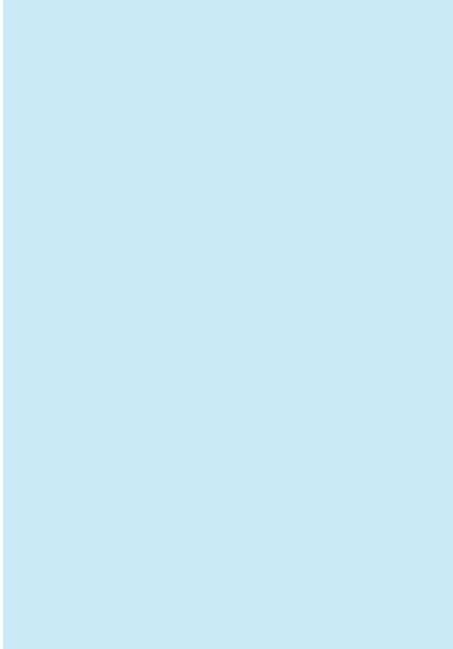
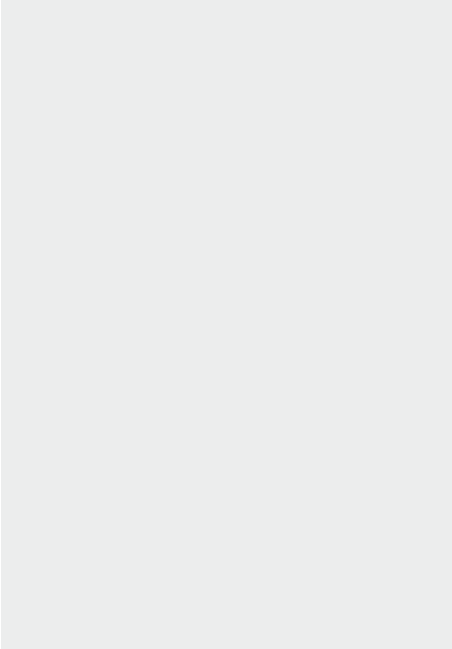
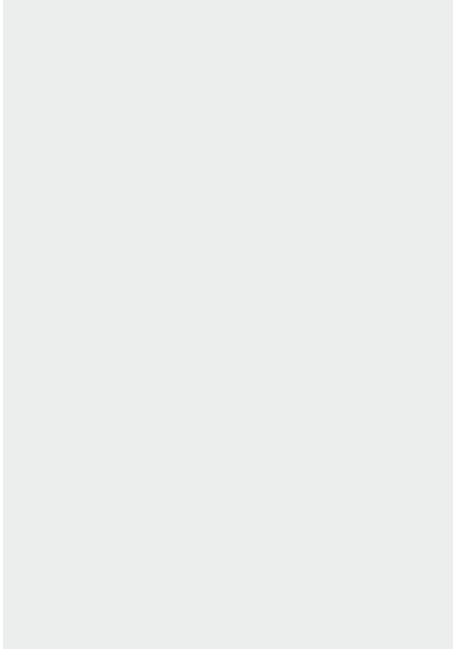
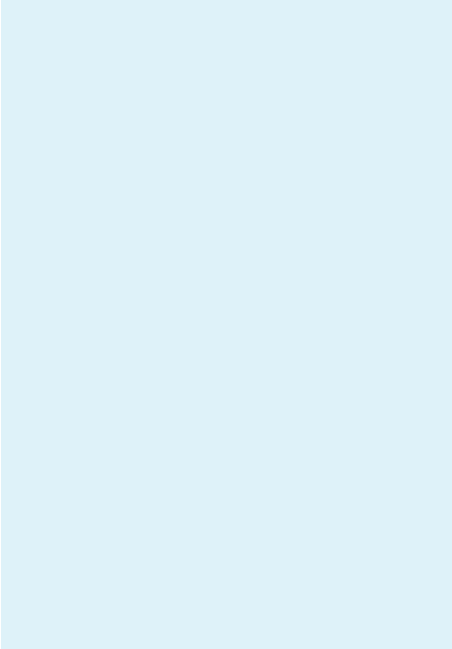
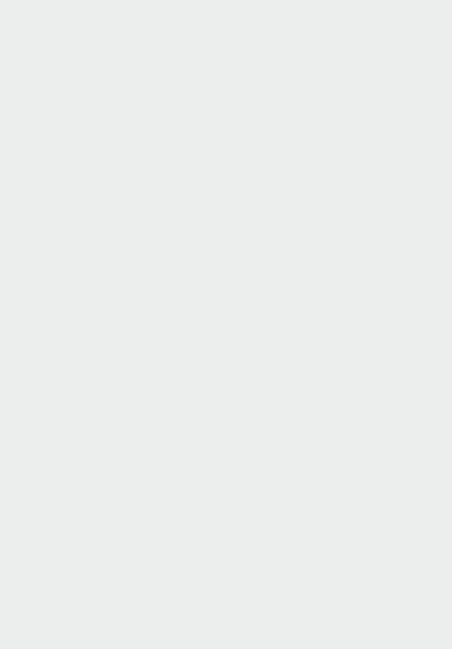


# Strengthening services to students with complex reading difficulties in rural and remote areas of NSW

---

The Expert Advisory Panel's advice to  
The Hon. Carmel Tebbutt, MP  
Deputy Premier and Minister for Health in NSW  
and to  
The Hon. Verity Firth, MP  
Minister for Education and Training in NSW





# Foreword

In December 2009 the NSW Government asked an Expert Advisory Panel to prepare advice about the development of a service delivery model for the future directions of Dalwood Assessment Centre/Palm Avenue School. The Panel was asked to develop a new model for students with complex reading difficulties in rural and remote NSW including those in Aboriginal communities.

The Panel sought input from interested parties, reviewed extensive literature on complex reading difficulties with a particular focus on Australian perspectives, and conducted meetings with parents in regional centres throughout NSW.

Jointly chaired by senior officers of NSW Health and NSW Education and Training, the Panel was itself strongly representative of those with a stake in the outcomes of any improvement to the service.

The Panel found that existing collaborative services provided through Dalwood Assessment Centre and Palm Avenue School were highly valued by parents. The multi-disciplinary approach and 'one-stop shop' availability of highly specialised education and health services were mentioned positively by many respondents.

But parents also noted lengthy delays in being able to access the service located in Sydney, compounding the already considerable disadvantages of isolation.

Perhaps in common with many tertiary services, promising gains made during the intensive intervention may not be durable when students return to the environment of their home school, leaving a gap that is presently beyond the sphere of influence of a tertiary level service to fully address.

The Panel believes that the significant challenges faced by students with complex reading difficulties in rural and remote areas of New South Wales must be met with stronger responses that are built upon successful evidence-based practices while addressing areas needing improvement.

This document sets out a pathway for strengthening services for students with complex reading difficulties in rural and remote schools across universal, targeted and intensive tiers.

We wish to acknowledge the considerable expertise, efforts and collaboration of the Expert Advisory Panel, together with the many individuals and groups who made contributions through the regional meetings and in writing.

The Joint Chairs

**Brian Smyth King**  
Director, Disability Programs  
NSW Education and Training

**Cathrine Lynch**  
Director of Primary Health and  
Community Partnerships Branch  
NSW Health

July, 2010

# The Expert Advisory Panel

---

## **The Joint Chairs**

Cathrine Lynch, Director of Primary Health and Community Partnerships Branch, NSW Department of Health

Brian Smyth King, Director, Disability Programs, NSW Education and Training

## **Community members**

Cindy Berwick, President, NSW Aboriginal Education Consultative Group

Jocelyn Cameron, Vice President, Country Women's Association

Anne Milliken, Vice President, Isolated Children's Parents' Association

## **Professional members**

Belinda Barton, Head, Children's Hospital Education Research Institute (CHERI)

Candice Brady, NSW Branch of Speech Pathology Australia

Max Coltheart, Director, Macquarie Centre for Cognitive Science, Macquarie University

Bruce Lord, Program Chair, Ambulatory Services, Children's Hospital Westmead

Sally Howell, Leader, Learning Assistance, Disability Programs Directorate, NSW Education and Training

Natalie Silove, Head, Child Development Unit, Children's Hospital Westmead

## **Health agencies**

Julie Cooper, Director, Primary and Community Health Care, Greater Western Area Health Service

