DOCTORS IN SECONDARY SCHOOLS

FACT SHEET

**HELPING VICTORIA’S YOUNG PEOPLE ACCESS HEALTH CARE**

The Victorian Government is making sure young people receive the health support, advice and treatment they need to reach their full potential.

The $43.8 million Doctors in Secondary Schools pilot program is delivering on the Government’s election commitment to fund general practitioners (GPs) to attend 100 Victorian Government secondary schools to provide medical advice and health care to those students most in need.

## doctors in secondary schools

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

This initiative will also provide for modern, fit-for-purpose rooms where required.

All secondary school students who are enrolled in the participating school will be able to access the GP, subject to providing the requisite consent for the services.

Participating schools, students and their parents/guardians/carers will not incur any out-of-pocket expenses for consultations with the GP.

## TIMELINE

To support successful delivery, the Department of Education and Training (the Department) will work with participating schools to:

* recruit and train staff to coordinate the program
* create fit-for-purpose consulting rooms
* establish local partnerships with health services.

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

* 20 schools will commence from Term 1, 2017
* 40 schools will commence from Term 3, 2017
* 40 schools will commence from Term 1, 2018.

In selecting the first 20 schools to participate in the program, priority has been given to those schools that scored highly in the expression of interest process and who had an existing partnership with a local health service to provide a general practitioner. Consideration has also been given to ensuring geographic spread, metro/regional/rural distribution and coverage across each of the six Primary Health Networks.

## PROGRAM COORDINATION

The Doctors in Secondary Schools program provides funding for program coordination staff. Program coordinators 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. arrange GP appointments)
* provide ongoing case management if or as required.

Program coordination responsibility will be shared between a school staff member (‘school program lead’) and a nurse dedicated to supporting the GP. 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 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.

The Department will work with its regions to provide further information on recruitment to these positions shortly.

## general practitioners

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 primary health care service in order to run the program.

GPs will work closely with the school program coordinator to provide a primary health care service on the school premises. It is anticipated that a GP engaged under the program will attend the school for up to one day per week.

All participating GPs will be required to undertake training in adolescent health that conforms to the standards of accreditation for continuing professional development set by the Royal Australian College of General Practitioners. They will also receive training on providing primary health care within a school, including understanding the context, roles and responsibilities, legal and consent issues, communication etc.

Comprehensive program and operational guidelines will be provided to GPs and school staff in 2017.

## GP Services

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 coordinator will work with the student, parents/carers and the GPs to help facilitate referrals to other services when needed.

There will be no out-of-pocket expenses for the school, students or families to see the GP.

## APPOINTMENTS

The school program lead will work with the nurse, the local primary health service and school staff to establish a process for students to confidentially access the GP program.

## Consent and confidentiality

The Department is currently finalising the program’s operational policy which includes information on consent, confidentiality and mature minors. This is being developed in conjunction with experts in adolescent health and will be provided to schools in 2017.

The operational policy will help ensure that young people who have the maturity to seek confidential health care are able to consent in a way that is safe, respects their rights, and balances the need for parental involvement. This is the same as it would be if a young person was going to see a GP in his or her local community.

INFRASTRUCTURE

PURPOSE BUILT GP ROOMS

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 GP, an office for the program coordinator, and a waiting room for students. 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
* accessible toilet facilities situated either within or close by the consulting facilities
* rooms free from excessive noise, containing acoustic treatment to provide auditory privacy within the consulting room
* screening or curtains to provide visual privacy within the consulting room
* heating and cooling
* hand cleaning facilities accessible to staff and patients
* where possible, a private entrance for students to encourage them to use the facility
* appropriate furnishings
* medical equipment appropriate for a consulting room.

The consulting suite facilities will comply with standard 5.1 of Standards for General Practices 4th Edition issued by Royal Australian College of General Practitioners.

Ensuring privacy for students visiting the GP is paramount, as research shows that confidentiality is the number one factor influencing a young person's visit to a health professional. The Department's consultants will 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.

## TYPEs OF INFRASTRUCTURE

The majority of consulting suites will be purpose-built relocatable buildings. The size of the building will depend on the size of the school. The location of the relocatable building will be determined in consultation with the Principal or nominated school representative.

If a school has significant excess space in its permanent facilities, refurbishment may be undertaken. The design will be site-specific, and the location of the refurbishment will be undertaken in consultation with the Principal or nominated school representative.

Each school will be advised of the type of infrastructure they will receive by 2017.

**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 a program coordinator, psychologist, etc. throughout 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 1200 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; however 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 per 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 a program coordinator, psychologist, etc. 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.

## finishes, FITTINGS & FURNISHINGS

Finishes:

There will be a choice of three internal colour schemes that schools can choose from. This decision will rest with the school principal or the school representative.

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

IT equipment:

* 2 x desktop PCs, with monitor
* 2 x printers
* 2 x telephones.

## MEDICAL EQUIPMENT

The program will provide medical equipment that aligns with the Standards for General Practices 4th Edition issued by Royal Australian College of General Practitioners.

## INFRASTRUCTURE timeline

For the first 20 schools, site visits will commence in October and provision of relocatable buildings will be scheduled shortly after. Completion will be in time for services to commence from Term 1, 2017.

For the remaining 80, site inspections will be undertaken progressively in 2017 as determined by the rollout order, and will be completed in time for services to commence in line with the start date of that tranche.

Schools will not need to contribute financially to the infrastructure for the Doctors in Secondary Schools program unless they would like additions beyond the core requirements necessary to run the initiative.

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

## use of facilities

Schools may use the facilities for student health and wellbeing support as needed when the GP is not in attendance. 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.