

## **SPECIFIC EDUCATION NEEDS REPORT**

### **Briony Sinclair**

The past 12 months has been an incredibly busy and enlightening time for ICPA both at Federal and State level. The advent of the COVID-19 pandemic has brought about so many changes to communication, health, travel, boarding and education as a whole. There were times when it was incredibly difficult to keep up and that was just from a personal point of view, not from the perspective of someone tracking legislative changes which were happening by the day and sometimes by the minute.

Those who serve as volunteers for any community organisation deserve mention in this space as so much has fallen to them over the past 6 months which has affected and driven many decisions by families and business in rural areas. I would like to say a particular thankyou to those who serve as representatives for ICPA at all levels, without your ongoing resilience and dare I say stubbornness, rural Australia would be a much poorer place.

#### **Medicare Rebate**

So, to my actual portfolio report, there was one Specific Education Portfolio Motion presented to the 2019 Federal Conference in Adelaide last year by Kindon Branch.

*“That ICPA (Aust) lobbies the Minister for Health and Federal Treasurer to extend the Medicare rebate to include patients wishing to access speech pathology and paediatrician appointments through telehealth deliveries.”*

The singularity of the one motion does not do justice to the sometimes insurmountable challenges families who are raising children with Specific Needs face in educating those children in rural and remote areas of Australia.

ICPA (Aust) corresponded with several Ministers and departments to raise this issue and received a reply from the office of then Minister for Regional Services, Decentralisation and Local Government the Hon Mark Coulton MP. He outlined the plans the government has for the future of telehealth, mentioning that the Government has a 10-year plan focusing on primary healthcare in the short term, and in the longer term, aimed at reforming the system so that primary health providers are better equipped to assist those in rural and remote areas. He also explained that the Government’s Australian National Digital Health Strategy has highlighted the importance of digital health in the clinical setting and that under the Strategy, the Australian National Digital Health Agency is developing options to harmonise telehealth models by reviewing current use and addressing barriers to embedding telehealth services into clinical settings. Federal Council was also informed that applications for new or amended medical services to receive public funding can be made to the Medical Services Advisory Committee (MSAC) which advises the Government about what services need to be on the Medicare Benefits Schedule (MBS). No mention was made however, of possibilities of real impact for rural and remote families raising children with specific health and education needs.

#### **Telehealth**

Since the COVID-19 pandemic has arisen there has been increased access to Telehealth for certain disorders, especially mental health, and Medicare rebates have expanded to cover these services. This increase was much needed and appreciated however it still did not cater to the needs of all students and pre-schoolers in remote and rural locations with specific health issues affecting their learning. These changes have a limited lifespan and are currently due to expire in September.

ICPA (Aust) is determined that there should be an extension/expansion of a Medicare rebate for telehealth services for a range of allied health services for all remote students who rarely/never have access to specialist support due to their geographic location, not just in times of crisis. This issue was

mentioned in our most recent submission to the Standing Committee on Employment, Education and Training's "Inquiry into Education in Remote and Complex Environments - Home Learning and Teaching in COVID-19". The request for the addition of an MBS number for telehealth appointments specifically related to a child's educational success will remain in policy and Federal Council will continue to advocate for this on behalf of our members.

### **National Rural Health Alliance (NRHA)**

Part of my role is to liaise with the National Rural Health Alliance (NRHA). They are a body of 44 national organisations representing health consumers, health care professionals, service providers, health educators, students and the Indigenous health sector which make up the Alliance. The Alliance collects and shares information, determines key issues that affect health and wellbeing in rural and remote areas, and provides advice and evidence to governments, educational and research institutions, and other professional bodies.

ICPA (Aust) were pleased to meet with the driving force behind the NRHA, Dr Gabrielle O'Kane during our face-to-face meetings in Canberra in October last year. We were able to discuss with Dr O'Kane our members' concerns regarding healthcare access in rural and remote areas and pass on individual stories which always gives credence to our discussions.

The NRHA has also set up a subcommittee for Rural Digital Health. The main focus of this group is

1. Connectivity
2. Interoperability
3. Funding Models
4. Digital Health Literacy

I have joined this subcommittee with a hope to give input which may assist our members in the long term.

### **National Rural Health Commissioner**

The National Rural Health Commissioner role will continue for another term. The National Rural Health Commissioner role is a world first and Emeritus Professor Paul Worley has used his time since Nov 2017 to comb through 20 years of documentation, discussing issues with stakeholders both local and professional, finishing by writing a report for Minister Coulton regarding Allied Health Delivery in Rural Australia. If you would like to read his findings and the ensuing recommendations you can do so here [https://www1.health.gov.au/internet/main/publishing.nsf/Content/815AFEED0337CF95CA2581D30076D095/\\$File/National%20Rural%20Health%20Commissioner's%20Allied%20Health%20Report%20to%20the%20Minister%20June%202020.pdf](https://www1.health.gov.au/internet/main/publishing.nsf/Content/815AFEED0337CF95CA2581D30076D095/$File/National%20Rural%20Health%20Commissioner's%20Allied%20Health%20Report%20to%20the%20Minister%20June%202020.pdf).

Professor Worley is stepping down from this role and Associate Professor Ruth Stewart has been appointed to the role which has been expanded along with the offices. Associate Professor Stewart's Office will include Deputy Commissioners who will support the Commissioner and provide expertise across a range of vital rural health disciplines such as nursing, allied health and Indigenous Health. The Office will contribute to significant health reforms already under way, including in primary health care reforms, workforce and training. The Professor will drive innovation, with a clear focus on supporting on-the-ground improvements.

The expansion of the role and offices of the National Rural Health Commissioner is a major boon for those living in rural locations. Having a specific office which looks to our communities and their health service requirements is very exciting and I look to the future of this appointment with hope that there will be measurable and practical improvements for our members' families and their health and learning.

### **Delphi Study**

ICPA (Aust) also recently participated in the Delphi Study which looked at ways to improve delivery of health services to children in diverse settings including rural and remote regions. The study was

conducted by a PhD candidate working in the healthcare sector. Our participation in these types of studies helps to guide researchers and healthcare workers to providing better service delivery to clients and their families in the long term.

### **Digital Health for the Bush**

ICPA (Aust) was represented on a panel at a 'Digital Health for the Bush' workshop in the Northern Territory last year. The workshop was presented by the Australian Digital Health Agency, Asia Pacific College of Business and Law, CDU and organisers of Broadband for the Bush. The main aim of the workshop was to gain a better understanding of stakeholder's experiences of digital health and telehealth in the Northern Territory and how improved access could benefit regional and remote communities. ICPA (Aust) was able to give important feedback to the leaders of digital health provision in Australia on behalf of our members.

It remains to be seen if the developments of the past twelve months and especially those that have come with COVID-19 will be maintained, however ICPA (Aust) will continue to ensure that the needs of our rural and remote children with specific learning needs are raised. Despite the pandemic and all of its challenges for ourselves and our students it has been a productive 12 months and I look forward to the next 12.