

RESPONSE TO THE ROYAL COMMISSION INTO VIOLENCE, ABUSE, NEGLECT AND EXPLOITATION OF PEOPLE WITH DISABILITY - EDUCATION AND LEARNING ISSUES PAPER

The NSW Department of Education is an inclusive education system with a range of settings, including mainstream, mainstream with support classes, Schools for Specific Purposes and selective schools.

Anson Street School is a School for Specific Purposes that caters for 140 students with diverse learning needs across 22 classes from Kindergarten to Year 12. We are proud to be a NSW Department of Education school and our staff and school community disagree with the Committee on the Rights of Persons with Disabilities that by definition we are a school that segregates.

Our school's strategic directions* promote high expectations, connection to community, a sense of belonging, and a way to foster a belief in oneself that permeates every part of life to build a growth mindset and positively adapt to change. We explicitly teach kindness, gratitude, curiosity and hope to students to help them develop the resilience to persist and try new learnings and experiences.

One hundred percent of our students complete the Higher School Certificate, go on to further learning such as TAFE, apprenticeships or employment; or access day programs depending on their interest and capacity. We focus on high expectations and offer a range of opportunities which enable our students to succeed at a high level, including our School Captain being awarded the Governor General's Award for Leadership in 2018; and a student's art work being selected by Operation Art to donate to Bear Cottage in Sydney this year.

We also have students who are terminally ill or who have degenerative diseases which will lead to an early death. These children are supported at school in engaging and inclusive ways and are happy each and every day that they attend school.

We also enrol students who have challenging behaviours due to mental health disorders or exposure to trauma through sexual assault or domestic violence. These students can have psychotic episodes, be extremely violent or can try to self-harm. Our staff are highly trained and respond in a way that keeps students regulated, engaged in school, and learning.

Our school also includes the Orange Learning Centre which supports students with challenging behaviours and the Return to School Program where students who have been long suspended from other local schools can attend and stay connected with their learning.

We provide a specialist setting which allow students to thrive and be supported in the development of their physical, intellectual and emotional learning. We provide a smaller staff to student ratio, which allow us to see changes and growth in students and to cater for individual cognitive and safety needs.

* Strategic Directions:

- Connect and Belong: *be your best self;*
- Be Curious: *Explore and cultivate wisdom;* and
- Foster a growth mindset: *be willing to do things differently.*

The enrolment policy of the NSW Department of Education provides parents and carers with the choice of educational setting for their child and we are disturbed that the Education and Learning Issues Paper sees SSPs and support classes as segregated settings and asks the question that implies that settings like ours will be made redundant through the transition to 'inclusive settings'.

I believe this is flawed in many ways but largely because there is not enough infrastructure to cater for the devolution of support classes; not enough staff trained in supporting students with disabilities in mainstream settings, and largely overlooks that fact that students at our settings in over 100 SSPs in NSW are not forced to be enrolled in our schools, but parents and carers have chosen for their child to attend our unique and inclusive settings.

I believe we offer an inclusive education for each student, because every child in our setting is unique - learning beside other diverse learners. We have students who are accessing mainstream outcomes alongside students on Life Skills. Each student has a Personalised Learning Plan that caters for and accommodates individual difference.

Two secondary female students with autism and mental health disorders had very low attendance at their mainstream high schools. They now have attendance greater than 90% within one term and have both identified the reason for this is because they feel supported at our school emotionally, socially, physically and academically.

We are one system and I do not want to denigrate the wonderful work that mainstream settings currently do, however as stated before, our school is a school of choice for our parents, carers and students. They want to continue to have choice in the public education system.

We have had three students successfully transition from home schooling to our school this year. They are now connecting socially with peers and have settled in to the routines of school life very well.

I note that the committee had education academics but not educators from schools. I invite people from the committee to visit our school and see the growth, happiness, kindness, gratitude, curiosity about learning and hope for the future that our students have and tell our community that transitioning our 140 students to their mainstream 'inclusive' school would be the best for their child.

