

BOH 17031



Hamilton

SCHOOL PROGRAM REVIEW

City of Hamilton Board of Health
Monday November 13, 2017
Council Chambers

Jen Vickers-Manzin

Public Health Services
Healthy Families Division

Agenda

1. Public Health Context
2. School Program Review Process
3. Results of School Program Review
4. Proposed NEW School Program Delivery Model
5. Questions and Comments

Public Health Context

Standards for Public Health Program & Services (2017)

- School Health Program Standard

“To achieve optimal health of children and youth in schools through partnership and collaboration with school boards and schools.”

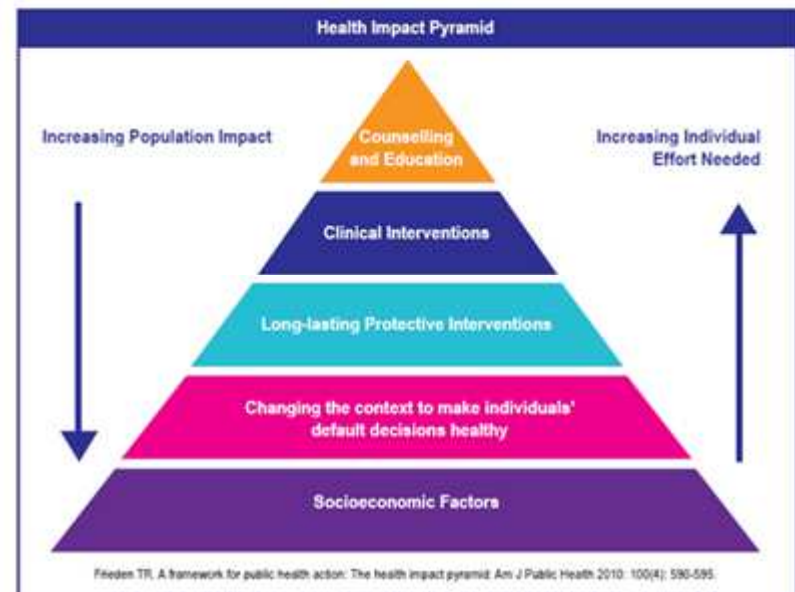
Public Health Context

Population Health and Program Data

- Focus on health equity

Health Impact Pyramid

- Programming at multiple levels to have greatest impact, focusing on population health strategies



Current Model

PHS School Program provides services to publicly funded schools across the City of Hamilton:

- All secondary schools, and approximately 1/3 elementary schools
- Secondment to the Arrell Youth Detention Centre
- Public Health Nurses (PHNs) work in partnership with school communities and link the school to Hamilton's community resources
- Key health topics: mental health promotion, healthy eating, sexual health and physical activity
- Mental health promotion continues to be the School Program's top health priority within school communities

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School Program Review

Three phases:

1. Literature review, environmental scan, and review of current practice
2. Stakeholder engagement
3. Recommended program service delivery model

Results of Literature Review and Environmental Scan

Evidence shows that positively impacting the health of students requires a comprehensive approach:

- extends beyond health and physical education to include school policy, the physical and social environment at school and the links between schools, families and communities
- requires development and maintenance of strong positive working relationships with all school stakeholders at all levels

Results of Stakeholder Engagement

Overall, stakeholders had a positive experience with the School Program

- “I would like to thank you for giving our school community this invaluable resource and hope that more schools will be able to have a PHN as well.”

Benefits of collaboration include:

- Increased awareness of the school community’s health needs
- Increased student skills to make healthy choices
- Increased support with health curriculum
- Increased access to resources and information
- Increased engagement with youth and parents
- Improvement in relationships between students, parents and schools

Working with a Public Health Nurse (PHN) helps schools **identify and address** the health needs at their schools

Results of Stakeholder Engagement

Identified areas of Improvement:

Increase access and time with the School Program

- “PHNs have limited time to spend in the school and it is too limited for further benefits.”

Increase awareness of the School Program Services and role of the PHN

- “Need a concise description of what is available including how to access and who to contact.”

