of backlog—if I can use that phrase—of parents with children with disabilities who need that assistance?

Mr MOORE: I can give you an exclamation in general terms. I am happy to provide you with some tabular information that should relate to what I suspect it is behind the issue you are raising. A substantial range of requests are made to us by families with a child with a disability to assist and those requests are prioritised. As I was alluding in my opening remarks, our target is not exclusively but most predominantly towards those with severe, profound, significant, the higher-end of disabilities. We endeavour to ensure that those people are the priority and they get early responses. There is also a wider range of people with disability beyond those that fit into the high-end categories and we will do what we can where possible for them—but that tends not to be very much very often, I will absolutely frank with you. In part we are also cautious about doing too much because one quite often wants to avoid drawing people with disability into the specialist system if the mainstream service system can be an appropriate response for them. The specialist system will often tend to lead to people having an expectation of enduring supports when that may not be necessary. That tends to allow people unfortunately to set lower expectations as to what their son or daughter may be able to achieve. One is trying to battle this sort of dilemma between trying to help people and if one is doing that in the specialist system one will get the dilemma in helping them one can also lock them into a service-system response. Disability is a whole-of-life matter, not just a one-off response. This sort of prioritisation goes on and we certainly deal with the fact that there are many more requests for service then we could possibly respond to.

The Hon. GREG DONNELLY: I stop you there. You said the priority is for those with the most significant disability. Do you have any sense of the numbers involved in the other groups annually? For example, are there many thousands coming to the department seeking assistance and not being able to receive assistance? Is there a way of gross the magnitude of what we are talking about?

Mr MOORE: Off the top of my head on that particular issue I could not give you a number. I would be at risk of misleading you if I tried to give an educated guess. The number is not trivial. In a previous inquiry into the adequacy of ADHC funding, which concluded in 2010, a pile of information was provided around access to therapy services in particular, which is the sort of thing I think you are referring to. I would be happy to get that and to have it updated for you. That would then give you an understanding of the sorts of volume. I will try and get it for you in a way that shows the difference between those that are priorities for response and those that are lower priorities and less likely to receive a response.

The Hon. GREG DONNELLY: With respect to those who are outside the scope of priority for those most disadvantaged, what advice is provided to the parents about what they could do themselves? The reality is that because of prioritisation they will not receive assistance in the near future. Are you saying to them, "These are other avenues you can proceed along in order to seek assistance?" Are they given any guidance about how to deal with the circumstances?

Mr MOORE: There is not an across-the-board approach to responding to people in those circumstances. Different parts of our regional operation will have different strategies in place to address that. I am aware that in one of our regions they will endeavour to try and get groups of such families together to provide a sort of more information-based session to assist them. Individuals who are contacting our access, front door services will be provided with a range of different sorts of information as to where they may go if they are unlikely to get service. But there would not be a single, systematic response that would say, "All people in this category must go there". In part, in terms of the reforms that we are looking at in building a better operation within ADHC and within the broader Department of Family and Community Services environment, one looks to do those sorts of responses to people who really should be assisted to go elsewhere to do that better. But at the same time one ends up with a very wide range of people with differing needs and different circumstances. It often becomes very difficult to have a simple response as to where to point people. That is not to say that there are not good responses for individual groups. For example, for families with Asperger's autism there would be a range of health groups that they could be pointed to that would be appropriate. I would hope that the various information referral systems that we have would do that. I do not want to mislead the Committee into thinking that we have a very systematic fail-proof system.

The Hon. GREG DONNELLY: One of the things I have identified is that a number of parents are struggling to work out what to do. I appreciate that the situation is not set up at the moment so that they can go along to a single agency, body or organisation to get singular advice for their child, but the evidence of a number of parents is that they are really going on a fishing expedition to try and find who might be able to offer help. They seem to be struggling. Some parents have the confidence, background and wherewithal to take on all of this and try and develop that understanding to provide the best assistance to their child. I am concerned about the number of parents who almost sink because they do not know how to take it all on. Do you see any merit in having some—I am reluctant to use the term—centralised referral or some portal where people could go to receive broad referral as opposed to shopping around to try and ascertain basic information?

Mr MOORE: Yes, there is merit in that but it has its limits. I do not think that there is a single magic solution to the information needs of people, that they are too wide and varied. I think that within the work that the Family and Community Services Department and ADHC as part of that are looking at better information systems and better linked up responses. There are two sorts of things that we would endeavour to pursue. One is a broader range of information supports that can be provided to people and try to enrich the repertoire of things that you can provide to people and not just in terms of an information product—"here's a pamphlet", "here's a booklet". That I think particularly in the disability sphere but not exclusive of that, I suspect.

There are a wealth of families who have lived the experience who are often the best placed people to assist others to know what to do better with their child in similar circumstances and the ability to link up peers in a way is very important because I think some of the things that you know when it comes to getting the best for your child are things that will not be written down readily; they are things that come from one peer being able to talk to another and tell them what they wish they had done differently. You will not readily get that sort of advice in the written literature that might be provided to support people. Disability is being characterised by substantial change in its nature. People with a disability are now living very long lives. The opportunities in front of them are very different than what they were for previous generations. You do not have aunts, uncles, grandparents who can tell you what they did in similar circumstances because, even if they did have a child with a similar disability, they did not realistically have the opportunity to think that that child may be living until 60 or 70 themselves.

So you are looking to peers and you are looking at a way to assist people to learn what not to do as well as what to do. To that end, the repertoire of things that would fall under the banner of helping people like you are thinking about should not be just seen as a single point of access, single referral thing and a single information product. We need to build the community groups both in formal groups around a particular disability, condition or in a particular location, and the information products which they need to build the networks of peers and support groups, not just experts, because some of this is not expert stuff, so to speak. It is literally what a family's lived experience and lessons are.

The Hon. HELEN WESTWOOD: I will continue on that theme. Some of the evidence we have heard from parents suggests to me—I will continue on the point that the Hon. Greg Donnelly was making, which from the sound of your answer you do not think is a practical idea, which is a one-stop shop where you could have a multi-disciplinary team that could provide information and advice to parents, particularly when their children have multiple disabilities. This morning we heard from parents whose children have Down syndrome and a profound hearing loss and parents whose children are blind and have autism. It seems as though there is no coordination of approach to those children and a coordinated approach to meeting their education needs. These parents must go from place to place. It depends on the strength of the advocacy skills and tenacity of parents. I find, too, that it is always women. It will always end up being women whose careers and lives are being disrupted by the fact that their child has a disability because they must go out and shop around and do all the work.

I am surprised that we do not have a one-stop shop. When children are diagnosed with disability, many of them have said that if they had information at the time it would assist them in making choices about their children's education and their future. Another thing that is lacking is a case manager who pulls this stuff together, who assists them, first, in ensuring that there is plan—and we have heard from every witness about the importance of a plan to the success of a child through the education system. There does not seem to be any regulation or requirement that that plan be followed and no-one has any responsibility for monitoring it. I would be interested to know whether you have seen a model that may operate in other parts of the world that could offer that, or why you think it could not happen here.

Mr MOORE: Let me correct a misimpression that I gave in my response to the previous question. It is not that I do not think some one-stop-shop ideas, coordinated case management, integrated services are impractical. I think they are absolutely practical. My answer was I was giving it to a broader sort of spectrum. There will be a response that will fit a certain part of the spectrum but there will be a broader range of people who will need help and I do not think the one-stop-shop concepts will cover the whole spectrum so you will have to think of other things. To continue on from the previous point, notwithstanding things like coordination of services, integration of services, one-stop shopping, case management and accountability around implementation of planning, all of which are important things, some of the things I was referring to about networking families will still be an important part of how you support somebody who may be getting case management as well.

To the heart of your question, those things are very important and they are growing in their scope and in number. The case management resources within Disability, for example, were substantially increased under the reform program called Stronger Together, which began in 2005. That program has a substantial expansion of case management on the recognition that you needed to plan and you needed assistance to help stitch together what would be a response across a range of multiple services. The fact is that those services do not cover the full range of people who may be seeking some degrees of support. The current Government's priorities around joined up service are the next iteration of reforms that you will see being picked up within, I hope, the banner of Strong Together 2, the second five-year phase of this reform program and will be emphasised under the individual funding person centred approaches that are being developed where you are trying to stitch together the services across everything, no matter who is providing them, and enabling people to prioritise across the range of things they want, rather than what a programmatic response is.

The problem with the programmatic response is that you must learn all the programs you could possibly be supported by and how you get them all together and you get one because you heard that is what your friend got and that sort of sounds right but it is not right for you but at least you have got that one. It is not enough and then you go on the hunt for the next one. That service system response, which at least was helping people, is not helping them well enough. So the next iteration of reforms tries to turn that on its head and make it about people, now how can we help you, given we are prepared to help you with this amount of resource or in this way in broad terms. That will start to change for a large group of people but I still think that there is the tension I was trying to refer to in my opening remarks, which is at a certain point a person, while they may have a disability, the primary response we should be cautious about—as much as they themselves will not like me saying this, I think we need to be cautious about making the response a disability-driven response because that sets a series of expectations and future trajectories of support which are not necessarily the ones that will be the best for the person. It is about who should step up to the mark, what part of the broader service system should learn how to assist that person, and that is a challenge for government in terms of integration of service and trying to get, for example, the education system to learn where it can respond more appropriately, where it needs to call on assistance from the specialist disability system or other parts of the support system.

I give you one other thought that I think is relevant to the issue that the Hon. Helen Westwood and the Hon. Greg Donnelly have been asking about. To be frank with you, in disability most people who will need support have been spotted earlier in the broader service systems somewhere and we need to think about more proactive responses. The health system will have picked up a lot of the people in the examples that you were referring to and it is a matter of being able to get sufficient integration that that can turn on maybe three or four years after detection, support services from other parts of the service system. Those matters in the disability debate quickly lead you to why national disability insurance schemes are important, because what you do know and what the Productivity Commission—the commission recently completed an inquiry into whether you should have an insurance scheme or not—was identifying was the orders of magnitudes of resources that you would need to do that stuff which are well beyond what State governments can afford to resource.

They were effectively talking about, in very round terms, after Stronger Together 2 has rolled out fully, to then effectively doubling what New South Wales would then spend on specialist services. While you do not have that service capability, you will run into the sorts of pressures that you are referring to. That is just an inevitable consequences of the resourcing constraint and the response of the service system, which is a hard one for it to learn, is for the things that are not specialists in responding to disability to learn to pick up and do as best they can. You can shift service systems but it takes times to get people to interact well. We should not underestimate the benefits that have come. They will not have addressed those families you were referring to this morning at all. I am not trying it address them but the benefits that come from the mainstream of education, how people have started to learn different ways of thinking about disability and how to help someone with a disability. That must flow much further through the service system because there is a chance that a less than fully resourced system can do something decent for everybody who needs some help.

The Hon. CATE FAEHRMANN: I want you to expand on Stronger Together 2 and how specifically Stronger Together 2 will improve transitional support for students with additional or complex learning needs.

Mr MOORE: In very simple terms, Stronger Together 2 is, from memory, about a 50 per cent increase in the volume of service that will be available and it is targeting in a much more proactive way those points in people's lives which will help them set themselves up for a better future. The transition points in education are significant ones. When we talk about that we talk about it in terms of transition into school and then transition certainly from primary to secondary school and then transition out of school. In terms of completeness of answer, we have learnt a lot about the transition out of school over the past five, six years. Programs called Community Participation and Transition to Work are proving effective in assisting people to move from the education system into a post-school environment. Transition to Work is obviously into employment where we are now seeing 50 per cent to 60 per cent of participants, up from 5 per cent or 6 per cent of participants in 2004 and 2003, ending up in work or further education.

