Developing synergies between the National Disability Insurance Scheme and the Victorian Government school system

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Introduction

About 7.5% of children in Victorian schools have a disability (ABS 2009). Education systems are obliged to ensure that school students with disability can participate in education on the same basis as other students (Commonwealth of Australia, 2005). However, this can be difficult when students have support needs that are currently outside the funding responsibility of education departments. These 'whole of life' supports may not be directly related to accessing the school curriculum but they have an impact on students' personal wellbeing and quality of life.

The National Disability Insurance Scheme (NDIS) seeks to address these issues. The intent of the National Disability Insurance Scheme Act 2013 (NDIS Act) is to facilitate full inclusion in mainstream community, and to maximise independent lifestyles for all Australians with disability (Commonwealth of Australia, 2013, p. 4). The legislation thus gives effect to Australia's obligations under the Convention on the Rights of Persons with Disabilities ratified in New York on 13 December 2006. From 2016, Australians up to 65 years of age—and including school-age students— with permanent and significant disabilities will be able to apply for the whole of life disability supports that will support them to continue with their education and foster economic participation. The National Disability Insurance Agency (NDIA) is the agency responsible for implementing the legislative intent of the NDIS Act. Trial sites have already been established in most Australian states, including the Barwon Trial Site in Victoria, to test and review interactions between the NDIS legislation, the NDIA, and other service systems.

By defining its own responsibilities, the NDIS brings into stark relief the responsibilities of other systems. The NDIS is not a system of first resort. It does not replace the support reasonably provided by families or informal mechanisms, and nor does it over-ride the obligations for inclusive polices, practices and services of other systems such as education, health and transport.

The education system, like other service delivery systems, is still working through where its responsibilities for their students with disability begin and end. In particular, the education system is engaged in defining the threshold between pedagogy and curriculum support on the one hand, and functional support for the students on the other. The challenge is establishing sensible boundaries without foregoing opportunities for collaboration and partnership.

The NDIS advances several concepts and process issues of relevance for the education system, schools, and families with school-aged sons and daughters with disability. They include concepts such as 'choice and control', 'individualised funding' and 'individual' goals, aspirations and needs, 'reasonable and necessary',

and 'functional capacity' (Commonwealth of Australia, 2013). These concepts in turn result in new and different processes, challenges and issues for schools, families and students with disability for different and competing reasons. For example, families need to familiarise themselves with new processes to access support services for their sons and daughters with disability, which can be challenging, particularly in the early stages of implementation (NDIA, 2014a, p. 15; JSC, 2014, pp. xv, 31, 55-58, 87, 121, 135). In turn, the education system and schools will develop new systems, networks and approaches to be responsive to the impact of the NDIS.

About this report

The Victorian Department of Education and Training is conducting a review of its Program for Students with a Disability (PSD). This program provides targeted supplementary funding to government schools to support eligible students with disability.

The review aims to respond to stakeholder concerns about the scope of the PSD and the PSD funding allocation process. Students with disabilities who have low to moderate special needs (around 11% government school enrolment) do not attract targeted funding. Funding is allocated to the school, not to the child. The use of these funds and the associated decision-making and monitoring varies. Many stakeholders want additional supports, including a broadening of the eligibility criteria. For example, specialist schools benefit from access to student transport resulting in significant economies of scale. In addition, some specialist settings (including Autism specific schools and facilities for deaf students) attract more funding than the students would otherwise receive through the PSD if they were enrolled in a standard specialist school or a mainstream school.

As part of the review, the Department commissioned Dr Donna McDonald, Senior Research Fellow, Griffith University, and Katy O'Callaghan, Director, Outpost Consulting, to write a report on the interface between the NDIS and school education. This report aims to identify areas of potential policy and service contradictions or discrepancies, as well as possible policy and service delivery synergies between the NDIS and the Victorian state education system that could improve or streamline support to children and families.

This report was prepared by reviewing research articles, policy statements, reports and commentary related to the implementation of the NDIS that are in the public domain. Little peer-reviewed literature is available on this emerging issue. Consequently, focused conversations were also conducted with key expert informants who provided their insights on this topic (see Attachment A). These discussions highlighted evident complexities and apparent contradictions that need to be resolved.

Differences in approach

The NDIS

The NDIS is a social insurance scheme to provide funding for Australians with a permanent and significant disability to participate in social and economic life. As such, it aims to respond to their whole of life disability needs. It is not a capped program but a total pool of funding in which all Australians share. However, any supports funded under the NDIS must be considered to be 'reasonable and necessary'.

Individuals can access funding from that pool when they meet certain criteria. They must meet age and residence requirements:

- be aged less than 65 when they first access the scheme, and
- be an Australian citizen, a permanent resident or a New Zealand citizen who holds a Protected Special Category Visa. (A Protected Special Category Visa is a temporary visa introduced for New Zealand citizens who were residing in Australia in 2001, before visa rules were changed).

They must also meet either the disability or the early intervention requirements. For children under 7 years, an NDIA delegate would first consider whether the child meets the early intervention requirements, before considering the disability requirements.

The disability requirements state that:

- The person must have a disability that is attributable to one or more intellectual, cognitive, neurological, sensory or physical impairments or to one or more impairments attributable to a psychiatric condition, and
- The impairment or impairments are, or are likely to be, permanent, and
- The impairment or impairments result in substantially reduced functional capacity to undertake, or psychosocial functioning in undertaking, one or more of the following activities:

    i. Communication

    ii. Social interaction

    iii. Learning

    iv. Mobility

    v. Self-care

    vi. Self-management, and

- The impairment or impairments affect the person's capacity for social and economic participation, and
- The person is likely to require support under the NDIS for their lifetime. (NDIS Act s.24)

The early intervention requirements state that:

- The person has one or more identified intellectual, cognitive, neurological, sensory or physical impairments that are, or are likely to be, permanent; or
    - o the person has one or more identified impairments that are attributable to a psychiatric condition and are, or are likely to be, permanent; or
    - o the person is a child who has developmental delay.
- The provision of early intervention supports for the person is likely to benefit the person by reducing the person's future needs for supports in relation to disability.
- The provision of early intervention supports for the person is likely to benefit the person by:

    a. Mitigating or alleviating the impact of the person's impairment upon the functional capacity of the person to undertake communication, social interaction, learning, mobility, self‑care or self‑management, or

    b. Preventing the deterioration of such functional capacity, or

    c. Improving such functional capacity, or

    d. Strengthening the sustainability of informal supports available to the person, including through building the capacity of the person's carer.