Melanie Meers

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Principal

Anson Street School

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Individual comments from staff

- Most of our local government and non-government secondary schools in Orange have an enrolment over 700 and it would be an unreasonable task to ask teachers to develop individual plans for each of the students they teach and to be able to adequately cater for their learning needs.
- If students were all transitioned to what is defined as an inclusive setting, there would be a need for:
 - Vastly increased provision of support staff for moving students, changing students, feeding and supporting students.
 - Space for storage of walkers, standers, wheelchairs, hoists, TAPIt, eye gaze technology etc.
 - Upskilling of all mainstream staff in areas of disability and how to teach students with a range of disabilities.
 - Physical facilities: ramps, toilets, change areas, withdrawal rooms, modified furniture, wider doors and corridors
 - Increased education of all mainstream students in disabilities, anti-bullying, tolerating behaviours.
 - Modified sport, excursions, assemblies, eating facilities, classroom spaces.
 - Safe areas for students with special needs to play and socialise.
 - Multiple individual programs - PLPs, behaviour, healthcare plans, safety plans, etc which all need extensive time to plan, develop and implement.
 - Provision of opportunities for life skills such as cooking, shopping, swimming,
 - Locked doors, gates, fences etc, to ensure student safety.
 - Laundering of clothes, towels, nappies etc. that are needed.
- In a previous mainstream school, a student had a brand new wheelchair, supporting her diagnosis of Cerebral Palsy. The student was bullied and physically tipped out of their chair and the chair was then taken for a 'joy ride' by other students, which resulted in the chair being broken and then unable to be used by the student relying on it. This then caused the student to not return to school for three months due to feeling unsafe.
- The extent and nature of violence is more prevalent in mainstream settings, with this being minimised and reduced in students who have been introduced or working with students from support schools. Students within an SSP are educated about a variety of disabilities, are able to be more understanding and empathetic towards students with varied needs. Students in some SSPS are integrated with students with varying disabilities and are provided with many opportunities to be supported by mainstream students.
- I worked in mainstream settings and saw students with disabilities not catered for, socially isolated, bullied, and refusing school. We're not resourced to work with students with high needs and students with mental health disorders and challenging behaviours are often disruptive in class impacting on the learning of others.

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- I work in a Special Education setting and saw students coming to school traumatised from mainstream experience and not learning. Over time they settle down and are happy, learning, and catered for.
- In a mainstream setting where there are many students and periods, teachers are less able to develop relationships with students and enable vulnerable students to feel safe enough to talk about or expose reportable offenses. Due to larger class sizes in a mainstream setting, teachers would be less likely to notice physical and psychological signs of abuse.
- In an SSP, teachers and SLSOs work closely with students and spend many more face to face hours with students, where relationships are built and trust is developed. In these classrooms, students are much more likely to expose any violence, abuse, neglect or exploitation. This can then be reported and the student provided with follow up support.
- A student with Cerebral Palsy attending a mainstream high school had to use her wheelchair at all times as she was constantly bumped or knocked over accidentally with the movement of students between periods. She now attends our school and is able to walk around when she wants and feels safe and supported because we are a smaller setting.
- In an SSP school there is a clear chain of command and much easier access to executive staff in regards to raising concerns and reporting incidents.
- If neglect is identified, students in SSP schools are often supported in a much more comprehensive (and accessible) way. For example: food, clothes, shoes and transport to and from school/medical and psychological appointments
- In a specialised setting the provision of curriculum can be offered at an appropriate, individualised level. Learning goals can be negotiated with the family and student where possible.
- Within mainstream settings, integration funding support does not provide enough support for students with high needs.
- We have found students within an SSP setting are more accepting of other students with high support needs or other disabilities.
- Students with a disability attending mainstream settings are more likely to disengage from school, avoid class. This would limit opportunities for finishing school and working towards post school options. Within a special school or support class setting students have access to post school options and supported work experience.

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- Students participate in a range of opportunities including representative sports, creative arts and leadership opportunities.
- Year 12 students remain for the entire year and are able to increase their engagement with volunteering, work experience, and community connection.
- Special Education schools/settings/classes promote a more inclusive environment than mainstream settings because students can be left with SLSO and not given the teacher expertise that the need.
- Special Education schools provide students with the necessary social, emotional and life skills to promote inclusivity within a school setting and the community.
- Our students are connected to our school and to staff/peers, assisting them in forming stronger and more positive social skills.
- We provide many opportunities for our students such as discos, excursions, community outings, swimming and athletics carnivals, weekly sporting events etc. which in turn results in our students gaining social skills and the community gaining more awareness of the needs and abilities of our students.
- Our students are learning the following skills in our setting (which in turn results in a more inclusive society):
 - Answering phones
 - Taking orders for coffee
 - Handling money
 - Shopping
 - Ordering items at stores
 - Using buses
 - Crossing roads
 - Doing hair and nails
 - Making coffees
 - Communicating appropriately in different settings
 - Turn taking
 - Question asking
 - Listening to others
 - Basic social skills
 - Non-verbal communication
 - Budgeting
 - Cooking
 - Hygiene
 - Toileting
 - Washing clothes/doing laundry
 - Sewing
 - Recognising emotions
 - Using strategies to regulate
 - Managing anger

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There is segregation in every school and every environment within the human world. Not everyone is able to do everything. Within the schooling system (public education) segregation is within all schools, including Gifted and Talented programs, where students are segregated based on their academic ability. Another example is school sporting teams - not everyone can play every sport or are chosen to represent the school in their desired sport because the best player is chosen based on their abilities. Grading of students - having a 'top' class and a 'bottom' class in Mathematics and English, these are determined by student's academic results.