Community Participation is assisting people to move from school into a post-school environment where they still receive a lot of day type supports that enable them to set themselves up for the whole of their live around that. Those programs are still largely programmatic; they are not highly tailored to an individual's needs but they are trying to go, this person we think with some more effort can actually get to work; the school system has got them this far, we can pick up where the school system is unable to complete and carry that a little bit further.

The Hon. CATE FAEHRMANN: If I can just interrupt there, one problem we have heard with the assessment for young people entering into community participation or transition to work is the timing of that. We have had a number of witnesses tell us that they find out late in the year, I think term 4 or something. Is there a reason why the assessment is taking place so late?

Mr MOORE: In part because you are endeavouring to get an objective assessment close to the end of the person's school time as to what their future should be. I mean again, and I say this with an understanding that it does not necessarily sound entirely empathetic to people supporting their families, but what you are absolutely trying to do is ensure if somebody has got the chance with some more effort of being able to join the workforce that you really push them to that outcome, because the other outcome is that they will spend the rest of their life or are at much greater risk of spending the rest of their life in specialist supported services, when they could have been more fully connected with the community in some form of employment. You do want to be able to make as good an assessment as possible and you do want to try and make that not something where you reach a conclusion early on, in the last year of school or even earlier than that and then say "Okay so we are now locked into you being in community participation when you might have been able to get them to transition to it, so you have got this challenge of making sure you do not lock people into expectations that are inappropriate.

The Hon. CATE FAEHRMANN: A lot of the submissions though did mention that as a real problem, including parents and a number of service providers, so I am aware that it might be good to wait for as long as possible to see if there is any progress in the student, though nobody in their submission recognised that. They said in terms of these young people and their families it was really tough, particularly because the whole point for transition planning is to allow, what we are hearing as well, obviously six months in and six months out either end of the transition, and that makes it very difficult.

Mr MOORE: So for me I am happy to consider ways in which you could make that transition point work better. Being frank with you, to me the issue around those programs that has been raised with me that is the subject of additional work is how to much earlier in a person's school time start focusing on the possibilities of what it would take to get somebody to be able to have a better chance of getting into transition to work rather than community participation. So we are actually trying to work on how you might work better with education and others on what you might be able to do in the earlier, even year 9-10 range—not to be determining where somebody is going to end up, but in "what would it take to enable this kid who looks like they might end up being a community participation program recipient, what would it take to see if we in the school system could get them to have a good chance of transition to work"—or someone who looks like they might end up in transition to work, what would it take to avoid even that—not because you actually want them to not participate in those programs but if they could go straight to employment from school, why do they need to pass from transition to work?

If they do not need to be in community participation what can it take to get them out of it? So that for us has been the priority, but if what you are hearing is a substantial concern about that very last point, that is something I am more than happy to have looked at and I am certainly willing to look at suggestions; they just will bump up against that challenge point that I was telling you about, which is that the earlier you make the call the greater you are at risk of getting it wrong, and this is not something you want to end up getting wrong—particularly in terms of someone who could have gone to work—and in the end you lock them into a program which tends to deter that option.

The Hon. CATE FAEHRMANN: Exploring the whole issue of case management a bit more, in the Government's submission there are some examples of what looks like pilot programs for case management. Could you just explain—I am sure you do case management that is not just the pilot programs in the submission—I am trying to get my head around how in the two examples of parents this morning, they both indicated they really could not get the support from the Department of Ageing, Disability and Home Care in the time they needed basically. In particular this young woman seemed to have a child of high need, I think she said something like 24 months or 18 months was going to be the waiting period in the end. What do you have in terms of case management? You said you dealt with children or supported families and children of very high need. What is the criteria there and how much in the way of resources do you have for this type of case management?

Mr MOORE: I am at a little bit of a disadvantage of being accurate in the answer because I am not quite sure of the specific cases you are talking about but what I would be happy to do for you is—I presume I will be able to get access to the transcript fairly quickly?

The Hon. CATE FAEHRMANN: Can I suggest one was somebody with a child with Down syndrome and who is deaf.

Mr MOORE: The issue will not be so much those two conditions as opposed to the severity of those conditions. There is a wide range, particularly of Down syndrome, and what that would mean. If I was able to look at the cases I would actually be able to give you some indication as to why, for example, 24 months might have been the answer for that person. In more general terms we would have in these days in the vicinity of about 350 more generic case managers, I think would be the number, I will correct that if that is way off the mark, and as I was indicating earlier, that is a group of support resources that we have grown out of the Stronger Together Program since 2006.

They perform in very simple terms two sorts of roles, one trying to assess people in more detail as to what is appropriate and whether they can for example be placed on waiting lists for supported accommodation, as well as endeavouring to get the right mix of programs and supports and other services lined up to assist somebody to be able to make their way through their life. That is something that may be a one-off or it may be to some degree enduring. The pilots you may be referring to, we are also looking at trying to do things where people have more complex needs or multiple needs, where you are talking about service responses that go way beyond specialist disability and trying particularly to use the linkages that are now emerging between the Department of Family and Community Services, the Department of Housing and the Department of Ageing, Disability and Home Care within the FACS department to build a response across the department rather than just leaving it to each individual agency to do its bit and no more.

The Hon. NATASHA MACLAREN-JONES: I am interested in looking at the relationship between your department and the Department of Education. Can you outline a current example where you have been working well together over provision of a service and where some challenges are that could be improved?

Mr MOORE: I think certainly in terms of the challenges that we need to take on board, the single biggest challenge is that the main frontline resources within the education system are not targeted to a whole service system response and you would not want them to be and the challenge is being able to take the teaching responsibility and find ways of getting it to butt up into and activate alternative service responses and that again, talking about disabilities, there is a wide range of disabilities, ranging from very small impacts to very substantial impacts on a person's capabilities, and trying to get the dividing line between where, that is something that needs to be dealt with in the education system, and where that needs to have specialist services begin to emerge and where you put any bridging resources is the key challenge. We continue to have discussions with the Department of Education about how to try and get the specialist therapy sorts of services interfacing with them to get better outcomes and that is a difficult and ongoing discussion because it is just the competing priorities within the two sorts of systems.

I think that my current thinking, which reflects where the current Government is pushing a broader service system reform, is that you do need to have a highly devolved and highly decentralised authority to enable people to work closely together and have the autonomy to make decisions to put things in on the ground that work in locations. I think many of the problems that we will bump into are ones where systematic programmatic type responses are the ones that are not satisfactory or adequate to respond to individual circumstances. Again we are talking about people, not programs, and you have got to have local capability to respond to the individual circumstances. I think that there will be some very productive discussions between the Department of Education and the Department of Family and Community Services about how to work locally much better and that is where I am looking to and where I am aware Minister Goward is looking to some particular reforms around how FACS operates and how it will interface with where school governance is going.

In terms of things that are working really well within the Department of Education, the thing I am most pleased about is the work between the Department of Education and the Department of Ageing, Disability and Home Care around the transition to work community participation and trying to get a greater sense of responsiveness on both sides of the fence so to speak about how to as early as possible start making decisions to assist people as to what opportunities they may have in the future; whether they are going for community participation or transition to work, and I think the education system from a disability perspective is vital because the role of families and the expectations of families in setting goals for their child is critical and getting them to understand how they may be able to set high goals which are more risky for their child, and particularly if you take the point I was making earlier where, because of longevity we are dealing with people with disability, which is great news, who are living as long as anybody else. We don't have the well of community knowledge to support decision making—people do not have aunts or uncles or grannies that can help you and guide you in the same way they can about other things. The education environment does provide I think a great network of peers that could assist families to take what is actually a much riskier concept about what their son or daughter may be able to achieve.

CHAIR: If I could ask a couple of quick questions in the remaining time. On that planning for transition to work, some of the evidence, particularly from some of the TAFE representatives, is that it is one thing to be looking at the educational outcomes but there needs to be the other experiences, the actual ability to have work experience and things like that and they are saying this needs to be happening around the 14-15 years of age, not so much term 4 in year 12. A lot of this is about early planning. Some jurisdictions legislate transitional plans through children through the different systems; do you see a position where through, whether it is Stronger Together, legislate, there needs to be plans developed and assessed at certain key points and indicators right through the system.

Mr MOORE: I would ask not to comment on whether we should legislate or not, but in terms of the concept of planning, in terms of the importance of this being done early and often, absolutely. The real question you are asking when you say "if we do this intervention at age 14, is not will they do something at age 18, it is actually what is their life going to be like over the next 20, 30, 40 years. " You actually do not have research that answers that question for you, so you are punting but the punts are pretty obvious really. You go yes, early planning which helps somebody get better work experience, that sounds to me like it is going to get a better outcome in the long haul. So, yes, we should be really pushing for earlier planning.

CHAIR: With Stronger Together Two, what are the assessment points that we are looking at as we go through the different stages? Are there set assessment points?

Mr MOORE: Under Stronger Together Two, the first step is that the existing policy remains in place where you are making assessments of people at the lower part of their secondary years as to which of the Transition to Work immediate participation they will be going into. There is a commitment to working with education to find earlier points that are appropriate, and working together backs up my point about the lack of research which gives you unequivocal guidance as to where to go. But the other aspect that Stronger Together Two makes a very strong play around is the concept of what is called the lifespan approach, which says that you have to look at the whole of the lifespan and the key transition points. There it is also looking at the transition point from lower to upper high school. That will become the next stage. It is that one.

CHAIR: Thank you for your time this afternoon and your evidence. I note there are a couple of questions that you have taken notice. The Committee has resolved that answers to those questions on notice be returned within 21 days. The secretariat staff will be contact you in relation to questions you have taken notice. Thank you again for your evidence this afternoon.

(The witness withdrew)

SEV OZDOWSKI, Director, Equity and Diversity, University of Western Sydney, and

NICOLE LOUISE ISON, Program Coordinator, National Disability Coordination Office Program, University of Western Sydney, affirmed and examined:

CHAIR: Would you like to make a short opening statement? If so, please keep it to no more than five minutes. There is no need to repeat anything that is stated in your submission.

Dr OZDOWSKI: Yes, we would like to make a short opening statement. Perhaps I will start, and then Nicole will follow it up. We would like to start with thanking you for giving us this opportunity to, first, present a submission, and now to give evidence today. Allow me to start with introducing myself: Since 2006 I have been the Director of Equity and Diversity at the University of Western Sydney. Previously between the year 2000 and 2005 I was the Federal Human Rights Commissioner and Disability Discrimination Commissioner. Among key achievements during the time that I was the Disability Discrimination Commissioner was the National Inquiry into Mental Health Services, "Not For Service". This inquiry placed the issue of mental health on the national agenda and resulted in major changes, including a major commitment from the Howard Government to deliver $2.4 billion and new services for people with mental health issues.

I also delivered the report of the National Inquiry into Employment and Disability, "WORKability", which also resulted in a number of changes—possibly not going as far as I would have liked to—and then I was responsible for establishment of a range of different disability standards dealing with access to education, public transport and premises. We also established a number of voluntary industry standards dealing with, for example, banking and captioning. With reference to my present role as the equity and diversity director at the University of Western Sydney, I am responsible for the overall management of the National Disability Coordination Office [NDCO] program on behalf of the university. My unit is also responsible for disability adjustment in the workplace as a separate unit which deals with disability adjustment for students.

The NDCO was founded by the Australian Government Department of Education, Employment and Workplace Relations. There are altogether 31 different NDCO regions. We have about 10 per cent of them. We are responsible across three regions in greater western Sydney. Looking at the key goals of NDCO, they are first to improve transition for people with disability to move from school or from the community to post-school education, training and to subsequent employment; then to increase participation by people with disability in higher education; and the third one, which possibly as the most important, to establish better links between schools, universities, TAFEs and disability service providers. In fact NDCOs are the only coordinator of all the services in this area in Australia.

