Parent Forum

26th March 2025

Welcome

Thoughts for the day…..Mentimeter

Erin Anear
Assistant Director - Inclusive Practice

Perry Rush
Director – Inclusive Teaching and Learning

Meredith Reynolds
Discipline Lead Inclusive Educators
Student Support Services

Student Support Services

What are Student Support Services?

- The DfE Student Support Services works with preschools and schools where there are children and young people who have particular educational support needs

Sometimes children, young people and families need a helping hand to achieve health, wellbeing and learning goals

Our services

- Aboriginal Education
- Behaviour Support Educators
- Inclusive Educators
- Speech Pathology
- Psychology
- Social Work
- Self –Regulation Service

Aboriginal Education

▶ Provides cultural leadership, advice and policy to close the gap in Aboriginal education and child development outcomes. The Aboriginal education staff provide a tailored approach and provide cultural and community knowledge that underpins their work and recommendations

Behaviour Support Educators

- Teachers who work with students, families and schools to address educational and wellbeing concerns by providing specialist support aimed at promoting and supporting positive behaviours

- They also work with the school leadership team to build school capacity and address and support students with additional behavioural needs

- They may provide professional support to teachers in program development and may work with schools to strengthen wellbeing processes and early intervention

Inclusive Educators and Teachers of the Deaf and Hard of Hearing

- Teachers who support schools and families to improve the learning and wellbeing outcomes for students with disabilities, learning difficulties or health support needs

- Assist staff to adjust and adapt the curriculum to support these students

- Provide training to school and preschools

- ToDHH collaborate with families to understand the impact of hearing loss, and to decide on goals and intervention pathways

Speech Pathology

- ▶ Support schools and families to optimise the learning and wellbeing outcomes for students with speech, language and communication needs

- ▶ Helps schools and preschools to implement strategies to strengthen the inclusion of students with oral language difficulties impacting on learning and literacy development

- ▶ Assist with collaborative planning, coaching and strengthening inclusive practices

- ▶ This service does not provide therapeutic intervention

Psychology

- Provide specialist support in the areas of student learning, behaviour and wellbeing
- Support schools and families to meet the needs of students to achieve academic success
- Provide professional development on a range of topics such as learning disorders, cognitive processes and wellbeing
- Assist schools to identify and implement interventions to support learning, wellbeing and engagement
- This service does not provide therapeutic intervention

Social Work

- Support schools to provide inclusive processes and practices that encourage the attendance, inclusion and engagement of all children

- Promote a positive school culture with strong family and community connections

- Work with families who are less engaged to build connection with schools. As children in care have the support of their DCP team, social work truancy rarely provide direct case work

- Close partnerships with DCP, DHS and Non-Government Intensive Family Support providers are being developed

We have several other services that schools may connect with, which include:

- Children in Care Service
- Flexible Services Response Team
- School Buy-In Service
- School Mental Health Service
- Social Work Incident Support Service

What are we aiming for?

We will provide a professional, consistent and equitable service to make sure that the best interest of the child is central to everything we do

We will achieve this by:
- Providing a service which is evidence-informed
- Ensuring services are *consistent* and *accessible* to all children regardless of location
- Promoting a culture that accommodates the additional needs of all children and supports them to achieve their potential
- Providing the most appropriate and effective services at the right time
- **Adopting a holistic approach focused on a child's physical, personal,** social, emotional and spiritual needs
- Streamlining our referral process to reduce duplication and adopting technologies to support this.
- Providing a culturally responsive service which affirms cultural, racial and linguistic identities.

STUDENT SUPPORT SERVICES
CATALOGUE OF SERVICES

Government of South Australia
Department for Education

How are students and children prioritised?

The catalogue defines our prioritisation approach in detail

- Aboriginal and Torres Strait Islanders and/or children in care are a state-wide priority

- Students and children with the highest and most complex needs

- Each discipline prioritises based on complexity and service provider's capacity

Nicolle Rerich
Manager - Disability Policy & Legislation

Non-education Service Provider Access

- A parent/carer's request to have an external provider deliver therapeutic support services in schools is not automatically approved
  - Decision belongs with the Principal
- Multiple factors for Principal to consider:
  - Space
  - Line of sight
  - Impact on student's education time
  - Impact on other students
- Each request is considered on a case-by case basis

Communication Responsibilities

- From the point of requesting access to ending services, the family/carer is the main channel of communication between the school and the external provider

- This includes:
  - Letting the provider know of the leader's decision to allow access
  - Informing the provider as soon as possible if your child is absent on the day a provider is scheduled
  - Informing the provider if other activities are scheduled, for example, excursions or camps
  - Informing the school if there is a change in provider or any breaks in or conclusion of services

Health Support Agreements VS Health Care Plans

Health Support Agreements	Health Care Plans
Education staff and parents/guardian (and student if age appropriate) work together to understand how medical needs are delivered in an education setting – with respect to reasonable adjustments	Completed by treating health professionals to cater for individual care needs
Identify needs and how to minimise risks for students • When, what, how and why for agreements/plans • Inclusive approach • confidentiality requirements	Consideration as part of Health Support Agreement process
Holistic view of student health support • physical health (includes medication) • personal care • mental and emotional	Health condition focus: • medication agreements • individual first aid • non-specific and specific care plans
Review date is not expiry date	Review date is not expiry date
Health support planning for children and students in education and care settings (education.sa.gov.au)	Health care plans for individual care – information for health professionals (education.sa.gov.au)

Specific Health Care Plans

- Anaphylaxis and severe allergies
- Asthma
- Cancer
- Continence
- Cystic fibrosis
- Diabetes

- Oral eating and drinking
- Osteogenesis imperfecta
- Seizures and epilepsy
- Spina bifida and hydrocephalus
- Transfer and positioning
- Non-specific

Transfer and Positioning

- The information available regarding the transfer and positioning of children and students, including the care plan, is currently being reviewed

- The objective of the review is to ensure that the safety and wellbeing of the student and staff is considered in the planning and that we are demonstrating best practice

- A wide range of stakeholders are involved in the review ie health and allied health professionals, policy people, parent and educators

- As a result of this work we expect a new care plan will be developed and new guidance materials will be available for staff; particularly around manual handling practices

Morning Tea Break

20mins

Hermione Farmer
Senior Advisor – Inclusive Practice (SIES)