- Even if a person meets the test above, that person does not meet the early intervention requirements if early intervention supports:

    a. are not most appropriately funded or provided through the NDIS, and

    b. are more appropriately funded through:

        i. Other general systems of service delivery or support services offered by a person, agency or body, or

        ii. Systems of service delivery or support services offered as part of a universal service obligation or in accordance with reasonable adjustments required under a law dealing with discrimination on the basis of disability. (NDIS Act s.21, 25(3) and 34(1)(c)).

Actuarial modelling is used to estimate and manage the costs of care and support across the life-course.

Rather than assessing a person based solely on their disability diagnosis (eg cerebral palsy, autism, deafness), assessment under the NDIS is based on how the person's impairment arising from their disability reduces their functional capacity to take part in everyday activities. The funded categories are aligned to the World Health Organisation's International Classification of Function (WHO-ICF, 2001). Supports are only funded if they are considered 'reasonable and necessary' to help a participant to reach their goals, objectives and aspirations, and enable and economic participation. For a support to be deemed 'reasonable and necessary' it must:

- be related to the participant's disability,
- not include day-to-day living costs that are not related to a participant's disability support needs,
- represent value for money,
- be likely to be effective and beneficial to the participant, and
- take into account informal supports given to participants by families, carers, networks, and the community. (NDIA, 2014i)

The most significant—and indeed, dramatic—break from past disability funding schemes is that the NDIS funding goes directly to the individual participants, not to the service providers who have traditionally received 'block grant funds' to ration and allocate among their clients as deemed necessary. This individualised funding is designed to give 'choice and control' to individuals with disability.

Within the boundaries of their plan, participants in the scheme can choose what service they want to use to implement their NDIA plan, and they can negotiate with a service provider on where, when and how they want their supports delivered, up to a point. For example, if an NDIA delegate considers that it is more cost-effective for the support to be provided through bulk purchasing of goods by the NDIA, then the plan must specify that that support will be provided by the NDIA. Participants can manage their funding directly, choose a family member, friend or other plan manager to help, ask the NDIA to manage and pay for supports on their behalf, or they can use a combination of these options (NDIA, 2014b).

This all sounds good. However, the flexibility to choose is meaningless if you do not know how to choose, or how to manage your choices safely and effectively. The NDIS principles of 'choice and control' come with the day-to day-realities of making sense of new rules; acquiring new skills; grappling with new paperwork, application forms and planning documents; and finding the way through a maze of new services and new ways of doing things. Most (if not all) people with disability, and their families and carers will need help in taking up the opportunities of the new (NDIS) way of choosing, managing, and reviewing their supports and services. This need for supported and informed decision-making has been recognised by the NDIA and state governments alike.

To ensure quality and safety in the context of choice and control, NDIS providers will need to be vetted and monitored. This is particularly important in a rapidly expanding market. A national NDIS quality and safeguards framework is being developed which aims to maximise the opportunities for people with disability to make decisions about their supports while also enabling them to live free from abuse, neglect and exploitation.

State-funded school programs

The Victorian Department of Education and Training has responsibility for over 560,000 students in more than 1,520 government schools (DEECD, 2015b, p. 3). The

Department offers an extensive range of policies, programs and resources for schools to support the learning needs of students with disabilities. The Department's disability support programs include:

- The Abilities Based Learning and Education Support (ABLES) program that provides a suite of curriculum, pedagogy, assessment and reporting resources that assist teachers support students with disability
- The Schoolcare Program, which enables students with ongoing complex medical needs to have their health care requirements met safely at school
- Equipment grants for students with visual impairments
- An accessible buildings program
- Language Support Program to support students with mild to moderate language difficulties
- Specialised schools, including fifteen autism inclusion schools.
- Student support services including psychologists, social workers, youth workers, speech pathologists, School Nursing Program and visiting teachers.

The Program for Students with Disability supplements these resources. It provides resources to schools for a defined population of students with moderate to severe disabilities. Supports funded through the PSD include relevant aids and equipment, specialist staff and accessible learning resources. Unlike the NDIS where money is allocated to the individual, funding under the PSD and most other state-funded school programs is provided directly to schools based on their enrolments of students with particular disabilities.

Funding provided to schools under the PSD assists them to meet their legal obligations under section 32 of the Commonwealth Disability Discrimination Act (DDA), which states that education providers must comply with the Commonwealth Disability Standards for Education 2005. The Standards, which are reviewed every five years and are being reviewed in 2015, seek to ensure that students with disability can access and participate in education on the same basis as other students. 'On the same basis' means that a student with disability must have opportunities and choices which are comparable with those offered to students without disability. This applies to admission or enrolment in an institution; participation in courses or programs; and use of facilities and services (Commonwealth of Australia, 2005). To achieve this goal requires education providers to make 'reasonable adjustments' to accommodate the education needs of a student with a disability. Schools are required to make reasonable adjustments for a student with a disability regardless of whether the student may meet the eligibility guidelines for a targeted funding program such as the PSD.

Reasonable adjustments are based on the perceived individual learning needs of the student. Adjustments can be made in both the classroom and whole-school settings as well as at an individual student level. An adjustment is considered reasonable if it achieves the purpose of providing access and participation, while taking into account

the student's learning needs and balancing the interests of all parties affected, including those of the student with disability, the education provider, staff and other students (Commonwealth of Australia, 2005).

The DDA uses a broad definition of disability in order to provide protection against discrimination for a wide range of people. The disability does not have to be permanent, as is controversially the case with the NDIS. While the NDIS has been built to come in and out of people's lives as required (such as for episodic events), the controversy arises in the mental health sector as contemporary mental health and psychiatric interventions are based on the recovery model.

