REQUEST FORM AND PARENTS AND CARERS CONSENT FORM

Request to observe a student on school grounds

The Department of Education (the department) provides educational programs to Victorian government school students.

The National Disability Insurance Scheme (NDIS) provides people with disability with the reasonable and necessary supports to participate in the community and achieve their goals.

On occasion, schools may receive requests from parents/carers to allow an NDIS funded therapist to provide support or therapy to their child (the student) on school grounds or virtually during school hours (request). These requests are made via a completed Request Form.

The department is committed to supporting students and their parents/carers to optimise the benefits offered by the NDIS. Consistent with this commitment, Victorian government schools are encouraged to accommodate students and their parents/carers exercising choice and control in relation to NDIS supports, where practical to do so.

There are several relevant factors that must be considered when determining whether or not it is possible for the school to agree to such requests. These factors are set out in *Responding to requests for NDIS funded therapy in schools – Guidelines for Principals*.

For the principal to consider such requests, NDIS funded therapists and parents/carers must:

- complete the attached **Request Form**
- have the student's parent/carers sign the attached **Parents and Carers Consent Form**
- provide the completed forms, and any other relevant documents to the school at the time of making the request.

When the completed **Request Form** and **Parents and Carers Consent Form** are provided, the principal will consider all relevant information and aim to respond to the request within 10 working days.

If you have any questions regarding the **Request Form** or **Parents and Carers Consent Form**, please contact the principal.

ATTACHMENT 1: REQUEST FORM AND PARENTS AND CARERS CONSENT FORM

TO BE COMPLETED BY NDIS FUNDED THERAPIST

Details of therapist making request	
Name of therapist	
Company	
Company address	
Phone number	
Email address	
Qualifications held by therapist	
Professional registration details of therapist	
Is the therapist an NDIS registered practitioner? (Y / N)	
Details of student	
Name of student	
Year level / teacher of student	

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Are there particular family, social or practical circumstances that are relevant to the request?	
Details of the proposed therapy	
Purpose of the proposed one-hour observation on school grounds	
Proposed date / time the observation will occur	
Proposed aims and benefits of the observation being provided at school / in school time	
Attach relevant documents	
Please attach proof of a satisfactory **Working with Children Check** for the therapist	Tick to confirm the relevant documents are attached ☐
Please attach **certificates of currency** for the following insurances held by the therapist / company / incorporated association: • public liability insurance	Tick to confirm the relevant documents are attached ☐

ATTACHMENT 1: REQUEST FORM AND PARENTS AND CARERS CONSENT FORM

• professional indemnity insurance	
Acknowledgment by NDIS funded therapist	
I ……., acknowledge and agree that, if the principal approves my request to observe a student on school grounds: • I, or my company/incorporated association if I am an employee of a disability service provider, must enter into a **licensing agreement** with the School Council which sets out the terms and conditions of my use of the school premises; and • subject to the consent of the student's parent(s) or carer(s), I must sign an information sharing deed which requires me to share relevant information about the student with the principal and/or nominated school personnel. Copies of the relevant licensing agreement and relevant Information Sharing Deed are available upon request.	Signed ……. Print name …….. Date ……

REQUEST FORM AND PARENT AND CARER CONSENT FORM

PARENTS AND CARERS CONSENT FOR NDIS FUNDED THERAPY AT SCHOOL

This Parents and Carers Consent Form records consent to:

a) the NDIS funded therapist sharing important and relevant information about the student with the school (as set out in the Information-sharing section below)
b) the NDIS funded therapist providing support or therapy to the student, on school premises (if and when the principal agrees to the request).

Sharing student information

Schools must comply with the Victorian privacy law when collecting and otherwise managing personal and health information about students and their families (**student information**). Our school only collects and shares student information as permitted by the **Schools' Privacy Policy**, which is available at: https://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx

The department requires that NDIS funded therapists providing support or therapy to a student at school share important and relevant information about the student with the school. The school requires this information to optimally educate and support the student and fulfil important legal obligations.

This means that the NDIS funded therapist must provide student information to the school as follows:

- information about the student's disability and their needs - in the way/s and at the times specified by the principal
- student information that relates to reasonably foreseeable risk to anyone. This includes, for example, information that the student has emotional, wellbeing or
  self-harm issues; displays aggressive or violent behaviours; is a victim or perpetrator of bullying, assault or age-inappropriate sexualised behaviours.

The principal will only share this information with other staff who 'need to know' to enable the school to educate or support the student or fulfil legal obligations. For more information, see the Schools' Privacy Policy, which also describes how you may seek to access and/or correct information held by the school about the student. Alternatively, please feel free to contact our school to discuss this further.

Your consent

I confirm that I have read this Consent Form and:

- I support the request for the NDIS funded therapist to provide support or therapy as described in the Request Form, to my child (named below) at school.
- I understand that if the principal agrees to the request, the NDIS funded therapist must share information about my child with the school, as described above.

- If I wish to withdraw my consent for the NDIS funded therapist to conduct an observation on school grounds for my child, I can do so by contacting the school.

TO BE COMPLETED BY PARENT OR CARER*

Student details			
Student name		**Date of birth**	
Student's school		**Year level**	
Therapist details			
Therapist name			
Consent of parent, carer, guardian or mature minor*			
Name		**Signature**	
Relationship to student		**Date signed**	
Phone number and email			

***Who may sign this form?**

1. Any of the following people may sign this form:

a. a person with **parental responsibility** for 'major long-term issues' as defined in the *Family Law Act 1975* (Cth)
b. a person authorised to make health decisions for the student under the *Children Youth and Families Act 2005* (Vic).
c. An adult student

2. If neither of the people described in (1) are available, an **informal carer** may sign this form. An informal carer is a relative or other responsible adult with whom the student lives, and who has day-to-day care of the student. Informal carers should provide to the school a signed 'Informal Carer' statutory declaration. Parent(s) can contact the school for assistance in obtaining a copy of this document.
3. If a principal has determined the student is a **mature minor** for the purpose of making this specific decision, the student may sign the form. The principal makes this decision consistent with the Mature Minor policy on Policy and Advisory Library (PAL).