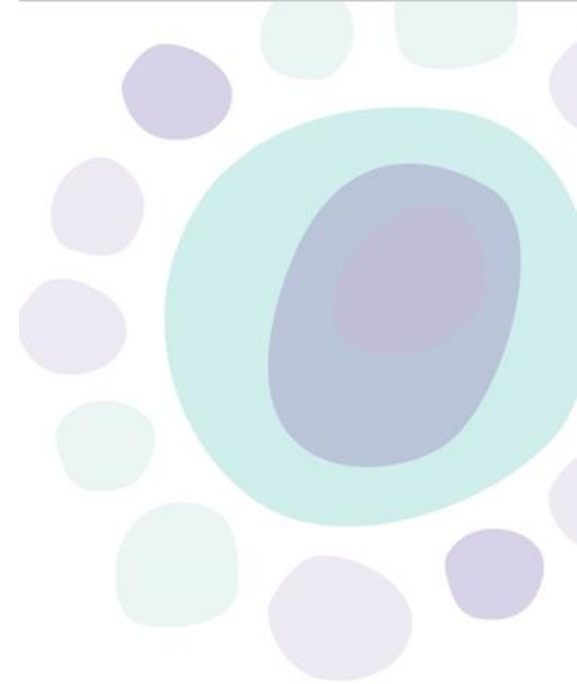# One Plan / Personalised Learning Update

Parent Forum 26 March 2025

Presented by Hermione Farmer

CO-DESIGN OF PERSONALISED LEARNING SOLUTION

Term 1 2023

Internal Research

Research to understand the needs of internal stakeholders.

Term 2 2023

Site Research

Research to understand the pain points for site staff, parents and carers and children and young people.

Term 3 2023

Idea Generation

Generate ideas to address the key problems identified from our research in order to create an improved digital solution.

Term 1 2024

Prototyping

Test the ideas generated and seek feedback from site staff, parents and carers and children and young people.

To the end of 2024

Recommendations

Development of business requirements for a digital solution, as well as the guidance and capability building to support.

Business Improvement

Support & Inclusion

Thank you

TESTING

Current state

Links

Practice guidance: Personalised Learning.pdf
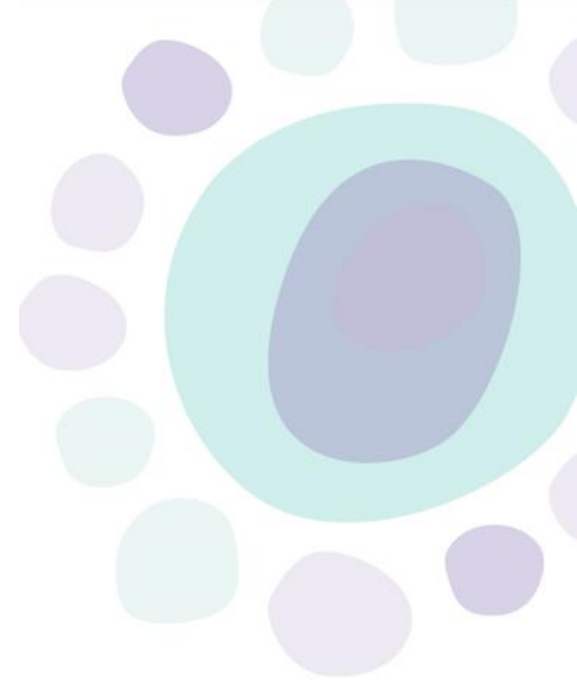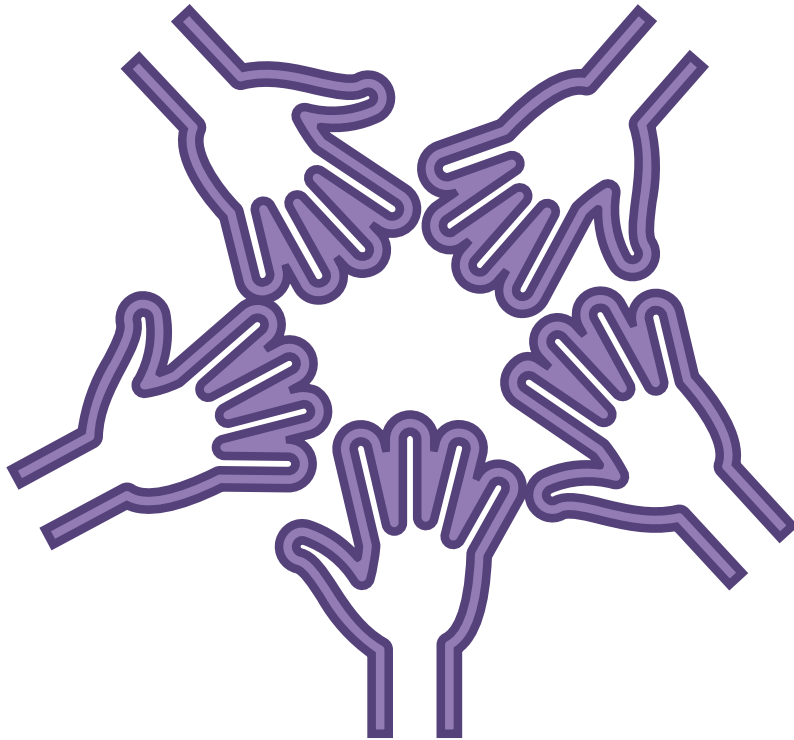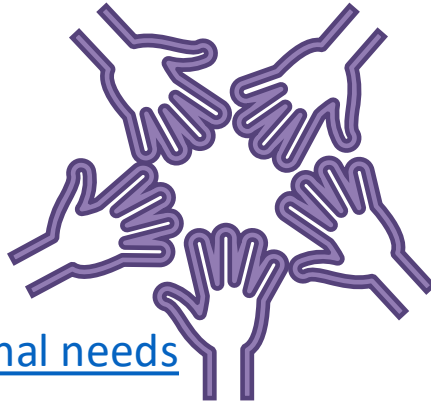
Online Practice guidance for learners with additional needs
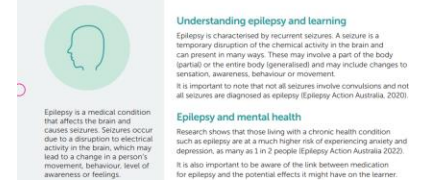
- acquired brain injury (ABI) (PDF 91 KB)
- attention deficit hyperactivity disorder (ADHD) (PDF 100 KB)
- auditory processing disorder (ADP) (PDF 93 KB)
- autism (PDF 93 KB)
- autism and attention deficit hyperactivity disorder (ADHD) (PDF 93 KB)
- autism and girls (PDF 92 KB)
- autism and complex communication needs (PDF 97 KB)
- autism and intellectual disability (PDF 98 KB)
- cerebral palsy (PDF 99 KB)
- cortical cerebral vision impairment (PDF 97 KB)
- complex communications needs (PDF 91 KB)
- deaf and hard of hearing learners (PDF 97 KB)
- dyslexia (PDF 155 KB)
- epilepsy and learning (PDF 90 KB)
- intellectual disability (PDF 148 KB)
- school refusal (PDF 90 KB)
- siblings of children and students with disability (PDF 97 KB)
- vision impairment (PDF 94 KB)
- visual supports (PDF 73 KB) .