Under the PSD, for a school to receive additional targeted funding to support a student, the school needs to provide evidence that the student's disability falls within one of seven significant disability categories—physical disability, visual impairment, hearing impairment, severe behaviour disorder, intellectual disability, autism spectrum disorder, or severe language disorder with critical educational needs. That evidence has to be aligned with corresponding eligibility criteria, which spell out key functional descriptors and corresponding required documentation to establish eligibility under each disability category (DEECD, 2015b). Although these eligibility criteria are developed from guidelines set by the World Health Organisation (WHO), the seven categories do not include all conditions covered under the DDA, such as mild sensory impairments or health conditions, and only apply to children with moderate to profound disabilities. The PSD's application of the WHO categories is also different from the NDIS's application of the WHO-ICF approach, which is less prescriptive about disability type and focused more on functional capacity.

Unlike the NDIS, the PSD is not restricted to Australian citizens. International students enrolled in Victorian schools, including refugees and migrants, are eligible to apply for the program on the same basis as Australian students. Refugees also have access to other schooling support in Victoria, including the Refugee Education Support Program.

Who funds what?

The NDIS is not intended to replace the funding obligations of mainstream services. On the contrary, it is intended to increase the capacity of people with disability to be included within the mainstream community by accessing appropriate, high quality services and support systems. Further, the NDIS is not designed to pick up any shortfalls of mainstream settings including schools.

To increase clarity and transparency about funding responsibilities, governments have agreed to applied principles and tables of supports that define whether the NDIS or another funding or service system is most appropriate to provide supports (COAG, 2015). These principles specifically address the interface with each mainstream system. The principles for school education are provided in Box 1 below. They recognise the universal and statutory role of the school system and the legal responsibilities of schools to make reasonable adjustments, along with the

responsibilities of the NDIS to fund supports related to daily living where they are not primarily related to educational attainment.

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Box 1 - Applied Principles – School Education

1.   The allocation of funding responsibilities between the NDIS and Education Department will be consistent with the legal obligations of schools, and governments' policy objectives for education including:

- the compulsory nature of schooling

- the current responsibilities schools have for reasonable adjustment, under the Disability Standards for Education

- curriculum and planning, including requirements for students to receive the legislated number of hours of instruction or meet class attendance requirements.

2.   In recognising the universal and statutory role of the schooling system:

- schools will be responsible for personalising learning and support for students that primarily relate to their educational attainment (including teaching, learning assistance and aids, school building modifications and transport between school activities)

- the NDIS will fund supports that the student would require which are associated with the functional impact of the student's disability on their activities of daily living (i.e. those not primarily relating to education attainment), including personal care and support and transport to and from school. Any funding arrangements for individual students will recognise the operational requirements and educational objectives of schools.

3.   The allocation of funding responsibilities will avoid placing inappropriate legal or financial obligations on schools or on the NDIS.

4.   The NDIS and the school education system will work closely together at the local level to plan and coordinate streamlined services for individuals requiring both school education and disability services recognising that both inputs may be required at the same time or through a smooth transition from one to the other or across service systems.

[Note: further work will be undertaken on how students' personal care needs will be assessed, the calculation of the level of funded supports for personal care and how these funds will be managed/administered.]

(COAG, 2015)

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Importantly, the overarching principles include an objective to minimise the administrative burden for families in navigating the two systems. They state:

> *The interactions of people with disability with the NDIS and other service systems should be as seamless as possible, with a no wrong door approach, and minimising the impact of system and organisational boundaries on people with disability, enabling coordinated and integrated plans, supports, referrals and transitions.* (COAG, 2015)

In some areas, by referring to the applied principles, it is quite clear which agency is responsible for supports. In other areas, the responsible agency might be different depending on the context and circumstances. The information in Table 1 (see below)

has been adapted from the NDIS Fact Sheet (2014) *Mainstream interface: school education* and the COAG Statement (2013) *Principles to determine the responsibilities of the NDIS and other service systems* and based on conversations with the Department of Education and Training's NDIS Implementation Unit. It indicates some of the nuanced complexities in determining roles and responsibilities. It is important to note that responsibilities for support do not always lie with government agencies. It will vary depending on an individual's situation and goals. For example, individuals themselves and families have a role in funding some education-related supports such as school uniforms, school fees, excursion fees and transport, where possible.

Table 1: Division of responsibilities: NDIS and schools

NDIS	Schools	Context Dependent	Still to be determined
Some specialist transport to and from school required because of a students disability (depends on level of parental responsibility prescribed in individual plans) Specialised support to transition between schools or from school to post school options Specialised support and training for school staff related to the specific personal support needs of a student with disability, including specific behaviour management plans	Skilled teachers, learning assistants, facilitating access to educational resources Making reasonable adjustments to curriculum to enable access by students with disability Support to transition between schools or from school to post school options Making reasonable adjustments to school buildings (eg ramps, hoists) Day to day supervision, including addressing behavioural issues while at school General support, resources, training and awareness building for teachers and other school staff to support and engage students with disability at school and in the classroom	Therapies • NDIS when required to support functional capacity • School where it is specifically for education attainment Aids and equipment • NDIS when transportable and required for a range of life domains (eg wheelchair, hearing device) • School when primarily for education attainment or when fixed in a facility Transport • NDIS - specialist transport to and from school required because of a students disability • School - Transport for school activities such as excursions • Parents – when deemed a parental responsibility prescribed in individual plans	Personal care (further work is being undertaken on how students' personal care needs will be assessed, the calculation of the level of funded supports for personal care and how these funds will be managed/administered)

Grey areas

The NDIS trial sites around Australia, including in the Barwon Trial Site in Victoria, are providing the opportunity to test and review interactions between the NDIS and other service systems and consider any lessons arising for full scheme implementation. The division of responsibilities does not appear to be straightforward or well understood in practice. Variations and negotiations occur at both at the local level and at the strategic level. One of the people interviewed for this report said:

> *Families could go to NDIA and have a discussion with planner and say I really want my child to read and write but more than that I want them to build their social skills so that they are not left in the playground on their own. It would vary from school to school on whose responsibility it would be to support those social skills at school.*

Whether this is accurate or not, it is nevertheless the reported experience of some families and demonstrates at the individual level the confusion around boundaries. The NDIA, government departments and other stakeholders are systematically working through these issues. For example, a policy workshop was held in 2015 in the Barwon region to work through some of the areas of confusion and contention. This collaborative work will continue during the trial period, in preparation for the full scheme roll-out.