Jann Kingston, Chief Executive Officer, Royal Far West

Robert Leitner, Director, Kogarah Diagnostic and Assessment Service, St George Hospital, South Eastern Sydney Illawarra Area Health Service

Cheryl McCullagh, Director, Clinical Operations, Children's Hospital Westmead

Elisabeth Murphy, Senior Clinical Advisor/Manager, Maternity and Child Health Unit, Primary Health and Community Partnerships Branch, NSW Health

## **Education agencies**

David Ferguson, Organiser, NSW Teachers Federation

Geraldine Gray, State Coordinator Special Learning Needs, Catholic Education Commission NSW

Cate Pinnington, Director: Professional Services, Association of Independent Schools of NSW

Pam Ryan, School Education Director, Orange, NSW Department of Education and Training

## **Observers**

Kim Field, Area Director of Primary and Community Care, Northern Sydney and Central Coast Area Health Service

Jenny Kneipp R/Leader, Planning, Monitoring & Reporting, NSW Department of Education and Training

Phillip McNabb, Learning Assistance Coordinator, Hawkesbury/Nirimba Schools Western Sydney Region, NSW Department of Education and Training

Gail Wykes, School Education Director, Western Sydney Region, NSW Department of Education and Training (Dec 2009-June 2010)

Daryl Jacobs, School Education Director, Western Sydney Region, NSW Department of Education and Training (July 2010)

## **Secretariat**

Trish Stubbins, Senior Policy Officer, Maternity & Child Health Unit, Primary Health and Community Partnerships Branch, NSW Department of Health

Cathryn Thompson, Learning Assistance Program Coordinator, NSW Department of Education and Training

# Terms of reference

---

## Future Directions of Dalwood Assessment Centre/Palm Avenue School Advisory Panel

### Terms of Reference

Oversee the development of a model of service delivery for future directions of Dalwood Assessment Centre/Palm Avenue School:

- that is based on evidence based literature and other available data that embraces best practice delivery of both education and health services for primary school aged students with significant reading difficulties living in rural and remote New South Wales

- that provides access to sustained and locally supported specialist intervention in the early years of primary school delivered locally

- that utilises new and emerging technologies to deliver services locally

- that gives consideration to access to specialist services and technology

- that allocates available resources equitably.

Advise on ways that this model of service delivery will provide an improved specialist service to students from rural and remote New South Wales including those in rural Aboriginal communities.

Oversee the development of an implementation plan that articulates this model with other relevant health and education services and systems.

### Business Rules

Joint Chairs: Director, Primary Health and Community Partnerships Branch, Department of Health and Director, Disability Programs, NSW Department of Education and Training

Joint Secretariat functions: Maternity and Child Health Unit, Department of Health and Disability Programs, NSW Department of Education and Training

Frequency of meetings: Monthly, with review after first 3 months

Meeting Dates:           14 December 2009  
                                  22 February 2010  
                                  29 March 2010  
                                  3 May 2010  
                                  7 June 2010  
                                  5 July 2010

Joint meeting venue: NSW Health, Miller Street, North Sydney (teleconference facilities will be provided) and NSW Department of Education and Training, Bridge Street, Sydney

Anticipated duration: 12 months, with review

Joint reporting accountability: Director General of NSW Health and Director General Department of Education and Training

# Contents

---

## Executive Summary

---

## Introduction

---

## The Panel's Advice

A challenging task - the proposed model

Sooner - early intervention through a tiered approach

Who and where

Closer and improved services - regional and metropolitan campuses

Gaining and maintaining - the role of professional learning

The leading learner - research and development

Assurance - governance arrangements

Certainty - transition from existing to new model

---

---

## References

---

### Additional Links

1. Report to the Hon Bill Shorten, Parliamentary Secretary for Disabilities and Children's Services, from the Dyslexia Working Party. ( January 2010)

<http://www.dyslexiaaustralia.com.au/DYSWP.pdf>

2. Identifying and Teaching Children and Young People with Dyslexia and Learning Difficulties. Sir Jim Rose (2009)

<http://publications.dcsf.gov.uk/eOrderingDownload/00659-2009DOM-EN.pdf>

# Executive summary

In December 2009 the NSW Government asked an Expert Advisory Panel to prepare advice about the development of a service delivery model for the future direction of Dalwood Assessment Centre/Palm Avenue School. After considering the needs of students, the circumstances that families face in rural and remote areas of NSW, including those in remote Aboriginal communities and the urgency of closing the reading gap, the Expert Advisory Panel advises that:

**DELIVERING BEST PRACTICE** literacy support to students with complex reading difficulties in rural and remote areas has proven a challenging task for schools and systems throughout Australia, suggesting it requires a high degree of coordination of resources, capacity of participants and collaboration with partners. It therefore suggested the government:

Move to establish a body to be known as the NSW Centre for Effective Reading, which incorporates Palm Avenue School. The Centre would provide assessment and intervention for students experiencing complex reading difficulties, professional learning for teachers and other key participants, and undertake research and development in the area of complex reading difficulty.

**TO ACHIEVE ITS AIMS**, the Centre would need to deliver support nearer to the time that a student's complex reading difficulty is identified. It therefore suggested the Centre:

Introduce new tiers of support to the service to enable the earliest possible identification of difficulties and appropriate matching of supports to need. The tiers would comprise universal supports for all schools, targeted supports for students with complex reading difficulties in government, catholic education commission and independent schools in rural and remote areas and intensive supports for the students living in rural and remote areas of NSW with the most complex and non-responsive reading difficulties.

**ELIGIBILITY** and access need clearer definition, as confusion about these have seen the service provided unevenly across schools and in some cases delaying access for more remote and disadvantaged communities. It therefore suggested the Centre:

Develop eligibility guidelines based on location, specifically those residing or enrolled in schools within Australian Standard Geographical Code (ASGC) areas 2,3, 4 and 5.

Develop access guidelines based on need, demonstrated through age grade/ performance expectations and achievement gaps, and on a response to intervention model.

**ACCESS TO SERVICES** in rural and remote areas of NSW is reported by parents as one of the most challenging aspects of getting help for their children. The Panel therefore suggested the Centre:

Create three multi-disciplinary assessment and intervention campuses of the Centre, two to be located in rural centres of NSW, and a third to be located in Sydney. These campuses would provide educational and related health assessments and develop interventions for implementation by the home school, guided and supported by the regional campus.

Develop a 'response to intervention' process to be both the trigger and the evidence required for access to further levels of support, to reduce the time between identifying a difficulty and providing appropriate help.

**SIGNIFICANT RESEARCH** and practice evidence shows many children who struggle to gain new knowledge will often have difficulty maintaining and using that learning in new settings over time.

Develop professional learning courses and programs to better equip all participants in the process of supporting students with complex reading difficulties.

**MEETING THE CHALLENGE** would require the Centre to be a learner as well as a leader. Success and sustainability will come about through a propensity to act, a curiosity to reflect on outcomes and the energy to mobilise ideas and efforts anew. Currency and validity of service delivery will ensue. Substantial investigation of the Centre's practices and outcomes would call for partnerships with tertiary institutions and research facilities. It therefore suggested the Centre:

Undertake research and development in the area of complex reading difficulties, with a focus on diagnostic assessment and interventions to underpin the Centre's provision of services.

Develop strategic partnerships with tertiary education institutions and research-capable facilities to enable wider research and development, and to help the Centre reflect on its practices to support constant refinement and remain at the leading edge of best practice assessment and interventions.

# Executive Summary

---

**THE CENTRE'S ENDEAVOURS** would benefit from the oversight of a group representing key participant interest groups, charged with the responsibility to ensure communication of the Centre's purposes, achievement of its aims and celebration of its successes. It therefore suggested the government:

- Extend the terms of reference of the Expert Advisory Panel to assist in responding to and implementing the proposed actions for the remainder of 2010.

- Form a governance committee to support the future work of the Centre in 2011 and beyond.

**DURING THE COURSE** of its work, there had been a marked level of uncertainty about future supports for rural and remote students. There exists a climate of urgent expectancy amongst parents and advocates about the outcomes of the Panel's work. It therefore suggested the Government:

- Consider the proposed transition plan for current and imminent students in 2010 and maintain the current referral process into 2011 until a new referral process is developed and implemented.

The Expert Advisory Panel advises the need to continue to consult with parents and community as progress is made on establishing the NSW Centre for Effective Reading.