ABOUT EPILEPSY AND LEARNING

Understanding epilepsy and learning

Epilepsy is characterised by recurrent seizures. A seizure is a temporary disruption of the chemical activity in the brain and can present in many ways. These may involve a part of the body (partial) or the entire body (generalised) and may include changes to sensation, awareness, behaviour or movement.

It is important to note that not all seizures involve convulsions and not all seizures are diagnosed as epilepsy (Epilepsy Action Australia, 2020).

Epilepsy and mental health

Research shows that those living with a chronic health condition such as epilepsy are at a much higher risk of experiencing anxiety and depression, as many as 1 in 2 people (Epilepsy Action Australia 2022).

It is also important to be aware of the link between medication for epilepsy and the potential effects it might have on the learner.

Epilepsy is a medical condition that affects the brain and causes seizures. Seizures occur due to a disruption to electrical activity in the brain, which may lead to a change in a person's movement, behaviour, level of awareness or feelings.

EPILEPSY AND LEARNING ADJUSTMENTS

TRAINING, SEIZURE MANAGEMENT AND MEDICATION

Staff must be trained to support learners who are diagnosed with seizures or epilepsy. Training and support must be individualised to each learner and the specific requirements documented in their care plan and support agreements.

Learners must have a seizure management plan completed by a treating health professional, or use the standard seizure first aid procedures and flow chart until a management plan has been supplied.

If intranasal midazolam (INM) is part of the learner's management plan, this will need to be documented by a treating health professional in an Emergency Management Medication Plan. Since INM is a scheduled medication, it also requires specific management such as training of staff in the administration of INM. It also requires an authorisation to administer a controlled medicine form and the use of a controlled and restricted medicines register.

EXAMPLES OF ADJUSTMENTS

General adjustments
- Know your learner and be aware of their triggers and early warning signs that a seizure is about to occur.
- Encourage signals (where possible) so learners can alert teachers and peers to discomfort.
- Identify and take steps to reduce common triggers in the school environment.
- After a seizure, the learner may need a little extra time before they begin learning again.
- The speech and language of the learner may be delayed following a seizure. Notify families or carers of any noticeable changes.

Environmental adjustments
- Reduce background noises and distractions to help the learner maintain attention.
- Make sure there's a route to a safe space the learner can move to if they feel a seizure is about to occur.
- Set up an alternate, simple, low stimulus area that allows the learner to still feel included but with reduced stimulus.
- Provide access to headphones, white noise, low light and soft fall if necessary.

HOW TO DEVELOP AND DELIVER PERSONALISED LEARNING

Consult and collaborate

Consult or collaborate, or 'know your learner' by:
- building knowledge of the learner's background
- engaging the learner
- engaging with families, carers or guardians
- reviewing and analysing documents such as plans, education assessment data and professional assessments.

Assess and identify learner needs

Assess and identify learner needs, or 'design for the learner' by:
- considering where the learner is now
- considering where the learner could be
- identifying learning priorities
- aligning the learning priorities to the curriculum
- identifying learning aims and goals
- developing learning goals.

Implement personalised adjustments and supports

Provide support through:
- curriculum adjustments
- instructional adjustments
- environmental adjustments.

Monitor and review

Monitor and review learning by:
- checking through assessments in school and preschool
- being aware of cultural considerations
- making assessments accessible for students with disability
- updating SMARTAR goals
- giving effective feedback to the learners
- having formal reviews with learners and carers
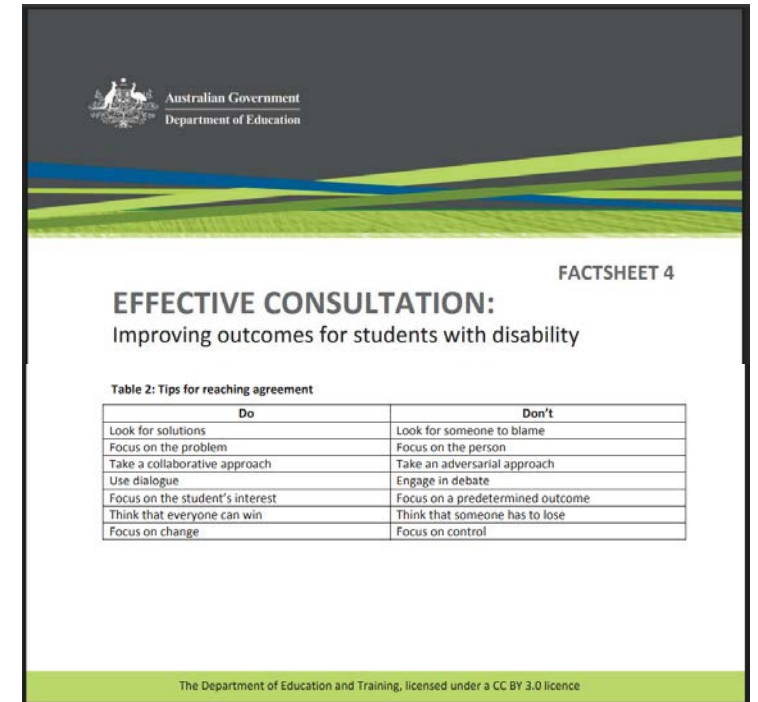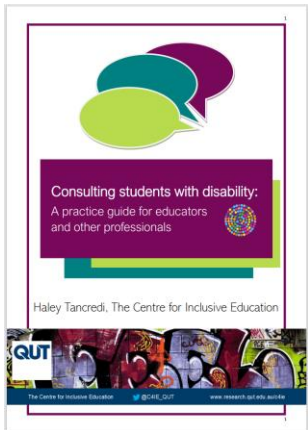- updating the plan at the end of the school year.

