



Equitable Access Adjustments for Mental Health Conditions

Operational Definition

For the purpose of assessing equitable access applications, the following operational definition is used:

A mental health condition is a disorder or illness that affects a student's thought processes, judgement, perception of reality, or emotional and social wellbeing.

The symptoms significantly impact on a student's cognitive functioning.

The current presenting symptoms must be supported by evidence from a range of sources including a student's history, school observations and appropriate health professionals.

Evidence

The health professional providing supporting evidence must:

- be the student's primary treating health professional and working within a relevant area of mental health as defined by the regulation body, and
- have made a comprehensive assessment of the student, seen the student recently, and may have established a treatment program for the student. (The treatment plan may not be considered necessary in all cases, e.g. if requesting low level support such as out-of-order seating), and
- be independent from the student (e.g. not be related to or a friend of the student). Evidence provided by a school-based health professional is acceptable.

The health professional should provide information required for the Authority to make an assessment as to the impact of the mental health condition on the student's access to the ATAR course examinations. This will include:

- clinical assessments, diagnosis (if available), date of diagnosis
- consultation history, presenting symptoms
- treatment periods and plans (if available)
- description of severity; the impact of the student's mental health condition on learning and assessment.

The school should provide relevant information such as:

- history of the student's mental health condition, from the school's perspective
- observed difficulties in the classroom and during assessments
- changes in student's condition over time
- history of any provisions approved at school level
- how the provisions have assisted the student.

Appropriate Provisions

The most appropriate provisions for students with mental health conditions are:

- out-of-order seating, in the position most suitable for the student
- permission to take medication into the examination room, according to doctor's instructions
- rest breaks (in most circumstances) taken at the student's discretion. These are calculated at the rate of 5 minutes per half hour of examination, with none calculated for the last half hour. The student is permitted to leave the room under supervision if they wish.
- extra working time – only where justified (as below)
- separate supervision – only for extreme cases where a student cannot attend class due to a social anxiety disorder or other situations (as below).

A request for **extra working time** needs to be supported by compelling evidence from treating health professionals and the school that demonstrates significant impact of the student's executive functioning and a decline in academic productivity and performance that cannot be rectified by rest breaks. The evidence may include:

- results of a Developmental Neuropsychological Assessment (NEPSY) administered by a suitably qualified health professional (students aged 3-16), and/or
- results of a Behaviour Rating Inventory of Executive Function (BRIEF) administered by a suitably qualified health professional (students aged 5-18), and/or
- evidence of student's decline in performance from the school providing student results or essays pre- and post- the onset of the mental health conditions; school observations and history of other provisions (specifically rest breaks) being trialled unsuccessfully for a reasonable period (usually six months).

Separate Supervision

Students should not be removed from the standard examination room or special examination room unless there is compelling evidence of need. Most examinations in special centres are conducted in small groups.

Criteria for allocation of separate supervision include:

- contagious illness, with risk of infecting others
- susceptible to infections, e.g. weakened immune system from recent chemotherapy
- disruptive student who will interfere with the examination for others, e.g. Tourette syndrome with vocal or noisy physical tics, uncontrollable actions for a student with Autism spectrum disorder
- violent student who poses a risk to other students or supervisors e.g. uncontrollable behaviour when stressed
- unable to attend class due to extreme social anxiety
- technology likely to interrupt others, e.g. keyboard, ventilator
- lighting conditions unsuitable for other students
- frequent nursing care.