The Federal program started in 2008, but there was an earlier program established by the Howard Government 12 years previously, which was called the Regional Disability Liaison Officers program. Altogether our university has 15 years of experience in this area. Now I would like to introduce Ms Nicole Ison, who is responsible for ordination of the free University of Western Sydney NDCO programs across greater western Sydney and the person directly responsible for its implementation. She has plenty of hands-on knowledge of how it works.

Ms ISON: As Sev mentioned, one of the three key goals of the NDCO program is to improve transitions. Just to conclude our opening statement, I will give a few examples of the ways in which we go about doing that. For example, that is by building sector capacity through large-scale professional development activities to school staff and other key stakeholders and through the development of evidence-based transition planning resources, many of which are now used at a national level. I have brought along a few of our key resources that I can table today, if you would be interested in that.

CHAIR: Yes, please.

Ms ISON: Would you like me to do that now?

CHAIR: Perhaps we could do that at the end.

Ms ISON: Okay, no problem. We also provide information, advice and referral services through efforts to improve linkages between schools, further education and training, including higher education and vocational education as well as disability service providers and the community. We do this, for example, through the coordination of formal networks or interagencies and electronic listservs to enhance communication and information exchange. Given our expertise and experience in supporting the transition of people with disabilities, we feel that we are well placed to contribute this inquiry. However, it is important to note that our specific experience and skills are in the area of transition from secondary school into further education, other post-school options and employment. Obviously we recognise that all of the transition points are equally important, but that is where our expertise lies.

Dr OZDOWSKI: I would add that most of our resources that have been developed by us are used nationally. Indeed, they recognise our really solid resources and they have been adopted by the department.

The Hon. HELEN WESTWOOD: Thank you very much for your submission and for joining us today. In relation to a number of points in your submission, I want to obtain clarification rather than embark on broader questioning—in particular in relation to the support teacher transition [STT] situation. What was the nature of the restructuring? When did the restructuring that has created that problem occur?

Ms ISON: To be honest, I cannot tell you exactly when it occurred, I am sorry, so I will not speculate. There has been a recent restructure within the Department of Education and Communities such that our previous person, who oversaw the work of the STTs across the State, had her position disbanded. Just in the last month or so a new person has commenced under a slightly different job title. My understanding of the issue around our support teachers transition is that they are itinerant teachers. They are not situated within every school. They cover a broad number of schools each.

Our understanding is that there is not equal representation of those support teachers transition within all of the Department of Education and Communities' schools. In addition there has been a slight change whereby schools have to invite support teachers transition to come into the school. They cannot just rock up to a school and say, "I'm the STT. I'm here to support all of your students that have a disability." They actually need to be invited. From our experience, it is based on previous experience within that school. If they have had a good experience working with the support teachers transition, they will call them back again and again; but if they are not necessarily as aware about the existence of that itinerant service, they might not actually invite them in.

We are aware of examples of students who are not being seen by the support teacher transition, or who the support teacher transition only finds out about in their very last few months of school. That is often when that STT will call us in because they have just found out about this student really late, and they can only offer support while the student is enrolled in the school. They will often get us involved to help provide some more transition services after the student actually has left school. It is obviously a resourcing issue as well in terms of the number of STTs in the regions. There are a few barriers. But I would just like to note that STTs themselves do fantastic work—absolutely. I guess there are just some barriers for them.

The Hon. HELEN WESTWOOD: From your experience with students with disabilities at the University of Western Sydney, what do you see are the components for successful transition? Is it to actually see a student come from school, enrol in a course and then graduate on completion of that course?

Ms ISON: Sure. I would just like to note that the NDCO program, while situated within the University of Western Sydney, actually works with students who are not just going to the University of Western Sydney. It is important to clarify that. We are funded by the Federal Government to provide support to students who are moving from school into any further education and training. That might be the University of Western Sydney or it might be another university, or it might be a TAFE or a private registered training organisation, for example. In terms of what is most important in seeing a successful transition—and that could be at the University of Western Sydney or elsewhere—it would be early planning, definitely. You have probably heard that again and again during the course of this inquiry.

The Hon. HELEN WESTWOOD: Yes.

Ms ISON: Our program is funded to commence at age 15. Something that we have raised with the Department of Education, Employment and Workplace Relations [DEEWR] as well is that we would really like to see, hopefully if the program continues, a reduction in that age. The evidence is that around 13 to 14 is the best age in which to commence transition planning. That would be number one. I guess another thing that is really important is for students to be aware of the types of support that are available for them and to be encouraged at an early stage to make connections with those services.

Our experience is that a huge number of students who have a disability are not aware that they are entitled to access support in post-school settings. It often comes up for students who perhaps have a learning disability or a mental health condition and who may not have had a disability confirmation at school, but they may be involved in the learning assistance program, for example. We often have heard of cases where young people have a disability but it seems that schools try to avoid using the term "disability" sometimes. Students might be aware, "Oh, I have a learning difficulty", or, "I need some learning support", but no-one actually uses that word "disability" in relation to them. When they go into a post-school setting where disability support is based on the definition of "disability" under the Disability Discrimination Act, they may not actually be aware that they are entitled to that support.

That is a huge barrier that we come across again and again. You will note in the submission that we referred to a survey that was conducted only this year where 57 per cent of respondents did not even know about the national disability standards for education, which is of huge concern to our program. One of the resources which I will table at the end is a plain English summary version of those standards. We do a lot of work around informing people of their rights to access support in education under those standards.

Dr OZDOWSKI: If I can add two things on behalf of the university, in Western Sydney about 45 per cent of students are the first students in the family, so people who have never been to higher education. And we have got a program which addresses different high schools across the region, to basically educate people that it is good to go and get a tertiary education. And in a way kids with disabilities are exactly in the same boat. They are quite often coming from families which do not have aspirations for them to progress into tertiary education.

We run a range of programs and we are glad to host these three NGOs because it links with our core business. Then when we get students the key issue is to keep them in. And sometimes it is difficult because quite often students do not declare their disability and sometimes it is difficult to get the support mechanism working for them if we do not know. But what we did, for example, in terms of disability adjustment for university staff, is two years ago make major reforms. One of the things we did was to centralise the pool of money available for disability adjustment within my unit so that individual schools and individual units of the university do not bear the cost of paying for adjustment for individual students and for staff. So basically for them it is free. They are not worrying about it and we are doing it. The second thing we did was allocate resources personally to the students with disabilities, not to the unit of the university. So if a student moves from one school to another or from one area to another the student can carry the support equipment with them. I think it is very important. It is part of our submission.

Ms ISON: That is one example of best practice as well, money following a person rather than a department or an institution. We come again and again across students who have gone through school and they have fought tooth and nail to get hold of funding to access something like a computer with assisted technology, text to speech software and the like on it. They finish school and that equipment, which is owned by the school, stays with the school. So then this person, in the process of trying to make a transition, which as we all know is extremely difficult, into TAFE for example or university, has to start again that process of getting access to the equipment and technology that they need. They have spent all that time in learning the system that they have set up there and then it is just all gone: they start again from scratch. That continuity that we demonstrate at the University of Western Sydney is an example of that kind of best practice that we are really looking for in that sense.

The Hon. HELEN WESTWOOD: And there is not flexibility within those programs for that equipment to stay with the student. Often it is designed for that person's disability and it may not be usable by anyone else.

Ms ISON: Absolutely. We have heard stories of storerooms in schools full of laptops and software and all this stuff that is not being utilised and then meanwhile, sitting in TAFEs and universities, are students who are struggling to find funding to support them to access this kind of equipment that is sitting there, not being used and getting out of date in their previous settings. It is of real concern.

The Hon. HELEN WESTWOOD: On the same issue, again in your submission you talk about personal care not being available. Is that an issue within ADHC, that personal care cannot be provided in an educational setting? Does it have to be provided at home?

Ms ISON: No, it can certainly be provided in the setting. I think it is an issue. I am happy to take the question on notice and give you some more detailed information. From my understanding, people can access personal care services at TAFE. There is a challenge, particularly in the area of university and personal care provision, I think, between the State ADHC services and the Federal provision of university services. There is a bit of toing and froing about whose role it is to provide access to the personal care. At this point in time the university position on that is that it is not their responsibility to provide personal care, as in to provide the staff. They absolutely provide the facilities, but not the staff. We have examples of parents coming in at certain points in the day to help their young person use the bathroom, to eat their meals, that sort of thing. So, in terms of the actual attendant care services, that is where the issue lies.

The Hon. GREG DONNELLY: I take you to page 4 of your submission, specifically the first dot point at the top of the page about the coordinated transfer of information from school to post-school provider being critical. Do you think that in fact, whilst that is important, there needs to be a continuity running right down to a much earlier age and then sort of moving ahead beyond the post-school period? I raise that because one of the things I have been struggling with, as I have been hearing the evidence from principally parents of children, is the almost ad hoc manner in which information is being maintained and held on files and what have you and coming back almost to a reliance on how efficient and organised the parents are to ensure that a disabled person is carrying through a comprehensive set of information about their disability. Do you think we really need to work out how we should go right back and create an almost multipurpose singular maintenance of a record which can be carried by a person right through their life and how we maintain that, bearing in mind there is obviously going to be a number of specialist providers and people from the medical profession and what have you wanting or needing to access that information so it is kept maintained over time? I would care for your comments on that.

Ms ISON: A coordinated method of storing all of that information on some kind of system that can then be accessed by all relevant providers would be fantastic.

The Hon. GREG DONNELLY: Is it too ambitious to think of something like that?

Ms ISON: My concern would be around the comprehensiveness that would need to be within a resource like that, so that any provider could then come in and find the information that was relevant to them. I am just trying to think, sitting here, it would be fantastic. I just do not know in practice if it would happen, to be honest. I think there is definitely a need for more consistency. Families, again and again and again are having to provide the same information to every service provider on a different form, so they cannot use the ones they have used previously. Often they do not understand, no-one is explaining to them the reasons why they are having to fill in this new form again, how is this different to the old form or to the form that another service provider gave them.

In terms of having something that follows someone throughout their life, I do not know how it would happen in practice. I think it would be a huge challenge but definitely around the transition from school, which is obviously where our expertise mostly lies, that is one of the huge barriers whereby, for example, if someone is trying to link in with a disability employment service provider, that employment agency will come along with their enrolment form, they will have to fill that in and two months down the track the family realises that that provider is not meeting their needs and wants to go with a new provider. They then have to pull all that information together again. It is obviously a big issue and it is again something that we try to encourage in our programs around raising the awareness that you will need this documentation again and again and again. And the better your own records can be—that might be the family's records or the records of the young person with disability themselves—the easier that process will be for them. I would love to see something.

Dr OZDOWSKI: A word of caution: There are very significant privacy issues involved with it and quite often people with disabilities are not willing to disclose their disability, sometimes for a very good reason. Plus, looking at further legislation, "disability" is defined broadly, so basically there are times people may have a disability and there are times people may not have a disability. So I would urge you, in a way, perhaps to stick to some core principles here and not to go overboard with how far we could go with transmission of information. And always the person who is at the core of it should be involved.

Ms ISON: Absolutely, and I think when you are looking at a particular service, for example, the disability employment services—I know they are Federally funded, I am just using them as an example—because of those types of services or it could be the transition to work programs funded in New South Wales by ADHC, those types of services are likely to require the same type of information. So if there could be a more coordinated approach around providers of those specific services that would probably reduce some of those issues around just having all of my information out here for everybody to see, which obviously, as Sev mentions, raises some significant privacy concerns.

