



KU Children's Services Inclusion Development Fund Manager and Inclusion Agency Programs Response to the 2020 Review of the Disability Standards for Education 2005

September 2020

ABOUT KU

KU Children's Services (KU) is one of the most experienced and respected not for profit providers of high quality early childhood education and care services in Australia. 2020 marks 125 years since KU was founded and early childhood education in Australia began. It also marks 125 years of social impact and making a difference to the lives of children and families through our high quality early childhood education and care programs and our strong commitment to the inclusion of all children.

Today, KU operates more than 130 services in New South Wales, Queensland, Australian Capital Territory and Victoria including preschool, long day care, out of school hours care, corporate (work-based) childcare services, family and early intervention programs, supported playgroups, Allied Health services and childcare for newly arrived migrants, as well as managing a number of large Commonwealth and State funded programs to support the inclusion of children with additional needs within the early childhood sector.

KU's vision is *'Every young child experiences excellence in early education and care, inspiring learning for life'*. To achieve our vision, we nurture and grow children's learning; partner with families and communities; and value children as citizens who create, think, and do.

Our six values of Childhood; Integrity and Relationships; Leadership; Innovation; Sustainability; and Diversity and Inclusion, underpin our practices and approaches.

KU advocates for every child's right to be valued as an individual and as a contributing member of their family, educational setting, community, and society. KU works to ensure that every child has access to, and participates meaningfully in, high quality early childhood education that is aligned with the UN Convention on the Rights of the Child; the UN Declaration on the Rights of Indigenous Peoples; and the UN Convention on the Rights of Persons with Disabilities.

Providing children with an inclusive environment in every KU service, KU offers mainstream education and care places to children with disabilities. Children and their families are supported through rich developmentally appropriate programs to develop knowledge and skills to ensure they reach their full potential and have equal opportunity to access opportunities, as do all children in their community.

KU's Family Programs and Education Support Managers provide services supporting families with children with disabilities to access quality education and care services.

KU is a NDIS registered provider and has offered Allied Health supports to children for close to 10 years.

OVERVIEW OF KU INCLUSION DEVELOPMENT FUND MANAGER AND INCLUSION AGENCY PROGRAMS

KU is contracted by the Department of Education, Skills and Employment (DESE) to implement the Inclusion Support Program (ISP). The objectives of the ISP are:

- ▶ For eligible mainstream Early Childhood Education and Care (ECEC) services to improve their capacity and capability to provide quality inclusive practices for all children, to address access and participation barriers, and to support the inclusion of children with additional needs, with their typically developing peers.
- ▶ Provide parents or carers of children with additional needs with access to appropriate and inclusive ECEC services that assist those parents or carers to increase their activity including work, study and training.

The responses provided are observations and anecdotes provided by KU Inclusion Professionals (IPs) working within the Inclusion Support Program, based upon their knowledge and experience working closely with a wide range of ECEC services. The responses provided are based on the ACECQA questions, but have been adapted to represent the perspective of the IP role working with educators to build their capacity in supporting inclusion for all children, rather than working directly with children and families.

The IPs employed in the program have an extensive understanding of the *Disability Discrimination Act 1992 (DDA)* and support services building educator capacity to understand their legal responsibilities.

Under the Inclusion Support Program, KU is contracted to provide the:

- ▶ National Inclusion Development Fund Manager
- ▶ NSW/ACT Inclusion Agency as lead agency in partnership with Include Me (Big Fat Smile) and Gowrie NSW
- ▶ Queensland Inclusion Agency as lead agency in partnership with Cairns and District Child Care
- ▶ Victorian Inclusion Agency as a partner with Community Child Care Association Inc

KU IPs and our subcontractors have also provided extensive feedback on how children with a disability are accessing and participating in ECEC services through the Department of Education, Skills and Employment (DESE) national webinar on the *Disability Discrimination Act 1992 and the Disability Standards for Education 2005* held on 1 September 2020.

KU Inclusion Support Teams are pleased to provide the following submission of the Disability Standards for Education 2005 review for consideration with the following recommendations:

RECOMMENDATIONS

1. Development of user friendly, readily accessible information to be available on the DDA

To ensure that services have a thorough understanding of the DDA, KU would recommend that a resource is developed regarding the practical implications of the Act such as '*Disability Discrimination Act - what does this mean in practice in ECEC services?*'

This could include:

- ▶ Publications and short videos which outline the key elements of the Act for ECEC services
- ▶ Practical guidelines about what the DDA might look like for centres
- ▶ Funding sources or grant opportunities for services to apply for funding for projects, where major physical modifications may be required to support a child's inclusion

KU would recommend that these resources are made available to early childhood education and care services, training institutions and Allied Health professionals.