The following areas are emerging as 'grey areas' where further investigations and negotiations are needed to clarify responsibilities and/or improve the linkage between the NDIS and education systems. These should not be read as criticisms of the NDIS or current education system programs, but rather as areas where greater clarity may improve the experience of the student.

Transitions to and from school

Transition points are of particular relevance to the NDIS design. Part of the rationale for implementing the NDIS was to overcome the disruptions caused by supports either dropping away or changing as people move into and out of various funding programs. The NDIS recognises the need for lifetime support that responds to key transition points in people's lives. Nevertheless, as students move into and out of school systems, a transition period inevitably occurs where extra coordination is required to address changing eligibility for NDIA and mainstream supports.

Consultations indicated that more work is needed to understand who has the primary role for providing information and induction into the school system. According to the NDIS principles, the NDIS will not be responsible for funding supports such as school readiness programs, which are for the purpose of accessing a universal service (school). Another current issue is that children in Victoria enrolled in Early Childhood Intervention Services (ECIS) receive less support when they transition to school. Alignment between NDIS early childhood intervention service models and

PSD support models would provide more certainty and stability for children and families, particularly during the period of transition to school. For example, in the early years children are supported through a key worker model. Continuing this approach through the early years of school would create some constancy while the child is adapting to a new education environment.

It is also important to consider those children that do not require any supports until they enter school. While the ECIS has had a wide gateway in Victoria, some children still do not come to school through the ECIS. For example some children with developmental delays may not be diagnosed until school age. These children may transition into the NDIS and a school program at the same time. Clear communication and coordination to create alignment between addressing functional needs (NDIS), and addressing learning needs (schools) would be important for these families.

Transition from school to further education or employment is another area, where clarity on the best approach is needed. Tasmania is piloting the School Transition Project, which looks at improving the pathway for young people from school into employment through an integrated planning model. The School Transition Project aims to integrate planning processes for students with disability in years 11 and 12 through a series of meetings. The key stakeholders including the NDIA, Disability Employment Services, the Department of Human Services, Australian Disability Enterprises (ADEs), the school and the student are brought together for joint planning sessions. This model looks to streamline an otherwise complex transition process which potentially involves up to four different plans: one with the NDIA; another with the school; one with a disability employment service provider; and a fourth related to the receipt of the Disability Support Pension (DSP) (JSC, 2014, p. 53). The NDIA in Victoria is planning to pilot a similar integrated transition pathway.

Consultations indicated that funding to support collaborative 'visioning for the future' might be another area of benefit to stakeholders. Schools traditionally offer career planning as part of their curriculum. But the NDIS also has a role in increasing the career aspirations of people with disability as part of promoting social and economic participation. An intent of the NDIS is to improve transitional planning for students with a disability. With new work options available to people with disability, schools, career planners and NDIA planners will all be challenged to think more creatively about what their students with disability can do in the future with the support of the NDIS, in line with their own goals and aspirations.

Following on from education, one of the key intentions of the NDIS is to improve the scope of employment for people with disabilities. The Productivity Commission report cited research showing people with mild, moderate or severe disabilities who are on the Disability Support Pension (DSP) have no greater an employment likelihood than people with profound disabilities. These results point to the powerful effect of incentives, job opportunities and attitudes, rather than just disability, as a major factor in job outcomes (PC, 2011, p. 277). The NDIA and schools could work

together with students in the senior years to ensure high aspirations for employment among students, families, teachers and career advisors.

Personal care

The scope of the NDIS's legislative responsibility for personal care at school is still under debate at a national level (JSC, 2014, p. 222). This is partly because schools retain duty of care obligations for *all* students, not just students who are NDIS participants. While personal care (assistance with meals, toileting, managing airways etc) is considered in scope for the NDIS, it should only be funded by the NDIS where it is deemed to be beyond 'reasonable adjustment'. Under the Disability Standards for Education personal care mostly fits within the definition of reasonable adjustment because it is central to everyday function and therefore to learning. However, the meaning of 'reasonable adjustment' is always a subjective consideration based on the nature of the disability and various local and systemic issues. Thus it is unclear whether and to what extent 'reasonable adjustment' extends to personal care in every case. Other difficulties arise in measuring and costing this role; understanding a school's legal duty of care for students; and working out how to provide an individualised and intermittent service efficiently.

One exemplifying issue is that often some or even many students within a school require personal care. A potential issue under the NDIS is that some students may prefer their own personal carer. However, with each personal care session lasting perhaps 20 minutes and personal carers entitled to minimum shifts, an individual's NDIS-funded package would be quickly eroded. It is acknowledged that some workforce challenges are inherent in this complex issue, but from a value for money point of view, families may be better off pooling their money, rather than each employing individual carers for longer shifts than required.

From a practical point of view, it makes sense for a school to employ one personal carer to work with all students, rather than having several personal carers entering and leaving the school grounds. This is also important from a legal duty of care standpoint. If personal care is delivered by external providers in schools, principals no longer have complete control over the care and supports in place for these students. Furthermore, schools would need to invest in processes to supervise and vet external providers. However, a policy tension arises here as this model goes against the 'choice and control' principles of the NDIS. Sometimes a balance will need to be found between the concepts of 'choice and control' and 'reasonable and necessary support'.

Another issue is that Education Support Officers are employed in Victorian schools to undertake a range of tasks to provide support to students with disabilities. For some students this includes personal care. Negotiations between the NDIA and state and territory governments are continuing about whether parts of the Education Support Officer's role could or should be part of a child's NDIA plan, and therefore funded by the NDIS. However, workforce complexities arise in transferring this responsibility

to the NDIS. Personal care in schools is not currently funded as a discrete program or delivered by a discrete workforce and the industrial implications are still unclear.

For the trial period, the education system has maintained their existing arrangements for personal care. This has limited opportunities to test and resolve issues to date. As decision-making on support for students in schools is made locally, there is currently no central identification, quantifying or costing of personal care in schools. A significant administrative audit and analysis is required before transfer of responsibility can occur.

