



Association for
Children with a
Disability

Association for Children with Disability

Snapshot: Reasonable adjustments at school

October 2024

Background

Association for Children with Disability (ACD) is the leading advocacy service for children with disability and their families in Victoria. We are a not-for-profit organisation led by, and for, families of children with disability.

Our vision is an inclusive community where children with disability and their families thrive.

In August 2024, ACD held two online sessions with families of children with disability to hear about their experiences planning and implementing reasonable adjustments with their child's school.

These sessions gave families the opportunity to share their experiences, connect with other families and have their voices heard on issues that affect them.

Reasonable adjustments are the number one education issue families raise with ACD's Support Line. This snapshot highlights families' experiences of what's working well, where there are gaps, and opportunities to improve planning and implementing reasonable adjustments.

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Successfully planning and implementing reasonable adjustments

1. Leadership and inclusive attitudes

Families consistently identified school leadership that prioritised inclusion as a key ingredient in successfully planning and implementing reasonable adjustments.

When school leaders prioritised inclusion, families noticed the difference this made in resourcing decisions, proactive planning and inclusive attitudes of teachers. Families highlighted schools with a strong focus on inclusion shared the following features:

- Staff were supported to undertake additional and regular training to gain the right knowledge and skills
- Student safety and wellbeing were at the forefront of decisions
- Staff trialled non-standard approaches to find the right adjustment for individual students
- There was proactive planning and existing process such as regular Student Support Group meetings were followed
- Investment was made in the time and patience required to bring all staff on board including casual relief teachers, create consistency for the student, and trial new approaches if adjustments weren't working.

Conversely, when an inclusive mindset was missing from principals and assistant principals, families highlighted challenges including:

- Schools denying their responsibility to provide reasonable adjustments
- Schools and teachers justifying their refusal to provide adjustments due to capacity or resources
- Families having to convince staff their child required an adjustment
- Difficulties accessing Student Support Group meetings, Individual Education Plans and Behaviour Support Plans before things went wrong
- Teachers not familiarising themselves with student's plans and reasonable adjustments.

'The disability inclusion mindset comes right from the top down from the principal and the assistant principal.'

'[We had a] teacher who's very approachable so it's sort of just really easy to have those discussions because everybody's really on board.'

'Our school has told me students are only entitled to have an ILP if they are of Aboriginal heritage.'

'Inclusion is giving all children what they need to succeed!'

2. Student and family centred

Schools that championed student voice and valued the expertise of families were more likely to achieve better outcomes for students.

Families shared examples of schools putting their children's views at the centre of all decisions about reasonable adjustments, including ongoing involvement and evaluations about adjustments, and acting on student views. This ensured there was clear alignment between what the student needed and how adjustments were implemented.

Families also wanted their expertise to be valued and leveraged to support better outcomes for their children. While families may not always be experts in disability – though many do have this expertise – they have a wealth of knowledge and insights about their children that are vital to finding the right adjustments for their children to participate in school.

Families had success with their child's reasonable adjustments when they were empowered with information about their child's rights and school processes, and when they came to the table with solutions.

However, for some families, having to come to meetings prepared with reports and evidence of their child's needs, strategies recommended by private allied health therapists and a clear understanding of the issues and challenges in order to advocate for their child added an additional workload.

While some families were able to advocate on their own, many said having access to an advocate – such as ACD or their child's allied health professional – to attend meetings and contribute to planning reasonable adjustments made the process easier. For some, this was because schools were more likely to take the advice from therapists more seriously than advice from families.

'I found with my daughter's SSGs... they actually make it very inclusive of her. They direct it around her and listen to her opinions. If they can see she's getting upset or anxious about something they'll ask her permission to then discuss it with me. It really is about her, it's not about what the school wants, what I want, what they hope to get out of her. It's what her goals are, what she thinks she can achieve and what she needs. And that's worked... If they feel like they've been heard and they matter, it makes all the difference.'

'... allowing [my child's] voice to be heard and him to say some of the adjustments that he wanted has really helped support the planning about what needs to be occurring.'

'Having an advocate I would also agree has been really helpful. One of my child's team to come along and advocate.'

'I provided numerous reports from his specialists as to what strategies were recommended and what has worked in the past.'

'Being emotionally exhausted to advocate, feeling like I was banging my head against a brick wall.'

'Not enough engagement with parents in writing the plan.'

'Listen to parents, we do know our kids!'

3. Good communication

Families said prioritising transparent communication and good relationships made planning and implementing reasonable adjustments more successful. When communication was poor or relationships between the school and family deteriorated, it was more difficult for families to understand what was happening with their child and to overcome barriers.

Examples of positive communication that families shared included:

- Schools following through with what they said they would do
- Schools updating families between Student Support Group meetings if needed
- Clear information about supports and adjustments available to their child
- Strong internal communication between staff so everyone was on the same page

When strong communication wasn't prioritised, families spoke about feeling their concerns weren't taken seriously, that they began doubting their own experiences when not believed by staff, and that this resulted in poorer outcomes for their children when there were delays or challenges implementing adjustments, or the school speaking to families about concerns.