The Hon. GREG DONNELLY: Three more points down, about best practice, it states:

> "Ensure that any changes to NSW State funded services or education departments are in line with existing Australian Government funded services."

Is that put in there because there have been cases in the past where that has not been done?

Ms ISON: No, not specifically. That was just a point to make that if changes come out of this current inquiry, which obviously we would love to see, just being aware of what is happening at the Federal level, as well.

The Hon. GREG DONNELLY: I was just wondering if there had been a prior issue.

Ms ISON: No.

The Hon. CATE FAEHRMANN: Could you inform the Committee a little about the specific challenges of young people entering post-school education and training from culturally and linguistically diverse backgrounds and Aboriginal students with disabilities as well?

Ms ISON: The issues are multifaceted and individual when it comes to people from culturally and linguistically diverse and Indigenous backgrounds. Again, access to information in an appropriate format is often something that we find is very challenging for young people and their families, being able to access the information about post-school programs. Yes, being able to access information to help them to make that transition. Another issue that comes up, probably more so I have heard in relation to students who are Indigenous, is around that definition of "disability". Disability is a concept that does not really exist within the Indigenous community. So being able to work with Indigenous families in an appropriate way to help them understand the support that is available to assist their young people is really important but it needs to be done in a very careful way and one that does recognise that this concept of disability is something we are imposing. They are two of the biggest issues we have come across in the program.

Dr OZDOWSKI: It is mainly the issue of dealing with cultural issues, that disability is acknowledged, that disability is a fact of life and not something to be ashamed of, and that people with disabilities can move further, providing the supports are in. There is perhaps one more point I would like to make, which goes a bit beyond your question. In looking at services provided to students with disabilities possibly the biggest conflict emerges between students and the lecturers or tutors when adjustment is being made. Generally speaking, adjustment is not properly communicated to teachers. Teachers assume that students are using their disability to cheat or to get an easy option. I do not know to what extent that occurs in high schools, but it is possibly the biggest problem we face at the moment in handling disabled students.

The Hon. CATE FAEHRMANN: Do you think vocational education and training providers are aware of their legislative responsibilities for students with disabilities? If not, can you suggest how they can be made more aware of their responsibilities?

Ms ISON: I am glad you raised that because it is a key issue we are struggling with at the moment. I am not talking about the TAFE sector; it is absolutely aware of its requirements. It has specific disability services in place and specialised teacher consultants who work with students with specific disability types. The TAFE sector is well prepared to meet its legislative requirements. That is not to say that it does not struggle with its own issues with regard to lack of resources for those services and so on. However, in general, it is definitely aware. The issue we confront again and again relates to smaller private registered training organisations that are mandated as much as anyone else, including a university like the University of Western Sydney or TAFE, to provide reasonable adjustments under the Act but are not aware of their responsibility to do so. We have heard about students with disabilities contacting a private training organisation wanting to enrol and asking about support but being told, "You would be better off going to TAFE; we don't know anything about that."

Work is being done in this area. The Australian Council of Private Education and Training [ACPET] is doing a lot of work on this issue at the moment. It has just developed a new resource around social inclusion issues. It is a handbook for small registered training organisations [RTOs] that are members of that organisation to help them to provide reasonable adjustments and to understand their responsibilities. However, that assistance is provided only to the members of that industry association and many RTOs do not belong. We are aware of only one registered training organisation—one of the larger organisations—that has in the past two or three months appointed a part-time disability adviser who will perform a role similar to that performed by advisers in the university and TAFE sectors. That was really exciting and it generated a great deal of discussion on the list servers about how progressive that organisation was being. It is generally left to teachers or people working in administration in those RTOs to get involved in adjustments. Often they do not have the awareness or the background knowledge, experience and skills to do that effectively. It is definitely an issue.

The Hon. NATASHA MACLAREN-JONES: I refer to your comments about transition planning starting early. You said that you would like that planning to commence at the age of 13 or 14 rather than 15. What are the barriers to realising that goal?

Ms ISON: Our program is funded to provide services from 15 to 65, but other services might start earlier or later. I do not know what the barriers are; I do not know why it is not happening. The evidence suggests that that is the way it should be; that is, the earlier the transition starts the better. To be honest, I do not know why it has not been made a priority before now. I just hope it is.

CHAIR: Have you had any experience of students living in regional and remote areas and the barriers to their accessing further training and the impact that has on their transitions?

Ms ISON: I preface my comments by saying that the National Disability Coordination Officer program at the University of Western Sydney operates in regional areas but not in remote areas. However, I have a great deal of experience through working with other groups in New South Wales and Australia. I am happy to make some comments, but it is not a specific issue for us in western Sydney. The sorts of things that we hear about happening in regional and remote areas relate to the number of service providers. For example, there is a real lack of choice of transition to work and community participation providers in some areas and no choice in others in terms of there being only one provider, or providers even being a really long way away. Transport and access to a broad range of providers from which to choose are the biggest issues. There are 31 national disability coordination officers around the country and we are lucky in metropolitan Sydney because we have five. There are four million people in metropolitan Sydney and we have five people looking after that area. The Northern Territory has one officer and there are three in Western Australia. They are covering huge geographical areas, which obviously impacts on the services they can provide.

Dr OZDOWSKI: I refer again to my not-for-service report, which focused on mental health. When you go to Rockhampton, Alice Springs and Broome you find that those services are not available. I also ask members to remember that disabilities are not only physical; mental health issues must also be considered. Quite often they emerge early at school and are seen as character issues or parental issues and so on, but they are in fact health issues and they are very difficult to address.

CHAIR: Thank you for your submission and your evidence this afternoon. The Committee would appreciate receiving the documents to which you referred. The Committee has resolved that answers to questions on notice must be supplied within 21 days. The secretariat staff will liaise with you about that. On behalf of the Committee, I again thank you for your time.

Ms ISON: Thank you.

Dr OZDOWSKI: Thank you.

(Short adjournment)

EMILY CASKA, State Policy Coordinator, National Disability Services,

PATRICK JOSEPH MAHER, Chief Operating Officer, National Disability Services, and

KATHERINE McLELLAN, Policy and Projects Officer, National Disability Services, sworn and examined:

CHAIR: Would you like to make an opening statement? Please keep it to approximately five minutes. There is no need to repeat anything in your submission.

Mr MAHER: National Disability Service is the national industry association for disability services, representing more than 650 not-for-profit organisations. Collectively, our members operate several thousand services for Australians with all types of disability. Our members range in size from small support groups to large multi-service organisations, and are located in every State and Territory across Australia.

We welcome this important and timely inquiry, and appreciate the opportunity to appear at the hearing today. It is important to contextualise this inquiry under the United Nations Convention on the Rights of Persons with Disabilities, to which Australia became a signatory in 2008. The convention obligates Australian governments to proactively seek ways to reduce the gap in educational outcomes for people with disability. To ensure this becomes a reality, the Australian Government has introduced the National Disability Strategy, which seeks to deliver quality outcomes for all Australians with disability through a whole-of-government approach.

In New South Wales, we have experienced significant growth and change in the way disability services are funded and delivered, most noticeably underpinned by a significant shift towards more person-centred approaches that enable more choice, voice and control for people with disability, their families and carers. The bipartisan supported addition $2 billion investment in disability services over the five years for the second phase of the Stronger Together campaign is evidence of the New South Wales Government's awareness of the growing demand and crucial role that specialist disability services play in supporting people with disability in all areas of their lives, and emphasises the bipartisan nature of that commitment.

The principles upon which the second phase of Stronger Together have been built provide a firm directive for how the education and other intersecting systems need to adapt to ensure they can be more responsive to the unique needs, opportunities and challenges of educating students with additional and complex needs. Stronger Together 2 signals the beginning of a significant paradigm shift in the way services and supports will be provided to people with disability and their families. It also commits the New South Wales Government to creating a service sector that provides for certainty of support across the lifespan, especially at key transition points, and a commitment to portable, flexible, individualised packages for anyone receiving disability services by the end of 2013-14. A commitment to person-centred approaches and to enabling people with disability and their families to decide on the supports and services they require should exist in all aspects of a person's life, including their educational setting.

National Disability Service believes it is imperative that the inquiry consider the transformative implications of the Productivity Commission's final report into disability care and support when considering the future funding of service and support needs for students with additional and complex needs. I would like to take the opportunity to thank the Parliament for their support with the Every Australian Counts campaign, especially with the DisabiliTea, which saw the Premier and the Leader of the Opposition sharing morning tea in this place, and in fact jointly cutting a cake that had a remarkable similarity to a wedding cake being cut. We promise not to send that photo too far and wide.

The recommendations in the Productivity Commission's report clearly indicate that the New South Wales Government will continue to be responsible for the bulk of educational disability support provisions in schools. These supports might include structural modifications to buildings to ensure better access, aids and appliances to increase educational opportunities, teacher aids, development of new curriculum materials, and teacher training. The current difficulties experienced by people with disability and their families in accessing disability supports throughout their education will only continue to amplify under a future National Disability Insurance Scheme if appropriate levels of recurrent funding are not identified and secured.

Given the breadth and depth of the issue at hand, there are a number of key points which National Disability Service NSW would like to highlight to the inquiry. The first is that early intervention is integral to a successful transition into early childhood education for children with disability. Furthermore, a successful first transition during a child's education can set the tone for their future transitions while in the education system. Secondly, the importance of meaningful and genuine collaboration cannot be underestimated during the key transition points in a child's education, and most particularly or children with additional and complex needs. Decisions for children with disability must not be prescriptive: a one size fits all approach is no longer valid or effective. Each individual and their family must be firmly involved in the decision-making process to ensure the best possible outcomes and effective and efficient resource allocation. Furthermore, a broad network of peers, practitioners, teacher or advocates should be available to assist with decisions at transition points so that the wishes of a child with disability and their family can be met.

Thirdly, it must be recognised that transitions will not be successful with the limited capacity and inadequate funding often seen within the education sphere for children with disability. We recognise too that this limited capacity is often further exacerbated in rural and regional areas. Finally, children with disability deserve the right to a fulfilling and meaningful education, as does any child in New South Wales and Australia. This is enshrined in the Disability Standards for Education, the applicability of which in practice is mixed at best. National Disability Service supports this inquiry to identify and address transition issues that may be inhibiting the right of children with additional and complex needs to access and enjoy a fulfilling education.

I would make just one further observation. I was at a meeting on Friday which was also attended by the Chair. There I was talking about the National Disability Insurance Scheme. To my amazement, a person in a hall of about 300 people stood up and said, "We have to have this scheme." Now 35 years of age, this person was diagnosed 10 years ago with Asperger's syndrome, and up until that point had been seriously bullied through school and through early attempts at employment. The condition had not been detected in early intervention at school, or in attempts to gain employment or in various medical situations until the age of 25. Having been diagnosed, she now has employment. She is now controlled. She is studying journalism, and is actually achieving incredible outcomes. The cost to the community of that person failing to be picked up at any of the key transitional points in her life has been monumental. That is what the National Disability Insurance Scheme is all about, and that is why this inquiry is very important.

The Hon. HELEN WESTWOOD: Both today and at our previous hearing the Committee has heard a lot about the need for both individual education plans [IEP] and transition plans. IEPs are discussed in your submission. You also question whether the current IEP process enables "true choice and voice for people with disability and their families". What do you mean by that?

Mr MAHER: I will defer to the two experts who are with me for a purpose today.

Ms CASKA: We did comment lot about the individual education plan process. We think from the feedback from our members it is a very limited process. It does not take account of the holistic and lifespan needs of a child. They are usually done annually by the teacher with whom the child is in the class with each year. Their lens is not very broad. The feedback from our members is that it is not a very inclusive process. So disability service providers and other specialists that are a part of that child's life are not part of those education conversations. They really need to be had.

