

SBHS update to SBHS Portfolio Managers: 8 August 2022

Tēnā koutou katoa

Greeting to our SBHS colleagues. Previously we have worked with you as DHB employees, now we are all part of Te Whatu Ora and Te Aka Whai Ora. We are looking forward to the ongoing and more connected relationships, as we all work to provide services to build the wellbeing of New Zealand's young people.

SBHS Programme Management in Te Whatu Ora

Eilish and I have transferred from the Ministry of Health to the Population Health Commissioning Directorate in Te Whatu Ora. We are still in the Family and Community Health team, reporting to Leonie McCormack and Grant Pollard as Group Manager for Child and Family Health.

SBHS service delivery expectations and funding

Our focus remains on School Based Health Services and the enhancements programme. The current service delivery expectations and funding for SBHS remain in place under Te Whatu Ora, and we do not expect any SBHS service reduction or withdrawal from schools.

You will appreciate that things may change in the future if we need to reorientate to ensure we contribute better to equity and wellbeing for young people. Through the enhancements programme, we have started work to improve SBHS to be more effective and efficient in improving outcomes for young people and in achieving equitable health outcomes. We are focused on better meeting the needs of populations currently not well served by the health system, including:

- a) rangatahi Māori
- b) Pacific young people
- c) rainbow young people
- d) young people in care
- e) young people with disability.

The enhancements programme will put SBHS in a strong position to respond to system changes under the health reforms and provide a foundation to implement the government's policy intent to expand SBHS to all schools. We know there is a lot of great work going on across the motu in SBHS and related services for youth, so we want to identify, spread, and support good practice. The five-year enhancements programme (2020-2024) is developing the new Te Ūkaipō vision and values framework and processes and structures to build on your current SBHS mahi and support your practice. You can expect to see incremental changes over that period as you are involved in and contribute to the development processes, and our influence on and connection with the education sector grows. You can expect further changes with implementation of the redeveloped model of care and workforce plans and potentially more funding from 2024 onwards.

Te Ūkaipō

"Te hoki atu ki te wāhi i ahu mai koe, te wāhi i whāngaitia e koe hei oranga mōu mō te rerenga ki mua"

To return to the place of your origin, the place where you can be nourished and sustains you for the journey ahead.

We set up our youth sector advisory group Te Tatau Kitenga to provide expert advice and recommendations to the Ministry of Health, and now Te Whatu Ora on youth-related topics and services, especially for our priority groups: rangatahi Māori, Pacific young people, rainbow rangatahi, rangatahi in care and rangatahi with disability. Te Tatau Kitenga is a group of youth health professionals selected for their expertise in working with young people, their wider contributions to the youth health, their expertise in te ao Māori and mātauranga Māori sector, and their experience with SBHS. The members are from variety of regions (including rural), health professions, and SBHS delivery models. Te Rōpū Mātanga o Rangatahi sits with Te Tatau Kitenga to assure a Te Tiriti based, Māori centric and equity focussed approach to the enhancements programme.

Te Rōpū Mātanga o Rangatahi developed the Te Ūkaipō Vision and Values Framework. Te Ūkaipō has nine kaupapa Māori whanonga pono (values) and corresponding whakatauki forming a value system that is strength-based and mana enhancing for rangatahi to begin or extend their oranga tonutanga (continued wellbeing).

Te Ūkaipō enables a Te Tiriti based and Māori centric approach to enhance the experience of SBHS for young people. It lays the path for indigenous-led practices and mātauranga Māori care and supports within SBHS, and shapes and influences the commissioning and delivery of SBHS.

Te Rōpū Mātanga o Rangatahi are the kaitiaki of Te Ūkaipō. We are currently exploring how to support and strengthen SBHS practice with leadership and professional development on how to embed Te Ūkaipō into practice across the programme. The enhancements workstreams are the strands the strands that weave together to ensure that SBHS has the foundation, practice, and workforce to deliver strength-based and mana enhancing care for young people.

Partnership Approach

We have previously communicated with you about the enhancements programme partnership. At that time the partnership included the Youth Advisory Group, Te Tatau Kitenga and Te Rōpū Mātanga o Rangatahi, Ministry of Education, district health boards, Malatest and the Ministry of Health. You can find more information on our partnership here: <https://www.health.govt.nz/our-work/life-stages/youth-health/school-based-health-services/school-based-health-services-enhancements-programme>. We are of course extending the partnership approach to include Te Aka Whai Ora, Te Whatu Ora, and Manatū Hauora.