Links
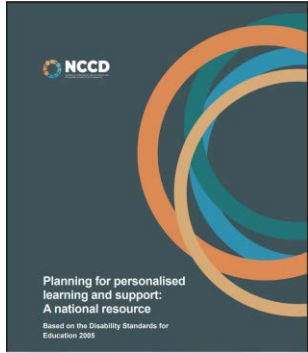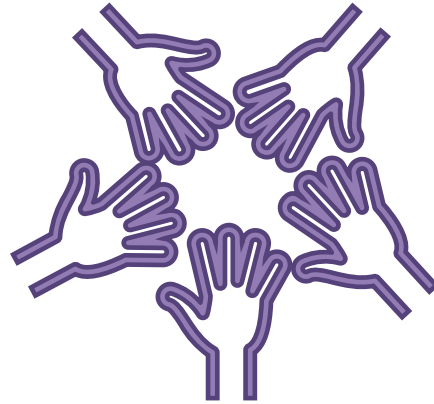
Planning for personalised learning and support: A national resource.pdf

Disability Standards for Education Fact Sheet 4 Effective Consultation.pdf

Consulting students with disability. pdf

Contact

If you are interested in the work developing the new personalised learning platform email:
education.personalisedlearning@sa.gov.au

For information to support personalised learning using One Plan platforms email:
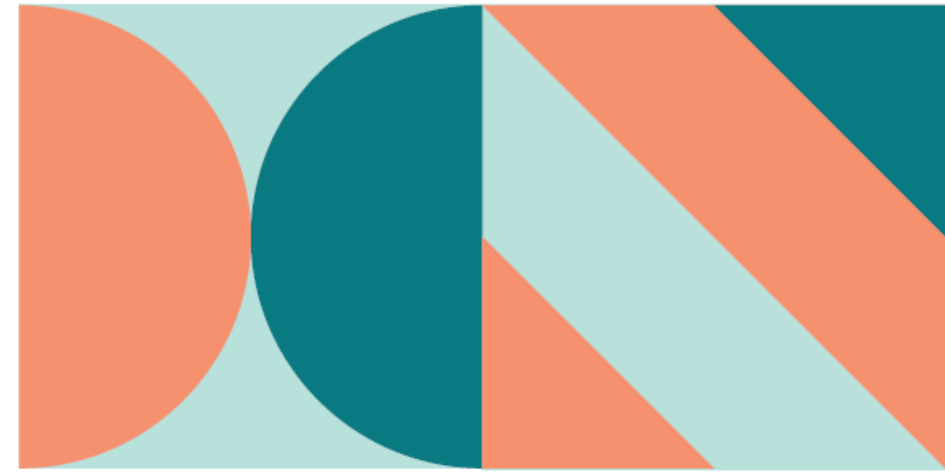Education.OnePlan@sa.gov.au

Thank you

Clare Kelly
Senior Advisor, Behaviour
Engagement and Wellbeing

Understanding the revised suspension, exclusion and expulsion of students procedure

Clare Kelly

Senior Advisor Behaviour

26 March 2025

SIES PARENT FORUMS

Suspension, exclusion and expulsion of students procedure

Government of South Australia
Department for Education

Session overview

- Background to the revised procedure

- Legislation and guiding principles

- Take-home, suspension, exclusion and expulsion

- Reasons for their use and factors that must be considered

- Internal placement

- Complaints and appeals

- Reconnection meetings

- Further information and support

Background to the revised procedure
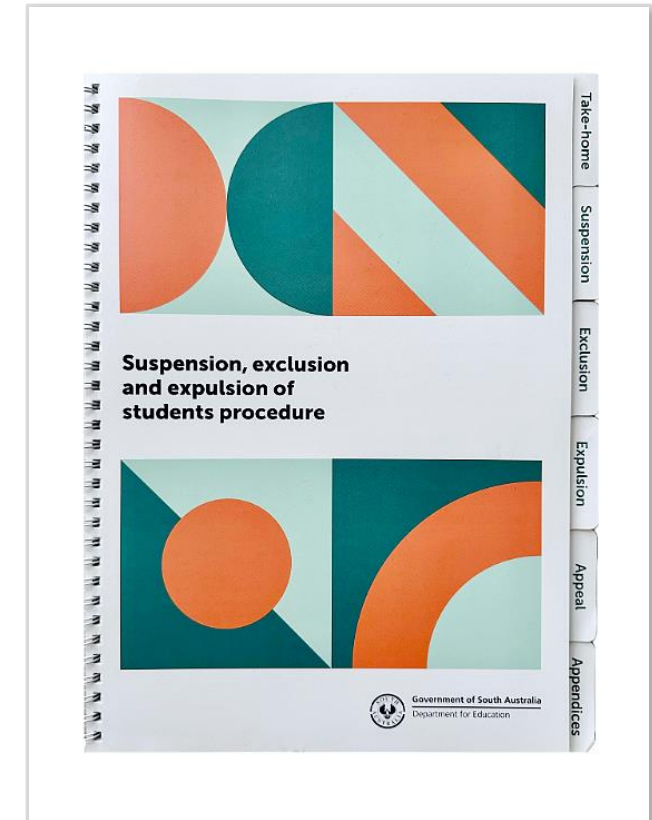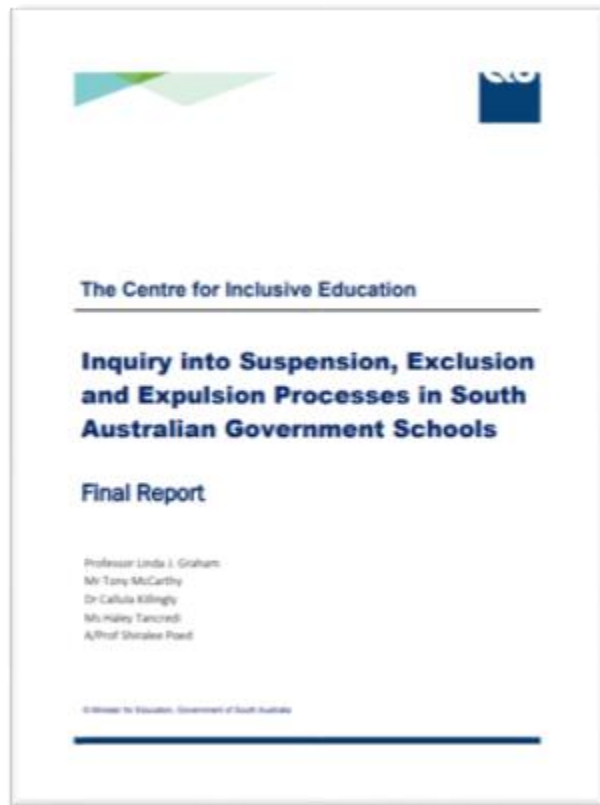
The legislative framework

Suspensions, exclusions and expulsions are outlined in the:

- Education and Children's Services Act 2019
- Education and Children's Services Regulations 2020.