2. Every early childhood centre to have a documented Strategic Inclusion Plan

By having a documented Strategic Inclusion Plan (SIP) specific to their service, 'all' children will be included within an early childhood education and care program. The plan would be developed to ensure that first and foremost centres have a responsibility to inclusion for children and the uniqueness of each child is supported. Barriers to inclusion would be workshopped by centre teams so that a centre is ready to support every child that was enrolled in their service.

3. Reasonable adjustment

The Standards provide detail about an education provider's obligation to make 'reasonable adjustments' to assist a child with disability to participate in educational programs. KU would like to see further information and clarification regarding the term 'reasonable adjustment'. This term can be interpreted in many ways which is causing confusion for all stakeholders. families and service providers.

If you require any further information, please contact:

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QUESTION 1

Area: Admission and access

What has been your experience with children with disability accessing early childhood education and care?

The Inclusion Support Program (ISP) supports the inclusion of all children in Commonwealth funded early childhood programs nationally. Through the Inclusion Support Program, KU supports centre-based day care, family day care and outside school hours care services.

These ECEC services may be a 'stand-alone' service or be associated with a larger service provider and may be either 'for profit' or a 'not for profit service'.

Our Inclusion Professionals (IPs) are employed with a minimum of five years' early childhood professional experience working directly with children and families in ECE services. Most of the IP team are early childhood teachers and many KU teachers across all states have post graduate studies in 'Special Education'.

In considering the range of services supported, our IPs report that the majority of services demonstrate that they have an awareness of the importance of including all children within their programs, however KU is unable to ascertain the 'level of knowledge' that individual services have regarding their responsibilities under the actual Disability Discrimination Act. Through the Inclusion Program, our IPs can confirm that through service visits, IPs observe practices that do not align with the DDA and the Disability Standards for Education and reflect a general misunderstanding of inclusion. Some service providers believe that they have a right to refuse care or limit care (such as reduced number of hours of attendance) if additional support, particularly one to one support, is not available to assist with the inclusion of that child.

On occasion, IPs discover families may have tried to enrol their child in several early childhood education and care services before they have successfully enrolled in a centre that the IP is supporting. This is particularly the case for children with a physical disability. The reasons provided by services in not completing the enrolment are generally that it would be too costly to make the physical modifications required to their building.

This is particularly the case for older, smaller size services which may not have been purposely built or designed. Newer childcare services are designed with disability access, therefore building access is not a barrier to successful inclusion. IPs work with non-purpose-built services to reduce physical barriers to inclusion, for example, the provision of portable ramps available through the Specialist Equipment Library (SEL). OSHC services often experience challenges when they are delivering a service in a school setting where resources, available space, and collaboration is limited and restrictive. They do not have control around decision making for required adaptations.

For example, a two-storey childcare service in Queensland worked with their IP to determine how they could provide physical access for a child with limited mobility. The child had been attending the centre and was transitioning from the pre-Kindy playroom to the Kindy playroom. The service rearranged their centre playrooms so the child could access the kindy playroom from the bottom floor of the building.

Some educators lack confidence, skills, or knowledge in working with children with physical disabilities. This may manifest itself in a lack of understanding on how to setup environments that are designed for children with physical limitations. IPs have reported that this is particularly prevalent for children with visual impairment. With increased educator knowledge and experience, many children can be successfully included in the program with only small adjustments being required to the environment.

This may also include how the educators structure a playroom, or the number of children and educators in a room at any time. The role of the IP is important in providing support and developing the capacity of these educators to reflect on their practices.

In terms of educators' knowledge about the DDA, IPs have reported anecdotally that educators have commented that information has been provided about the National Law and the Regulations through their studies, however there has been either very little or no information provided about the DDA.

Through KU's work supporting inclusive practice, anecdotally our IPs report educators understand that they have a responsibility to include children with additional needs, and equally they have a responsibility not to discriminate against the enrolment of children with disabilities, however the challenge for many early education and care services is when there is high demand for supporting a large number of children with disabilities who are enrolling in an individual service.