In late 2021, the enhancements programme partnership agreed a joint work programme. The enhancements programme has seven main streams: partnership and communications, embedding of Te Ūkaipō into SBHS and youth health services, evaluation, workforce development, model of care, data and information, and commissioning and funding. We provide updates on various parts of the programme below.

Working with the Ministry of Education

SBHS is a health service delivered in an education setting. SBHS is one of the services available to support student wellbeing and we want to support and contribute to a supportive wellbeing environment in schools with the Ministry of Education and the education sector.

Some of you have raised issues around school counsellors having only limited counselling training, barriers put up by school leadership, and the need to involve school leadership during implementation. We are aware of these issues and intend to work with you and the education sector to encourage a more wellbeing integrated environment for students.

While we are mostly working at the national level so far, we have provided information to the regional education offices on the enhancements programme. The previous communication was in the School Leaders Bulletin on 22 June 2022. You can find it here: <https://mailchi.mp/education/ministry-bulletin-for-school-leaders-he-pitopito-krero-issue-145>

Malatest also engaged with regional offices in their data gathering for the Formative Evaluation Report, which was completed in March this year. This will be available on the Ministry of Health website soon. The workforce development and SBHS model of care projects will also connect with the education sector to gather information and build relationships and collective effort.

We know that many of you have connections regional and local connections with the Ministry of Education and encourage you to continue those. We are very happy to meet with any groups to provide information, updates, and answer questions. Please do not hesitate to reach out. When engaging with the education sector, we usually go through our Ministry of Education colleagues at national office, but that's not a barrier to engagement, it's a facilitator!

The Equity Index

We are engaging with the Ministry of Education on the Equity Index (EQI). As you know, currently, the Ministry of Education use the decile system to allocate equity funding and to identify schools that would benefit from additional

resources. From January 2023, the Ministry of Education will begin to use the EQI to determine a school's level of equity funding.

Historically, the Ministry of Education deciles have been a key tool to identify eligibility for SBHS. The decile model has helped us to identify need and allocate available funding. We have also used other methods to identify need. This includes providing SBHS to Alternative Education and Teen Parent Units and in Budget 2022, we received funding for Activity Centres and increased Kura Kaupapa service delivery. Decile has not been the sole driver of expansion and determinant of expansion tranches.

Funding for SBHS delivery has been provided in tranches for deciles over time, starting with the lowest deciles, and mostly in Government budgets. Funding for decile 1-2 schools, Teen Parent Units and Alternative Education began in 2008, for decile 3 in 2015 and for decile 4 schools in 2018. Budget 19 funding allowed the expansion to decile 5, which began in 2020.

Description of the difference between deciles and EQI

School deciles indicate the extent the school draws their students from low socioeconomic neighbourhoods. Deciles are a measure of the socioeconomic position of a school's student community relative to other schools throughout the country and is based on Census mesh block data. All schools have learners from a variety of backgrounds. School deciles (and now the EQI) tell us the extent to which a kura or school's students might face socioeconomic barriers that could get in the way of them achieving in education. Implementing the EQI will mean the Ministry of Education can more accurately target the equity funding they have, and support schools to work in different ways to reduce the impact socioeconomic factors can have on student achievement. Unlike with deciles, schools and kura are not evenly distributed into bands under the EQI. There are 226 EQI numbers and therefore a much larger number of funding rates, presented along a smooth funding curve. The decile system used a stepped funding approach that created 'funding cliffs', where schools and kura could see a significant loss/gain in per student funding when moving between deciles.

Deciles have been misunderstood to be a de-facto measurement of school "quality". This is not the case. Neither the decile system or the EQI measure school quality, rather these methods are intended to help understand and respond to the relationship between socioeconomic circumstances and student achievement.

We strongly advise against analysis that places the EQI numbers into decile bands. While there are some similarities between school deciles and the EQI, in that they both measure socioeconomics, they are not directly comparable. They use different formulas, variables and data, and the way the Ministry of Education will apply the EQI will also be different.