Guiding principles

The SEE procedure is based on the following guiding principles, including that suspensions and exclusions:

- are most effective when used as part of school-wide approaches to support safe and positive behaviour
- are not designed to punish
- should only be used as a last resort
- should include efforts to support the safe inclusion of students who are at higher risk of exclusionary responses
- should be done in a way that is procedurally fair
- should have a focus on restoring relationships and repairing harm.

Take-home
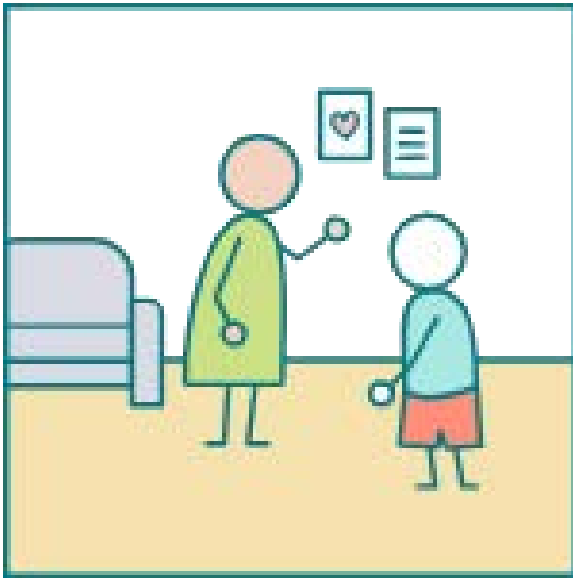
A behaviour emergency is when:

- a student is displaying behaviour of concern that is unsafe (physically or emotionally unsafe), severe and prolonged
- efforts to intervene and provide support haven't worked
- the student remains too angry, upset or distressed to safely remain at school.

Suspension

- Short-term response to behaviour that is unsafe or gets in the way of teaching and learning
- Between 1 to 5 school days
- Absence from school
- Time used to assess and plan required supports
- Mandatory check in for 4 or 5 day suspensions
- Education Director approval required if suspended for more than 15 school days or on 4 separate occasions (in 1 year)
- They do not have to escalate

Exclusion

- A longer-term response to serious student behaviour
- Usually, from 4 to 10 weeks
- Time used to assess, plan and provide the required supports
- Directions Conference is held to decide
- Requires an alternative learning program for students 16 years or younger
- Weekly monitoring and mid-exclusion review

The reasons the law says a student can be suspended, excluded or expelled

The student has:

- been violent or threatened violence (suspension, exclusion, expulsion)

- acted in a way that threatens the safety or wellbeing of a student, member of staff or other person associated with the school, for example, bullying, sexual harassment, verbal abuse, racial abuse (suspension, exclusion, expulsion)

- acted illegally (suspension, exclusion, expulsion)

- interfered with the ability of a teacher to teach or of a student to learn (suspension, exclusion, expulsion)

- acted in a way that threatens the good order of the school by repeatedly breaking or not following school rules about behaviour (suspension and exclusion only)

- repeatedly and deliberately not paid attention or shown interest in their schoolwork (suspension only)

Factors that must be considered

- The severity and frequency of the behaviour

- The student's past behaviour and response to previous consequences

- Any adjustments made to support the student

- If the student is at higher risk of exclusionary responses and the extra supports needed for safe inclusion

- If the decision is likely to prevent future behaviours of concern

- The safety of the decision for the student

- If the intended outcome can be achieved another way

Factors that must be considered

3 new factors have been added in the revised procedure:

- ✓ the student's age, stage of development and level of understanding
- ✓ whether any personalised plans are being actively implemented and monitored
- ✓ if the response will impact the student's ability to complete and achieve their academic pathway.
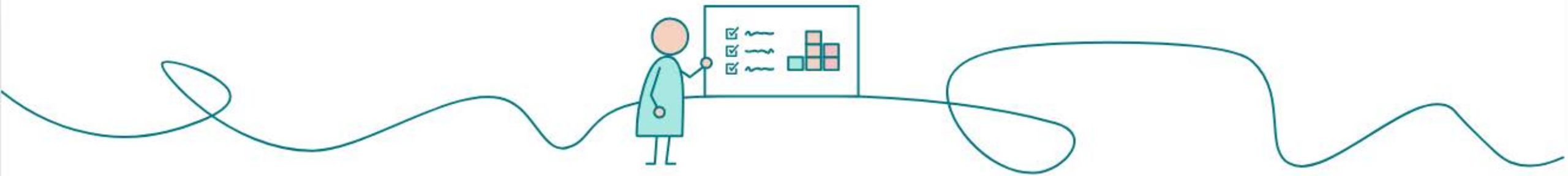
Out of school hours and off school grounds

Students can be suspended, excluded or expelled for behaviour that occurs out of school hours and off school grounds when there is a reasonable connection between the behaviour and the school community.

Internal placement

- 'Internal placement' replaces what used to be called 'internal suspension' or 'in school suspension'

- A maximum of 5 consecutive school days on any 1 occasion

- Can be used as an alternative to suspension

- Used when the student is engaging in behaviours of concern and behaviour support can be safely provided at school because the school has the resources to do so

- Provision of a fulltime learning program - outside of their usual classes and timetable

- Schools must communicate reasons, length (no more than 5 days), details, supervision arrangements and plan for reconnection

Complaints and appeals

No appeal for take-home, suspension and internal placement but you can make a complaint to the Department for Education's Customer Feedback Unit.