Therapists

The interventions provided by therapists tend to cross developmental and educational boundaries. When therapy is used to support a learning activity, it can often also be used to reinforce developmental goals, and vice versa. When a therapy goal supports both learning and development, it can be framed either way. See case study in Box 2 below.

Box 2: Case study on therapy

In reviewing their NDIA plan, a family asked for their child's therapy to be redesigned with a view to improving her fine motor skills so that she could learn to hold a pencil and eventually draw and write. The NDIA planner advised that as learning to write relates to education and isn't a life goal, that it would be the responsibility of the school to provide this therapy. The family then rephrased their goal for their daughter as needing therapy to be able to do up shoelaces and buttons. The therapy was then approved and included in the NDIA plan.

The same type of therapy was required but because it was ultimately not couched in education terms, it was funded through the NDIS.

For younger children, in particular, families often want to access as much therapy as possible in the hope that therapy will lessen the longer-term impact of a disability, and thus therapy is often a key feature of a child's NDIA plan.

The Victorian Department of Education and Training's student support services have a varied role. In addition to performing assessments of students in relation to an potential or existing disability, and in some circumstances, providing therapeutic intervention, they provide advice and make recommendations to schools about the reasonable adjustments within student's education plan which may include including modifications to curriculum, teaching methods and classroom practice. Most student support services are employed by the Department. However, in some mainstream settings, school councils also directly employ their own allied health staff to work specifically at their school to meet the needs of students, which may include therapy.

While therapy is common in specialist school settings where allied health professionals are often on staff, consultations indicated that access to therapy in mainstream schools was often limited to one or two sessions a term and that school-based therapy tends to be primarily provided in group settings.

Often, the most effective delivery model is for therapeutic supports to be provided *in situ* (ie in schools, in homes), to allow children to remain in their natural settings (Bundy, 2012, p. 26) and, importantly, to ensure they do not leave school to attend appointments. But as much as students have a legal obligation to attend school fulltime and thus schools seek to limit their absences, practical issues arise when allowing multiple external therapists to come on to school grounds. Principals have duty of care and safety issues to consider. One example arose in consultations of 67 therapists wanting to access one classroom. Furthermore, if therapy is provided only at school, families are not part of the process and miss out on information about how to apply the therapeutic approaches that promote their child's learning and development.

The provision of therapy by departmental staff depends upon whether the therapy has an educational purpose, and whether the therapy could be considered a reasonable adjustment to support that student's learning. The challenge is finding out what the purpose of the therapy is, how it can be delivered in school, and if it is appropriate to do that considering legal obligations, the student's learning and the impact on other students. It is not easy to unbundle what is curriculum support, what is whole of life support and what is a school's role in the NDIS objective of social and economic participation.

Ideally, the NDIA, schools and families would have a shared understanding of the goal of the child's therapy and be able to integrate the therapy provided at school and at home. Discussion should focus on whole of life goals and how therapy supports these rather than narrow, bureaucratic considerations, as occurred in case study 2 above. This would require joint approaches to planning, monitoring and funding therapeutic interventions.

Currently, therapy in schools is dealt with on a case-by-case basis, with decisions about access ultimately being made by the principal. The Department has developed some guidelines for principals in the Barwon trial site to help them make decisions and think through practical arrangements in relation to allowing therapists to operate in schools. The guidelines outline the various considerations involved and states that whether a principal decides to grant or refuse access to NDIS-funded therapy in school during school hours, a clear rationale needs to be provided for the decision. The guidelines also strongly recommended that a meeting should take place between the school, the parents of the students and the NDIS-funded therapist to confirm the details of any arrangements that might take place (DEECD, 2014).

Transport

Specialist transport to and from school is within the scope of the NDIS. A student with disability is entitled to NDIS funds for transport assistance to and from school if they cannot use public transport without substantial difficulty due to their disability, and if this transport does not fall within the scope of parental responsibility under the student's NDIS plan. At the same time, the Department of Education and Training in

Victoria currently provides specialised school buses for children attending Specialist Schools. Children with disability attending mainstream schools can also apply to the Department of Education and Training for transport support (eg taxis) if they need it.

Transport services arguably need to be provided more equitably across mainstream and specialist settings. It is true that the NDIS cannot simply take over the funding for the specialised school buses because some students on these buses will have an NDIA plan that includes transport support and some will not. On the other hand, it does not seem to make sense from a financial or environmental point of view to use individualised transport for large numbers of students going to and from the same place every day. How the NDIA treats transport is yet to be determined; significant work is required in this area. Viable arrangements need to be established that do not disadvantage either group of students, while at the same time upholding the NDIS principles of supporting inclusive participation in the mainstream community.

This issue will not be resolved quickly. Very many stakeholders are involved in the transport of students beyond the NDIA, schools and families. They include Transport Safety Victoria, numerous bus service providers and drivers, local councils, the Victorian Taxi Directorate and the Department of Transport. In addition, policies about licences, regional area boundaries, eligibility and so on are varied and complex. The existing arrangements are continuing in trial sites until workable alternatives can be agreed.

Aligning planning and assessment processes

Differences in approach

All governments state that their policy objective is to streamline and reduce the administrative burden on families and individuals with disability to access services. The National Disability Strategy 2010 - 2020 requires governments to:

> *reduce barriers and simply access for people with disability to a high quality inclusive education system* (COAG, 2010, p. 11)

The Productivity Commission in proposing the establishment of the NDIS said that:

> *Collaboration between the NDIS and education departments should be based on agreed frameworks and boundaries. It would be odd if children receiving supports through the NDIS were subject to vastly different criteria for school based supports* (PC, 2011, p. 248).

The criteria to access the NDIS are different from those of the PSD because they are focused on different goals. The PSD is focussed on support for learning and on accommodating students with disability in schools on the same basis as other students, whereas the NDIS is focussed on providing a broader range of support to maximise independence and meet lifetime goals. Schools will always have students who are ineligible for services under the NDIS but who meet the eligibility

requirements for support under the PSD (eg migrants on temporary visas, students with a temporary disability). Similarly, schools will have students who are eligible for NDIS funded services but who do not need specific learning support at school (eg students with a physical disability who do not require reasonable adjustments for learning, other than that the school's built environment be physically accessible).