# Introduction

*'We were never born to read. Human beings invented reading a few thousand years ago. And with this invention we rearranged the very organisation of our brain, which in turn expanded the way we were able to think, which altered the intellectual evolution of our species.'*

*Proust and the squid: the story  
and science of the reading brain  
Maryanne Wolf 2008*

Australian children living in rural and remote areas, including those in Aboriginal communities are at a higher risk of experiencing difficulties in literacy than their counterparts who live in metropolitan areas and large rural centres.

Isolation and inaccessibility of services can compound factors already known to impact literacy learning – the quality and nature of teaching, school attendance, engagement in learning and on-task behaviour, socio economic factors, language or processing problems and difficulties in short term memory, amongst others.

In written contributions to the Panel and through stories of the 'journey' to get help for their children, parents described the impacts of isolation in graphic terms.

Their concerns are underscored by the Ministerial Council on Education, Employment, Training and Youth Affairs' finding that the further a student lives away from a large centre, the more likely he or she is to experience literacy difficulties. Further, the problem usually grows worse – the gap widens – as the student gets older.

## Who we are talking about

Difficulties learning to read do not distinguish between those they affect. But they do unfairly designate many young people variously as 'different', difficult to teach, not interested in learning, a behaviour problem.

Beyond the immediate impacts of hurtful and unjust labels lies a range of possible outcomes leading to long term academic failure, disengagement, restricted life opportunities and poverty.

Our understandings of how and why these students encounter difficulties learning to read continue to evolve. For most, evidence-based teaching delivered accurately, systematically and explicitly will be sufficient to turn the tide. Some students will still need targeted support, and a few will experience the most severe and non-responsive

reading difficulties, requiring intensive assessment and intervention. For those with intensive needs, we must look at ways to help students adjust to and accommodate what may be a long term influence in their lives. What we learn about and do for each group can help all.

## Isolation

As populations in rural and remote areas decline schools get smaller and resources to support students with complex reading difficulties may reduce. Access to outside support can be limited by the large distances consultants may have to travel, spending more time on the road than working with the student or their teacher.

Delivering the best support to students in rural and remote areas has challenged schools and education systems:

*Of particular concern in this huge country with such small populations are the needs of students and parents in rural and remote areas of Australia, and we have yet to provide the appropriate support systems for these isolated families<sup>1</sup>*

Given the difficulties facing families struggling to support their children with complex reading difficulties when they are a long way from help, it is not surprising that the

<sup>1</sup> Graham and Bailey (2007)

Panel gained much valuable advice from parents through meetings and other contributions.

## What parents said

It must be stated immediately that there was widespread appreciation and much admiration of the services provided by Dalwood Assessment Centre and Palm Avenue School.

Parents consistently rated highly the **multi-disciplinary team** approach for specialised assessments and intensive interventions. They said the ‘one-stop shop’ concept and ‘holistic’ service were such a relief after years (in some cases) of

*..running from pillar to post to try to coordinate getting in to see my local paediatrician, the visiting school counsellor or some other specialist that wouldn't talk to the other specialists. (parent comment, paraphrased)*

Developing a **relationship** with one contact person throughout the process was held to be very important. Some reported that their child was “more comfortable” with a stable figure in an otherwise unfamiliar setting.

The **residential** aspect of the service appealed to many but views varied, with some citing high levels of anxiety for their children being away from home; others reported that it was a wonderful way for their children to experience city life.

Location and isolation naturally figured in comments and contributions from parents, with calls for the service to be **replicated around the state**, closer to students and families. Some added that placing students in unfamiliar surroundings (specifically Sydney, a long way from home) was likely to inhibit their learning.

Some found that demand for the service led to **lengthy delays** in getting help. In this, the Panel noted that such delays (some of up to two years) not only serve to compound the difficulties of isolation which the service is intended to redress, but increase the likelihood of the problem worsening.

The diversity of responses reflects the many individual circumstances of families in rural and remote New South Wales. It served to highlight for the Panel one of the strongest themes to emerge from the contributions – that whatever form the service should take, it must **address individual circumstances** and not be a “one size fits all” approach.

Five themes emerged throughout the contributions that address individual circumstances.

## Five themes emerged

Respondents invariably wanted children helped as soon as there was an indication that they were not learning to read. **Early intervention** was expressed as

*earlier identification for earlier intervention  
intervene when the need is first identified  
train all teachers to identify complex reading difficulties*

**Accessing** the service reflected more than concerns about isolation.

*access to the service has to reflect distances from services faced by some families  
the service needs to be culturally responsive, addressing the specific needs of Aboriginal students  
the service needs to be extended and duplicated*

Parents wanted the interventions to be based on a knowledge of what works best, consistent with the research about **evidence-based practices**.

*train all teachers in teaching students with complex reading difficulties  
the intensive reading program should be built into the school day*

Parents wanted interventions to **respond to individual need**. In this, the Panel notes that a student does not simply ‘have’ a complex reading difficulty. Rather he or she may be on a continuum of difficulty that varies in both nature and severity, and support is best when it is tiered to match the need.

*intervention should respond to individual needs  
the service should support schools in implementing programs*

Finally, and emphatically, parents wanted a **partnership** with the service and with their home school that would make the whole endeavour ‘do-able’ in the short term and sustainable over time. In this, the Panel notes that student learning is the focus of sustainability, where learning gains made as a result of interventions are maintained well after the intensive phase. Comments included:

*need partnerships with schools  
there needs to be a holistic and multi-disciplinary approach  
more and better communication  
more input from parents  
there should be a transition program between service and home school*

*links between services are the key to holistic educational service*

There is a remarkable convergence between the advice given to the Panel about the needs of isolated children on the one hand and the research evidence about what constitutes best practice and service delivery on the other.

## What the research says

Students experiencing complex reading difficulties require **systematic and explicit teaching** that at times may be qualitatively different from the reading instruction of the regular classroom.

*Teaching for these students addresses phonemic awareness, phonics, spelling and writing, fluency, vocabulary and comprehension (Rose, 2009; DEST 2005)*

*Variables of level, frequency, duration, pace and intensity are adjusted according to the student's response to instruction (eg Howell and Nolet, 2000; Fuchs and Fuchs, 2006)*

*Intensive interventions are linked to the regular classroom program lest the student be required to master two (or more) separate sets of knowledge (eg Kameenui and Carnine, 1998)*

Students with complex reading difficulties often experience **related difficulties that impact learning negatively**.

*Five pervasive influences are identified as having significant impacts on learning: memory, strategy knowledge and use, vocabulary, language coding (Kameenui and Carnine, 1998) and receptive/expressive language (eg Brent et al, 2001)*

*Students' learning history of long term school failure and/or 'co-existing' factors often brings a range of **social-emotional impacts**: behaviour issues (acting out or internalising), disengagement, learned helplessness, 'output failure' (Levine, 2003), loss of resilience and loss of self-efficacy and self esteem. Addressing these issues can improve both social-emotional and academic outcomes for the student.*

*All students have **strengths**. A focus on knowing, respecting and utilising a student's strengths can make teaching more effective and the learning experience a positive one. Strengths may be found in many areas: academic (including aspects of reading), strong interests and high levels of background knowledge in specific topics, ethnicity/cultural identity, sporting and musical accomplishment.*

Teaching and supporting learning are most effective when all involved in the process act in **collaboration**.

