

Selecting the level of adjustment

The collection of data for the Nationally Consistent Collection of Data on School Students with Disability (NCCD) is based on the professional judgement of teachers and school teams about the adjustments provided for students as part of day to day practice. Adjustments are actions taken to enable a student with disability to access and participate in education on the same basis as other students. When schools are determining the inclusion of a student in the data collection, teachers consider:

- the level of adjustment provided to a student to address a disability as defined under the *Disability Discrimination Act 1992 (DDA)*
- the broad disability category and
- the available evidence of the adjustment that has been made on the basis of a disability.

The evidence will reflect a wide range of practices of teachers and schools in meeting the educational needs of their students consistent with obligations under the DDA, the Disability Standards for Education 2005 and best teaching practice.

For a student to be included in the NCCD, the school must have evidence that adjustments have been provided for a minimum period of 10 weeks of school education (excluding school holiday periods), in the 12 months preceding the census day. The minimum 10-week period does not need to be consecutive. It can be cumulative and split across school terms in the 12 months preceding the census day.

School principals are responsible for verifying or confirming that there is evidence at the school to support the inclusion of a student in the data collection and reporting levels of adjustment and category of disability. In keeping with best practice, schools should retain relevant evidence of their provisions for students at the school.

Schools are encouraged to consider and discuss the types of evidence available in their setting to support their judgements about the inclusion of students in the data collection.

Schools and teachers make adjustments and provide support for a range of students. Not all adjustments are included in the NCCD.

Educational adjustments made solely for reasons other than disability, for example disadvantage (due to disrupted schooling and/or poverty), are not included in the NCCD.

Students with a disability that has no functional impact on a student's education should not be included in the NCCD (for example, students who wear corrective lenses due to mild vision impairment).

	Support provided within quality differentiated teaching practice	Supplementary adjustments	Substantial adjustments	Extensive adjustments
Level of adjustment descriptors	Students with disability are supported through active monitoring and adjustments that are not greater than those used to meet the needs of diverse learners. These adjustments are provided through usual school processes, without drawing on additional resources, and by meeting proficient-level Teaching Standards (AITSL). Adjustments are made infrequently as occasional action, or frequently as low level action such as monitoring. These adjustments may include: • explicit, minor adjustments, including targeted or differentiated teaching, assessments or activities • specific and relevant teaching strategies to support targeted areas of communication • active monitoring and supervision, meeting health, personal care and safety requirements through usual school processes • enabling access to learning through usual school processes (e.g. through a differentiated approach to teaching and learning) and existing facilities (e.g. existing modifications to buildings and learning environments). Students with a medical condition whose learning and support needs are met through usual processes (e.g. whole-school professional learning) and active monitoring by school staff are included in this category. These students may have a plan in place to support monitoring of their condition. Their identified needs would be subject to close monitoring and review.	Students with disability are provided with adjustments that are supplementary to the strategies and resources already available for all students within the school. Adjustments occur for particular activities at specific times throughout the week and may include: • adapted and additional instruction in some or many learning areas or specific activities • personalised and explicit instruction to support one or more areas of communication • planned health, personal care and/or safety support, in addition to active monitoring and supervision • adjustments to enable access to learning may include: - specialised technology - support or close supervision to enable participation in activities or the playground. - modifications or support to ensure full access to buildings and facilities.	Students with disability who have more substantial support needs are provided with essential adjustments and considerable adult assistance. Adjustments to the usual educational program occur at most times on most days and may include: • additional support or individualised instruction in a highly structured manner, including adjustments to most courses, curriculum areas, activities and assessments • personalised and explicit instruction to support one or more areas of communication • planned health, personal care and/or safety support or intervention, in addition to active monitoring and supervision • adjustments to enable access to learning may include: - specialised equipment - specific planning for access to activities or facilities - closely monitored playground supervision - modification to school environments, such as buildings and facilities - environmental adjustments to support participation in learning - provision of specialist advice on a regular basis - support from specialist staff.	Students with disability and very high support needs are provided with extensive targeted measures and sustained levels of intensive support. These adjustments are highly individualised, comprehensive and ongoing. Adjustments to the regular educational program occur at all times and may include: • intensive, individualised instruction or support in a highly structured or specialised manner for all courses and curricula, activities and assessments • intensive, individualised instruction to support multiple areas of communication • planned, highly specialised and/or intensive health, personal care and/or safety support or intervention • enabling access to learning through: - specialised equipment - highly modified classroom and/or school environments - extensive support from specialist staff.

