

Interim Report: Feedback Survey

The Sustainable Health Review Interim Report feedback survey consisted of 14 questions. The responses to the open feedback questions are detailed below. Responses to questions 9-12 have been published in a summarised report on the SHR website.

Your Personal Details	
1. Title	Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>
2. First Name(s)	
3. Surname	
4. Contact Details	
5. Organisation	Department of Education
6. Location	<input checked="" type="checkbox"/> Metropolitan <input type="checkbox"/> Regional WA <input type="checkbox"/> Outside WA
7. Are you providing a response on behalf of your group/organisation or as an individual? (Required)	<input checked="" type="checkbox"/> Group/organisation <input type="checkbox"/> Individual <input type="checkbox"/> Other, please specify: _____
Q8. Do you consent to your feedback being published, in summaries or in the Final Report? (Required)	
<input checked="" type="checkbox"/> I consent to my feedback being published <input type="checkbox"/> I consent to my feedback being published anonymously <input type="checkbox"/> I do not consent to my feedback being published	

The next two questions will allow you to provide more detailed feedback on how to maximise improvements in each of the Directions or suggest other areas or actions for the Sustainable Health Review Panel to consider to develop a more sustainable health system.

13. In regards to the 12 Directions, please provide detailed comments on how to maximise improvements in each of the Directions. Where possible, please indicate which Direction your comments relate to.

Directions, recommendations and areas for further work that most strongly relate to the Department of Education are as follows:

Direction 1: Keep people healthy and get serious about prevention and health promotion

In relation to Direction 1 to promote better health outcomes, the Department of Education in Western Australia recognises the importance of teaching students how to be part of a healthy population and to experience the personal and social benefits of living an active and fulfilling life. Western Australian public schools are required to ensure that all students from Kindergarten to Year 10 have the opportunity to participate in at least two hours of physical activity per week. Through the Health and Physical Education curriculum, students from Pre primary to Year 10 learn how to enhance their health, safety and wellbeing, and to contribute to building safe and active communities. Integral to the Health and Physical Education learning area is the development of movement skills, concepts and strategies to enable students to confidently, competently and creatively participate in a range of physical activities in various contexts and settings. The Department also requires schools to promote healthy eating within the school community, through developing and implementing a school based policy on the provision of healthy food and drinks, particularly foods served in the school canteen.

All Western Australian schools are also required to teach the content of the Western Australian Curriculum in relation to alcohol and other drug education. Within the Health and Physical Education learning area, students learn how to enhance their own and others' health, safety, and wellbeing and take a critical approach to questioning health practices; make healthy and responsible decisions for their own and others' safety and wellbeing; use inquiry skills to research factors that influence their health; and build their resilience.

School Drug Education and Road Aware (SDERA) remains the Western Australian Government's primary strategy for drug and road safety education for young people. SDERA works with schools and the wider community to provide prevention and early intervention education aimed at keeping young people safe.

SDERA works collaboratively across the health and education sectors to strengthen alcohol and other drug prevention and early intervention programs offered and to ensure that these programs are accessible for children and young people through all schools statewide. The education systems and sectors utilise SDERA's programs, resources and consultancy service to support their schools.

Smoking and alcohol education identified specifically in this review remain a primary focus of SDERA's programs and in particular, in resources for children and young people and their parents and caregivers.

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A whole school approach ensures that SDERA's prevention education efforts are extended and enhanced through staff education and training in early intervention. This contributes to targeted approaches that provide students with stronger support and intervention strategies and further education where required. It also provides opportunities to address and treat drug related issues before they escalate. This whole school approach is inclusive of the broader community, with parent and caregiver education being critical and supported by SDERA.

In relation to the areas for further work under Direction 1, SDERA looks forward to being involved in the ongoing discussions around the avoidance and reduction of health impacts associated with smoking and alcohol and other drugs being used through the community and in particular in settings where young people up to 18 years of age are engaged.

Direction 4: Facilitate effective interaction between acute and community based mental health services to deliver mental health reforms across the WA health system.

Positive wellbeing and mental health is a focus area for Western Australian public schools. Schools implement preventative programs aimed at all students, such as social and emotional learning, building resilience, mental health promotion (e.g. Aussie Optimism) and mindfulness programs.

The Department of Education also liaises with interagency partners like the Mental Health Commission to promote the wellbeing of students. The Mental Health Commission provides funds to the Department to ensure ongoing training for staff and students in suicide prevention, which complements a range of mental health promotion programs delivered in schools.

Students in public schools have access to school nurses, school psychologists, chaplains and pastoral care staff at the school. School psychologists can help support students who may be feeling alone and depressed by providing individual assessment, consultation and intervention.

Schools work closely with parents and, when needed, they develop and document plans to improve student wellbeing. Schools plan thoroughly for vulnerable groups of students with additional needs. This includes those in out-of-home care or with diagnosed mental health disorders and/or disabilities. Guidelines and provision of consultation through dedicated support staff assist to promote good practice in planning and responding to students with the most significant needs.

The School of Special Educational Needs: Medical and Mental Health (SSEN:MMH) have teachers working with inpatient mental health teams at Fiona Stanley Hospital in the 14 bed youth mental health services and Bentley Hospital in the Princess Margaret Hospital 20 bed mental health inpatient unit program. With the move to the Perth Children's Hospital, an agreement has been reached by SSEN:MMH with the East Metropolitan Health service to provide teachers to the 12 bed east metropolitan youth inpatient unit once opened in June 2018.

SSEN:MMH also have liaison teachers allocated to every community Child and Adolescent

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Mental Health (CAMHS) clinic in the state. These teachers enhance communication between CAMHS, education regions and schools. Consultancy is also provided for CAMHS clinicians on educational matters.

In addition, to support these inpatient and community services, SSEN:MMH provides teaching and liaison to the two specialist mental health programs – Touchstone and Pathways. Further, memoranda of understanding exist to outline the role of SSEN:MMH in all Child and Adolescent Health Service (CAHS) programs and the relationship between CAHS, CAMHS and the Western Australian Country Health Service and CAMHS and the Department of Education.

Direction 6: Develop partnerships for Aboriginal health outcomes.

The panel's observations outlined under Direction 6 align with the Department of Education's approaches around engagement with Aboriginal people. The key points supported by the Department of Education include:

- the need to develop the cultural competency of staff and build cultural responsiveness into health services to strengthen Aboriginal health outcomes;
- the need for better coordination and partnerships with Aboriginal people, including seeking an Aboriginal perspective and involving Aboriginal people in decisions related to them;
- culture is central to Aboriginal people and is a key determinant to the health and wellbeing of Aboriginal people;
- the WA Aboriginal Health and Wellbeing Framework recognises the need to respond in a coordinated, flexible and practical way to improve health outcomes for Aboriginal people;
- there is a need to better align State and Commonwealth funding commitments and the need for sustainable funding models; and
- there is a need for an integrated model of service provision where service providers across location pool funding collaborate to deliver targeted activities.

14. Is there anything else that the Panel has missed so far that is important in developing a more sustainable health system for Western Australia?

From the perspective of the Department of Education, the initial observations and views of the Sustainable Health Review panel and the preliminary directions, recommendations for immediate action and areas for further work appear to be comprehensive.

At this stage, the Department does not make any suggestions of areas for further consideration.