Exclusion and expulsion can be appealed on the basis of:

- error of fact (for example, the student did not behave as alleged)
- error of process (for example, the school did not follow the steps in the procedure)
- inappropriate length or conditions (for example, the alternative learning program does not provide enough learning supports during the exclusion)

Reconnection meetings

- Help the student to understand the behaviour expectations
- Support the student to share their perspective and contribute to plans
- Create plans to support the student's safe and positive behaviour in the future or update existing plans
- Repair harm and restore relationships
- You can bring an advocate and support person

Further information and support

- www.education.sa.gov.au

- Search for 'behaviour support', 'take-home', 'suspension', 'exclusion', 'expulsion', 'restorative practices' or 'complaints'

- Email questions about the 'suspension, exclusion and expulsion of students procedure' to Education.SEE@sa.gov.au

- Complaints that cannot be resolved at the school level:
  - submit an online complaint via the department's website
  - call 1800 677 435

**Please submit your questions about
take-homes, suspensions, exclusions and
expulsions in the lunch break for the Q&A panel**

Government
of South Australia

Department for Education

Public education **is for**

every child and

young person

in South Australia.

Tammy Rosling
Project Lead – Autism Inclusion Initiative

Autism Inclusion Teacher (AIT)

Year AIT started in the role

■ 2023   ■ 2024   ■ 2025

Role of the Autism Inclusion Teacher (AIT)

Autism Acceptance Day

the RAINBOW BRAIN

Written by Sandhya Menon

Illustrated by Kushla Ross

Deep down in the Brain Forest,
I found a tree that looks like mine.
It wasn't like any brain I'd seen.
It had colours that swirled to combine.

This tree was a sight to behold –
with beautiful shades of blue.
But all mixed in with that,
there was some fiery red, too.

This swirling, whirling tree
is called Autism and ADHD.
Those are names for what it's like
to have a brain like me!

BLUE & RED

Blue and red.
Peanut butter and jam.
Butter and bread.
Mint and lamb.

BUTTER
250 GMS

&

PEANUT BUTTER crunchy

&

JAM

Will they work together?
Amazingly they just do!
Can we know them as one,
rather than as two?

MINT

&

PURPLE!

We could be wonderful together and come to know this dance

of how two seemingly opposing ideas can work perfectly, given the chance.

I like to know what's coming up;
I feel great when things are the same.
I plan all the smallest details
to keep stress out of my brain.

ADHD

I like life to be interesting and new!
I feel bored when things are the same.
Details can matter or get tossed aside –
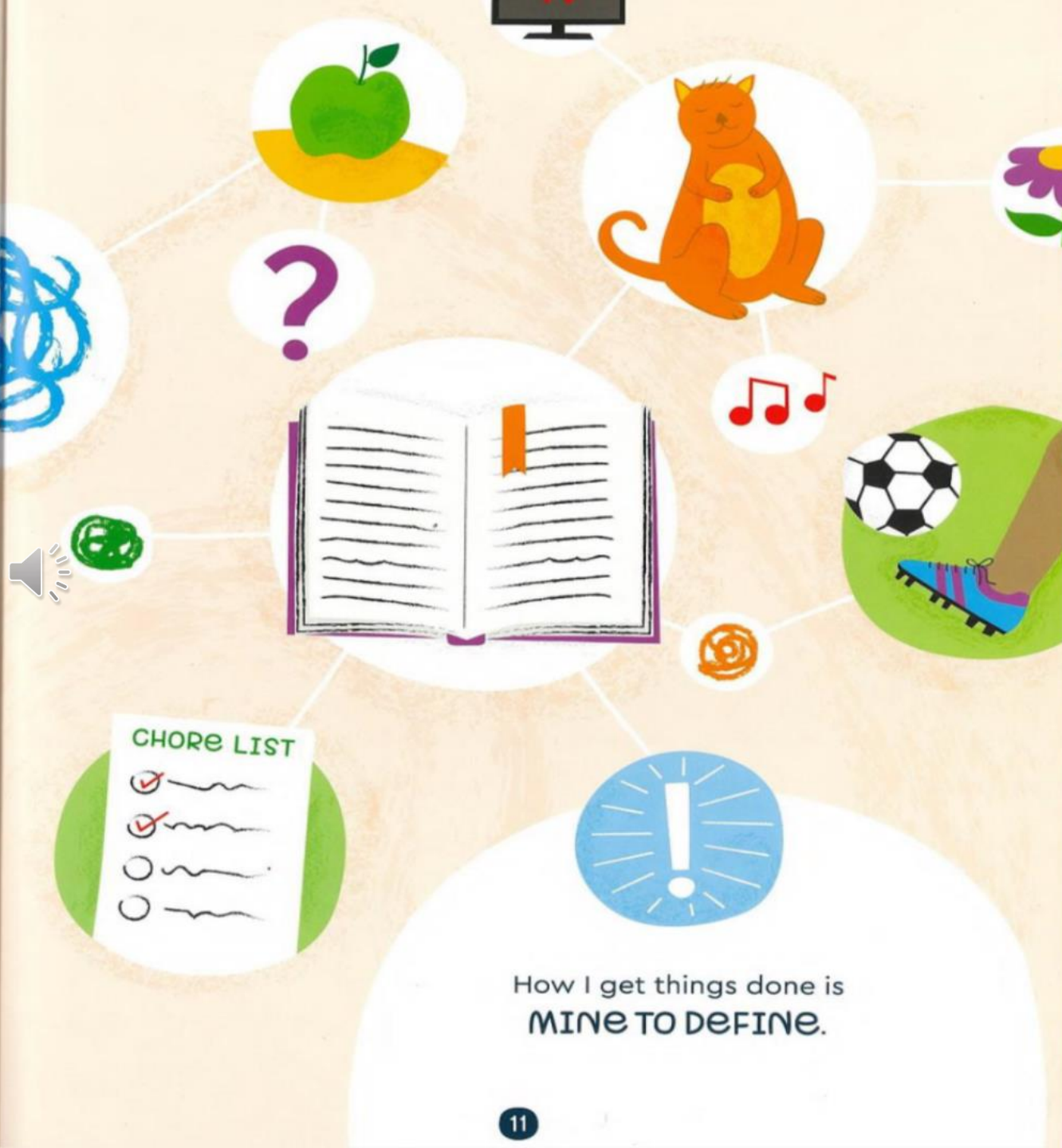doing what I feel is my aim.

