

Review of the loading for students with disability 2019–public submission

Mrs Christina Holly

Stakeholder type: Parent/carer/guardian

Jurisdiction: Western Australia

Summary

Significant concerns should be noted in regards to practice ascertaining what students are included in the NCCD; practices in Catholic and Independent schools seem to always be concurring to Disability Standards as outlined in DSE (2005).

AITSL standards should, at the very least, be "Professional" if a teacher is able to make appropriate learning adjustments for a range of disabilities. If a diagnosis requires a health professional that specialises in disability, it begs for discussion whether a teacher has the experience to create appropriate adjustments for full participation and access.

I would be very interested in joining this conversation, due to my dual role as an academic lecturer in Education, but also as a parent of a 14 year old child with a disability.

Concerning is the changing needs of a student throughout their trajectory of schooling - at all stages of schooling adjustments are needed for different purposes. As well as transitions to high school, we also have the important transition and preparation into post-secondary transition for our children to have value and purpose in the community. This needs to remain a firm focus on secondary education, as well as primary education.

Christina Holly

Submission

Questions

1. Is the funding provided under the loadings for the top three NCCD levels of adjustment appropriate to support students with disability to access and participate in education on the same basis as other students?

The proposal of removing supplementary adjustments for students with a disability is concerning, making this the teacher's responsibility under normal conditions as this is their role in education. There needs to be clarification as to which disability this will refer to, and how the adjustment levels are clarified.

The documentation on classification of disability states that the child/ student has a diagnosed disability under the DSE (2005). This diagnosis is given by a qualified medical practitioner or a specialised psychiatrist, therefore it is confusing that educational professionals are deemed to be qualified to do this, if they have a Proficient AITSL qualification under the standards. It needs to be very clear as to what qualifications they have in disability in order to do this in a professional manner.

Although the review states that there is collaboration under the evidentiary requirements (page 11 of 14 of the Review), the outline of NCCD (nccd.edu.au) does not emphasis this procedure. Parents as collaborators need to be consulted at each phase, and involved in learning adjustment recommendations as they are the person most qualified for involvement here, in conjunction with medical history.

On consultation with several local Perth schools (Catholic Education), the process for creating the NCCD list does not always follow the evidentiary requirements included. This seems to mainly accredited to insufficient time, lack of availability of classroom teachers to produce notes and personalised learning plans, records of specific resources and inability tailor programs that are specific to different disability requirements.

How does the level of resources required to support a student at each level of adjustment differ?

The range of disabilities require different levels of support, and different resources. As such, it is difficult to ascertain what resources are required to support each student on a generic level. E.g. a student with cerebral palsy may require additional adjustments to material and assistive technology, as opposed to a student with autism and co-morbid diagnoses of anxiety and sensory processing disorder will require a completely different range of resources.

In reference to evidentiary requirements (page 11 of 14), it is difficult to ascertain how classroom teachers and leadership staff are able to consult with health professionals, meet with parents, assess the individual needs of the student (with reports from medical practitioners, parents/ carers, assessments over a period of time, NDIS documents, teacher reports, diagnosis reports) over a short period of time. Following this, the school team creates reasonable adjustments in each learning area, have multiple meetings to review adjustments, whilst collaborating with parents and school staff over a 12 week period.

Does school setting or context impact on the cost of adjustments provided?

This is largely dependent of what adjustments are needed. Assistive technology may be larger set up costs, but this resource would be sustained for a length of times. School context would be dependent of human assistance, as well. Students needing additional toileting support would need an education assistant to be able to support this, adjustments can be implemented more effectively for some students with additional support in terms of the education assistant.

Does the stage of education impact the cost of adjustments needed; for example, in the early years and transitioning to secondary education?

There are such vast differences between adjustments required across K-12 in education. A child with a disability in early years possibly need adjustments relating to therapy needs (occupational therapy, speech therapy, physiotherapy) where teachers will have to closely work with these allied health professionals to achieve IEP goals created in collaboration with the stakeholders supporting these students.

As a child with disability progresses through the years of schooling, social and emotional adjustments will need to be factored in, in addition to disability requirements to provide participation and access to social engagement. Educational content and learning will also need general adjustments as well. As progression through the curriculum occurs, content becomes more complex, therefore classroom teachers will require the time to make specific adjustments, mindful that adjustments will differ according to the disability diagnosis.