Many families raised concerns about casual relief teachers not being informed about their child's adjustments and learning plans. Workforce shortages and continued pressure on schools meant casual relief teachers were a common occurrence. This highlighted the importance of ensuring casual relief teachers have access to key information about students, and there is an expectation they are familiar with the details of a student's adjustments.

*'A team approach [made planning for reasonable adjustments easier].
Engage our allied health team with the school experience -
communicate regularly between school and home and allied health.
I've always tried to also understand things from a school perspective
and made my request for accommodations with this understanding.
Sometimes it's hard to advocate when you don't know what to try or
what might help. People always say the parent/carer always knows..
sometimes we are just as baffled and overwhelmed!'*

*'Personally having autism and mental health issues making it difficult
to communicate.'*

'Found it difficult to find any information on reasonable adjustments.'

*'I've found I have to be very specific and keeping following up with
the teacher.'*

*'Saying one thing regarding timing of aid in classroom to ensure
hours allocated when he is not at external therapy, and then
timetable comes out and 50 percent of aid hours is when he will not
be at school.'*

'Putting in lots of work to build relationships with school staff.'

*'When you have positive experience giving lots of praise to the
teacher/ school for effort.'*

'Principal refusing parent to speak to [made planning harder].'

4. A well-resourced, disability-confident workforce

When teachers and education support staff had the right training, resources and support, families noticed they were more likely to work collaboratively with the student, family and private allied health professionals.

Families highlighted the benefits of teachers having some knowledge of disability and enough time and support to plan for and implement adjustments. Understanding the purpose of an adjustment and creating clear goals for an adjustment meant teachers were more likely to understand the need to work within the student's capacity and to make efforts to adapt the environment rather than trying to change the student.

Examples of teachers putting their knowledge and skills into practice included:

- Making smaller adjustments class-wide so students with disability didn't feel singled out
- Changing adjustments when they weren't working, or not working anymore
- Shifting language to empower students when planning and implementing adjustments
- Planning and supporting other students in the classroom to gain the right skills to manage their own responses to a student with disability's challenging behaviours

However, when teachers weren't confident and supported to understand a student's disability needs, families said they were more likely to experience challenges when planning and implementing reasonable adjustments. Challenges included:

- Teachers feeling overwhelmed and being unwilling to implement adjustments
- Teachers seeing student behaviour as intentionally 'naughty'
- Staff saying implementing adjustments would be unfair to other students
- Staff not familiarising themselves with a student's plan and goals until something went wrong
- Teachers having unreasonable expectations of students to change their behaviour without the necessary adjustments due to insufficient disability knowledge.

These challenges often led to students being excluded from school and poor academic and wellbeing outcomes. These challenges highlighted the importance of addressing workforce gaps in disability knowledge to ensure teachers and education support staff are confident they have the skills to meet students' needs.

'Teachers are feeling perhaps overwhelmed by the thought of accommodations – different rules for different kids.'

'There's no support for teachers to try and practice adjustments – so if they don't work the 1st time they stop doing it.'

'Teacher prioritising understanding, implementing and communicating adjustments and processes with student and family [made implementing reasonable adjustments successful].'

'Lack of school funding to provide full accessibility [made implementing reasonable adjustments challenging].'

'Staff should realise that small adjustments can have a large impact for the better.'

5. Proactive planning

Proactive planning was identified as the number one ingredient in successful Student Support Group meetings and Individual Education Plans.

Schools on the front foot of ensuring students with disability had the right adjustments in place to prevent issues worked with families to:

- Schedule meetings before the school year so adjustments were in place from the start
- Ensure meeting agendas and draft plans were made available before discussion so everyone could contribute additional ideas
- Confirm meeting minutes, strategies and next steps in writing
- Set 'SMART' goals in Individual Education Plans, covering academic and wellbeing goals
- Ensure alignment of goals between private therapists and school.

Too many families shared experiences of challenges accessing Student Support Group meetings or ineffective Individual Education Plans. Families found inconsistencies in schools following required processes, such as difficulties accessing termly Student Support Group meetings. For many, these challenges were only overcome when families were empowered with information about their child's rights to advocate for processes to be followed, or they received support from an external agency or allied health professional to advocate on their child's behalf.

'Parents having to read up on the child's rights [made planning for reasonable adjustments harder].'

'One teacher emailed me a breakdown of everything we discussed and what the goals would be, asking if I was happy with it, before they submitted it! Amazing. Very rare.'

'SSG scheduled early on at the end of term 4 for the following year with the current and new teacher so the teacher would know exactly what to do on day one. Because otherwise, and normally in previous years I need to wait until week 3 or week 4 to have SSG meeting and by the time they, and my daughter already struggling for weeks and by the time they implement the plan, it's gonna be too late, end of term one and the issue escalated.'

'Having an agenda prior to the meeting so we're all prepared when we go in is very helpful.'

Families who participated

26 parents/carers attended the sessions. Their children were aged between 5 and 19 years old. Autism was the most represented primary diagnosis. Their children attended both mainstream and specialist schools. One fifth of attended identified as being from a culturally and linguistically diverse background. One attendee identified as Aboriginal and/or Torres Strait Islander. Most participants lives in metro Melbourne (62 per cent), while 20 per cent of participants lives in an urban fringe area, and 20 per cent in regional Victoria.