*Collaboration is more than just getting on – it requires the skilled use of a range of established processes (eg West, Idol and Cannon, 1989) for achieving common goals.*

*Collaboration makes explicit the mutual responsibilities of all participants.*

*Collaboration can be strengthened through the formation of **school-based teams** with responsibility for supporting students, teachers and whole school planning around learning support. External agencies that develop and support intervention programs have greater success through sustainable interventions where such an entity exists in the school.*

*A **key collaborator is the student**. When students are involved appropriately in planning their own supports, self-efficacy and self-regulating learning behaviour are enhanced (eg Hattie, 2009)*

A three-tiered approach which differentiates **universal** classroom teaching, **targeted** group teaching and **intensive** small group and individual teaching is a well-validated process for **mapping instructional intensity** to learning support need (eg Kamps and Greenwood, 2005)

*At the **universal school support level**, up to **85%** of all students can have their learning needs met through high-quality, accommodative teaching delivered through the regular classroom program by their classroom teacher. The focus for school efforts at this level is on enabling and supporting all classroom teachers to deliver that kind of teaching across the Key Learning Areas. Schools often consider this level of action to be strategic because it has the greatest potential for reducing learning support needs and urgency at higher levels yet, at the whole school level, may require the least effort to do something about it.*

***Up to 15% of students** may need **additional school support** beyond that feasibly provided in the regular curriculum through accommodative teaching. In primary schools these students might typically be in the low reading group. In secondary school they would be candidates for the roll call period tutoring program, TAFE peer tutoring or the pre-teaching session. The **focus for** school efforts is making the organisational and structural changes needed to ensure that those students have daily access to this level of support. Schools often consider this level of action to be important because it engages students with significant need and there is much potential for improving learning outcomes through both teacher capacity building and schools' structural or organisational adjustments.*

*Of that 15%, a **sub-group of up to 5% of students** may need **targeted support** beyond that available within the school. These are the relatively few students who*

*experience the greatest difficulties learning and exhibit least response to evidence-based instruction delivered with fidelity. This group will include some students with evident dyslexia of either deep or instructional origin. The focus for school efforts is on ensuring quality and validity of the teaching practices, as well as taking all possible measures to ensure best **alignment** between the classroom program and the teaching provided in the intensive support program. Schools often consider this level of action to be urgent, because it engages students with the greatest need and also causes teachers the most concern.*

*Amongst the up-to 5% of students who need targeted school support, **a sub-group of about 1-2%** will have learning and reading difficulties that are very complex and which are not responsive to well validated teaching implemented with fidelity.*

Most significantly, this three-tiered logic is a **continuum** - a student with complex reading difficulties still spends most of their day at the universal level in the regular classroom. The **challenge for teachers and schools** lies in knowing how to refine regular classroom teaching to make it universal, that is, maximising the chances for every student to learn.

## The role of NSW Health

The Panel acknowledged that it was important to understand how NSW Health contributes to supporting children with learning disorders in order to provide advice on a new service model for the Dalwood Assessment Centre and Palm Avenue School.

It was noted that the NSW Health system and health workers play an important role in assisting children and families to achieve health and wellbeing. The NSW Health system collaborates with general practitioners, local government, government and non-government organisations, health professionals and families to create the best opportunities for improving children's health across primary, secondary and tertiary tiers.

At the primary tier, NSW Health provides local early childhood services that specialise in child and family health. These services offer a universal comprehensive surveillance program to monitor the achievement of developmental milestones, especially for children 0-5 years of age. This information, which is held in the Personal Health Record (Blue Book), can provide very useful information for parents and teachers. The outcomes of the primary assessments can inform the development of appropriate treatments and interventions across a range of domains, including learning disorders.

In more complex cases, children are referred to participate in secondary level assessments. A referral for a comprehensive paediatric assessment and early intervention services may be required. Royal Far West<sup>2</sup> provides specialist health care assessment services for children who live in rural and remote areas of NSW, who cannot access this level of care in their own communities.

There may be some instances when literacy problems may be underpinned by more complex learning disorders, which will require tertiary (or intensive) assessment. Services located outside a child's local area may need to be accessed, for example The Children's Hospital at Westmead.

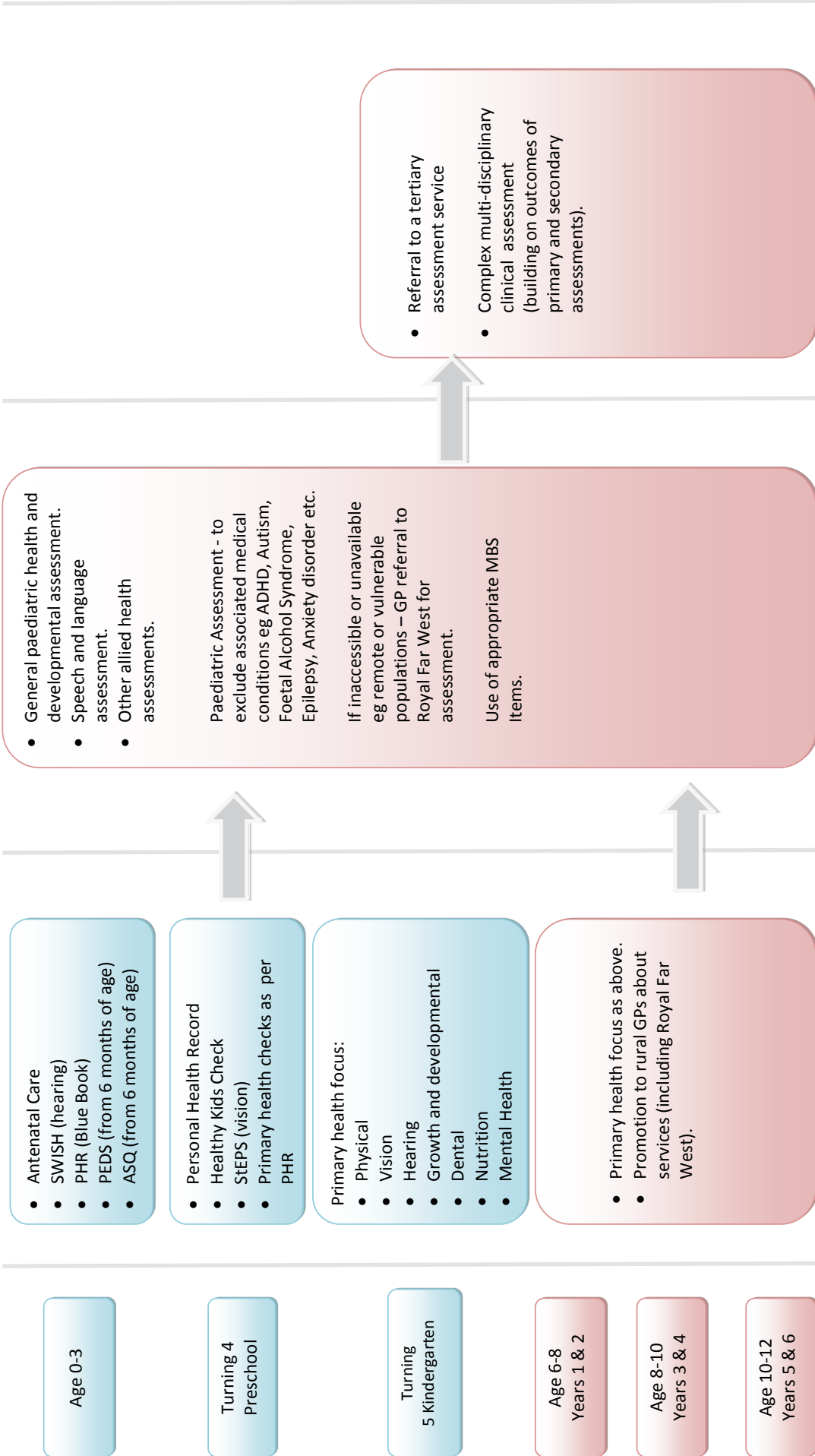
A health 'model pathway' for access to levels of support for health-impacted complex reading difficulties is on p13.

---

<sup>2</sup> The Royal Far West is a Non-Government Organisation that receives NSW Health funding.

**NSW HEALTH'S MODEL PATHWAY**

AGE	PRIMARY TIER		SECONDARY TIER		TERTIARY TIER	
	UNIVERSAL ASSESSMENT AND SERVICES		TARGETTED ASSESSMENT AND SERVICES		TERTIARY ASSESSMENT	



Primary school age appropriate for referral to tertiary assessment service

Prior to primary school age

**COLOUR CODE:**

# Where we are now

---

**Dalwood Assessment Centre** and **Palm Avenue School** have provided assessment services and intervention services through outreach and intensive programs to students with complex reading difficulties in rural NSW for almost 30 years.

Over the years the Dalwood Assessment Centre and Palm Avenue School have developed professional learning events for government and non-government teachers. These have been in key aspects of literacy and language development. Individual members have made substantial contributions to the field of understanding complex reading difficulty.

Using what we have learned from the experience of supporting students and of working with their parents and teachers must lead the way in strengthening the service for the future.

The Panel asked could these services and programs be made more effective by creating direct linkages to other health, education and academic organisations? Giving it a higher profile of importance in those fields? Better access to research, and a research capability of its own? having a leading role in professional learning around complex reading difficulties?