When I was a teacher in a mainstream setting in metal work and wood work classes, students with disabilities were segregated based on their physical disability and were not allowed to use tools such as hammers, saws, electrical tools because their teacher said they were "at too much risk of harm to themselves or others". At our school, we teach the safe use of these tools under supervision within much smaller class sizes so that students can join in with all activities.

If you have a specific medical need, you don't go to a GP you go to a specialist. So to in education, if you need additional or specialised support you have the choice to attend a School for Specific Purposes or a support class in a mainstream school.

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How does inclusive education promote a more inclusive society?

Our school is inclusive and builds values of respect for differences, tolerance, gratitude, friendship, social skills, relationships, empathy, social awareness, reflection, emotional regulation, higher expectations or standards of themselves.

We are able to:

- Differentiate curriculum: Diversity of strategies and resources; teacher to student ratio allows students to grow at their own pace and feel successful.
- Develop personal interaction with students to ensure that they feel connected and have a sense of belonging. Attune with nuances that would be missed in mainstream, due to scanning and delivering to a larger group.
- Promote greater social interaction with students with high needs around meal time and activities.
- Listen to students in a very purposeful way. Students who are non-verbal are able to communicate with the wider school population through signing or proloquo2go because all staff and students are learning these forms of communication.
- Work closely with parents who are often overstretched meeting the needs of a student with considerable needs. Connecting, listening and sharing to support parental wellbeing.
- Integrate specialised staff into the classroom so that they can observe and provide feedback and build capacity of staff. Specialised staff also bring ideas and strategies to planning meetings when students are discussed.
- Develop student's acceptance of individual differences. Other schools visit from mainstream and we visit mainstream schools so that students can learn about each other's similarities and differences. Students from mainstream schools also support events such as athletics and swimming carnival and develop skills of how to engage with children with disabilities.

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RESPONSES FROM OUR SCHOOL COMMUNITY

The following three examples are from members of our school community. Other parents and carers have submitted individual responses. Given the time of the year, more people would like the opportunity to respond and support the current NSW Education system of having support classes and specialist school settings.

Response 1

I have a unique perspective on this issue given that:

- I work in a mainstream high school which had a Support Unit for 25 years but moved Support students into mainstream in 2017 with limited success, to the extent that the Support Unit will be reverting back to the original model in 2020. The issues which have precipitated this reversion to a Support Unit include:
 - Increased truancy and attendance issues;
 - Increased behavioural issues;
 - Teachers with time restraints which make adjustments harder to do when numbers in classes remain the same;
 - Lack of life skill option;
 - Teachers who do not have special education training/expertise;
 - The students don't "belong" to anyone so difficulties can't be anticipated;
 - Pastoral Care is diminished.
- I have a grandson with special needs who started school at a mainstream primary school then transferred to a SSP in Year 5.
- My son who is now an adult also has a disability but was successfully schooled in mainstream classes throughout his schooling.

I have also had the experience of having supported my son and daughter-in-law as they chose schooling for my grandson, who has a disability. He began schooling in a mainstream school but we readily acknowledged that as he got older his interests were best served by attending an SSP:

- While students are in Stage 1 they are very inclusive and although my grandson's challenges were apparent he was included in most games and social outings.
- However, as children reach the age of 8-9 the differences become greater. They are maturing and deciding "who is like me?" and "who can I have shared interests with?"
- His classmates still took care of him but quite frankly they were being "friendly" as opposed to them being his "friend" mainly because they had little in common.
- The students with a disability are challenged more by the demands of the curriculum. Despite many meetings and extremely well meaning teachers who are very prepared to adjust learning outcomes and were accommodating in many ways in the mainstream school my grandson was struggling and becoming frustrated at the pace of school and was an unhappy little boy regardless of all the people around him who cared.

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- His move to an SSP has resulted in vast improvements in self-confidence, expressive language and above all his emotional wellbeing.

