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 **Doctors in Secondary Schools program**

**Frequently Asked Questions**

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**General**

**What is the Doctors in Secondary Schools program?**

The Doctors in Secondary Schools program provides funding for 100 Victorian Government secondary schools in disadvantaged areas to have an adolescent health-trained General Practitioner (GP) attend up to once a week to provide medical advice and health care to its students.

This initiative will also provide for:

* funding for school staff to support program coordination
* training for school staff, GPs and Practice Nurses
* modern, fit-for-purpose rooms where required.[[1]](#footnote-1)

 **What is the aim of the program?**

The objectives of this program are to:

* make primary health care more accessible to students
* provide assistance to young people to identify and address any health problems early
* aim to reduce the pressure on working parents and community-based GPs.

 **How will the program work?**

Selected Victorian Government secondary schools will work together with local GPs to enable primary health care services to be delivered on school premises. The program will enable a GP to attend the school for up to one day a week to assist students to identify and address any health problems early.

All secondary school students who are enrolled in the participating Victorian Government secondary school will be able to access the GP, subject to providing the requisite consent for the services. The participating Victorian Government Secondary Schools, students and their parents/guardians/carers will not incur any out-of-pocket expenses for consultations with the GP on the school premises.

Participating Victorian Government secondary schools will be supported to:

* fund and train staff to co-ordinate the program
* work with the Department of Education and Training (the Department) to create rooms that are fit for purpose
* establish local partnerships.

**School Selection Process**

A targeted expression of interest process invited select Victorian government secondary schools to lodge an application to participate in the Doctors in Secondary Schools program.

Schools were identified and invited to express their interest in the program based on the following two criteria:

* **Student Family Occupation and Education (SFOE):** SFOE is calculated based on parental occupation and education data collected at school level. It is considered the most accurate measure of disadvantage. The Victorian Government secondary schools with the highest SFOE index (thus the highest density of students from low socio-economic backgrounds) have been targeted for participation.
* **Access to health services:** Consideration was also given to Victorian Government secondary schools located in areas that have limited access to a local GP.

Expressions of Interest were assessed by regional panels to determine which Victorian Government secondary schools would participate in the program. The 100 successful schools were announced by the Premier and the Minister for Education on 1 September 2016 at Mount Alexander Secondary College.

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**Timeline**

**When will the program commence?**

The Doctors in Secondary Schools program will have a staggered rollout with GP services commencing in one of three phases:

* 20 schools will commence from the first half of 2017
* 40 schools will commence from Term 3, 2017
* 40 schools will commence from Term 1, 2018.

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**Infrastructure**

**What infrastructure will my school receive to deliver the Doctors in Secondary Schools program?**

As part of the Doctors in Secondary Schools program, the Department will provide 100 schools with modern, fit-for-purpose GP consultation facilities on school grounds. This will be either a new, purpose-built relocatable building or a refurbished area in an existing, permanent facility.

The consultation facilities will contain a consultation room, equipped and furnished for use by a General Practitioner, an office for a program support officer, and a waiting room. The facilities are designed to support patient privacy and confidentiality, and include features to support visual and auditory privacy. Features include:

* wheelchair access to the facility and accessible toilet facilities situated either within or close by the consulting facilities
* free from excessive noise, and will contain acoustic treatment to provide auditory privacy within the consulting room
* screening or curtains to provide visual privacy within the consulting room
* adequate lighting
* heating and cooling to allow a pleasant ambient temperature
* hand cleaning facilities will be accessible to staff and patients
* where possible, a private entrance for students to encourage them to use the facility
* appropriate furnishings and medical equipment appropriate for a consulting room.

The consulting suite facilities will align with standard *5.1* of *Standards for General Practices 4th Edition* issued by the Royal Australian College of General Practitioners (RACGP).

Ensuring privacy for students visiting the GP is paramount, as research shows that confidentiality is a significant factor influencing a young person's visit to a health professional. The Department's consultants work with each school to help ensure the location of a relocatable building or refurbished space supports this, wherever possible, given the existing school infrastructure. Other privacy treatments for access may be considered as an alternative.

**What types of infrastructure are being provided by the program?**

**Relocatable buildings**

To ensure we deliver on our commitment as quickly as possible, state-of-the-art relocatable buildings will be used to host the GP clinics. This means that students will have earlier access to the services and facilities.