Nevertheless, opportunities for synergies are available for exploration. Consultations indicated that differences between the current PSD planning and assessment arrangements and the NDIS approach create potential complexities for families. These differences include:

- Types of information required for eligibility. The PSD requires formal assessments, including medical assessments by specified professionals for eligibility under some disability categories. NDIS participants do not necessarily have to provide diagnostic or medical information.
- Eligibility criteria. Access to the NDIS is based on an assessment of functional capacity. Access to the PSD is based on standardised assessment and cut off points do not necessarily relate to functional capacity. (An example was given of a child becoming ineligible for PSD if their IQ increased from 69 to 71, despite this change being unlikely to have a significant impact on their functional capacity).
- Planning and assessment focus. The focus for the PSD assessments is on how the disability impacts the child's education. The focus for NDIS assessments is on individual goals and how to achieve them.
- Review schedules. The PSD is formally reviewed in Year 6-7. A reappraisal can be submitted up to once per calendar year to establish if additional supports are required. The review schedule for the NDIA plan is individualised. It is usually reviewed annually unless a change in circumstances arises.
- Monitoring arrangements. Progress of students supported under the PSD is monitored via a Student Support Group. A Student Support Group is a cooperative partnership between the student's family, school representatives and professionals to ensure coordinated support for the student's educational needs. The Student Support Group reviews and evaluates the student's program once per term (four times per year), and at other times if requested by any member of the group. The NDIA plan is formally monitored to ensure strategies are achieving intended outcomes. Monitoring strategies include feedback from participants and other significant people in the participant's life about the quality and effectiveness of supports received under the plan and outcomes of the plan, monitoring expenditure of NDIS amounts, and feedback from Local Area Coordinators.

Opportunities for alignment in planning and assessment

In revising planning and assessment processes for the PSD, it is worth considering applying, where possible, the good practice processes employed by the NDIA. The NDIS is here to stay; all states and territories are looking at ways to align their

programs to the NDIS. Box 3 below highlights some good practice elements of NDIS planning and assessment processes. Adopting these approaches, wherever possible, would reflect the latest developments and thinking in applying flexible, strength-based processes while making planning and assessment easier to comprehend and respond to for families working between different funding streams.

One innovation being implemented under the NDIS is having the participant lead the planning processes. In accordance with the NDIS Act 2013, during the planning and assessment process people with disability are assumed, so far as is reasonable in the circumstances, to have capacity to determine their own best interests and make decisions that affect their own lives (NDIA, 2014f). The NDIA planning process begins with the participant completing a participant statement. This describes their goals and aspirations, what is important for them, the supports they have in place, and the activities they are undertaking. In this way, NDIA plans are individualised and strongly linked to goals. A copy of the participant statement for a child is provided at Attachment B.

Box 3: Good practice elements of NDIA planning and assessment processes

Provision of information

1. NDIA officers must draw on and reuse existing information. Only when this is inadequate can delegates request additional information that is reasonably necessary for the purposes of preparing a statement of participant supports.

2. Participants do not necessarily have to provide diagnostic or medical information. Relevant information can come from other sources such as Centrelink or existing providers.

3. If information is likely to take a long time to be provided, a plan can still be approved with a review date of when the further information becomes available.

Planning process

4. The conversation with the planner is led by the participant, based on their goals and aspirations. The focus is on strengths and abilities that can be maximised or enabled, rather than deficit focussed.

5. The participant's statement of goals and aspirations and environment and personal context is prepared by the participant, with or without support.

6. If a participant has existing supports, provided through other programs, the delegate should seek to minimise disruption to these supports.

Monitoring and review process

7. Plans are reviewed when circumstances change or at pre-appointed times. The review schedule will be different for each individual.

8. Plans are monitored to ensure they are meeting the intended outcomes, including through feedback from participants and Local Area Coordinators.

   Adapted from NDIS (2014) Operational Guidelines – Planning and Assessment and NDIS (2014) Operational Guidelines – Monitoring and review of a participants plan

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Challenges

An identified demand pressure in education that may have an impact on the implementation of the NDIS is the school system's capacity to meet the support needs of students with disabilities, including those who do not meet the eligibility guidelines of the PSD. A 2012 review by the Victorian Auditor General received reports from parents saying that they had been discouraged from enrolling in particular schools because the principal did not believe the child would be able to access PSD funding (VAG, 2012, p. x). This situation was also reported in consultations, and is a national concern. A recent survey by Children with Disabilities Australia found 68 per cent of parents believe their children are not receiving adequate support due to a lack of resources, and 84 per cent of school principals have diverted funds from other parts of school budgets because targeted resources are not available for students with disability (CDA, 2015). The Victorian Equal Opportunities and Human Rights Commission reported similar findings in their 2012 report, 'Held Back: the experiences of students with disabilities in Victorian schools'. In that report, parents identified lack of teacher training, teacher time and specialist supports as the biggest barriers to their child's participation. Educators identified lack of funding and resources.

That said, some stakeholders suggested that part of the reason people identify a lack of funding by schools is that many of the things schools do provide for students with a disability are bundled together, as part of a general service, and as such they are invisible to families and other stakeholders. In Barwon, for example, some families did not identify transport or attendant care as a need in their plans because the school had always met those needs. With the NDIS putting pressure back on mainstream systems to define what they will provide, schools will need to unbundle the specific supports they provide to students with disabilities, understand their dollar value, and clearly articulate this to families.

The lack of processes to link the two systems is also a problem. Stakeholders interviewed for this report observed that currently no direct linkages are available between NDIA planners and those who work closely with children in schools. Systemic connections between a child's developmental goals and their educational goals also seem to be absent, as evidenced in the Barwon NDIS trial site. While most families in the Victorian trial site appear to have discrete, separate plans, unless they are particularly well informed and proactive about sharing their plans, no formalised structure is available yet to facilitate that process. This is currently being investigated in the Barwon pilot.