Orange is fortunate to have three different options for students with special needs in public schools. These being mainstream schools with mainstream outcomes adjusted, mainstream schools which have Support classes/units and a School for Specific Purposes.

I firmly believe each of these is a great option which caters for the varying needs of every individual child. This, to me, is the more important issue ... choice. Parents and students are able to decide which of these will best suit the particular needs of their child.

I have worked in Special Education for 30 years and have seen educational trends away from SSPs before, but it has been parents who have demanded this option be used more to enhance some children's education.

Thank you for this opportunity to have input into this issue.

Regards

Abby

Response 2

- Disabilities are not a one-size fits all, and therefore expecting children with disabilities to "adapt" to mainstream is not the answer for everyone
- Yes – more children with Autism maybe in a School for Specific Purpose (SSP), however as a population more children meet the criteria for a diagnosis, remembering ASD is Autism Spectrum Disorder. Being on this broad spectrum means that each child is different so that is why it is so important to have different settings to meet the educational needs of each child.
- Simply some children DO NOT cope in the large "mainstream" schools – the noise and busyness of the setting can be upsetting for students who are sensitive to noise.
- Most mainstream schools are so large our children would be so overwhelmed further exacerbating the/their problems.
- As parents we have had our daughter in a support class in a mainstream setting and now having had four years within an SSP, we would truly be lost if it wasn't for the dedication, care, patience and perseverance of the passionate staff at our school.
- Teachers within an SSP are specially trained to have the skills to support children with disabilities.
- A lot of teachers in a mainstream setting would not cope with the high demands of children with disabilities, such as our daughter, particularly when it comes to their personal care required throughout the day

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- Again, we are not all the same and can't expect to be so having option to meet our needs is essential
- By limiting parents and carers with lack of options only adds to the enormous pressures we already face on a daily basis, raising a child with a disability.

From Renai and Greg

Response 3

Most parents with students with disability are happier with special schools because of the acceptance of their children and encouragement for students to reach their full potential.

Dignity for students is paramount in meeting their personal needs.

As a teacher, it would be difficult to manage a class of 30 with a child/children with disability such as my grandson who has autism, is non-verbal and can become highly dysregulated and violent if there is too much noise in the classroom. He wears headphones and has support from therapists at school including occupational therapist, physiotherapist and speech pathologist. The school ensures that therapists at school work with the NDIS therapists and share strategies across school and home.

It is unlikely that students with special needs can adjust to the standardised requirements of mainstream schooling, including the timetable, bells, reduced playground support, etc.

Jan, volunteer and grandmother of a student of Anson Street School

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SUCCESS STORIES

Student: primary Year 5 male

Background: Student was attending mainstream primary school with integration funding. Student's parents are elderly and mother has cancer. Student has mental health disorder and health condition affecting his bowel movements and diet. Student was dysregulated daily, suspended or on part day attendance of up to one hour. He did not access the classroom but tended to 'roam' around the school with the School Learning Support Officer following him.

Outcome: Student started at our school and within six months has an attendance rate of 100% for term 4 and is attending full days. His father states that he has never been happier, he has friends and he is now regulated for learning and engaging in activities with his peers.

How: The staff on the student's class were encouraged to not focus in the first instance on formal school work but to create a sense of belonging and help the student develop attachment. The OT worked on building capacity of staff and provide a sensory diet for the student to follow at school and home. The dietician worked with the family and NSW Health Eating Clinic and provided strategies to help the student at home.

Student: Year 9 female student

Background: student was attending local high school in Year 7 but very quickly stopped attending school due to mental health disorder and autism.

Outcome: Student started at the Orange Learning Centre to help reengage her with education. The smaller, quieter and supportive setting meant that the student felt comfortable and within a short period of time the student was attending regularly. The student and her mother wanted her to enrol in our school and during the first year she experienced her first psychotic episode. She self-harmed and became violent regularly due to her mental health disorder. Staff were calm and able to use strategies to help her regulate and return to the class. Her attendance this year is 97.5%. She is accessing mainstream outcomes and has plenty of friends. Her mother is able to return to work because she is not called to the school each day.

Why: Our school explicitly teaches how the brain works, emotional learning, positive education and self-regulation activities to help students regulate and learn.

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The following cases outline the amount of time and care taken by staff in a specialised setting to enable the most vulnerable of our society to function, participate and be included in education.

Case Study 1

Annabel* is a 10-year-old student attending our school. Annabel has a severe intellectual disability, quadriplegia cerebral palsy, epilepsy and a global developmental delay. She is non-verbal, incontinent, has difficulty eating (but can swallow soft foods fed to her), relies on being pushed in her wheelchair for mobility and stands fully supported in a standing frame. She has some use of her left hand. She also has no sweat glands so can overheat if not monitored.