Often high quality services develop a reputation within a community as an 'inclusive service', which results in a large number of children with additional needs enrolling in that service. Depending upon the needs of the individual children and the resources and skills that educators have available to them, it can be very challenging to support the needs of all children within the environment.

QUESTION 2

Area: Participation

Do you understand your obligations for making reasonable adjustments to ensure a child with disability can participate in early childhood education and care? This includes participating in courses and programs, the curriculum, and using facilities. Do you know how to consult with the parent/carer? If you have had experiences in making reasonable adjustments, please tell us about this.

IPs have reported that some educators do not understand the details of the Act, particularly what it means in terms of making 'reasonable adjustments' to support the successful inclusion of children.

From an IP perspective, IPs have witnessed that a service will make adjustments to the physical environment where a child may have mobility related challenges. Although this may be at a significant financial cost to that service, many services access funding or use their own funds to support the physical changes required, leading to the child's successful inclusion within the program.

Our IPs reported that the challenge for many educators which is more prevalent is when children have 'silent' disabilities such as autism. Although children with these disabilities may be enrolled in centres, some educators find it difficult to reflect on their own practices or strategies to support the successful inclusion of a child. It is particularly challenging for those children who display conditions which manifest in traits such as violent or aggressive behaviours. Educators who understand their responsibilities question what is meant by 'reasonable adjustment'.

The term 'reasonable adjustment' is also challenging when health professionals have their own understanding and expectation that 'reasonable adjustment' means the employment of an extra staff member to provide one to one support. Families are sometimes influenced by the medical practitioner who does not understand early childhood programs and will influence a family to insist the 'one to one' support is best for their child. Each environment is unique and the skills, knowledge and experience of the educators within the centre vary greatly and so the best solution for a child or family may not be to provide 'one to one' support within that centre environment. This approach does not guarantee inclusion and in many cases can result in segregation or exclusion.

Services where the greatest success has been achieved have been where 'reasonable adjustments' have been made to the environment. The service has taken time to plan and educators have a sound understanding of the negative impact exclusion may have on an individual child and their families, not just now, but long term. Other indicators of success would be strong leadership focusing teams on 'what can we do to be inclusive?' and accessing ISP support early and consistently, so that confidence and skills are constantly building, not just requesting as a reaction to the current situation.

QUESTION 3

Area: The National Quality Framework

How does the NQF support you to deliver inclusive education practices?

In terms of delivering inclusive education practices, the Inclusion Professional would like all centres to have a documented Strategic Inclusion Plan (SIP) developed specifically for their service noting barriers to inclusion and how these barriers can be addressed. Ideally the plan would be reviewed annually to ensure that all educators can reflect on their own skills, strengths, and knowledge to support children with disabilities.

With each service having a documented plan specific to their service, 'all' children can be included within an early childhood education program, and having a plan in place that is regularly reviewed puts the idea first and foremost that centres have a responsibility for inclusion for children and the uniqueness of each child is supported.

Including the requirement of all services having an active SIP would be valuable inclusion in the National Quality Framework. An increased value placed on SIP development and implementation by Assessment and Rating Officers would reinforce the importance and benefits of reflection and planning in relation to inclusion within early childhood education and care services.

QUESTION 4

Area: Compliance

Have you had any experience where centres that you have worked with have families enrolled and the family has suggested that their obligations were not being met?

The challenge in this area is that some families enrol in a centre with the understanding from a range of different sources that their child requires 'one to one' support to be successfully included within the program. If 'one to one' support is not provided, services have been challenged by the family, on the basis that by not employing an extra staff member for support, the service is not meeting their responsibilities under the Act.

Working with a diverse range of professionals supporting their child (such as General Practitioners and Paediatricians), families may receive mixed messages about the level of support required by their child to be included. Often the focus of inclusion has not been on the service making 'reasonable adjustments' to the program, but rather the insistence that their child requires 'one to one' support.

The aim of the ISP is to build the capacity and capability of the educators, which in many instances results in the service not requiring an additional educator. IPs support services in the development of practices, policies and procedures through professional discussion and reflection on the practices within each centre to support every child.

Families may not view the operational adjustments made by services as meeting their needs/obligations under the Act.