The NDIA has a project underway looking at the feasibility of joint planning approaches that align with the NDIS principles requiring a 'no wrong door approach' and 'coordinated and integrated plans, supports, referrals and transitions' (COAG, 2013). The project, called the 'Shared Support Plan Project', is the result of a commitment by the NDIA to the Victorian Children Services Coordination Board to examine ways for the NDIS to work seamlessly with other supports. The aim is to

produce just one plan documenting an individual's needs and goals to be shared with all support services. The NDIA has surveyed families in the Barwon trial site about what they would like to see in the plan and how they would like the NDIS and school supports to work together. At July 2015, the next step is to interview school principals for their responses to the families' aspirations.

A critical time for families is in the lead up to the planning conversation with an NDIA planner. Families need to understand at this time what support schools will offer and if their plan includes educational strategies, how they would be implemented in the school. Goal setting for school age children would ideally be a joint process involving the NDIA planner, the school, the family and the student with disability. Consultations undertaken for this report found that a lack of understanding by planners about school programs has been a barrier to a more coordinated approach and sometimes wrong information is given to families within the NDIS trial sites about how the various school-based support programs work.

An important development in the Barwon trial site is the introduction of specialist planners (rather than generalists). The NDIA in Barwon has a children's directorate with specialised teams. This has reportedly helped with fostering understanding between the NDIA, school and other children's programs and services.

Whatever approach is taken, many families will need help from independent advocates or Local Area Coordinators (LACs) appointed by the NDIA to understand the interaction between the two systems. Local Area Coordinators help people with disability, including those who do not become participants, to be linked up in their community and assist to coordinate the supports they receive through the NDIS and the supports they receive outside the NDIS (NDIA, 2013b). Appointing LACs with specialist knowledge of the needs of and services for children and young people will also help promote understanding amongst families.

Streamlining processes raises questions about data exchange between the education system and the NDIS. On the one hand, processes could run more smoothly with less likelihood of people falling through the cracks if a systematic process was in place for transferring information about students between the two systems. On the other hand, legitimate privacy and confidentiality concerns arise about data exchange. For the Barwon NDIS trial, the NDIA now has permission to access students' PSD applications from the Department, with parental consent. This approach was initiated to reduce the paperwork burden on parents and schools.

Collaboration to improve learning

Many of the sticking points at the interface of the NDIS and schools could be improved with more effective collaborative approaches. In the trial sites, collaborative processes and structures are being set up to problem solve and cross-fertilise ideas. As the NDIS rolls out across all of Victoria (and Australia), it will be important to maintain and build on these structures to formalise collaborative arrangements.

However, agencies and stakeholders need more than a shared understanding of the formalised processes. Innovations are also needed in internal administrative structures, leadership approaches and cultural practices to foster opportunities for collaboration. In 2015, the Mitchell Institute published a research report, 'The shared work of learning: Lifting educational achievement through collaboration'. The project undertook detailed case studies in schools that are successfully using collaboration within and between their schools to lift student outcomes in the face of socio-economic disadvantage. The project found that by facilitating networks across a wide range of schools and communities to increase their access to information, opportunities and expertise that would otherwise be unavailable within the limits of an individual school, education can become more than the sum of its parts.

When the complexities of regular school obligations are over-laid with the additional organisations, professionals and relationships required to deliver the best learning opportunities for students with disability, the need for collaborative approaches becomes even more apparent. 'The shared work of learning' report outlined some key features of collaboration that could be applied to improve the NDIS-education interface, including a shared purpose focussed on student achievement and well-being; trust; administrative structures that allow for sharing time, funds, physical resources and knowledge; and equally prioritising student well-being and attainment.

Opportunities for synergies

This analysis has uncovered several opportunities to improve the connections between the NDIS and school support programs.

Information sharing

1. Ensure the Department of Education and Training's disability support program areas work with local NDIA managers and planners to facilitate understanding about how the existing programs work and how they could integrate better with the NDIS.

2. Consider the role of schools in providing information to families about the NDIS and NDIA to ensure students are accessing all the support they are entitled to and understand how their education goals can support their developmental goals and vice versa.

3. Work with the NDIA on protocols for data exchange with the aim of preventing duplication of processes across systems and reducing the paperwork burden for families.

Clarifying areas of responsibility

4. Work with the NDIA on clarifying responsibility for the 'grey areas' in a way that makes practical and financial sense and maximises benefits for students.

5. Wherever possible, work with schools and families to ensure administrative arrangements allow for therapeutic interventions to be implemented in both

family and school settings and can reinforce both education and developmental goals.

6. Work with the NDIA to maximise alignment between early childhood intervention services and services provided through schools including the PSD. Consider extending the key worker model applied in the early years into the first years of school.

7. Consider the lessons from Tasmania's School Transition project and Victoria's work on integrated transition pathways to ensure the PSD provides appropriate support during complex transition processes.

Aligning planning and assessment

8. Work towards having a joint education and NDIA plan for school-age children, which includes supports provided through the PSD that respond to both developmental and learning goals.

9. Introduce goals, outcomes and milestones into PSD processes, as well as regular opportunities for review, so educators and families can track progress and understand if the strategies are working well or need changing.

10. Ensure that both the education system and the NDIS apply similar principles to their planning and assessment processes, including strength based and participant-led approaches.

11. Move towards an assessment approach that considers functional impact of the disability, rather than severity of disability.

Capacity building

12. Recast the PSD as a program that promotes active participation of students with disability, rather than a response to anti-discrimination laws, and train teachers in skills for actively including students with disability.

13. Implement a communication strategy to ensure school principals and teachers understand the interface between the NDIS and schools and the importance of a coordinated approach.

14. Assist schools to separately identify and cost the supports they provide to students with disability as part of their general service and to clearly communicate to families about everything they offer.

15. Convince schools of the benefits for students with disability of collaborative approaches to education and skill principals and teachers on how to collaborate effectively with key organisations and individuals in the lives of students with a disability.