Research points to the urgency of doing something sooner for students. Parents seek support that is closer. Schools and teachers want to know how to maintain the gains their learners have been helped to achieve, and systems seek the best supports for their schools. A challenging task, indeed.

Why strengthen services to students with complex reading difficulties in rural and remote areas?

Because we still have students who struggle.

# The Panel's Advice

---

After considering the needs of students, the circumstances that families face in rural and remote areas of NSW and the urgency of closing the reading gap, the Expert Advisory Panel provides the following advice.

## A challenging task

**THE PANEL ADVISES** that delivering best practice literacy support to students with complex reading difficulties in rural and remote areas has proven a challenging task for schools and systems throughout Australia, suggesting it requires a high degree of coordination of resources, capacity of participants and collaboration with partners.

### ***Establish a centre for studies into reading and dyslexia***

The Panel suggests that the NSW Government move to establish a body to be known as the NSW Centre for Effective Reading. The Centre would form part of the NSW Department of Education and Training service provision and be in collaboration with NSW Health.

It is suggested the Centre be empowered and resourced to ensure students in government, catholic education commission and independent schools in rural and remote areas of NSW are helped in the most effective, timely and equitable ways.

The Panel suggests that the Centre be responsible for

1. strengthening all levels of multidisciplinary assessment for students in rural and remote NSW experiencing complex reading difficulties
2. reaching and supporting more students on the continuum of complex reading difficulties through a tiered approach to **intervention** service delivery, with a relentless focus on early identification and prevention; and the provision of intervention services locally

3. contributing to teacher and school capacity by developing leading-edge **professional learning** resources and activities that address universal, targeted and intensive responses to complex reading difficulties

4. conducting **research and development** in the field of complex reading difficulties, with a particular focus on diagnostic assessment, intervention and professional support.

The Centre would be based at Westmead incorporating Palm Avenue School which would continue to operate as a school. The Centre would operate across the state through several campuses. Under the proposed model services previously provided by Dalwood Assessment Centre will now take place at the Child Development Unit at The Children's Hospital at Westmead, which will work in partnership with the Centre.

The Panel believes that the change of name to the NSW Centre of Effective Reading better reflects the purposes and functions of the service and will more clearly communicate these to a wider audience as its visibility and influence grow.

# Sooner...

**THE PANEL ADVISES** that to achieve its aims, the Centre would need to deliver support nearer to the time that a student's complex reading difficulty is identified.

## ***Introduce tiered support***

The Panel suggests that **three tiered levels of support** be introduced to the service, to help children in their home school much earlier. The tiers would correspond to well-established education and health pathways, commonly known as universal, targeted and intensive. The tiered model moves from indirect support at Tier 1 to direct support at Tiers 2 and 3.

The Panel notes that earliest possible identification and response is a key to preventing reading difficulty for the individual student. It is also the essential ingredient for school and system efforts to reduce both the incidence and prevalence of complex reading difficulties for all students. For these reasons, the Panel places a high priority on the suggestion to match tiered support to the continuum of student needs.

The service functions of the proposed Centre are summarised in *Figure 2*. These functions are supported through professional learning and partnerships.

## ***Tier 1: Universal support***

The Panel suggests that the Centre develop and provide access to web-based **information and resources for all schools** about making regular classroom, small group teaching and individual interventions more effective for students experiencing reading difficulties. This universal, indirect support would also feature guidance on a 'response to intervention' process for monitoring student learning that would give earliest possible signs of difficulties learning to read. It is suggested that all key participants will access this level including, where relevant, education and health professional, parents and students.

## ***Tier 2: Targeted support***

The Panel suggests that an **assessment and intervention service** provide **targeted** multi-disciplinary (speech/language and psychological) assessments, and interventions leading to the collaborative development

of individual programs and teaching strategies to be implemented by the home school for students living in rural and remote areas of NSW.

This targeted support will require partnerships involving the family, the child's school and the Centre.

## ***Tier 3: Intensive support***

To address the needs of students with the most complex and non-responsive reading difficulties, the Panel suggests the Centre provide intensive supports, involving a broad range of multi-disciplinary and highly specialised assessments and interventions.

At this level there will be interventions that may include the use of technology, other aids and adjustments to sustain the individual in their reading throughout school life and beyond.

The Centre would work collaboratively with the assessment service located at the Child Development Unit, The Children's Hospital at Westmead. It will provide a specialised, multidisciplinary diagnostic assessment service articulated with an intensive intervention service provided by the Centre through Royal Far West.

## ***Response to intervention***

The Panel suggests that students' non-responsiveness to well-founded instruction be both the trigger and the evidence required for access to further levels of support. Waiting until a student has developed a complex reading difficulty before getting help is known to compound the problem.

## ***Parallel education and health pathways***

Closely paralleling this education pathway, health services are likewise arranged on a continuum of increasing intensity of response to need. There are many linkages and, for individual students, the pathways may meet or merge at various points on the way to getting the most appropriate help.



# Centre Service Functions

(read in conjunction with NSW Health Pathway figure 1)

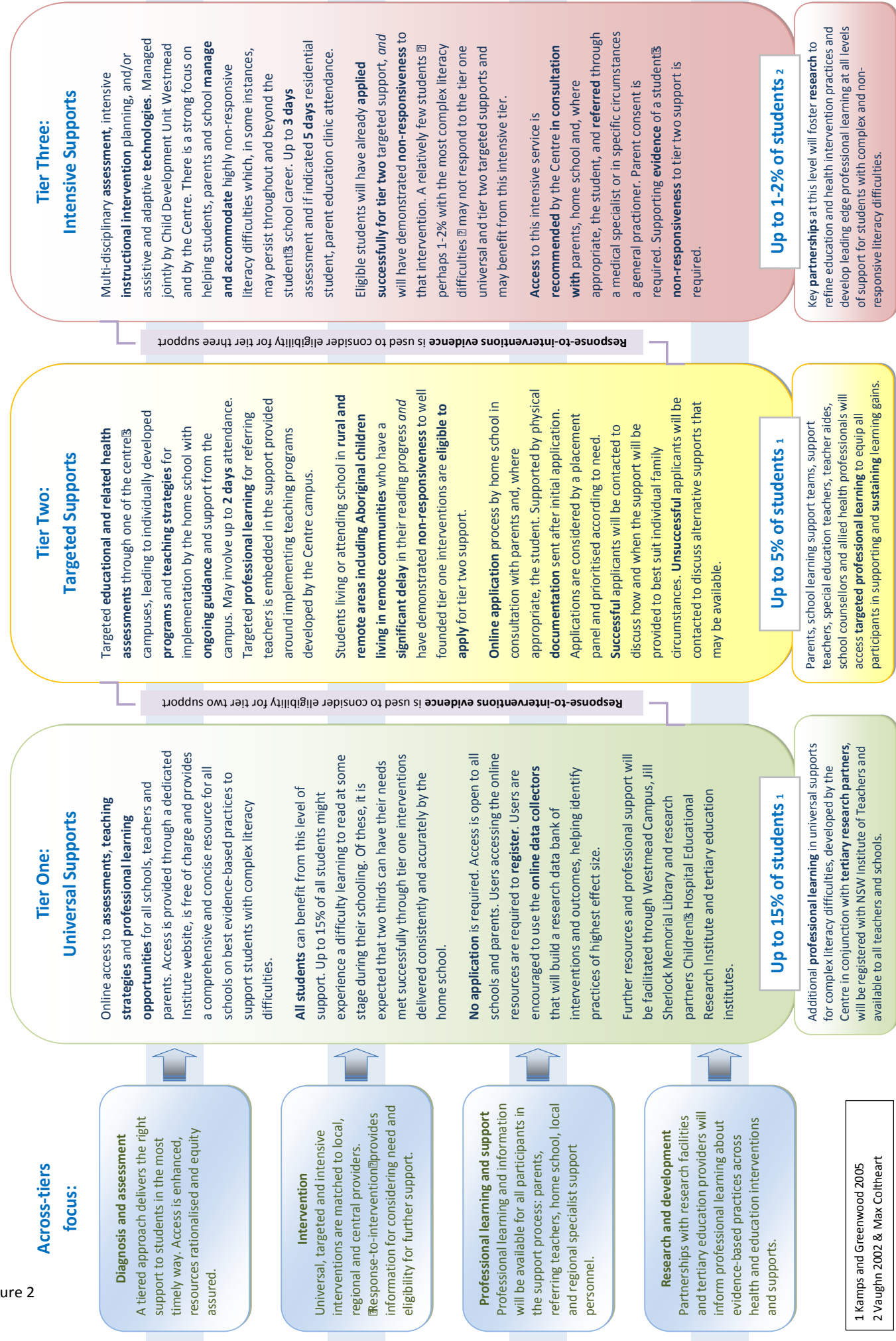


Figure 2

1 Kamps and Greenwood 2005  
2 Vaughn 2002 & Max Coltheart

# Who and where

---

**THE PANEL ADVISES** that eligibility and access need clearer definition, as confusion about these have seen the service provided unevenly across schools and in some cases delaying access for students in government, catholic education commission and independent schools in the more remote and disadvantaged communities..

