



ACT
Government
Education and Training

BRIEF

Trim No: MIN14/1414

SUBJECT: Healthcare Access at School (HAAS)

To: Minister for Education and Training

From: Deputy Director General, Education Strategy

Director: Beth Mitchell
Branch: Student Engagement

Recommendation

That you:

- note the information contained in this brief

NOTED/PLEASE DISCUSS

- note the uncertainty about how HAAS can be funded under the NDIS, as ETD and ACT Health are unable to meet likely additional cost pressures

NOTED/PLEASE DISCUSS

- agree not to expand the HAAS pilot to further specialist schools until a detailed analysis of cost impacts is undertaken and further consultation with stakeholders occurs

AGREED/NOT AGREED/PLEASE DISCUSS

- agree to continue the pilot with existing clients in mainstream schools and Black Mountain School and The Woden School

AGREED/NOT AGREED/PLEASE DISCUSS

*update when info available
as you work thru options*

Joy Burch MLA 14/1/15

Action Officer: Iain Barr
Branch: Student Engagement
Extension: 59391

Critical date and reason

Decisions that will impact on the proposed pilot schools for the 2015 year need to be made as soon as possible in order to notify school principals prior to the commencement of the new school year.

Purpose

To update you on progress of the Healthcare Access at School (HAAS) pilot and to provide an outline of the 2015 plan for the pilot in response to that update.

Background

Over the past 22 months, a new model of care to support the complex and/or invasive health care needs of students to enable them to attend school has been trialed in a small number of ACT public schools.

The new model was developed in accordance with the policy frameworks of the Directorate's *Students with a Disability: Meeting Their Educational Needs* and the *Disability Standards for Education* 2005.

HAAS is a model of nurse-led, delegated care designed to meet the routine healthcare needs of students to enable them to access an educational program. Through the HAAS pilot, Education and Training Directorate staff are provided with training, and on-going support from the HAAS nurses to provide the required health care support.

The HAAS pilot commenced in February 2013 in mainstream schools.

During 2014, the HAAS pilot was expanded to include specialist schools. Black Mountain School is transitioning to the HAAS model and the Woden School is already participating. Cranleigh is in the early phases of transitioning; and it is proposed that Malkara will do so in 2015.

As at October 2014, six students attending mainstream schools, two students attending The Woden School, and 14 students attending Black Mountain School were being supported through the HAAS program.

Prior to the introduction of the pilot, complex and invasive healthcare needs of students were met in a range of ways:

- In mainstream schools, the healthcare needs of students were managed on an individual basis. This included support provided and funded through ACT Health including registered nursing, private agency nursing, community nursing and Caring For Kids, and supports provided and funded through the Directorate such as Learning Support Assistant support.
- Some specialist schools (Malkara, Cranleigh, and Black Mountain) have had registered nurses on site responsible for providing this care. Four registered nursing positions have been funded through ACT Health for these specialist schools. ACT Health has also contracted private agency nurses at The Woden School.

Each student in the pilot has undergone a HAAS Health Assessment and had a Healthcare Support Plan developed by the HAAS Nurse. These plans are developed in

collaboration with the family and other health professionals as required. A "level" of healthcare is determined based on this information.

The level of care ranges from intermittent support, where the student requires intervention one or more times a day, to 1:1 support, where the student requires continuous dedicated healthcare support all day. The latter level of support is much more costly.

Issues

While the Healthcare Access at School (HAAS) pilot is demonstrating successes, the cost implications are of concern. As well, the full impact of the NDIS on funding arrangements is still unknown.

Initial data indicates that HAAS delivers a more personalised level of care to more students in more schools, but at a greater cost, than the old model of nurses in specialist schools. The old model saw the cost burden fall to ACT Health alone.

Under HAAS, the costs are shared between the directorates. In order to contain costs in 2015, it is proposed not to proceed with an extension of the pilot to the other specialist schools until more detailed analysis of funding arrangements, including the impact of the NDIS, can be undertaken. The pilot in mainstream schools and at Black Mountain School and The Woden School will continue as the numbers of eligible students, and the costs per student are manageable.