She is taught in a class of seven students with varying needs: physical, intellectual, emotional, ADHD and autism. The class has one teacher and one SLSO (School Learning Support Officer) to provide education and support to the seven students.

Annabel stands in a standing frame for at least 30 minutes each day as part of her physiotherapy program and to strengthen her legs after recent bi-lateral hip surgery. She wears AFOs to support her ankles and lower legs when standing. She is hoisted from her wheelchair and positioned in her standing frame by the teacher and SLSO each morning.

Her incontinence is managed at least twice per day. An additional SLSO from the classroom next door assists with toileting as Annabel requires a two-person lift from her chair to the change table and then from the change table to a commode chair. Whilst on the commode Annabel requires a water flush (300mLs) through her stomach peg before being lifted back on to the change table and back into her chair.

Annabel also has a weekly hydrotherapy session where she requires full assistance from two SLSOs to change into and out of her swimming outfit. Annabel is hoisted into the spa and fully supported by an SLSO in the water due to her epilepsy and physical needs.

Annabel has emergency medication for seizures and requires a specific procedure health care plan to be implemented if a seizure occurs including removing her from her wheelchair and placing her in the recovery position.

Annabel's parents attend Personalised Learning Plan meetings once per semester to provide advice to the school and to discuss arrangements for her personal care and education. Daily communication is maintained through a diary and regular phone calls and pop in visits are made throughout the year. Annabel's external therapy team also see her at school during teacher/SLSO facilitated times.

The school reports that Annabel receives approximately 21 hours of 1:1 assistance with personal care and support each week. Her 1:1 personal care supports include:

- Mealtime assistance twice per day for 20 minutes
- Planned toileting assistance twice per day (2 changes)

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- Unplanned toileting assistance and changing of clothes at least twice per week
- Health care procedure assistance – water flush (300mLs) twice per day
- Mobility support to and from morning and afternoon bus transport each day
- Mobility support to and from the classroom to the playground, hydrotherapy, assembly and to the school bus (for a weekly outing each Thursday)
- Personal care assistance fitting her AFOs each morning
- Mobility support to transfer in and out of standing frame for 30 minutes each morning
- Full assistance in dressing for hydrotherapy and physical support in the water
- Hand over hand assistance for all academic tasks and communication skills

Case study 2

Thea* is an 8 year old girl attending our school.

Thea has been diagnosed with Dystonic Quadriplegic Cerebral Palsy, Kyphoscoliosis, profound hearing loss (2 cochlear implants), Gastroesophageal reflux disorder (GORD), Laryngomalacia, food aversion, Cortical vision impairment, Nephrocalcinosis.

Thea requires full support for mobility and is pushed in her wheelchair. Thea is tube fed using a pump and NIL by mouth. Thea is incontinent and requires nappy changes twice a day.

She wears a second skin as a brace and this is partially removed during nappy changes and completely removed for hydrotherapy sessions. The second skin is fitted to use as a brace to support Thea's spine and she wears the brace all day every day, except during hydrotherapy. The brace has a number of zips and needs to be positioned exactly to ensure its effectiveness and to ensure there is no damage to Thea's spine.

Thea is taught within a class of 7 students with varying needs: Physical, ADHD, Intellectual, Autism.

She is taught in a classroom with one teacher and one SLSO.

Thea stands in a standing frame for at least 30 minutes a day as part of her physiotherapy program. She is positioned in the frame by the teacher and SLSO and returned to her chair by the teacher and SLSO.

Thea wears AFOs and requires leg straps 2-3 times a week to maintain tendon extension. These are left in place for 30 minutes minimum.

Nappy changes are conducted by the SLSO and teacher in the change area adjoining the classroom and require a two-person lift. There is a minimum of two changes per day and more if required.

Every Tuesday Thea participates in hydrotherapy as a part of her physiotherapy program and the SLSO or teacher change her for this.

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1:1 supports each week include:

- Tube feeding twice per day for 30 minutes plus 20minutes cleaning pump
- Planned toileting assistance two times per day (more if required)
- Unplanned changing of clothes at least three to four times per week due to vomiting/toileting
- Mobility support to and from the classroom each day
- Mobility support for 30 minutes standing each morning
- Mobility support to and from the spa and school assembly once per week
- Full assistance with dressing for spa once per week
- Leg straps two to three times a week

* real names not used to protect privacy.

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