Say a child is accessing therapy outside school hours, given the amount of time a child is at school those conversations should be had about how one can complement those behaviour supports that might be in place; how one could co-locate therapy services within the school process. They are very limited in terms of who contributes to them. We have also had feedback from our membership that the involvement of the child and their family in those processes can be quite limited and that the IEP format and process is quite prescriptive in terms of the directions some teachers may think that children with disability should take because they have a particular diagnosis or whatnot. That is where I think in the disability space this whole concept of person-centred approaches or strengths-based approaches really needs to be translated across to the education system. It is not a matter of saying, "You have Down syndrome. Here is a list of what you cannot do." It is a matter of taking a strengths-based approach and digging in a lot more into communities, informal networks and supports. Not having that very narrow educational lens but taking account of health, disability and other services.

In terms of transition planning, I think the first point to be made from our membership is that we would like to streamline planning as best as possible where we can. We would not want to see an individual education plan, then a transition plan and then other things that happen. In the disability space we do things like lifestyle planning and other types of planning, respite planning and other things. Where we can streamline them: one person, one plan, would be ideal. Just having that forethought about what is coming next and also where a person has come from is really integral to informing that planning process and involving as many sources of information as possible.

Mrs McLELLAN: Could I add one thing to that point following on from Emily?

The Hon. HELEN WESTWOOD: Yes.

Mrs McLELLAN: A recommendation from the Provision of Education to Students with Disability Inquiry held last year was that teachers get relief time to put together individual education plans. National Disability Services would be very supportive of that recommendation but we also would push, as Emily mentioned, that it is a collaborative effort. It is not just the teacher that would get time to do that but that it would always involve the child and family and other advocates as necessary. I just thought I would highlight that.

The Hon. HELEN WESTWOOD: The Committee has received evidence from parents and service providers about the importance of students and families being involved in the development of the plans and then the implementation of them. If that is not happening at the moment where is it breaking down? Do you have a sense of what the problem is or why there is not that involvement from the student and their family at that crucial stage?

Miss CASKA: I think firstly why it is not happening is because when a child enters a school the initial base information about the networks, the services and support that the child accesses is not shared, let alone then fed into a planning process. Also from what our members tell us—the specialist disability service providers—particularly in rural and regional areas there are pockets where it is working really well because there are other community networks and they are familiar with their local school, but if those informal networks are not there our feedback is that education providers are not overly proactive in sourcing the other services that the child with disability is accessing. I think another reason why it is not working is that IEPs in our view, and the view of our members, are not overly aspirational.

They are done under a lens of what resources are available and they are quite restrictive, as opposed to maybe garnering community support and looking outside the square a little bit more. We have certainly come from a place like that in the disability sector because in disability services everyone gets an individual plan but we need more thrust towards this person-centred approach. We have done a lot of workforce development, staff training, in really looking at the person as an individual and not saying, "You have Down syndrome. Here are the five programs we are going to put you in." But actually inverting the system and saying, "You are a person. What you want out of this life? Who can we involve in that whole process to get you that?" I do not think the education system is quite at that point yet.

Mr MAHER: A lot of the readings in the findings of the Productivity Commission's inquiry certainly highlight the lack of communication that goes on between all of the parties that have a role to play in the life of someone with a disability. People are assessed, reviewed, checked and double checked and then we are continually confronted with a lack of transparency in terms of people being prepared to share information often under the cloak of privacy—and often that is misplaced protection. They should be spending more time with agencies in speaking to each other. In an absolutely ideal world there would be no department of disability; disability would be a generic form of service provision in every portfolio area. That is probably not going to happen in my lifetime but I hope it does happen in the lifetime of some people sitting around this table. We absolutely need to get all the stakeholders—and education is a critical stakeholder—if the NDIS concept is going to work with a singular view to identify a person as early as possible and then to remove the barriers that exclude them from having an ordinary life as quickly as possible. So doing whatever we can do to ensure that happens and the education system is one of the best places where we can achieve that.

The Hon. HELEN WESTWOOD: Some parents have spoken to the Committee about, particularly those parents whose children have multiple disabilities—one might be sensory, one might be intellectual or one might be gross motor—who from the time of diagnosis are still grappling with not being able to get an appropriate program of education services for their children. How do you see the NDIS being able to address that serious issue?

Mr MAHER: The design of the NDIS is one of the great challenges before us now. The next great hurdle is the Council of Australian Governments next week where hopefully the special ministerial council of treasurers and disability Ministers will all agree in principle that this has got to go ahead. Then we will get into the design phase and that is when some of the fun is going to start because some people hold the view that the States have no role in this. I think that is a very dangerous approach to take. The States must be involved. If they are not the amount of cost shifting that will go on and the opportunity to create excuses as to why the services should not be delivered by one agency will be insurmountable.

The intention is to diagnose as early as possible and to ensure that anything that is needed is in place as early as possible, whether that is in the education system, the health system, the formal disability network system or wherever it may be, that those services be available but that the person have a life plan that is created in one place by one—I am not designing the system—organisation, one person, one whatever it turns out to be, that will be facilitated by the National Disability Insurance Agency—there are so many acronyms going around—the agency that will have the role of running the scheme. They will be required to provide the opportunity for the person to have a life plan so they are not repeating their story over and over again, it happens once, and they are able to say, "I need that from education and I need that from health. As I get older I need that to avoid being in the criminal justice system. I need this for employment." That is the intention of how it should work. The answer to your question, "Can it?" The answer is absolutely it can and it must.

The Hon. GREG DONNELLY: On page 9 of your submission you raise a question about whether or not the individual education plans enable "true choice and voice for people with disability and their families". In other words, you are raising the question of whether or not the IEP process is working as well as it could. Will you elaborate on that point?

Miss CASKA: The first part of the IEP process, which we touched on before, is that across the State they are so variable. So that in and of itself in terms of equity is a real inhibitor of choice across the board. It is a bit of a postcode lottery, it is a bit of a teacher lottery or a school or principal lottery depending on how much emphasis they put on the IEP process or not. We do also get anecdotal evidence that there are quite a number of students with disability who do not have an IEP even though it is enshrined in the Disability Standards for Education and other things, so that in and of itself is an issue.

The Hon. GREG DONNELLY: I interrupt you there. Is the enshrining a mandating or a requirement that they do have a program?

Miss CASKA: Yes, it is a requirement under Department of Education, Employment and Workplace Relations [DEEWR], the Federal Government, those Disability Standards are currently under review and through that submission process there is evidence coming in as well that it is not a universal blanket. Even though it is a right that every child has an IEP with or without disability, we do get anecdotal evidence that children with disability are excluded from that process for various reasons. In terms of inhibiting choice, voice and control I think it alludes to the earlier comments in relation to Helen's question, that it is done under the guise of what resources are available. They are not overly aspirational so that certainly limits what students with disability and their families put into their plans because they are sometimes guided within the constraints of the resources of the school, of the teacher, of the teacher's understanding of disability. By having that strengths-based approach some of those aspirations can be corralled and very much limited.

Also the issue that Patrick alluded to in his summing up of the NDIS, I think the NDIS and Stronger Together 2 provides us with some really good platforms to enhance choice, voice and control is around portability and individualised funding. So inverting that paradigm where the person with the disability and their families hold the money and they can choose who they spend their package with will really shake up the system and revolutionise how responsive education and other providers are in terms of providing that genuine choice as opposed to prescribed choice along program barriers. That is the evidence we have.

Mrs McLELLAN: We have also heard a fair bit from families through our member service providers that where a child with a disability at school might have an individual education plan put together and he or she is receiving a certain amount of funding, the school will often try and use that funding not just for that child but to service a range of children that might also have some additional or complex needs. In that way we are saying while there is an individual education plan for that child, if that funding is not going only to that child then is the plan working for them? Are they accessing the services they need or is it going too broad to other students?

The Hon. GREG DONNELLY: Thinking about what this Committee can recommend to the Government and bearing in mind that there is a national disability insurance discussion continuing into the future, do you think there is good reason for the Committee to recommend to the Government a tightening up of the whole area of individual education plans whilst this other thing unfolds? The Committee is getting conflicting evidence about these plans. Your evidence is perfectly consistent with some of the evidence we have received today from parents of children with disability. When one speaks to officers from non-government organisations, for example, they are a little bit more fulsome in their argument that it is working reasonable well. It is a bit all over the place. It does seem that some people are falling through and not receiving these plans. I am wondering whether or not strengthening the requirement in some way would be a useful recommendation to the Government to try and enhance the way in which these plans are being provided to children.

Mr MAHER: I am not being flippant. The answer is yes, absolutely.

The Hon. CATE FAEHRMANN: The Committee has heard a fair bit about the complexity of the system and the maze of different programs and services, which I am sure you are working in all the time. Do you have any particular recommendations to government about ways to streamline those services or at least ways to make it easier for parents and young people to navigate through the system? For example, this morning we were discussing the idea of a one-stop shop. What are your views on that?

Mr MAHER: We have a significant body of work going on in that very area under the guise of the Industry Development Fund. In New South Wales the State Government has allocated $17 million towards ensuring that the design and structure of the disability service provider sector is such that it can meet the needs of individuals in a self-choice environment. Rather than prattle on here for too long, we would happily provide the Committee with a written report on the type of work that is underway, the progress of that work and the desired outcomes. It would only be strengthened if along with other forums in which we are prosecuting these arguments it was also prosecuted from this Committee as a recommendation back to government certainly.

The Hon. CATE FAEHRMANN: So a recommendation around a one-stop shop in terms of getting that on the record?

Mr MAHER: That is the ultimate goal, and at the moment that is certainly where—it is the single gateway. Referred to in a lot of ways: no wrong door, single gateway, one-stop shop, whatever. But it is that the person has one point of contact with government and that point of contact, whether that be an external individual agency of whatever, is the only point that the person goes back to. We are contracted to operate companion card for the government in New South Wales, Western Australia and South Australia. Some of the assessment processes that we see go on there, I think it is fair to say if a person is assessed this year as requiring supports and companionship to be able to access the community in a normal way, they require a companion because they have Down syndrome or they have a significant physical disability or whatever it may be, they will probably still have that next year and the year after. We do not need to keep reassessing them and we do not need different government departments to say, "Well, I don't rely on ADHC. I want my own health assessment of this person", or "I want my own education assessment of this person". It is ridiculous, it is unfair on the person and it is a tremendous cost to society and the Government.

The Hon. CATE FAEHRMANN: Something you specifically raised in your submission was the shortage of transition teachers. What is the extent of that shortage? Are you able to be more specific?

Mr MAHER: I cannot.

The Hon. CATE FAEHRMANN: It is page 15.

Mr MAHER: Can we take that on notice if we do not have a ready answer? In saying that, I cannot give you an absolute commitment because we do not operate generally in the education field, but we will do our best to come back and we will come back regardless and say, "Yes, we can answer it, this is it" or "No, we can't".

The Hon. CATE FAEHRMANN: We have had a few witnesses talk about the Transition to Work Program and some witnesses raised a few difficulties with that program. You also raised a number of concerns in your submission about that and the Community Participation Program. Would you like to expand on those problems and perhaps offer some suggestions of ways they could be improved?

Mr MAHER: I will start by making a broad statement around Transition to Work. For disability services in Australia, employment-related programs are funded by the Federal Government and anything other than employment-related are funded by State governments. We are significantly challenged by the bureaucracy at the Federal level in its capacity to be able to show some compassion about getting the best outcome for the individual, rather than meeting their requirement to tick certain boxes on pieces of paper. So you can have somebody in Transition to Work receiving government funding, being funded at a government level of maybe up to $50,000 a year, depending on the level of supports needed, where that person may be quite capable to doing one, two or three days a week working in an Australian disability enterprise, where they would probably be funded at the top level of about $15,000 a year.