Over 2015, the plan is to explore a range of options to ensure that the HAAS scheme can be sustainable in the long term, including:

1. recalibrating key parameters of the current scheme to contain total costs.
2. more closely defining the scenarios where the new model will deliver more cost efficient services and where it will not.
3. allowing the NDIS trial to catch up with the HAAS pilot and using an analysis of that information to inform directions in 2016.

Initial analysis of the HAAS trial.

There has been some very positive aspects of the pilot shared by families involved in the HAAS trial. In these cases the quality of the educational and health experience of the students has clearly been enhanced.

In some cases, costs previously incurred by a specialist school are now being incurred by a mainstream school. This shift complicates the measuring of the net costs of the new HAAS scheme.

An analysis of student participation data in HAAS in 2014 and the number of LSAs providing care shows that:

- the total gross cost to provide attendant care support for students with complex and invasive health care needs is approximately \$520,000.

- The cost per student under the HAAS model can be particularly expensive in those schools where the students with the most intensive and complex health conditions attend.

Interim funding arrangements 2014

During 2014, an interim resourcing arrangement between Health and the Directorate was agreed where Health determined the level of care required and provided the nurse-led training and support. The Directorate provided resourcing to schools to employ the staff required to provide the attendant care and Health agreed to reimburse the Directorate for the cost of school staff providing HAAS support.

The Directorate has issued an invoice to ACT Health for the costs incurred by the Directorate to trial the program in mainstream and specialist schools. The Directorate has processed payments to schools associated with the trial.

However, the Directorate understands that ACT Health will only be able to pay the invoice in installments during the remainder of the 2014/15 financial year.

Implications of the NDIS

For the purposes of the NDIS, the average cost of provision of personal care for a student with very high needs has been calculated at \$44 759 per annum. This cost has informed part of the ACT Government's contribution to the NDIS. This cost is inclusive of all areas of personal care required by a student; including eating, drinking and toileting support and other supports required by an individual regardless of the activity they are undertaking (e.g. feeding, managing airways ventilation). This very high level of support includes supports like those provided under HAAS.

As these students transition to the scheme, the Directorate will notionally bill the NDIS for personal care for eligible students receiving HAAS support. It will be necessary to look at the cost of providing HAAS support for these students and how that compares with the rate determined by the Directorate for very high level personal care for the purposes of the NDIS.

Many, but not all, of the students who currently access HAAS are likely to be eligible for the NDIS. The Directorate and Health will need an agreement about funding support for non-eligible NDIS students in mainstream schools. Health has agreed to continue to fund the HAAS nursing positions and the provision of training to LSAs.

Implications for 2015

There are budgetary implications for both the directorates resulting from the HAAS pilot because the "level" of support that has flowed from the health assessments of the students has been much higher than initially envisaged. (note: 14 of the 23 students now in the pilot have been assessed as requiring the highest 1:1 level of support.)

It is also difficult to predict if the number of HAAS eligible students will increase during 2015.

Further, while personal care is within the scope of the NDIS, there are uncertainties around the impact on students with disabilities in schools and a clear picture will not be visible until well into the 2015 school year.

However, the benefits that accrue to students and their families in receiving a HAAS service that meets their educational and healthcare needs are also significant, particularly in a Human Rights context.

On balance, the Directorate believes the best course is to maintain HAAS in the mainstream setting and at Black Mountain School and The Woden School (this is possible within existing resources) while we explore other recalibrations and alternatives over the course of 2015.

Given the uncertainties of the NDIS, and lack of funding for HAAS for the school year 2015, the Directorate will propose to Health that the HAAS trial be put on hold in further specialist schools until a clearer understanding of the costs is known.

Consultation

The Directorate has been working closely with ACT Health to develop the current HAAS model, cost these services and refine the model for implementation from 2015.

Financial implications

The Directorate is consulting with ACT Health to develop a costing structure for current and future services. This work will be informed by the impact of the roll-out of the ACT NDIS trial.

Media

The introduction of the HAAS model has caused concern for some parents in specialist schools and this has attracted media attention. There is also the potential for positive media attention where parents and carers identify positive outcomes for their children.

 *dr* 

Stephen Gniel
Deputy Director-General
Education Strategy

23 December 2015