



File Ref: 2013/04203

Director-General

STUDENTS WITH COMPLEX MEDICAL NEEDS PROGRESS REPORT**Recommendation**

That you note the information provided in this brief.

*Please draft brief
for Minister's information*

NOTED/PLEASE DISCUSS

[REDACTED]

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Background

The ACT Education and Training Directorate and the ACT Health Directorate have an arrangement whereby students with complex medical needs in particular ACT public schools receive health support from registered nurses. These schools are Cranleigh School, Malkara School and Black Mountain School. Currently, [REDACTED] is provided with nursing support.

The existing model of nurses working in specialist schools has been in place since the 1970s. Employment of nurses in these schools shifted from the Directorate to ACT Health at the beginning of 2003.

A new model for providing health care at school, Health Access at School (HAAS), is being piloted with a student at [REDACTED] Preschool. HAAS is designed to support children who have complex healthcare needs to attend school through the provision of nurse-led care during school time.

Issues

As the provision of nurses in specialist schools pre-dates self government, there is little evidence of a formal agreement between the directorates on the provision of nurses in schools.

A Memorandum of Understanding (MOU) is being formalised between the Directorate and ACT Health to cover the range of agreements between the directorates, including the provision of nursing for students with complex medical needs.

Budgetary responsibility for programs identified in the MOU require clarification to ensure that the Directorate is only responsible for education in schools while ACT Health maintains responsibility for funding the delivery of health services in schools.

HAAS will initially supplement existing nursing services in schools but has the potential to be more beneficial for students than the current model of health care in schools as it is informed by evidence, personalised, and addresses specific need.

To qualify for HAAS, students are assessed by ACT Health to determine, in consultation with their family, the level of health assistance required at school. The care provided under HAAS may include, but is not limited to, care of tracheostomy, provision of nutrition or medication via gastrostomy, catheterisation, and oxygen therapy. This level of care does not necessarily require a registered nurse as a nominated "unlicensed worker" can provide this care safely under instruction from a nurse – in the same way that parents can provide the care at home.

The nurse is a link between parents and the school, and ensures that the "unlicensed workers" have appropriate instruction, support, and skills to provide care for the nominated students. Routine healthcare needs, such as first aid, are managed within existing school processes. When the level of care requires a nurse, ACT Health will allocate nursing resources.

The HAAS pilot has not yet been evaluated. Early indicators of success are, however, present. The following issues have been identified and will be addressed in the evaluation:

- Budget implications, including school staffing

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- Parent and community expectations about the provision of nurses in many or all ACT public schools will also need to be considered.

Consultation with Finance and Corporate Support and Funding Implications

Budgetary responsibility for nurse programs will need clarification to ensure that the Directorate is responsible only for the education of students in schools, while ACT Health maintains responsibility for funding delivery of health services in schools.

Consultations

ACT Health and the Directorate met with stakeholders in 2012 to outline the early models for HAAS. Specialist School Principals have had initial consultation about the HAAS pilot.

Media

Collaboration between directorates to provide health services for students with complex needs in schools has generated positive media attention.

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Stephen Gniel
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