ADHD & AUTISM

I can deal with change,
unless a surprise you spring.
Given choice, control and time,
I'm happy to do new things!

ADHD

My brain likes to go fast ...
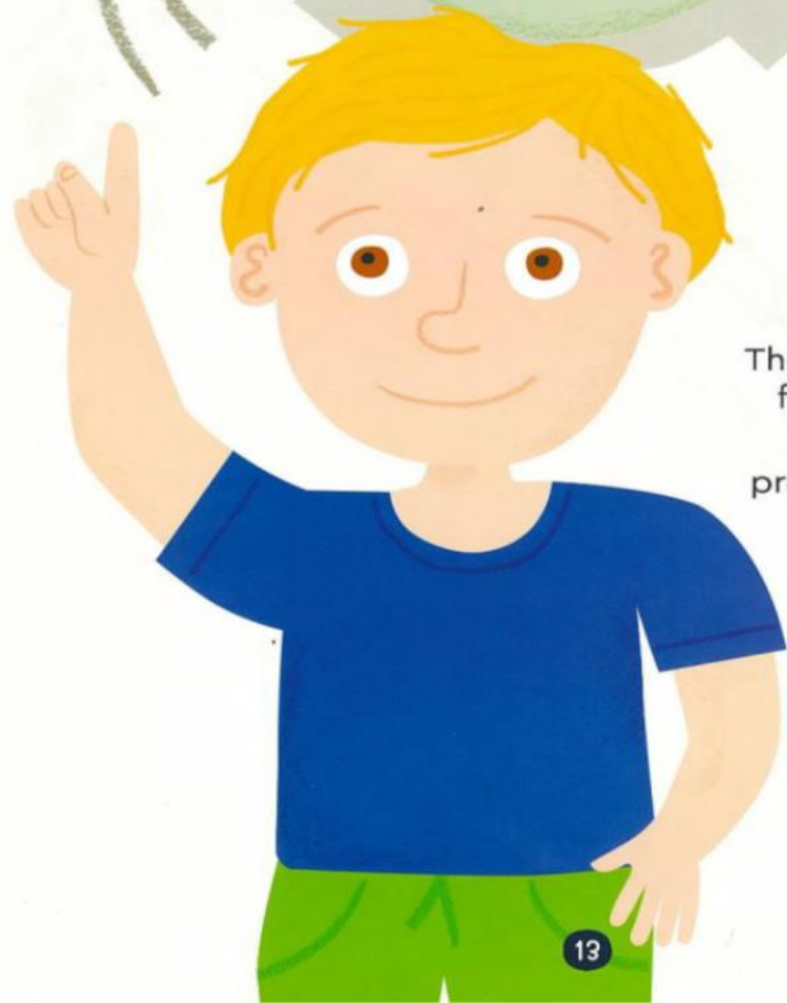and do lots at the same time.
A little of this, a bit of that –

HOMEWORK

SALE

CHORE LIST

How I get things done is
MINE TO DEFINE.

AUTISM

TO DO LIST

My brain needs to go slow;
it takes its time to think.

12

There are so many
facts gathered
to collect,
process and sync.

13

I learn best with preferred topics;
my interest determines my speed.

When it's **BORRRING** though,
I multi-task to meet my needs.

14

15

My brain does not filter,
taking in most sights and sounds.
Being in nature is lovely, but
I need help in busy surrounds.

Turn down the lights

Noise cancelling headphones

AUTISM

QUIET PLAY AREA

Ask to meet in a quieter space

ADHD

My brain thinks everything's important –
I pay attention to it all!

It's easy to forget what is said;
I use strategies to help me recall.

One instruction at a time

Sit closer to the teacher

Make it visual –
draw or write it down

YES!

We engage with the world so deeply.
Our highs are high; our lows are low.
However I am feeling, I allow myself –
I've learnt to go with the flow.

NOT GOOD

URGH!

Now, these colours that are swirling
work together, don't you see?

Want to know another little secret?
There may be more colours in your tree!