So we have opened a dialogue between the State and Federal governments to say that we want to be able to see a person being able to have a blended service. So if they are in Transition to Work, they are showing some capacity to want to work, give it a go, parents often will say no because they are scared they will lose all the benefits they are getting at the State level or the five days a week of supports they are getting at the State level. We have asked the Federal Government to give an absolute guarantee that they can have a blended service and the State to give an absolute guarantee of a right to return.

We have no problem with the State, and we think we are getting the Commonwealth to where we need it to be in this particular area. And the beauty of that is you are reducing the cost, you are removing a person out of Transition to Work and putting them into a disability enterprise, they are earning an income, it is costing the taxpayer less, they are paying some tax because they are earning an income. All of sudden you have vacancies in Transition to Work, you can bring people through the Community Participation Program into Transition to Work and you find, and I have seen it over 30 years in this industry, you give people the opportunity to elevate themselves and they do it with amazing repetition. We see it all the time but we have to create the opportunities.

Miss CASKA: Just adding to that more specifically because I think the school to post-school transition points are certainly all very important but the magnitude with which that school leaver assessment process carries is critical. What we see at the moment, and I will explain it maybe in a linear way from year 12 at the moment school leavers get their assessments done in April of year 12, they get their letters of notification from ADHC in September and they have to choose their provider by December. I know it has been noted in previous submissions that is no time for service planning. There is no time for the person. It is around 19 December so most services are closed, and then you start your service January-February the next year. So I think the school leaver assessment process itself, we are starting to work the ADHC and they are starting to open the dialogue with the Department of Education in starting that process in year 10 because the more cumulative information you can have about a person the better.

We also think and our members think that if you can do that over a two-year process—and I note the comments earlier today by the acting director general that you want to get the most latest information but I think getting two years worth of information also shows someone's progression over two years so that gives you a really good indication for post-school. Then what we see as well there is not much information or centralised information given to students and their families about what their post-school options are and that is mainly because of what Mr Maher was alluding to is that the State Government does post-school programs, TTW and Community Participation, FaHCSIA at the Federal level does Australian disability enterprises, DEEWR at the Federal level does open employment, TAFEs are run under New South Wales, universities are run in different ways as well. So there is not one central point of information around that so I think that should be a recommendation of this Committee.

Then once we do enter post-school programs, two-thirds of school leavers go to the TTW program but only about 50 per cent of them then transition into employment. The Transition to Work Program is unique in terms of other similar programs across Australia. In some States they do not have that so it certainly has its merits but it is a time-limited program. It is two to 2½ years only and once you do it if you do not transition into employment—and there are loggerheads that Mr Maher pointed to; the Federal Government coming to the table on that—then you go to the Community Participation Program. So in TTW people are funded at around $15,000, $16,000 a year. If they do not go into employment they then fall to the Community Participation Program, which is a life-long entitlement program and that is funded at an average of about $30,000 to $35,000 a year. So you can work out the cost there. So I think another recommendation would be looking at the mechanics and the restrictions around the TTW program and looking at letting people perhaps even try community participation to build their social skills for two, five, 10 years, whatever it takes and then do some sort of transition to employment program as well, again, like Mr Maher said, some of those more blended models.

The Hon. CATE FAEHRMANN: It sounds like you are making solid recommendations to both the State and Federal Governments on this. I wonder whether it would assist the Committee if we were able to see some of those recommendations if they are not contained in here, because I do not think some—

Mr MAHER: Some of them would not be in here and we would happily develop a briefing paper for the Committee.

The Hon. NATASHA MACLAREN-JONES: Some witnesses have raised concerns about the transfer of information, particularly when their children transition to other schools. I noticed in your paper you have also raised that particularly in relation to early childhood education. Are there any recommendations that you could give to us where you could see that this could be improved?

Mr MAHER: I think it goes back to some of the issues that I have talked about, about a single person or a single entity being responsible for the life plan of an individual. I want to be careful in the language I use because we are not saying that we should be planning the person's life, the plan to remove the obstacles that allow them to have an ordinary life. So in that broad context that would be the response but in this other work that we are doing particularly around some of the industry development work we will be able to provide you with some information on the project work that is going on in this area but specifically I think we have been doing some work more specifically in this education area.

Miss CASKA: I think particularly, like you have noted and previous witnesses have noted, that the information sharing particularly around that early childhood intervention into school is such a critical phase. What we see, and you have probably heard it from many others as well, is that at age five, six, a lot of those intensive supports drop off and children go into the school system and there are no complementary plans, there is no information sharing whatsoever. So under Stronger Together 2 there is an allocation of $146 million for decision support making services and it links to this NDIS concept of, for want of a better term, hand holding through the system to whatever degree a person wants so that there is that central point of contact so that information does go through with that person.

An interesting model that I would highlight to the Committee from one of our members is at Kurrajong Waratah, a service based in Wagga Wagga. They do what is called team around the child and they start it really early, in the child's early childhood intervention phase. They bring in all the key stakeholders and it is not just the professionals; it is family members, extended networks and they bring them in right from the beginning and there is a commitment from everyone in that team around the child to go through those transition points with the child so it is not segmented like so many of our programs are into pre-school, middle school, primary, secondary. So I think that is an interesting model to start exploring. I think also what we have noted in our submission is around the therapy transition program that was piloted only in three regions in New South Wales, getting things like that expanded as well.

The Hon. NATASHA MACLAREN-JONES: In relation to the school visitation program, are you aware of any schools in Australia that currently have a program in place?

Miss CASKA: Not aware of any formal programs as such. We are aware in New South Wales of particular members. Again, Kurrajong Waratah in Wagga Wagga would be a very good example of where they have set that up themselves with their local schools but again it is very varied. There can be, from feedback, more so in the post-school sphere, our members, the disability providers, do sometimes feedback to us that there can be some pre-determined ideas in the school system around disability that perhaps have not moved with contemporary research and best practice, so sometimes there can be a friction there.

Mr MAHER: I managed a service in Tamworth for about 10 years and we had a proactive program of bringing the special education teachers in from schools once a year to give them a full briefing on the full range of services that we operated, and we operated every type of service, accommodation, respite, aged care, employment and what have you. That got to a stage where they demanded that every year because it was more information than they were getting from anywhere else. We have been through a process with the bureaucracy in New South Wales that is certainly getting much better and at the senior executive level there is no issue. We still have some issues at regional areas where we strongly support the idea, if you like, of almost an expo of disability services. Some organisations do it voluntarily in geographic areas but at a critical time each year where you may take the town hall and just like a careers expo have all the disability service providers there and that can be done in metro or regional—it makes no difference.

People who will have to make decisions to support their children at different stages of their life and then people as they get older who can make their own decisions can go to one place to say, "What do I want to do next?" and not be restricted by a department that when we started doing it 10 years ago would say, "We're going to put out a booklet. You can have half a page of a maximum of 250 words and you are not allowed to say this, this, this, this or this or make your place look too exciting because it might upset one of the other service providers." Gosh, if mine is more exciting I think the person has a right to know that it might be a more exciting life at this place. So we do not want it to become a marketing exercise but we want it to become very much a positive information sharing exercise and it is lacking at the moment.

CHAIR: In Stronger Together 2 are the individuals provided with a set case manager who then helps them liaise through the steps and the agencies?

Mr MAHER: The design of the system is under construction so that is not automatic at this stage, but that will be in place by 1 July 2014.

CHAIR: So it is not a case of one gateway but when you walk through the gate there are 15 case managers?

Mr MAHER: It is neither at the moment but the plan is that there will be this individual, so there is some jockeying going on at the moment with what we do with Stronger Together 2 leading to 1 July 2014 when individual choice is absolute but how we make sure we do not design something that we are going to have to completely redesign when we get an NDIS. You can look at the Western Australian model of the local area co-ordinators or the Tasmania model, where they have got it broken into three or four geographic areas for the gateway and that is slowly expanding out. Certainly the intention is there under Stronger Together 2 that it is either a single point of entry or a single person to navigate you through the process.

CHAIR: And again it is a person-centred approach. That includes equipment. We heard from one of the witnesses earlier that an individual may be given a laptop to help them voice the text technology on it but when they leave school it has to stay at the school and then they have to apply again to go through TAFE.

Mr MAHER: Stronger Together 2 is not an equipment provider; that at this stage falls to the Federal Government.

Miss CASKA: In NSW Health, under the program of appliances for disabled people, that is the main program here, and it is very ad hoc and there have been a number of inquiries into it.

CHAIR: Again if we go to an NDIS with individual choice the equipment becomes theirs to follow them through.

Mr MAHER: The equipment will come through the NDIS at the moment. Equipment is one of the big issues right across Australia.

CHAIR: We have run out of time. Thank you very much for your submissions this afternoon. The Committee has resolved that the answers to the questions that you have taken on notice be returned within 28 days. The secretariat will be in contact with you in relation to the questions you have taken on notice to facilitate those answers as well as the recommendations you have also outlined.

Mr MAHER: Thank you very much. Katherine McLellan will be taking the lead on that because both myself and Miss Caska will be away overseas for about three weeks, although not together.

GRAHAM KAHABKA, School Education Director, Department of Education and Communities, Illawarra and South East region,

ROS COLEBORNE, Student Support Coordinator, Illawarra and South East region, and

VICKI MUSCAT, Principal, Queanbeyan West Public School and Primary Principals Association representative on the Queanbeyan community of schools placement panel, affirmed and examined:

CHAIR: Would you like to make an opening statement? If so please try to keep it to five minutes, and you do not need to repeat anything that is already in your submission.

Mr KAHABKA: I will give an opening submission just to put the context of our work, particularly in this area. Firstly, may I thank the inquiry for providing us with the opportunity to discuss our arrangements and procedures for the enrolment of students with disabilities and learning difficulties in our region. The Illawarra and South East Region is a large and diverse region extending from Helensburgh in the north to Eden and the Victorian border in the south, and from Boorowa in the northwest to Jindabyne in the southwest. Most students and schools are located in the northern part of the region, which includes the Illawarra. This part of the region is metropolitan in nature and its provisions, and then the remainder of the region is rural, with the city of Queanbeyan centrally located and adjoining Canberra as part of our region as well. Schools within the region are organised into eight school education groups consisting of 24 to 33 schools. Each school education group is led and supported by a school education director. In 2011 the region has 230 public schools with 70,269 students. These schools are supported by over 4,700 teachers, 1,000 support staff and 75 regional staff.

The Education Act 1990 (NSW) states that every child is entitled to enrol in the government school that is designated for the area where their home is situated and that they are eligible to attend. All local children can enrol in their local school. Families approach their local school in the first instance to discuss their child's needs and to hear about the options that are available for all children. Principals and teachers liaise with the local prior-to-school settings, such as pre-schools, to become familiar with the needs of all incoming children. The department's enrolment policy and procedures apply equally to all students, including those with a disability or learning difficulty. Most students with complex or additional needs, including disability, are enrolled in their local school and attend mainstream classes. Programs are also in place in regular schools that provide additional support for students who have difficulties in learning without the need for a formal application to access this support. In addition, specialist support for eligible students with a disability is offered in mainstream classes, in special schools and special support classes in regular schools. This is part of the department's full range of options for providing additional support for students. The region has 255 support classes for up to 2,684 students located in 74 of our schools.