## ***Eligibility based on location***

The Panel suggests that all schools be eligible to access the Centre's indirect universal level of support, described earlier.

The Panel suggests access to Tier 2 and Tier 3 direct services should be available to primary aged students whose home is in a location categorised under the Australian Standard Geographical Classification (ASGC) as Inner/Outer Regional, Remote /Very Remote Australia as per the map on page 19.

## ***Access based on need***

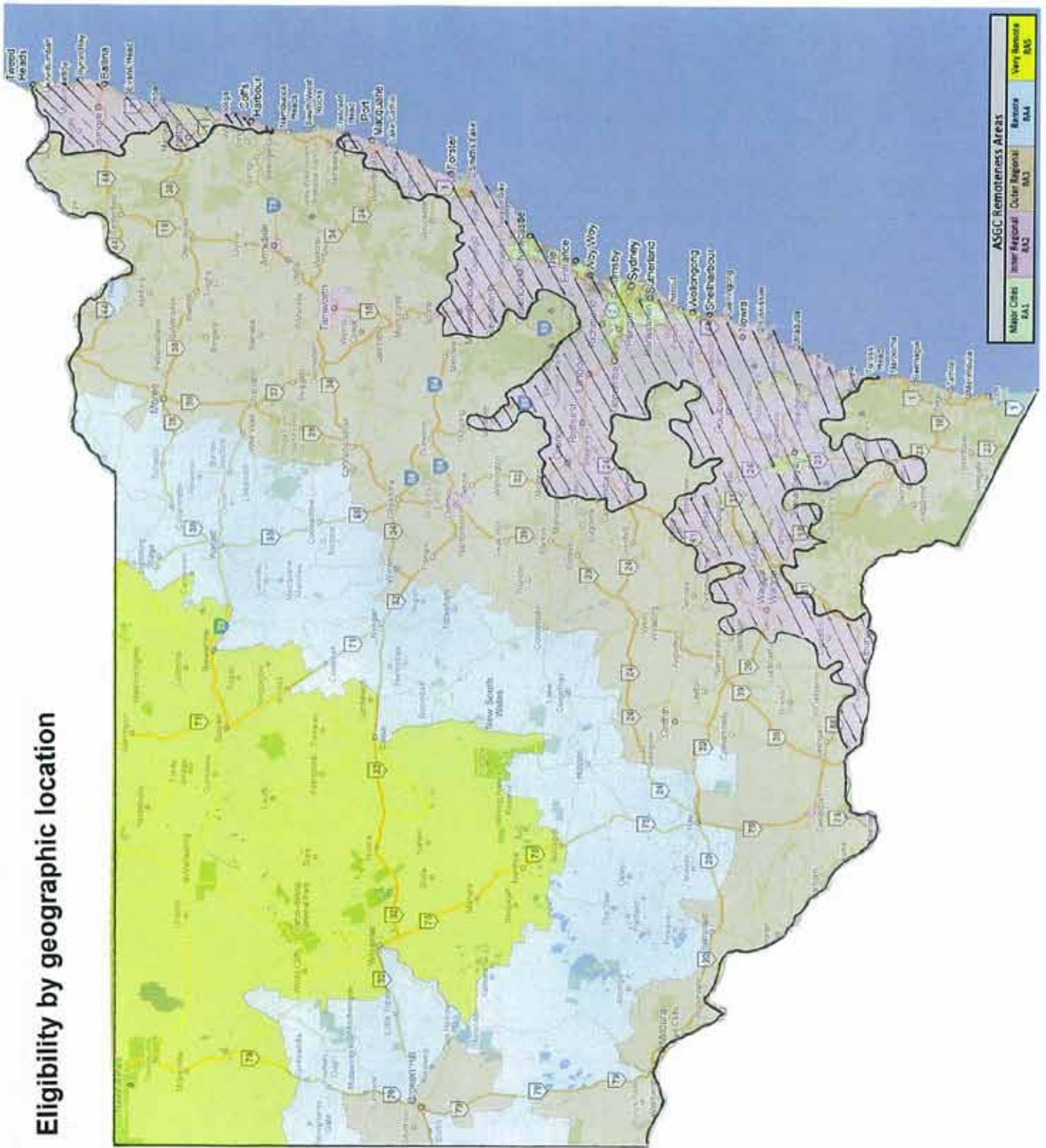
The service at Tiers 2 and 3 directly support students with complex reading difficulty. The Panel suggests that guidelines be developed to help schools identify students requiring this support.

These guidelines should include information about age group/ performance expectations for reading and the critical achievement measures for essential reading skills. In addition the guidelines should enable health and education professionals to draw together information that details what has been tried and how well it has worked particularly for Tier 3 referrals. This should form the basis of the response to intervention evidence as referenced in the Service Centre Functions (Figure 2).

## ***Aboriginal students with complex reading difficulties in rural and remote areas***

The Panel suggests that to recognise the complexity and scope of issues facing Aboriginal students in rural and remote communities, there would be benefit in conducting focus groups with Aboriginal communities to inform the Centre's work in building its services. Participants from Aboriginal organisations should be directly involved to guide this work.

# Eligibility by geographic location



<http://www.youth.gov.au/Documents/NSW.pdf>

# Closer and improved services...

---

**THE PANEL ADVISES** that access to services in rural and remote areas of NSW is reported by parents as one of the most challenging aspects of getting help for their children.

## ***Develop three campuses for targeted support***

Where students require support beyond Tier 1, it is suggested that Tier 2 targeted services be accessed through one of **three assessment and intervention campuses** to provide targeted education, speech/language and psychological assessments and educational interventions. Two of these campuses would be located in regional NSW to provide closer services for children with complex reading difficulties in rural and remote areas of the state. A third campus would be located in Sydney to provide for students in rural and remote areas unable to access one of the regional campuses. The Royal Far West School, Manly would be a suitable location for a targeted intervention service based in Sydney.

Each campus would provide educational assessments, and related speech/language and psychological assessments; develop interventions, programs and teaching strategies; and support home school, parents and student in their implementation.

At each campus there would be a special education, speech pathology and educational psychology presence, together with strong Aboriginal community engagement providing positive relationships with interested partners and community members. This is crucial in providing a sense of connectedness.

Programs and teaching strategies would be collaboratively developed with the child's home school and implemented at the home school with guidance and support from a regional or Sydney based campus.

Schools accessing targeted support would also access specialised professional learning where appropriate.

The model for the proposed Centre is summarised in *figure 3* on page 22.

## ***Develop new intensive level support at Westmead***

The Panel suggests that intensive tertiary level assessment and analysis be undertaken jointly through Child Development Unit, Children's Hospital at Westmead and the existing education campus at Westmead. This arrangement co-locates these two peak services for best practice multi-disciplinary collaboration.

The Panel notes that through written contributions and regional meetings, parents rated the 'one-stop shop' notion highly. This service concept will now begin at the local level and carry through to the intensive/tertiary level should a student need to proceed to that level.

## ***Tertiary assessments***

The tertiary level assessment service is to be located at the Child Development Unit, The Children's Hospital at Westmead. The service offers the benefit of being aligned with the principles and services of paediatric tertiary care and networked in a supported, professional environment. The service will also draw on best practice and evidence based research undertaken by The Children's Hospital Education Research Institute.

At this level, students will participate in multidisciplinary clinical and educational assessments that build on the outcomes of tiered 1 and 2 assessments. All referrals will require coordination through a general practitioner or a paediatrician.