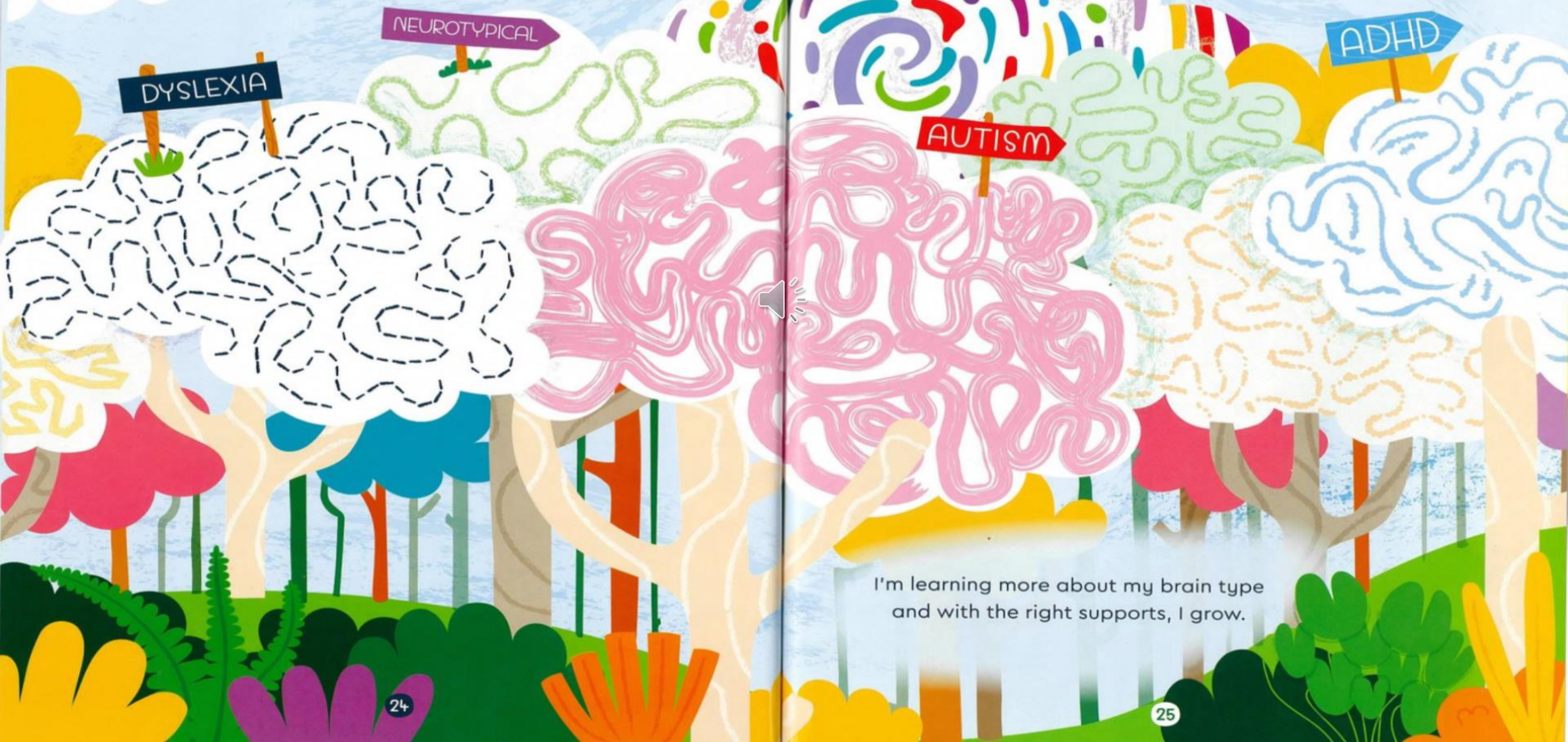⚠️ TURN *the* PAGE ➤

ARFID

INTELLECTUAL DISABILITY

GIFTEDNESS

ANXIETY

PDA

OCD

TOURETTE'S

DYS LEXIA/ CALCULIA/ GRAPHIA/ PRAXIA

*This is not even all of them!

22

23

There are so many different trees,
and a few of them are rainbow!

DYSLEXIA

NEUROTYPICAL

ADHD

AUTISM

I'm learning more about my brain type
and with the right supports, I grow.

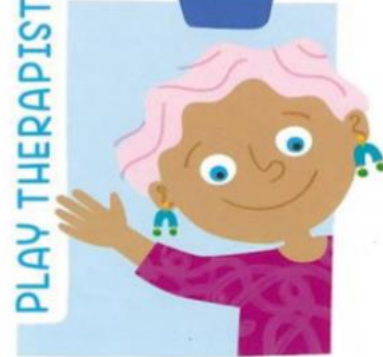Here are some people that help nurture rainbow brains.

OCCUPATIONAL THERAPIST

PARENTS

ANIMAL THERAPIST

COUNSELLOR

PLAY THERAPIST

$4 + 5 = 9$

MATHS

DICTIONARY

the BRAIN FOREST

TEACHER

PSYCHOLOGIST

SUPPORT WORKER
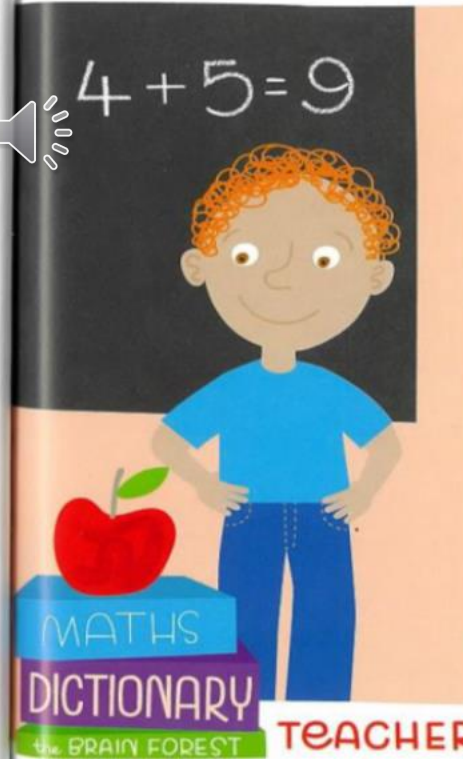
SPEECH PATHOLOGIST

S SSS S

ART THERAPIST

Here are some things that can hurt rainbow brains.

Loud noises

Bright lights

Too many things to concentrate on

Having to sit still for a long time

Sudden changes

Rejection

Feeling misunderstood

Ignoring our body signs

I NEED TO PLAY BY MYSELF TODAY.

OKAY SURE, I'LL SEE YOU LATER.

Here are some things that can help rainbow brains.

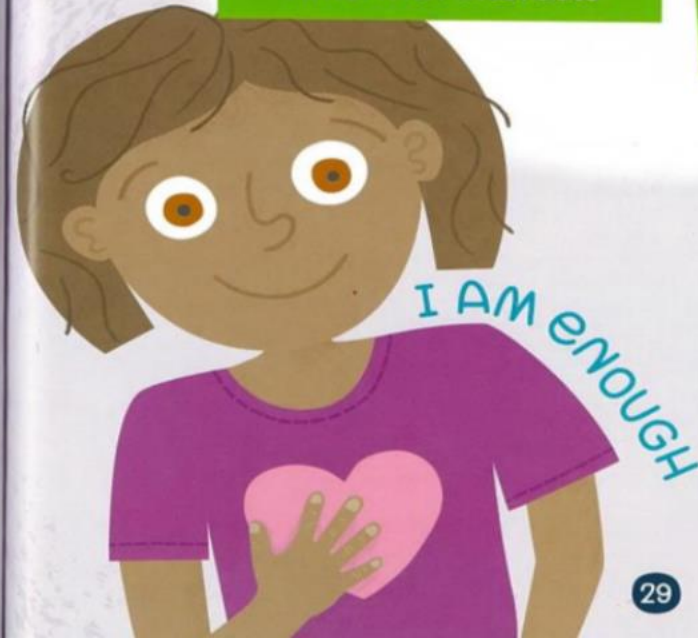Resting when we need

Sensory accommodations

Safe and same foods

Asking for what we need

Learning about ourselves

Time in nature

Time with interests

Meeting others with rainbow brains

I AM ENOUGH

I ♥ NUGGETS

28

29

Having a rainbow
brain is special
BUUUUUUT,

the world can be
hard to navigate.

See, it wasn't built
for rainbow brains.
There are still changes
we need to create.

It's tiring moving
through this world
and we need more
time to rest.

Making space for self-care
and the things we love
helps us feel at our best.

30

31

Lunch – 30mins

Q and A Panel to follow

Panel Q and A

**Final thoughts and reflections of the session.....
Mentimeter**

Ngaityalya