Where a parent seeks a specialist placement or support service for their child the majority receive the service they seek and are satisfied with the support service provided. Special classes and schools are established according to local and regional demand and are not available in every school community or geographical location across the State. For this reason access to placement in special schools and support classes needs equitable management and is organised by a representative panel or committee. Regional panels operate an open and transparent process to match parent preference for students with a confirmed disability where it is possible. If a parent preference is for a particular support provision and a placement or access that is not immediately available the student's application remains active and is considered subsequently if the situation changes. In the meantime the student is supported by a package of alternative resources. These include access to funding for school learning support officers or teachers aides, training for teachers, and time for planning for teachers. In-school resources such as the funds and personnel provided to the local school to support students who may be experiencing difficulties in learning and regional staff and resources are also available. Regional student services personnel maintain regular contact with parents seeking specialist services prior to the placement panel meeting and following decisions of the placement panel.

Regional officers maintain a regional database showing students who currently occupy support class placements. This is constantly monitored to observe student flow, potential for further access requests, for example, from pre-school settings and years 6-7 transitions, projections for upcoming years, eligible students not immediately placed and unexpected incoming students, for example, from non-government schools, interstate or transfers, are added to the database to provide a comprehensive picture of support class occupancy at any one time. This data provides the required information to relocate classes, disestablish and establish classes, or change the provision. This is designed to provide the right service in the right location at the right time. It is also designed to ensure an effective and efficient allocation of government resources. This is also consistent with monitoring the provision of mainstream classes, which is conducted annually.

The representatives on placement panels are responsible for helping to inform their colleagues regarding the transparency of the process and to advise on all elements of the task. The membership of the panel includes principal representatives and there are about 18-20 principals across the region. They are nominated by the Primary Principals Association and the Secondary Principals Council. On several panels there are principal representatives of schools for specific purposes, district guidance officers and school counsellors who are associated with the sites where students are leaving or are going to be placed are represented. Other members are senior education officers for student services and assistant principals learning. On occasions representatives from the Aboriginal out-of-home care and vision and hearing support teams attend in relation to students with specific additional needs.

The main points of transition are, prior to school, to kindergarten, years 6 and 7, and year 12, to work, and the ongoing individual transitions in and out of support classes, in and out of mainstream classes, perhaps to new schools, and to new teachers. All these transitions can provide different challenges to the families of children with additional or complex needs. Schools and regions strive to provide individualised support in each of these settings where they occur, developing close relationships with families, principals and teachers, providing timely information, access to resources and the support of a range of personnel whose primary goal is to make the transition experience positive and successful at any junction in a child's school career.

CHAIR: We will now open it up for the panel members of the Committee to ask questions.

The Hon GREG DONNELLY: Thank you for coming along today and providing us with the opportunity to ask you some additional questions. Can I just revert back in looking at this period leading up to commencing in kindergarten, where they have started their formal primary education? Could you give us some sort of insight into the number of children who are commencing kindergarten who have not been diagnosed with a disability? In other words they are commencing but they are not bringing to the school through their parents anything to suggest to them that they have a disability and therefore the school is unaware that they are dealing with a pupil with a disability. I am trying to get a sense of whether we have a big issue in this State where large numbers of children starting school are not diagnosed.

Dr COLEBORNE: I cannot give you hard figures, although possibly we would be able to research figures, but it would be a very small proportion. It does happen. We had a very interesting situation beyond Boorowa where a family of five children came into the school and they all had quite severe speech difficulties because they had been out in the bush. That meant we had to bring it together rapidly. One went to high school and the rest were in the primary school which had four students in it and they suddenly had four more and all with a speech difficulty. But it is relatively unusual. Generally children are picked up very early, in the first instance by their General Practitioner frequently, then they start the accessing of all of the other support services, so it is unusual in my experience.

Ms MUSCAT: We find that the preschools are very well across concerns or issues, that connectedness with the family, with the children, and the information provided during our transition time is broad and I cannot actually think of an instance we have had prior to school starting without some very strong background information on the child.

The Hon. GREG DONNELLY: Can I ask you the information that is looked at during this transition period when they are starting at kindergarten, is the quality of that information generally quite good? In other words, you are presented with quite a detailed file, shall we say, of information about the child's position in terms of the disability?

Ms MUSCAT: As a principal in my school I seek from my local preschools—I give them a form because this is the information that I require that I feel will support the student if they come to my school. In that meeting that we have with the parents that information—I need to be very quickly across the intricacies of the complex needs or additional needs or whatever the situation may be. I need to be across that very quickly and so the information that I get from the preschool in my context is thorough and in depth because the parent is wanting me to be confident and able to give accurate information. So the more information I get, the better equipped I am to speak about the individual student.

The Hon. GREG DONNELLY: One of the issues that has been raised, and I am raising it now not as criticism but as an observation from witnesses, is that at least in some instances there appears to be some adhocracy associated with the way in which the information is collected and then transferred through stages of education. So there can be sort of disparate quality in the information that is being collected and because there are not standardised formats—you indicated you use a particular form yourself, but in other instances they may not be using those forms—that passing the information on and through the system so to speak sometimes can be a bit of a challenge and families are often left with a scenario or having to repeat and repeat and re-repeat.

Ms MUSCAT: I do not want to jump around a bit, I will try to be focused on what it is you are asking me, but as part of the access request process when I apply for additional funding or additional support there is a component in that where I have to write about the needs of the child in their receptive or their expressive language, their access to curriculum. So the form is not from my experience; it is actually there to be used and I just choose to bring it down into a format that the preschool can access.

The Hon. GREG DONNELLY: I understand what you are saying. Can I ask about individual education plans and the development of those plans. We have had once again some contrasting evidence where it has been put that the development of those plans is done on a quite regular basis, they are well prepared, thoroughly done and students are in the main properly dealt with. There has been other evidence that it appears people might be slipping through; some of the plans may not be well developed or may not have plans at all. I am just wondering that as we understand it there is a requirement for these plans to be developed for all students with a disability, is that the case?

Mr KAHABKA: There is a requirement for an individual education plan for any student with a disability who is receiving a service. For example, if they are in a support class or if they are in a support class in a special school or if they are receiving funding support, so there is a requirement for each of those students. But there are many students who have a disability who may have a more personalised plan but it is not to the same depth as an individual education plan because of the accommodations that are made within the teacher's program to meet their needs.

The Hon. GREG DONNELLY: So they are being essentially accommodated through the work of the teacher in the school and therefore not covered specifically by a plan?

Ms MUSCAT: And the learning support team within the school and all the other parts or components. A school is a living, breathing entity and so all those components come together to form those personalised learning plans which are as in depth as an individual educational plan.

The Hon. GREG DONNELLY: Can I be the devil's advocate and ask you this question: Do you think there is a case to be put about whether or not a plan should be mandated for students who may not be receiving a service per se? In other words, all students with disabilities should have a formal plan as opposed to the way I think you explained it where it is provided where the child is actually receiving a service only?

Mr KAHABKA: I guess one of the things we try to avoid is an absolute link between if a student has a disability that they necessarily need either for example a special placement or a special adjustment when there are many students with a disability who do not. In fact, very many fit very well, with some minor adjustments to the teacher's program, into the regular classroom and in many instances that is also the wish of the parents that as much as possible they are very much fully—

The Hon. GREG DONNELLY: Integrated.

Mr KAHABKA: It is more than integrated. They are treated as any other student would be. In fact, on a number of occasions we get requests that they do not want any special treatment for their child where they are succeeding within the program. And so I would be wary about mandatory application because of that and because of the wishes of some parents.

The Hon. GREG DONNELLY: Thank you for that. This is one of the sort of prepared questions: The Committee has heard that the dates for submitting applications to placement panels varies between regions and that is some of the evidence we have received. We were wondering why there is not one standard date for all applications around the State. You may not be able to answer that.

Dr COLEBORNE: My understanding is that there is and it is week five of each term and then week nine if it needs to be. In second term year six to seven transitions are considered and in third term there is a concentration on kindergarten to school. Week five and week nine, as far as I know, is where we try to do that. The only reason that we would need to change that is if we had some requirement for instance from State office for the return of some information that was required that would need to go through a placement panel.

CHAIR: Can I just clarify, week five of term?

Dr COLEBORNE: Each term.

Mr KAHABKA: The fifth week of each term .

CHAIR: The applications are made every term leading up to it?

Dr COLEBORNE: Yes.

Mr KAHABKA: Can I also add there is more flexibility than that in that we have some students who appear that we knew nothing about. When that happens and we have an immediate need for some kind of specialised support, we also have e-panels where we also meet. The decision is made by the same panel but it is by email where the information is provided.

Ms MUSCAT: The email is sent out if there is an emergent or a unique circumstance and we have an e-panel and the email is sent out and it is the same forum. We all respond and answer but we do not have to come together and that can happen as the need arises.

Mr KAHABKA: So while we have the panel in the fifth week of term and the ninth week of term, we have those, this is to ensure we are just not rigidly locked into that and people have to wait if a service is necessary immediately.

CHAIR: And that is standard just for your region or across the State?

Dr COLEBORNE: My understanding was that is common across all regions, but that is certainly how we do it in ours.

CHAIR: I just thought we should clarify that because that is certainly contrary to the evidence we received earlier, so it is good that we look at that.

The Hon. CATE FAEHRMANN: One of the witnesses we had was the Schools for Specific Purposes Principals Association and they were informing us about some of the frustration when for their child they had to apply to the local primary school to begin with even if it was quite clear that a young person had a disability and would need to go to a School for Specific Purpose. They expressed frustration at not being able to get the information from the primary school to the School for Specific Purpose and the parents were having to explain the whole story. Obviously a lot of witnesses have talked about the frustration of having to retell stories and retell stories all through their education. Do you know whether the primary school is bound to provide the information to the School for Specific Purpose and whether there is a reason why they would not?

Dr COLEBORNE: I cannot think of any reason why they would not.

Ms MUSCAT: I cannot think of any reason why they would not.

Dr COLEBORNE: And the School for Specific Purpose is really like a collection of support classes but all together. So it is the same process that we use for support classes wherever they might be. Why there would be a breakdown in that information sharing I do not know.

Ms MUSCAT: Because I go to your school, you as the principal would be requesting records from my school and it is part of the Department of Education and Community's policy that the information goes through.

Mr KAHABKA: There is no procedural reason that we have in the system that should make that happen.

The Hon. CATE FAEHRMANN: So it is policy to share the information?

Ms MUSCAT: Between Department of Education and Community schools and our computer system that enrols the children, people around the State can access that in the school.

The Hon. CATE FAEHRMANN: Okay. Thank you for clearing that up then. How many transition advisers do you have in your general area? Or are they called transition support teachers? We heard from a couple of witnesses this morning that were saying it was quite difficult to sometimes access these transition advisers, they called them, but I think they might have been meaning the transition support teachers.

Dr COLEBORNE: In our region we have four advisers, or transition teachers we call them, but they are people who specifically help with students who are leaving school and entering the workforce. What we do in our region in terms of any other kind of support is to ask the regional team of student services consultants, they all have responsibility for seeing that transitions are properly carried out. So there is no specific person to whom they become their responsibility.

The Hon. CATE FAEHRMANN: So what about the students that might be wanting to access or get transition support say between primary and secondary in your area, are there readily available transition teachers?

Dr COLEBORNE: Not between primary and secondary. We would expect the student services consultant out of the region, one for each of the school education communities, to be the person who oversees that.

Ms MUSCAT: And in our Queanbeyan area each principal and other staff member go to the transition meeting which has high school staff, usually the school learning support teacher and the assistant principal in charge of disabilities or whatever the service is we are connecting to and as part of that transition meeting in our community of schools we go to the transition meeting and at that meeting we share between primary and high school. So we are very much part of that process and the parent is invited to come along if they are able to and, if not, then I communicate back to them what the process is or where they are situated.

Dr COLEBORNE: And I do not think that we would want to move in the direction of having a specialist who is looking after that because we would prefer it to be everybody's responsibility and everybody should be concentrating on that. Once you develop a position that becomes responsible for it, I think sometimes there is a tendency for people to step back and say, "Well, that is that person's job to see that that happens." We would rather have everybody thinking, "This is part of my job to see that this happens."