Improved communication between the School Boards and PHS

Recommended Service Delivery Model

1. Public Health Services School Program continue to collaborate with schools and school boards to:

- Meet requirements within the Standards for Public Health Programs and Services
- Meet requirements within the Well-being Strategy for Education and Ontario Curriculum
- Strengthen partnerships between PHS and local schools/school boards

Recommended Service Delivery Model

- 2. Establish a formal structure between PHS and School Board leadership to:**
 - Share health data and strategic plans to identify shared priorities between PHS and School Boards
 - Establish shared goals, success indicators, and processes for evaluation
 - Plan for PHS resource allocation and service coordination of school based PHS services
 - Connect and liaise with other relevant community stakeholders
 - Share successes and challenges

Recommended Service Delivery Model

3. Provide PHN services within a Family of Schools (FOS) Model in alignment with current school board structures

- a) PHNs will provide universal services to **all** schools within the FOS
- b) PHNs will provide targeted services to **focus** schools within the FOS
 - In an effort to provide equitable service, PHS and school boards will collaborate to identify priority schools
 - Population and school based data will inform the selection of priority schools

Sample Targeted Services

In Collaboration with School partners a full comprehensive school health promotion approach will be used. This will include engaging the full school community (principal(s), teachers, students, and parents) to:

- Identify health needs and priorities
- Develop and implement a comprehensive, evidence-informed, action plan to address the school's health needs
- Report on activities and outcomes (program and population indicators)
- Identify school board level policy opportunities and communicate through board level liaison PHN

Sample Universal Services

Universal PHS services offered to schools will include:

- Share school health data
- Support linkages with community resources
- Consultation on emerging health priorities
- School based immunization
- Dental screening
- Vision screening
- Web-based resources
- Curriculum and professional development support

Recommended Service Delivery Model

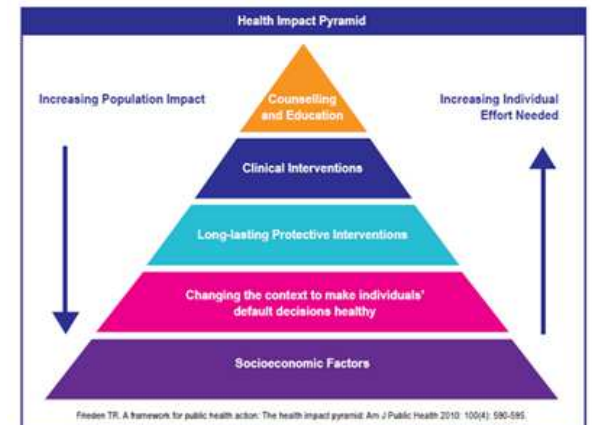
4. Allocate PHN FTE to liaise with school boards to:

- Support interdisciplinary collaboration at all levels
- Provide knowledge transfer and exchange within and across sectors
- Support ongoing professional development opportunities for health **and** education professionals

Recommended Service Delivery Model

5. Maintain a focus on mental health and well-being of children and youth in schools:

- Clarify roles and responsibilities
- Ensure integrated and complementary services by staff within the School Boards, PHS, and community agencies (e.g. LHIN)
- Build on the strengths and capacity of students, fostering resilience among students, creating a supportive environment and where appropriate, assist in referral to needed services



Implementation

A staged implementation process has been designed in negotiation with School Board partners. Milestones include:

Time Frame	Milestone
Fall 2017	Establish: School Board/PHS Leadership Group Data Sharing PHS/School Board Sub-Group Shared goals and priorities at Board level Initiate comprehensive internal and external change management plans Implement and evaluate staff development model
Winter 2018	Collaborative data sharing to inform 2018-19 priority health issues at Family of School (FOS) level Establishment of shared goals and priorities within each FOS Identification of high priority schools for targeted service
Winter 2018	Select and begin pilot of new model within selected Hamilton FOS Finalize resourcing the annual service plan and budget approval process
September 2018	Launch new Family of Schools model of service delivery



THANK YOU



QUESTIONS?