		Information to support levels of adjustment descriptors			
		Support provided within quality differentiated teaching practice	Supplementary adjustments	Substantial adjustments	Extensive adjustments
Typical adjustment		Quality differentiated teaching practice caters to the needs of a diverse student population. Students at this level do not require the adjustments that are captured in the other three levels. Adjustments at this level generally: • are explicit, albeit minor, adjustments to teaching and school practice that enable students with disability to access learning on the same basis as their peers • have been made in a school as part of developing or maintaining a culture of inclusion. Specific examples of adjustments at this level could include: • adjustments to teaching and learning, such as: - a differentiated approach to curriculum delivery and assessment that anticipates and responds to students' learning differences - personalised learning that is implemented without drawing on additional resources • adjustments to enable access to learning, such as: - whole-school professional learning for the management of medical conditions such as asthma, diabetes or anaphylaxis that require active monitoring. This forms part of a school's general, ongoing practice to equip teachers and education staff with the skills and knowledge to support students' health need - building modifications that already exist in the school and cater for a student's physical disability where no additional action is required to support the student's learning.	Specific examples of adjustments at this level could include: • adjustments to teaching and learning, such as: - modified or tailored programs in some or many learning areas - modified instruction using a structured task-analysis approach - separate supervision or extra time to complete assessment tasks • the provision of course materials in accessible forms • programs or interventions to address the student's social/emotional needs • adjustments to enable access to learning, such as: - the provision of intermittent specialist teacher support - specialised technology - modifications to ensure full access to buildings and facilities - support or close supervision to participate in out-of-school activities or the playground - provision of a support service that is provided by the education authority or sector, or that the school has sourced from an external agency.	Adjustments at this level generally: • are considerable in extent • occur within highly structured situations. Specific examples of adjustments at this level could include: • adjustments to teaching and learning, such as: - frequent (teacher directed) individual instruction - access to bridging programs - adapted assessment procedures (e.g. assessment tasks that significantly adjust content and/or the outcomes being assessed) - regular direct support • adjustments to support communication, such as: - adjustments to delivery modes - significantly modified study materials - adapted assessment procedures (e.g. assessment tasks that significantly adjust mode of presentation and format) • adjustments to support health, personal care or safety, such as: - frequent assistance with mobility and personal hygiene - close supervision in highly structured situations - the provision of additional supervision on a regular basis • adjustments to enable access to learning, such as: - close playground supervision may be required at all times - regular visiting teacher or external agency support - access to a specialised support setting - essential specialised support services for use of technical aids.	Specific examples of adjustments at this level could include: • adjustments to teaching and learning, such as: - personalised modifications to all courses and programs, school activities and assessment procedures - intensive individual instruction - highly individualised learning programs and courses using selected curriculum content tailored to their needs - learning activities specifically designed for the student - the provision of highly structured approaches • adjustments to support communication, such as: - provision of much more accessible and relevant curriculum options - the use of alternative communication modes • adjustments to enable access to learning, such as: - constant and vigilant supervision - extensive support from specialist staff; the use of highly specialised assistive technology - the use of technical aids. Some students may receive their education in highly specialised facilities.
Student characteristics		Through support provided within quality differentiated teaching practice, a student is able to participate in courses and programs at the school and use the facilities and services available to all students, on the same basis as students without a disability. Examples might include: • students with medical conditions, such as asthma, diabetes and anaphylaxis, that have a functional impact on their schooling, but whose disability-related needs are being addressed through quality differentiated teaching practice and active monitoring • a student with a mental health condition who has strategies in place to manage the condition in consultation with medical professionals, that can be provided within quality differentiated teaching practice • a student with a medical condition or a mental health condition that has a functional impact on their schooling and requires ongoing monitoring but who does not require a higher level of support or adjustment during the period they are being considered for the data collection • a student who has been provided with a higher level of adjustment in the past or may require a higher level of adjustment in their future schooling.	Students at this level often require support in accessing the curriculum at the appropriate year level (i.e. the outcomes and content of usual learning programs or courses). Examples might include: • students who have particular difficulty acquiring new concepts and skills outside a highly structured environment. The needs of some students at this level may be related to their personal care, communication, safety, social interaction or mobility, or to physical access issues, any of which may limit their capacity to participate effectively in the full life of their school.	Examples might include: • students who require curriculum content at a different year level to their same-age peers • students who will only acquire new concepts and skills, or access some of the outcomes and content of the usual learning program, courses or subjects, when significant curriculum adjustments are made to address their learning needs • students who have limited capacity to communicate effectively • students who need regular support with personal hygiene and movement around the school. These students may also have considerable, often associated support needs, relating to their personal care, safety, self-regulation or social interaction, which also impact significantly on their participation and learning.	Students at this level may be dependent on adult support to participate effectively in most aspects of their school program. Without highly intensive intervention, these students may otherwise not access or participate effectively in schooling. Many students at this level will have been identified at a very young age and may also: • have complex, associated support needs with regard to their personal care and hygiene, medical conditions and mobility • use an augmentative communication system • have particular support needs when presented with new concepts and skills.