QUESTION 5

Area: Transition

Tell us about your experience assisting a child with disability to transition from early childhood education and care to school.

From an IP perspective, many educators and families do not know the processes of transitioning a child with a disability into the school system. The role of the IP in most instances is to make an early childhood service aware of the need to collaborate with the parent and the school, where appropriate, many months before the child will be attending school.

The process does vary from state to state, however the transition process does take an extensive period of time, particularly if physical modifications are required to the school environment. KU recognises that the transition to school process is different for every child and each school environment. With this in mind, IPs have commented that the transition process may be seen as a 'deficit' process/model where the school has concentrated on skills that a child does not have and what modifications are going to have to be made at the school, rather than the strengths of the child or the actual transition process itself.

IPs have commented that families are, at times, reluctant to contact the school as it is a new challenge to face with their child.

IPs have commented that there are still barriers to inclusion in some schools as the knowledge of early childhood centres has not been considered or taken into consideration when a child is transitioning to a school setting. The knowledge that educators have developed over time would be beneficial to supporting children who are transitioning to school.

QUESTION 6

Area: Aboriginal and Torres Strait Islander children with disability

Tell us about your experiences supporting Aboriginal and Torres Strait Islander children with disability. How did you help them to access and participate in education? How did you consult with them and their families and carers? Did you feel that you had a sufficient level of cultural competency to engage in a culturally appropriate manner?

The IP's role has been to build the capacity of all services, including supporting the services in their level of cultural competence. Anecdotally, IPs have reported that their role is to support the services to navigate pathways and provide support to all families. Some families are reluctant to seek support as there may be judgment within the community and this has been particularly demonstrated where a child may have a disability which is expressed in behavioural challenges. The role of the IP is to encourage services to develop collaborative partnerships with families and working together to support a child.

Challenges commented on by IPs in relation to barriers for the inclusion of Aboriginal and Torres Strait Islander children with disability have been related to cost of the centre program, the need to access information from the family in a timely manner (this particularly relates to the enrolment in Outside School Hours Care programs), the enrolment process may be considered lengthy or administration focussed, and a lack of trust in the educators within the program.

KU has had experience supporting centres with Sound Amplification Systems through the Deadly Ears program in Queensland. This has been a targeted program to support Aboriginal and Torres Strait islander children with permanent hearing impairment or otitis media. IPs worked directly with the centres and Allied Health professionals in the regions to support these families.

QUESTION 7

Area: Specific experiences

Access and participation in early childhood education and care for children with disability may be affected by other circumstances such as their or their parent or carer's age, sex, gender, gender identity, sexual orientation, intersex status, ethnic origin or race, and culturally and linguistically diverse background. If you have experience with children or parents and carers who were affected by other circumstances, tell us about how you helped their child to access and participate in early childhood education and care.

IPs have provided support to services by arranging opportunities to access bicultural workers and translators, as well as linking with local community agencies/supports, so that services can gain a better understanding of cultural and child rearing practices to support children with disabilities.

IPs have commented that there are more discussions around gender/gender identity in services, however, these discussions have not necessarily related to children with disabilities.

QUESTION 8

Area: COVID-19

Has COVID-19 impacted your experience with children with disability? What about during other major events, such as natural disasters?

Throughout COVID-19 and major natural events, IPs and the IDFM have maintained regular and ongoing contact with services via online platforms such as Zoom and Microsoft Teams. This form of communication has proven to be very successful for most services, except for those in remote communities with limited internet connection. KU will maintain an online presence along with centre visits as services are reopened to third parties.

For some services, attendances of children with a disability have been limited due to ongoing concerns for children's health. This is chiefly a concern for children with respiratory issues, children with compromised immunity, or for families using public transport to access children's services.

COVID-19 has had an impact in remote communities. There are challenges for families in accessing assessment for their child at most times due to the limited number of health services available, however the impact to Aboriginal and Torres Strait Islander communities during these times has exacerbated the situation. Many remote communities have been closed to external visitors for many months. For some of these communities, non-Indigenous staff members left the community due to concerns about the proposal of an extended lockdown of the community during COVID-19. This has resulted in the temporary closure of some ECEC services or reduced hours and days of operation.

Although service visits have been halted temporarily, KU's commitment throughout this time has been that a service will be visited if a child is at risk, if there is an emergency situation, or if there is a concern that a child may be excluded from a program.