A word of caution

The NDIS is a long-awaited, strongly supported step-forward for children, young people and families. However, it will create systemic upheavals along with anxiety

about what its introduction will mean for individuals. The review of the PSD, while also welcome, will introduce another element of uncertainty. Particular care needs to be taken at this time to bring families and stakeholders along with any reforms. One of the people interviewed for this report provided the following word of caution:

> *Be careful not to unravel a system and replace it with something else that is also inadequate. What replaces the current program shouldn't just be another, different hurdle that may or may not give better outcomes for kids. Don't rush it.*

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Attachment A – Key informants

Appreciation for their time and expert insights go to:

Stephanie Gotlib, CEO, Children with Disability Australia

Stephanie Gunn, Manager, Community Development Authority, National Disability Insurance Agency (NDIA)

Georgina Lyell, Manager, NDIS Implementation Unit, Department of Education and Training, Victoria

Christine McClelland, Acting Director Children, Service Delivery Barwon, (NDIA)

Elizabeth McGarry, CEO, Association for Children with Disability Victoria

Vanessa Robinson, Assistant Director, Agreements and Practice Design, NDIA

Di Strachan, Assistant Director, Children, Service Delivery, Barwon, NDIA

Attachment B: NDIS Participant Statement: Child

What is the participant statement?

The 'Participant statement of goals and aspirations' is the description of how your child would like to live their life in the future. It also includes information about their life, what is important for them, the supports they have in place, and the activities they are undertaking. Your child's National Disability Insurance Agency planner will discuss this information with you during your child's planning and assessment conversation.

Your child's participant statement will become part of their NDIS plan. You can change or add to your child's participant statement over time.

Who should use this template?

You can use this template on behalf of a young child if your child is unable to prepare their own statement. A different template is available for an adult or older child/adolescent whose is able to prepare their own statement or prepare it with assistance.

Why should I use this template?

This template can help you think about what needs to be in your child's plan. If you have more information you would like to provide, you can attach extra pages or any documents you think may be relevant.

You do not have to use this form.

If you need some help to prepare your information contact us on 1800 800 110.

- ☐ If you are a TTY user — phone 1800 555 677 then ask for 1800 800 110.
- ☐ If you are a Speak and Listen (speech-to-speech relay) user — phone 1800 555 727 then ask for 1800 800 110.
- ☐ If you are an internet relay user — visit the National Relay Service website and ask for 1800 800 110.

Or you can send an email to enquiries@ndis.gov.au. For more information go to ndis.gov.au

Participant's name:

Your NDIS number number:

Name(s) of person(s) assisting with or preparing this statement on behalf of the participant

Your relationship to participant (e.g. parent, relative, carer, guardian, nominee)

First name:	Last name:

Daily life

Describe your child's day to day life

For example, what activities does your child participate in such as education and social activities? What are the things in your child's life that are working well for them, what are the things your child would like to change or improve about their life? What are the things that your child enjoys or is good at?

Living arrangements
Describe your child's current living arrangements

For example, who does your child usually live with, what sort of accommodation do they live in? Is there anything your child would change about their living arrangements to make things easier for them?

Relationships and supports
Your child's current relationships and supports from other people

For example, the family and friends your child sees regularly, the people who play an important role in your child's life and how they help your child.

Your current supports
Please complete the table below to indicate the amount of each type of support you are receiving at the moment. Include all the disability supports you currently get regardless of how they are funded, any mainstream or community supports you access as well as support provided by family and friends. Do not include supports you do not receive but would like to have. Your service provider may be able to help you.

Type of support	How much support do you and how often do you get it?	What service currently provides your support?
EXAMPLE: Assistance with daily personal activities	3 hours per week	Supports4U
Assistance with daily personal activities		
Day program or community access		
Transition program		
Participation in community, social and civic activities (like a sport or community activity)		
Assistance in shared or group living eg supported accommodation		
Case management or coordination		
Therapeutic support		
Behaviour support program		
Respite		

Other, specify		
Other, specify		

Please provide details of any aids, equipment or modifications which your child currently uses as a result of their disability, and how often they use them.

Type of aid, equipment, modification	How often is the aid, equipment or modification used? Eg daily, weekly, fortnightly, monthly or annually
Example Manual wheelchair	Daily

My child's goals

What are the things your child most wants to change or achieve in their life in the next few years? Write these down under the heading that best describes the area it relates to. You don't have to write down a goal under every heading – just the ones that are most important to your child:

- Education
- Social participation
- Independence
- Health and wellbeing

What my child wants to achieve in their plan (my child's plan objectives)

Thinking about your child's goals, what do they want to achieve during their plan? This could be the first step towards achieving a goal listed above. Only write down what they want them to achieve under the headings above where you have a goal.

How my child will achieve it

This could include the strategies that your child, you or your family or friends could undertake to help your child make their plan work for them.

What supports my child has to help them
This includes family and friends and other informal supports, mainstream and community supports and disability supports your child may have that can help them to implement their plan.

What supports your child might still need
Thinking about what supports your child already has, what other supports could help make your child's plan work such as particular community or mainstream services or disability supports?

My education related goal is:

What my child wants to achieve during this plan (my child's plan objectives)	How my child will achieve this objective? (strategies)	Supports my child has to help them achieve this objective (including informal supports, mainstream and community supports, and disability services)	What is stopping my child from achieving this objective?

My social participation related goal:

What my child wants to achieve during this plan (my child's plan objectives)	How my child will achieve this objective? (strategies)	Supports my child has to help them achieve this objective (including informal supports, mainstream and community supports, and disability services)	What is stopping my child from achieving this objective?

My independence related goal:

What my child wants to achieve during this plan (my child's plan objectives)	How my child will achieve this objective? (strategies)	Supports my child has to help them achieve this objective (including informal supports, mainstream and community supports, and disability services)	What is stopping my child from achieving this objective?

My living arrangement related goal:

What my child wants to achieve during this plan (my child's plan objectives)	How my child will achieve this objective? (strategies)	Supports my child has to help them achieve this objective (including informal supports, mainstream and community supports, and disability	What is stopping my child from achieving this objective?

		services)	

My health and well-being related goal:

What my child wants to achieve during this plan (my child's plan objectives)	How my child will achieve this objective? (strategies)	Supports my child has to help them achieve this objective (including informal supports, mainstream and community supports, and disability services)	What is stopping my child from achieving this objective?