The assessment may take up to 3 days and will be based on the needs of the child. The service has access to a range of staff specialists available at a paediatric tertiary facility and may draw on the advice of the following professionals:

# Closer and improved services...

---

- Allied health, nursing and medical health professionals
- Speech pathologist
- Psychologist
- Neuro-psychologist
- Social worker
- Clinical Nurse Consultant
- Occupational therapist
- Staff specialist (paediatrician)
- Special education teacher (provided by the Centre)

A case conference will follow the assessment process and a dedicated case manager will be allocated to liaise with the parents/carer and the child.

## **Tertiary interventions**

Based on assessment outcomes there could be three intervention pathways. Most students would access with their parents a five-day intensive education clinic at Royal Far West School where comprehensive supports including technological aids would be matched to the child, and both child and parent/s trained in their use. This tier of support acknowledges that these students' reading difficulties may persist throughout and beyond their school life. It is important to equip students and their families for this.

In cases where a student's reading difficulties are found to be accompanied by a health or medical issue, the student may be referred for more specialised assessment if needed, in addition to accessing the five-day clinic at Royal Far West School.

There may be some cases that call for specialised health/medical intervention without the need to access the educational clinic.

The Panel notes that this five-day residential instructional program was proposed in a joint written contribution from parents:

*"Provide a one week intensive instructional program on site. Child and parent attend the service 5 days... Having the parent present for the week will permit him/her to observe the program in operation, have questions answered and... be trained in relevant home-based instructional activities"*

Importantly, this tier also provides for ongoing contact with Centre staff by teachers and parents after the assessment and intervention has taken place.

## **Professional materials and learning**

The Panel notes that the NSW Department of Education and Training has a further range of existing services that would strongly support the work of the Centre. These include the Jill Sherlock Memorial Library, housed at Oatlands Public School in Parramatta. The library collection comprises specialist teaching and learning materials for professionals and families supporting children with reading difficulties. The library provides a state wide service to over 4000 borrowers.

The organisation and functions of the Department's Curriculum K-12 Directorate and the Centre for Learning Innovation are being combined, into an entity to be known as NSW Curriculum and Learning Innovation Centre (CLIC). The Panel strongly supports the Centre making links with this new operational structure to embrace an extensive range of emerging technologies while keeping teachers updated about developments in curriculum, research and professional learning. The Centre could contribute effectively to embedding specialist resources into general school services provided by CLIC.

In addition the quality professional learning developed through the Centre should be registered with the NSW Institute of Teachers to support ongoing teacher accreditation requirements.

## **Partnerships**

Partnerships with research facilities and tertiary education providers will inform professional learning about evidence-based practices across health and education interventions and supports.

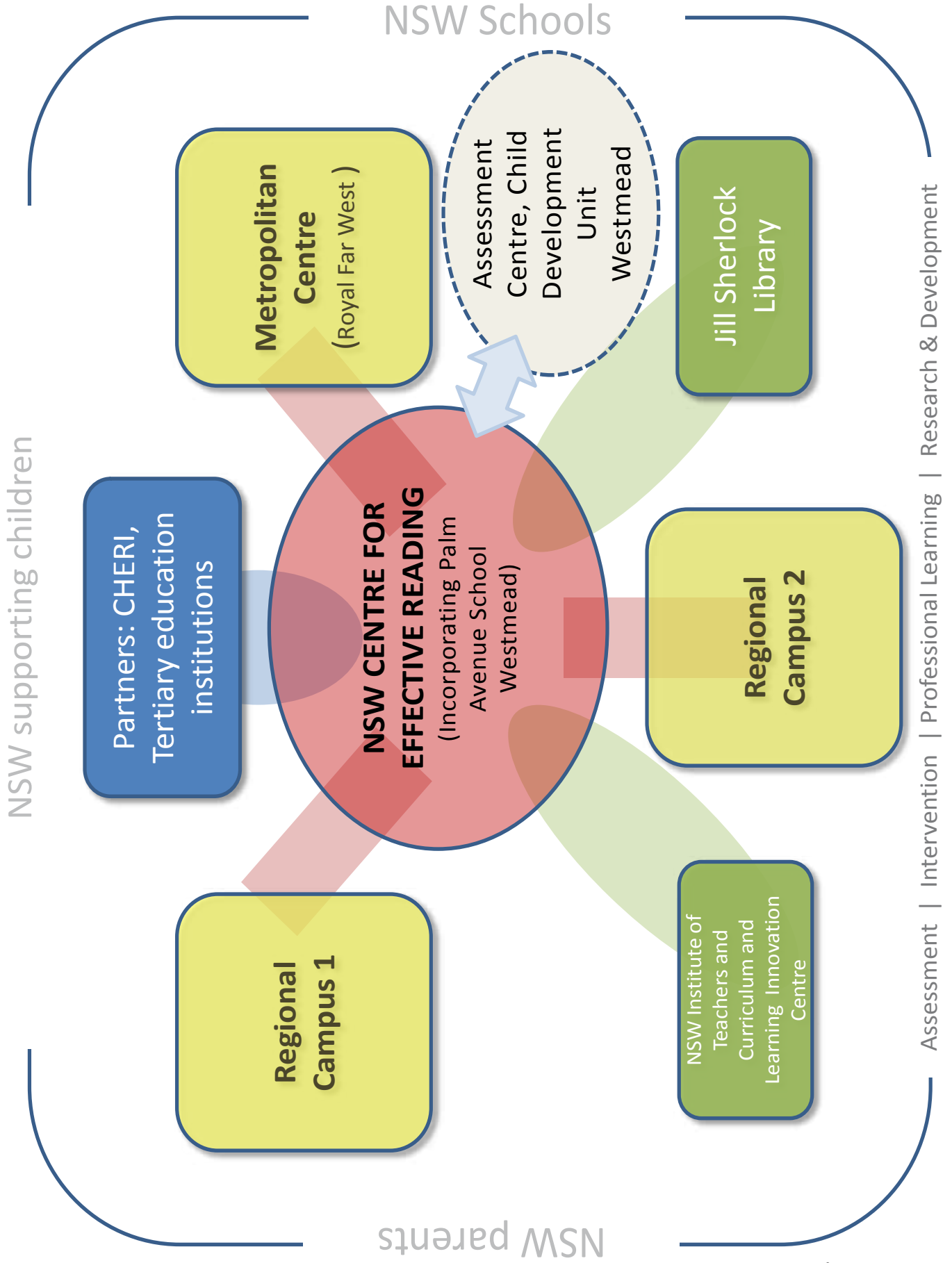


Figure 3

# Gaining and maintaining

---

**THE PANEL ADVISES** that significant research and practice evidence shows many children who struggle to learn to read will often have **difficulty maintaining and using** that learning more broadly. An often reported phenomenon is of students making promising, even remarkable, gains in short term intervention settings but failing to maintain their new rate of learning because little or nothing has changed in the regular environment to sustain that learning.

To ensure the durability of learning gains brought about by each tier of support, the Centre would need to develop ways of helping teachers and schools to integrate evidence-based practices that support students and to develop systems that support teachers in implementing those practices.

The Panel notes the literature pointing to the significant challenges in bringing about effective and durable change, suggesting the Centre commit boldly to supporting professional learning.

## ***Develop professional learning opportunities***

To ensure that student learning is maintained the Panel suggests that **professional learning courses and programs be** developed to better equip all participants in the process of supporting students with complex reading difficulties. This professional learning would go across all levels of student learning support – universal, targeted and intensive. The Panel suggests the professional learning activities be registered with the NSW Institute of Teachers so that participants may have their professional learning recognised towards Institute accreditation. The courses should be promoted widely to government, catholic education commission and independent schools through each system’s usual communication channels.

## ***Enhance pre-service training for teachers and allied health professionals***

The Panel suggests that the Centre act in conjunction with tertiary education institutions to enhance pre-service teacher training and allied health training in complex reading difficulties, learning difficulties and learner diversity. This training should go beyond the traditional inclusion of an optional ‘special education unit’ in an under-graduate course. Rather, the pre-service training provider should work towards integrating knowledge of supporting diverse learners into all curriculum areas as an across-curriculum perspective.

## ***Target early career teachers***

The Panel further suggests that the Centre collaborate with government, catholic education commission and independent schools to ensure that during their first three years, early career teachers participate in substantial, rigorous and evidence-based training (not one-off workshops) to help them reach professional competence level in teaching students with additional learning needs. This may have considerable positive impacts for rural and remote schools because of the higher numbers of early career teachers employed at those schools.

