

# Guide to tutoring requests for school students with brain injury

This guide outlines Lifetime Care's approach to funding tutoring as an education support strategy. It aims to provide guidance to education and service providers when considering requesting funding for tutoring services for a participant. This document is supplementary to the *Lifetime Care and Support Guidelines* regarding Education Supports which is on the Guidelines and Policies page on the icare website, [Guidelines and Policies | icare \(nsw.gov.au\)](https://www.icare.nsw.gov.au/guidelines-and-policies).

## Background

This guide is the result of a project that aimed to define the features of tutoring services that may be within the scope of the Scheme and to develop a framework for the evaluation of funding requests for tutoring.

Decision-making regarding the approval of funding for Education Support is based on a range of defined criteria, however requests for tutoring have been difficult to assess. Recent evidence reiterates the difficulty in determining best practice for supporting students with brain injury with their schooling and there are limited peer-reviewed studies on the benefits or considerations of academic tutoring for these students. There are also limited studies on other effective strategies and those that do exist are observational and descriptive in nature.

Lifetime Care promotes a comprehensive, collaborative and individualised approach from all stakeholders when supporting students with identified learning needs as they grow and develop. It is acknowledged that learning needs will evolve and change as the student progresses through school and that regular assessment and revision of effective strategies will be required to reflect their current needs and to assist the student to reach their goals.

## Definitions used within Lifetime Care

### Tutoring

Tutoring relates to a specific need for education support as a direct result of the accident-related injury.

Tutoring:

- is subject-specific
- is linked to the curriculum (not cognitive therapy or support for organisational skills) and supports the goals and outcomes of the student's personalised plan. It's not a stand-alone service.
- incorporates strategies known to be effective for students with brain injury such as remedial teaching, error free learning and personalised strategies recommended in neuropsychological and other relevant assessments and reports
- is provided outside of school hours
- can be delivered 1 on 1 or in small groups but must be personalised
- should be supplemented by other relevant specialist supports such as neuropsychology, psychology, speech pathology and occupational therapy.

## **Individualised Education Plan / Personalised Learning and Support Plan**

A student's personalised learning and support plan describes the adjustments, goals and strategies that will be used to meet their individual educational needs so they can reach their full potential. It considers the student's specific learning needs and is developed by school staff who know the student well with input from the student, their family/informal network, therapy team and any other relevant parties. The terms Individualised Education Plan and Personalised Learning and Support Plan are used interchangeably depending on the school.

## **Learning Support Team**

This team may be a formal arrangement but may also refer to an ad hoc group who are brought together to collaborate on the student's specific and individual learning needs. The team is a collaborative network that supports the student throughout their education to successfully achieve their goals and realise their potential. It may include the student themselves, their parent/guardian, the class teacher, learning support staff, the school principal, school counsellor, specialist health or therapy personnel and icare contacts.

## **Tutor**

A tutor is someone who has accumulated relevant knowledge, skills and experience in a subject area and is able to help students improve their performance or skillset in a particular subject or learning activity. Tutoring is not meant to replace regular classroom learning activities or class attendance.

## **Allied Health Assistant**

An Allied Health Assistant is somebody with specific skills that works closely with and under the supervision of a treating Allied Health Clinician, such as an Occupational Therapist, Physiotherapist or Speech Pathologist, to support the implementation of therapeutic interventions and strategies, usually at a reduced cost compared with the therapist. An Allied Health Assistant will not have a role in the academic or subject content component of the student's learning support needs.

## **Education Support Request (ESR) Form**

Use the Education Support Request (ESR) form for any support requested to be delivered within the education facility.

## **Service Request (SR) Form**

Use the Service Request Form for Lifetime Care for any tutoring support requests.

## **Preparing the request for the tutoring service**

### **1. Which participants may be considered appropriate for tutoring requests?**

The participant is most likely to be a student of high school age who has a specific need, as a result of the brain injury, to consolidate identified academic skills. Other adjustments and strategies to support the student should already have been implemented by the student's teacher and learning and support team.

### **2. When is tutoring not considered appropriate?**

Tutoring is not appropriate when:

- a student does not want to participate
- it may increase fatigue or anxiety
- the student is in primary school
- it's used to meet unrealistic parental/family expectations.

Tutoring does not include tasks that are the responsibility of a parent or guardian such as supervising homework, helping access the local library or other resources or project materials.

### **3. What evidence should I provide in the request for tutoring if it has been identified as the most suitable approach?**

Documentation from meetings or correspondence demonstrating collaboration (including student, parent/guardian, educators/school staff, health/therapy workers) must be provided that demonstrates:

- how the decision was made to request tutoring
- why tutoring was identified as the most suitable approach
- that the request for tutoring has been agreed to by all parties
- the adjustments and strategies currently being implemented in the school and classroom
- how the tutoring requested will complement the overall comprehensive strategy/plan

All these strategies, including tutoring, must be consistent with the student's specific needs and their personalised learning and support plan.