Two types of relocatable buildings will be offered as part of the program: 2 Mods and 5 Mods.

**2 Mods:**

Most relocatable buildings will be a 2 Mod purpose-built consulting facility with a total floor area of 69m2. The 2 Mod purpose-built consulting centre consists of a dedicated GP consultation room with soundproofing for privacy and a hand basin for GP use, and a general office space provided for the school to use as they wish for throughout the rest of the week. Both rooms will be provided with a desk, seating and appropriate IT equipment, with an examination bed and medical equipment in the GP room. There will also be a furnished waiting room and accessible toilet within the relocatable.

**5 Mods:**

A small number of schools will receive a 5 Mod purpose-built wellness centre with a total floor area 172m2. Schools with an enrolment of over 1,200 are eligible to receive these larger facilities.

The 5 mods will contain the same facilities of the 2 mod with the additional space being an open, flexible configuration. The consulting room, office and waiting area of the 5 mods will be furnished by the program, and schools will need to supply furnishings appropriate for the planned use of the remaining space.

The siting of all relocatable buildings will be determined in consultation with the school Principal or the school representative, with preference given to locations that provide privacy of access to students.

**Refurbishment of existing building(s)**

As with the relocatable buildings, the refurbished facilities will include a dedicated GP consultation room with soundproofing for privacy and a hand basin for GP use, and a general office space provided for the school to use as they wish for other services, throughout the week. Both rooms will be provided with a desk, seating and appropriate IT equipment, and the GP room will have an examination bed and required medical equipment. There will also be a furnished waiting room. There will be accessible toilet facilities in close proximity and wheelchair accessibility to the area.

**What finishes, fittings, furnishings and equipment will be provided?**

**Finishes:**

Schools will have a choice of three internal colour schemes.

**Fittings:**

* Curtain track and curtain for exam couch
* Mirror
* Pin boards
* Lockable draws and cupboards integrated with wet area
* Hand basin
* Examination light
* Emergency assist call button

**Furniture:**

* 2 computer desks and chairs
* Seating in the waiting area suitable for a teenage cohort

**IT equipment:**

* A desktop PC with monitor
* A printer.

 **What medical equipment will be provided for the General Practitioners?**

The program will provide medical equipment that aligns with the *Standards for General Practices 4th Edition* issued by the RACGP.

**Will I have to contribute financially towards the building?**

Schools will not need to contribute financially to the infrastructure for the Doctors in Secondary Schools program (unless they wish to make additions beyond the core requirements necessary to run the service).

**Does my school own the relocatable building?**

All relocatable buildings provided under the program remain the property of the Department. The Relocatable building will stay at the school for the duration of the program.

**Can I use the building for other purposes?**

Schools may use the facilities as needed when the GP is not in attendance, preferably for other student health and wellbeing support purposes. The facilities must be kept locked when not in use.

The consulting room should be kept in a perpetual state of readiness for the GPs, and all medical equipment, IT equipment and furniture must remain in the consulting suite. Medical supplies must be kept securely locked. A secure, lockable facility will be provided for the GP’s bag when the GP is in attendance. Medicine and prescription pads will not be kept in these rooms when the GP is not in attendance.

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**Program coordination**

The program coordination duties are shared between the appointed School Program Lead and the Practice Nurse. This coordination model ensures the partnership between the participating school and the Medical Centre creates the most effective service in meeting the health and wellbeing needs of students.

**School Program Lead**

Schools will be required to appoint a Leading Teacher to hold overall responsibility for the school’s program coordination duties – to be known as the School Program Lead. Schools will be provided with the funding equivalent to 0.2 FTE at Leading Teacher Entry rate to support this. The responsibility for coordination of the program within the school can also rest with an Assistant Principal if that is more appropriate than appointing the Leading Teacher (noting the school would not receive additional funding).

**How much funding will I receive for program coordination?**

Schools will be provided with funding for 0.2 FTE at a Lead Teacher rate to fund the role of School Program Lead. The Department will also fund the attendance of the Practice Nurse at 0.2 FTE.

This model of coordination is beneficial because it:

* Provides for a full range of functions to support the program including leadership, clinical support, relationship management and administration
* Leverages the clinical expertise of a nurse, ideally with specialist expertise in adolescent health
* Complements the health promotion work of current DET Secondary School Nurses.