## ***Develop processes for supporting teacher and school change in learning support***

The Panel suggests that the Centre develop processes and resources to help schools improve their practices and organisation for supporting learning, especially for students with complex reading difficulties.

In this, the Panel notes the significant body of ‘implementation research’ upon which to draw, as well as several successful or promising local examples of developing school-wide systems for supporting learning.

# The leading learner...

---

**THE PANEL ADVISES** that the Centre would need to be a learner as well as a leader in order to meet its challenges. Success and sustainability will come about through a propensity to act, a curiosity to reflect on outcomes and the energy to mobilise ideas and efforts anew.

Substantial investigation of the Centre's practices and outcomes would call for partnerships with tertiary institutions and research facilities.

## ***Establish learning partnerships***

The Panel suggests the Centre build connections and relationships with learning partners. These partners would help maintain the Centre's leadership in evidence-based practices for diagnosis, assessment and intervention for students with complex reading difficulties. The learning partners would be tertiary institutions and research facilities who would help the Centre to set courses of action, conduct research to monitor, evaluate outcomes, then to use that information to refine practices.

## ***Conduct research and development***

To ensure best practices and assure quality outcomes, the Panel suggests that the Centre develop partnerships with tertiary institutions and other bodies with capacity to undertake significant original or applied research. Together, the Centre and its partners would investigate and develop best practice identification, assessment and intervention processes.

It is envisaged that the outcomes of such research and development would directly inform the assessment and intervention practices of the Centre. They would also position the Centre for developing leading edge professional learning as part of the effort to build more 'diverse learner friendly' schools, where gains made through intensive interventions are easily and fluently supported and enhanced by home schools.



# Assurance

---

**THE PANEL ADVISES** that the Centre's endeavours and achievements would benefit from the oversight of a body representative of key participant interest groups, charged with the responsibility to ensure communication of the Centre's purposes, achievement of its aims and celebration of its successes. This would include ongoing consultation with parents and community as the Centre is being established.

## ***Interim governance committee***

The Expert Advisory Panel has overseen the development of the advice provided in this document and proposes that for the remainder of 2010 would assist in responding to and implementing the proposed actions. The Panel notes that the considerable knowledge, skills and commitment of the Panel members who have been involved with this development from its inception would serve governance well for this period.

As progress is made in establishing NSW Centre for Effective Reading members of the Expert Advisory Panel will continue to consult with parents and communities.

## ***Future governance committee***

The Panel believes the future governance committee for the Centre needs to have representation that can provide advice and support on the key functions of the Centre. These would include diagnosis and assessment, intervention, professional learning and research and development in 2011 and beyond.

It is suggested that the future governance committee would draw on a number of sources of data and information, from key consumer groups including students, parents and schools.

It would be anticipated that this governing committee would meet quarterly to review services provided through the Centre and advise on future directions.

The Panel suggests that the administration of the Centre fall within NSW Education and Training and draw on expertise from NSW Health to progress its services. This administration would align with existing structures, policies and procedures already established within these government departments.

# Certainty

---

**THE PANEL ADVISES** that, during the course of its work, there has been a marked level of uncertainty about future supports for rural and remote students. There exists a climate of urgent expectancy amongst parents and advocates about the outcomes of the Panel's work.

In this, the Panel notes that concerns centre around four key areas: imminent support for those students already 'on the books' for the remainder of 2010; processes for applying in 2010 for support during a possible 'transition phase' in 2011; information about services, eligibility and application processes after that time; and communication.

## ***Students already on the books***

Assessments still outstanding for students whose applications were lodged in 2009 for service in 2010 will be undertaken in the second half of this year.

Students known to the service will have access to interventions services, outreach program and intensive residential program where required. The Panel acknowledges the Ministerial announcement made on 16 June 2010 that the residential program will continue for terms 3 and 4, 2010. This program will be available through Royal Far West at Manly.

The Panel notes that the recent tasking of a NSW Education and Training officer to make contact with families of students who made application to the joint health and education service for support in 2010 has been well received and has gone some way to alleviating concerns.

## ***Transition period 2010-2011***

To allow time for the Centre to develop fluent and effective application and access processes for full operation, the Panel suggests an interim application process be based on students' level of reading difficulty, but would not yet require the response-to-intervention evidence.

It is proposed that referrals for a service in 2011 be managed through the current referral process. The joint health and education placement panel will look at each application and determine whether the child will be referred for an assessment at Tier 2 or Tier 3.

## ***Information about services, eligibility and application process***

The Panel notes that the application process would need to be further developed during the transition period.

The Panel advises that information about the service, eligibility and application process be provided widely so that parents and schools are aware of the supports available through the Centre.

Further, it is suggested that information about timeframes and points of contact for parents and schools be clearly described and distributed.

## ***Communication***

The Panel acknowledges that parents of children with complex reading difficulties from rural and remote areas of NSW are keen to know how the strengthened services will operate.

The Panel strongly advises a communication strategy be developed to provide information to parents, schools and health professionals about the services the centre will be providing.

# References

---

Brent, M., Gough F., Robinson, S. (2001) One in eleven: practical strategies for teaching adolescents with a language learning disability ACER Press Camberwell, Vic

Department of Education, Science and Training (2005) Teaching reading: national enquiry into the teaching of literacy. Commonwealth of Australia

Fuchs, D. & Fuchs, L.S. (2006) New Directions in Research: Introduction to response to intervention: what, why, and how valid is it? Reading Research Quarterly, 41, 1. 93-99

Goninan, M. (2008) Supporting students with learning difficulties in rural and remote areas: unpublished literature review for the NSW Department of Education and Training

Graham, L. and Bailey, J. (2007) Learning disabilities and difficulties: an Australian conspectus – introduction to the series. Journal of learning disabilities, 40, 5, 386 - 391

Harris-Murri, N., King, K., & Rostenberg, D. (2006) Reducing disproportionate minority representation in special education programs for students with emotional disturbances: toward a culturally responsive response to intervention model. Education and treatment of children, 29, 4, 779-799

Hattie, J. (2009) Visible learning: A synthesis of over 800 meta-analyses relating to achievement. Routledge, Abingdon

Howell, K. and Nolet V. (2000) Curriculum-based evaluation: teaching and decision making. Wadsworth, Belmont.

Ingesson, S.G. (2007) Growing up with dyslexia: interviews with teenagers and young adults. School Psychology International 2007; 28; 574

Kameenui, E. and Carnine, D. (1998) Effective teaching strategies that accommodate diverse learners. Prentice Hall, New Jersey.

Kamps, D.M. and Greenwood C.R. (2005) Formulating secondary-level reading interventions. Journal of learning disabilities, 38, 6, 500-509

Kurrajong Early Intervention Service (2005) Promising practice profiles: rural beginnings project practice hub and spoke model of service delivery to rural communities. <http://www.aifs.gov.au/cafca/topics/targetgroup/targetgroup.html>

Levine, M. (2003) The myth of laziness. Simon & Schuster

Reschly, D.J., Holdheide, L.R., Smartt, S.M. & Oliver, R.M. (2008) Evaluation of LBS-1 teacher preparation in inclusive practices, reading, and classroom organization-behavior management. Paper submitted to the Illinois State Board of Education

Rose, J. (2009) Identifying and teaching children and young people with dyslexia and literacy difficulties; An independent report to the Secretary of State for Children, Schools and Families: United Kingdom

Stecker, P.M. (2007) Tertiary intervention: using progress monitoring with intensive services. Teaching Exceptional Children, 39, 5, 50-47

Vaughn, S. & Roberts, G. (2007) Secondary interventions in reading: providing additional instruction for students at risk. Teaching Exceptional Children, 39, 5, 40-46

West J.F., Idol, L. and Cannon, G.S. (1989) Collaboration in the schools: An inservice and preservice curriculum for teachers, support staff and administrators. Pro-Ed, Austin.

GPO Box 33  
Sydney NSW 2001  
Australia  
T 9561 8000  
[www.det.nsw.edu.au](http://www.det.nsw.edu.au)

© July 2010  
NSW Department of Education & Training



NSW  HEALTH

The NSW Health logo, which consists of a white cross with a smaller cross inside it, set against a blue circular background.