Subsequent requests for tutoring will need to include review of the measurable benefits of the previous tutoring, including details of progress or achievement of the previously identified goals and outcomes in addition to the below information for each new request.

### **4. What if there is a learning support need identified that is not related to tutoring?**

The student may have support needs related to other areas of learning such as organisation, initiation and motivation that is above and beyond the typical student needs. This can become more noticeable and frequent in the later years of school as the workload and demands increase.

In some circumstances, there may be a need for assistance outside of school hours to implement additional strategies for these identified needs that are above and beyond what is considered typical parental support. This type of support is outside the role of the tutor and should be underpinned by relevant therapy recommendations. For example, an Occupational Therapist may be required to support learning needs in relation to set up of their home workstation, structuring homework and assignment timetabling and prompting. If the student requires ongoing active support to implement and manage these additional strategies, an Allied Health Assistant may be an appropriate worker to provide this.

### **5. What evidence should I provide in the request for other supports related to learning needs?**

The same level of evidence and documentation is required for requests for other learning supports such as those being delivered by an Allied Health Assistant. Like tutoring and in-school learning support, this intervention should be part of a collaborative, wrap-around approach, with the overall comprehensive strategy/plan demonstrating how all elements of education support fit together.

# Applying Reasonable and Necessary criteria to the request

## 1. Benefit to participant

Your request needs to demonstrate that:

- providing tutoring will benefit the participant's specific learning
- the student has agreed to participate in the program
- the tutoring would promote the student's engagement and confidence in the education setting
- the expected outcomes of the tutoring will show that the student is gaining and consolidating the concepts, by objective measures and changes in the student's academic performance.

## 2. Appropriateness of request

Your request must demonstrate that the tutoring has been identified as the most effective approach for the student after adjustments and strategies implemented by the school have been considered. It must:

- outline what subject tutoring is being requested for
- include evidence of collaborative planning amongst stakeholders around the student (student, parent/guardian, educators and health/therapy workers) such as meeting notes
- include reports and recommendations from a special education consultant, or other specialist in child education and development, that tutoring is the most appropriate intervention at that time
- identify in detail the specific individual academic subject needs of the student as well as clear goals and expected outcomes of tutoring, including what measures and reports will be used to demonstrate the outcome and benefits compared with identified baseline performance
- demonstrate that the tutoring is clearly linked to the student's curriculum and is consistent with the personalised learning and support plan in place for them
- detail which other models of education support have been considered and are incorporated in the student's schooling or have been rejected and the reasons why
- describe any other adjustments and strategies implemented in the school and classroom so that the context of all the supports around the student can be appreciated.

When considering tutoring, other student factors such as anxiety, fatigue, and logistics need to be taken into account. Generally tutoring is not considered appropriate when a student does not want to participate, for those with anxiety-related problems, for primary school children and when used to meet unrealistic parental/family expectations.

## 3. Appropriateness of Provider

The provider of the requested tutoring service must have:

- teaching skills
- knowledge of curriculum, subject content and current teaching practice in the specific subject that tutoring is required for
- understanding of impacts of brain injury on education and learning or be willing to up-skill in this area
- individual commitment to the requested program (consistency of the tutor)
- good communication skills: participate in the planning meetings, collaborate with the student's support network to ensure a cohesive approach to learning needs, collaborate in the selection of the outcome measures, critically evaluate effectiveness of techniques, and provide progress reports as required
- ability to complete ongoing monitoring and make any adjustments required during the block of the tutoring service
- current Working with Children Certification.

## 4. How the request relates to the injury sustained in the accident

Your request needs to demonstrate that the need for tutoring is linked to the injury the student sustained in the accident and is complementary to and consistent with other adjustments and strategies incorporated into the student's school program.

Provide evidence that the student has a need for tutoring in a specific subject due to the brain injury and reference current school reports.

## 5. Cost effectiveness

Your request needs to demonstrate that tutoring will provide both short and long-term benefits to the student and is the most appropriate option to achieve these benefits. This may include discussion of rejected alternatives. The rate (fee) charged by the provider must also be comparable to current market pricing and any additional costs justified.

# Submitting the request

## 1. Who can submit the request for tutoring?

The Case Manager, either internal and external, appointed by Lifetime Care will usually be the lead in the relevant meetings and prepare documentation regarding requests for tutoring. This documentation must show that the request was developed in collaboration with all relevant personnel including the student themselves.

The request for tutoring must summarise evidence that the final request has been agreed to by all parties, show a clear link with the student's personalised learning and support plan and the supports provided by the school, and align with the Lifetime Care Education Support Request (ESR) if one has been submitted.

## 2. What form do I use?

Submit requests for tutoring to [care-requests@icare.nsw.gov.au](mailto:care-requests@icare.nsw.gov.au) using a general Service Request Form. Your request should include the information described in this document and demonstrate how the tutoring relates to other education supports and the overall support strategy for the participant's learning needs.

## 3. What length of time can be requested for the tutoring program?

Requests for tutoring should generally be consistent with the timeframes in the ESR, or term by term where there are suitable measures and progress analysis is in place.

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