**What core tasks will they be required to do?**

School Program Leads may be required to:

* Build and maintain partnerships with a local health service
* establish school processes to support program implementation
* promote the program to students, teachers and parents
* support the administration and operation of the program (e.g. assist students to make appointments)
* provide ongoing case management as required.

**Will the School Program Lead receive any training?**

Yes. All school program leads will need to undertake training to prepare them for running the program. This will include understanding adolescent health, working with a GP, and following the operational guidelines. Costs associated with training will be covered by the Department.

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**Partnering with a General Practitioner**

**Will I have to find my own GP?**

No. Participating schools are not required to find their own GP.

The Department is working with Victoria’s six Primary Health Networks to identify and engage GPs to work with participating schools through local primary health care services. Schools participating in the program will be expected to form a strong and positive partnership with their identified local medical clinic in order to run the program.

**How often will they attend the school?**

GPs engaged in the program will attend the school for up to one day per week.

**How will they work within a school?**

GPs will work closely with the School Program Lead to provide an adolescent friendly health service on the school premises. All participating GPs will be required to undertake training in adolescent health. They will also receive training on providing primary health care within a school, including understanding the school context, roles and responsibilities, legal and consent issues, communication etc.

Comprehensive operational guidelines, along with an induction checklist, have been developed to assist school staff, participating clinics, GPs and Practice Nurses.

**What health issues will they see students about?**

GPs will provide students with the same services as those of any GP in the community, including management of physical health, mental health, and sexual and reproductive health issues.

GPs may also make referrals to other health services if required. The School Program Lead will work with the student, parents/carers and the GPs to help facilitate referrals to other services when needed.

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**Operational questions**

**Will students be required to pay anything for their medical appointment?**

No. There will be no out-of-pocket expenses for the student and their family.

**How will billing work?**

Clinics will bulk-bill Medicare for eligible services provided. The model of billing may differ depending on the local context and primary health service, however, schools can be assured that their school and their students will not incur expenses for the GP’s services.

**How will appointments be made?**

The School Program Lead will work with the Practice Nurse and the participating medical clinic, and other school staff, to establish a system of appointments and reminders.

**How will parents and students provide their consent to see the GP?**

Victorian law is clear on consent for medical treatment by a GP:

* Young people who are mature minors can consent to their own medical treatment.
* Young people who are not mature minors cannot consent to their own medical treatment.

On 19 January 2017, the Deputy Premier and Minister for Education announced the Doctors in Secondary Schools consent and confidentiality policy. The policy was developed in consultation with experts including the Australian Medical Association, the Australian Education Union, Parents Victoria and the Victorian Association of Secondary School Principals.

Consistent with Australian common law, the program recognises that:

* ​Any student who wants to see a doctor can book an appointment.
* Doctors will decide whether students are mature enough to consent to treatment or whether parent/carer consent is needed – as is the case with all GPs in the community.
* ​Health information of young people will be confidential and managed according to law – as with all GPs in the community.

Families with children at participating schools will be informed about the program as it commences at the school, with detailed information sheets. These are available at: <http://www.education.vic.gov.au/about/programs/health/Pages/doctors-secondary-schools.aspx>.

**Can the GP refer to other health services if the student needs it?**

Yes. It is anticipated that referrals will be an important part of this program. The School Program Lead will work with the GP, the student and parent/carer to make referrals.

**Who else can I get involved in the GP clinic?**

All Victorian Government secondary schools selected to participate in the program are encouraged to take a holistic approach to the Doctors in Secondary Schools program. This means that other health and wellbeing staff within your school are encouraged to be involved. How this works will vary, but may, for example, take the form of multidisciplinary teams or meetings to discuss relevant cases, or closer working relationships with the GP to facilitate a comprehensive clinical approach to the student in need.

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**Evaluation**

**Will the Doctors in Secondary Schools program be evaluated?**

Yes. Participating schools will be expected to participate in a program evaluation, which may include data collection and interviews with staff, parents and students.

1. The infrastructure provided to individual Victorian Government schools will depend on the needs of the individual school and will either consist of a refurbishment of an existing room, or the provision of a new building. The Victorian School Building Authority will determine which is most appropriate for each individual Victorian Government school selected to participate in the program. [↑](#footnote-ref-1)