The Hon. CATE FAEHRMANN: Sometimes they do fall through the cracks.

Dr COLEBORNE: Having a specialist, yes. You have turnover of workforce. It might be somebody's job one year, and then they are not there the next year. I would much rather have the responsibility broadly based.

Mr KAHABKA: Can I just add that one of the advantages that we have thought fits into the model we use is that the student services consultants know the families and know the kids. They have been the ones who have been managing the process of application for additional services as well as interaction with principals of schools and other members of the regional team. They already have a longer-term relationship with the family. When it comes to transition, it is not just an event in the child's life; it is just another part of that overall support that is provided to the child and the family. That is an additional reason why we think this is a nice model.

The Hon. CATE FAEHRMANN: We have heard a fair bit from groups and parents about the need for, ideally, six-month transition to education and then, on the other side of transition, between stages of education. What is your view around the allocation of placements? Obviously it is not the case now that students find out where they are going to a secondary school or a post-school placement until the last couple of months. Is it your view that it should be done earlier for students with disabilities or complex learning needs to be able to transition more effectively?

Ms MUSCAT: For parents in our area, we make our applications for the transition period from grade 6 to grade 7. That occurs in term two, which is the first half of our year in our area, and that process and then travels through. At the end of our term three, if there are places available, the parents are told then, in the term that has just finished. We are a few months away.

Dr COLEBORNE: I think it is really more complex than just placement in the class. I would be asking my team of people, "All of the children are in year five. Do we have our eye open about where we think they might be going to go?" One reason is that takes two years to get ramps or toilets with the proper facilities in them, and we need to be really thinking ahead. It is difficult because we can be looking at a child in year 5 and predicting that they will go to a particular high school, but they may not want to go to that high school: There may not be the proper place in a support class in that high school. But we still start the thinking in year 5 and try to head towards that direction so that we think we will be ready.

But the actual placement of the child to do the class happens, as Vicki said, because we have to be equitable about everybody having a chance. We cannot say to somebody two years ahead of what they are going in there, "You are promised a place in this class", because there is so much flexibility and fluid movement about who goes in and who does not. But certainly from the student services team's point of view, I like to have everybody alert to where they think a child will be going to go.

The Hon. CATE FAEHRMANN: Earlier a witness from Autism Spectrum Australia [Aspect] gave us a statistic about a 30 per cent increase each year in students with autism spectrum disorders. Clearly that is starting to impact on the education system. Do you think that that is creating gaps in terms of students with additional or complex learning needs who do not have the support they need to transition now into primary school or from primary to secondary? Do you see that as an emerging need and that might need more resources?

Dr COLEBORNE: It is an emerging need, but we have developed a category of class called multi-categorical in which, for us in our region, has been brilliant. Because a large part of it is rural, it means that we do not necessarily have a group of seven or 14 children with a particular need. We might have two with autism and another child a little way away with autism, but that is all there is that is in a particular area. By being able to have classes, which we now called multi-categorical, we are able to group children with needs together as long as the needs are similar and not hugely dissimilar.

That means that we have been able to create support classes for children with autism who previously would not have been able to access the other categories of support class that have been existing for a long time. So, for us, the introduction of that class has been wonderful. In terms of autism itself, the region has been opening autism classes each year for the last three or four years that I am aware of. We have opened three, four, five autism classes to pick up on the need.

Mr KAHABKA: We also work closely with Aspect and have quite a number of their classes working as satellite classes in our schools as well. But realistically, they work as one of the classes although they are Aspect classes. We are a bit different to the other regions in that we are on a school learning support program trial. One of the flexibilities that is offered is that we now have a special educator in every one of our schools under this trial. Many of the needs of students with autism and other disabilities are being picked up by those positions that now exist in every one of our schools. We think that has been a real advantage to us.

Dr COLEBORNE: We think it has been wonderful.

Mr KAHABKA: It allows more students with a disability to have a successful experience in a mainstream setting with the appropriate support that they would not have had before.

Ms MUSCAT: Through that program it comes very quickly. I am able to act quickly to ensure the support is happening.

Mr KAHABKA: The beauty of it is that, previously for those students, we would have had to have put in an application for funding support. We do not have to. The resource is at the school so the principal and their learning support team can make a rapid decision about what resources can be put to a child immediately without waiting for forms in the process. There are no forms needed. It gets to be done locally. It has been an advantage to us—a real advantage.

Ms MUSCAT: That is a great advantage.

The Hon. CATE FAEHRMANN: Is that a pilot program?

Mr KAHABKA: In our region.

The Hon. CATE FAEHRMANN: What is it called?

Mr KAHABKA: The School Learning Support Program.

The Hon. NATASHA MACLAREN-JONES: Could you outline the decision-making process for the placement panel, in particular the factors that are taken into account in making decisions?

Dr COLEBORNE: First of all, we would need to be sure that the diagnosis that comes with a child has been confirmed. The district guidance officer who oversees the school counselling service has the responsibility for seeing that the disability that is going to be discussed in fact has been confirmed and signed off. We call it a disability confirmation sheet. That is the first thing that needs to happen so that we are sure we are talking about children who fit within the category that the placement panel needs to make decisions about.

The panel is representative, as Graham said in his introduction, of principals so that principals can report back to their colleagues, "This is what happened at the last meeting." It has guidance officers representing counsellors and they report back to counsellors who have put up the access request, or have helped to put it up in the first place. Then it has student services officers and a variety of officers that come from within our student services team.

The information arrives for that panel on an access request, which is the same across the whole of New South Wales. It is a relatively new process. That contains all of the information that we would need to know about any child and their needs. The student services officers are aware of where the vacancies are in support classes. They also are aware of what would be required to have funding support allocated. Generally there is an around-the-table discussion about each child. I am trying to move everybody to reading the information from the Smart board rather than us printing very large amounts of paper. I have some panel members who still want to have paper and others who are prepared to read from the screen, but we are moving towards reading from the screen.

The student services person who is responsible for putting up a particular case will speak to that. Just like here, the rest of the panel will ask questions for clarification. A suggestion is made by the student services person about what would be the best site: "Yes, there's a vacancy. This would be the best site." That is either agreed to, or not. That is how it is from my point of view. Vicki may wish to add what it looks like from a principal's point of view.

Ms MUSCAT: From the principal's perspective, I have put the access request form in. Again it might be integration or it could be a support class. It goes exactly as Ros said to that spot or that place. We then meet as a group and discuss each individual child. I consider my role there to be an advocate for my principals and the children. I believe all of us that panel are there for that.

Dr COLEBORNE: I think, importantly—sorry, had you finished?

Ms MUSCAT: Yes.

Dr COLEBORNE: Prior to us getting to the access request position, the school learning support team has worked with the family to make sure that what goes into the form is appropriate and is satisfactory to the family. The family needs to sign off that they agree that what is going to be put to the placement panel is how they feel about where they would like their child to go.

Ms MUSCAT: The panel then will make its recommendation, and that will come back to the parent and to the principal. It is usually at that time at the grassroots I am connecting with parents and making sure when they are coming into my school that we are communicating and they are aware at every stage where we are up to. I like to talk and connect the parent with my school. Parents also need to feel supported in this as well because it can be challenging and daunting to come into a school with a preschooler, or even going from year 6 to year 7, or from year 2 to year 3. It can be daunting and challenging. I need to make that connection very quickly and keep that line of communication open. That is what I do in my school.

Dr COLEBORNE: At that point when the offer is made, a parent is able to say no, that they have changed their mind and that that they do not want to do that. That happens, too.

Ms MUSCAT: It does.

The Hon. NATASHA MACLAREN-JONES: If a student is allocated to a mainstream school, is there an opportunity to reappear to the panel or appeal to the panel for the child to change to a special school, if that is what the requirement is?

Dr COLEBORNE: Yes, absolutely.

Ms MUSCAT: Yes.

The Hon. NATASHA MACLAREN-JONES: Does that happen on a yearly basis, or is it ad hoc?

Dr COLEBORNE: No, it is the same as the situation we described earlier. That can happen at any time.

CHAIR: I would like to go back to the initial enrolment process and touch on the question asked by the Hon. Cate Faehrmann. If it is absolutely clear that a child has Down syndrome or a disability, the process still requires you to go to your local public school first. I am from your region so I could use an example for Goulburn where, if I know that my child will end up at the Crescent School, I as a parent will still be asked to go to, say, Goulburn North Public School and present my case there to then go through the process be referred to the panel. Is there scope for me to short-circuit that and, rather than tell my story twice, go and tell my story to the Crescent School and they will make the application to the panel?

Ms MUSCAT: I can give you an example. I am not a special school, but I can give you an example. I have a student enrolling from preschool to primary school that has a disability. I am the local zone school, but they will access another primary school's IO unit. The parent came to me and I began the access request as part of that transition. I began the access request that the parent and I explained, "This is what will happen. It will now go to the placement panel. They will meet and they will decide if there is a vacancy there. If there is, then you will get a letter to say you can accept or decline, whatever it is, and that is the end of the process." That is what happened at my school.

Dr COLEBORNE: I think it is a shame that we hear that people are telling their story several times.

CHAIR: Yes.

Dr COLEBORNE: It really should not feel like that to a parent. Their story is already well known by whatever preschool group of people have come together. The transferring of that story to the initial enrolment point and then into, say, The Crescent School, should be more seamless than that and they should never feel that they have to tell their story again. We would expect that information to be moved from one centre to the next without the parent feeling as though they are telling the story again. I am quite distressed to hear you say that because we do not want that to happen.

CHAIR: Is there a policy or something that is inadvertently creating that situation that says all children must enrol in the school for which they are zoned? Could we make a recommendation that would lessen the burden on some families by that system being, for want of a better word, a little bit flexible?

Mr KAHABKA: There is a slight complication in that we guarantee a place for every student in their local government school. We cannot guarantee a place in, for example, The Crescent in Goulburn because there may not be a vacancy. If they then approach The Crescent or any other School for Specific Purposes we may be raising a false hope that that is going to happen. We have to look at what might be the most appropriate setting that is available for that child. It may not be the one that the parents choose. The other thing we are very careful about is that we have the same enrolment procedure for every student. We have worked really hard to move away from one for the bulk of students and a separate process completely for those kids with a disability, because they are different. We now have a single enrolment process. I guess the downside is that we hoped that was not happening but if the system works as well as it should, they should not have to repeat their story. What we can do through our placement panel process is try to get the most appropriate nearest setting for the child that the parent is also comfortable with.

The Hon. CATE FAEHRMANN: Similar to that and based on sharing information, in the last part of the Government's submission from the Department of Education and Communities [DEC] it talks about A Positive Start to School, the Victorian model for sharing information. Are you aware of that model?

Dr COLEBORNE: No.

The Hon. CATE FAEHRMANN: Whoever wrote the submission from the Department of Education and Communities says that transition processes in New South Wales could be strengthened by adopting a consistent process for sharing information about young children entering school similar to the Victorian model. The Victorian model came up a little at our previous hearing. If you do not know about the Victorian model—

Dr COLEBORNE: I do not know about the Victorian model. I saw it referred to in the submission and thought it was interesting and I would have to look at it, but I have not yet done so.

Mr KAHABKA: In terms of the consistent process though, by all means. We would always hope for a much more consistent process particularly if parents are concerned.

CHAIR: Thank you for your time this afternoon, particularly with it being the first day back at school.

Ms MUSCAT: For me. I am the one out of school!

CHAIR: Thank you for your evidence.

(The witnesses withdrew)

(The Committee adjourned at 5.18 p.m.)