Transition to secondary school requires a complex series of adjustments, with collaboration required amongst multiple teachers who are delivering different content in different modes of delivery. Parental consultation, in combination with allied health professionals, education support staff, education assistants and school leadership is essential for this transition to be effective, and will need to span over the year as the needs of adolescent students will change during their development. Social and emotional inclusion is equally as important as learning adjustments, and as such will also need funding for successful inclusion to occur.

Once students with a disability enter secondary school, the negotiations for adjustments change. In line with NDIS, capacity supports need to be put in place. Capacity building attracts large levels of possibly funding under NDIS (ndis.gov.au) for parents and carers to access for out of school support. Whilst students with a disability are in secondary school, they will also require capacity building for value based inclusion (whilst still requiring core and capital adjustments as outlined in the NDIS) in preparation for post-secondary options – in both work and further education sectors. Adjustments required remain significant, but need to be evaluated with different criteria. Whilst NDIS is a different funding mechanism, and does not replace school funding, it is essential that schools are in line with supporting the same criteria of supports whilst they are engaged in education at government and non-government schools.

What costs of supporting students with disability (for example, fixed system costs, costs of collection, assurance and management of the NCCD at a school level) should be factored into the loadings?

The review of funding and successful adjusting of curriculum materials, as well as evaluation of social, communicative and emotional support, needs to be clearly outlined. This review outlines the process of identification of students who are included in NCCD, but not how it is reviewed. Concerning is the small sample of schools evaluated by PwC (150 schools across Australia), with the analysis of 3295 sample student records. Noted that focus group discussions were carried out with approved authorities and schools, there was no evidence as to what focus group discussion questions were used, and no evidence of focus group discussions occurring with all invested stakeholders (classroom teachers, allied health professionals, parents, educational support teachers, and input from adolescent students themselves). PwC found in the 'in the majority of cases, schools were complying with the evidentiary requirements of the NCCD (page 14 of 14)', yet no report has been linked to these findings in the review for submissions. In light of these findings, it could be suggested that a larger sample of schools should be analysed. The requirements of the NCCD is the critical process defining the success of analysing adjustments needed for students with a disability.

Are there any other factors that impact on the level of resources required to provide adjustments?

Holistic support needs for students need to be considered in terms of resources required. The NCCD outlines resources and strategies that are in place to support students during their schooling, yet it is unclear when teaching staff are able to be inducted in these strategies, in addition to the comprehensive evidentiary requirements that have to be incorporated. It becomes evident, that there needs to be additional support to allow educators to have the time to address these changes.

As a result, a key concern is the consideration of removing time and money for supplementary adjustments for students with a disability, whilst maintaining monetary support for students with substantive and extensive support.

Successful implementation of the NCCD creates a vastly increased workload for education providers, thus it is concerning that this review is suggesting that there should be less money provided for loading.

<https://www.nccd.edu.au/sites/default/files/2018-10/Strategies%20to%20support%20decision%20making.pdf>

<https://www.nccd.edu.au/wider-support-materials/what-nccd-model-1?parent=%2Funderstanding&activity=%2Fwider-support-materials%2Fwhat-nccd-model-1&step=-1>

2. Are Australian Government assurance processes, undertaken to support the accuracy of information provided to calculate a school's Australian Government funding entitlement relating to students with disability, appropriate and sufficiently robust and how might they be effectively improved?

There would be significant concerns as to the diagnosis of disability as outlined in the Disability Standards for Education (DSE, 2005). Currently disabilities are diagnosed by health specialists in developmental disorders, in conjunction with psychiatrists, so it is unclear how a classroom teacher/ educational professionals would be able to diagnosis the level of support that students with disability would need, without specialist information and diagnosis criteria.

If the diagnosis of a disability is conducted under health professionals' jurisdiction, it is perplexing that education professionals are able to make these decisions, without consultation of an educational psychologist, at the least. School counsellors and leadership staff would need to receive extensive professional development at university level to enable skills to do this correctly. It is concerning that teachers only have to be at an AITSL "Proficient" standard to be deemed able to conduct appropriate learning adjustments for a range of disabilities. At the very least, a "Professional" standard should be achieved to take on this responsibility to respond to the large range of disabilities that require complex and different learning adjustments.

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