Detailed information on the EQI model, including the 37 variables it considers, is currently being prepared for publication on the Ministry of Education website in early August. In the meantime, information about how the EQI works can be found here:

<https://www.education.govt.nz/our-work/changes-in-education/equity-index/>

<https://assets.education.govt.nz/public/Documents/our-work/changes-in-education/Introduction-to-the-new-Equity-Funding-system-for-schools-and-kura.pdf>

There are no changes to schools eligibility at this time as a result of the EQI as we are yet to decide how we will apply the EQI model in determining eligibility for SBHS. Should there be changes in school eligibility we will need to seek an increase in our overall funding to expand service delivery and will work with our Te Whatu Ora districts/regional portfolio managers on expansion.

SBHS facilities in school settings

We are also working with the Ministry of Education on SBHS facilities in school settings. We know availability of facilities causes issues around the motu and perhaps increasingly so with the pressure on space in schools. Our youth advisory group has provided some advice on what they want to see in facilities for SBHS, and we are open to suggestions about how to support service delivery such as mobile vans. These will inform the mahi, and any actions to seek further funding to meet these requirements.

Evaluation and Monitoring

We have in place a three-phase evaluation for SBHS: a formative evaluation which describes the current SBHS completed in Feb 2022, a process evaluation later in 2022, and an outcome evaluation in 2023. While you may not have been involved in the formative evaluation, there will be opportunities to be involved in other evaluation processes, and in the workforce development and model of care projects.

The evaluation frameworks are in the final stages of development to ensure they reflect Te Ūkaipō. They are also linked with other evaluation processes and wellbeing measures for young people, including in education, mental health and ultimately the Child and Youth wellbeing Strategy.

For the evaluation and monitoring of the service, there are five key streams of data we need to consider, these are:

1. Rangatahi feedback
2. Case management and clinical data
3. Service delivery data
4. Workforce feedback
5. Population level data

The first data stream we have focussed on is the service management data. Between February and April, we re-developed the SBHS quantitative service delivery reporting template. Thank you all for your feedback and contributions to the development. The goal of this was to simplify the template as the previous version was trying to address all five key data areas mentioned above and as a result was difficult to use, and not effective.

Thank you for using the re-developed template for Quarter four 2021/22 reporting. We are developing a reporting dashboard which will provide a national picture and individual district pictures. We intend to provide this dashboard back to districts each quarter.

Our next data stream focus is rangatahi feedback. We are working with the SBHS Youth Advisory Group on the development. More information will be available later this year.

Workforce development

Currently workforce development and supervision are not consistently provided across SBHS, and there is limited career pathway or progression for people working in SBHS and youth health nursing in general.

We have underway a two-year project to create a workforce that has the capability, confidence, and capacity to deliver SBHS. The project aims to build the foundation to ensure practitioners working in SBHS can practice safely and competently in youth health, especially mental health and cultural safety. It will improve the sustainability of a specialised but often overlooked workforce. Any further expansion of SBHS is contingent on meeting these fundamental workforce requirements.

The project will start with an analysis of the characteristics of the existing SBHS workforce. It will then define the desired state of the SBHS workforce, map the existing opportunities, identify the training and workforce gaps, and develop and implement a workforce plan that supports the desired skills, knowledge, attributes and diversity for this workforce. As you know there is existing and proposed work by the Ministry and sector around the nursing and youth health workforces and increasing the Māori and Pacific workforce and this is an important context for the project.

We have engaged the Society of Youth Health Professionals Aotearoa New Zealand (SYPHANZ) to undertake the mahi. You can read more about SYPHANZ here: <https://syhpanz.co.nz/>

Model of Care

We appreciate that there is a range of models used through the motu, which have been developed to meet the needs of particular regions. Again, we want to look at these current models and identify, spread and support good practice.

The two-year project will focus on the model of care for the health assessment, usually the first interaction the nurse and student have. This is a fundamental way we can embed Te Ūkaipō into practice across the programme and support and strengthen your practice.

The mahi will take a co-design approach, engaging the school-based workforce and rangatahi, with a focus on our priority groups, to redevelop the model of care. The mahi will look at the assessment processes currently used such as HEADSSS and work with the sector to develop processes that support student wellbeing and enhance practice. The methodology aims to uncover how the school-based health check can be framed, understood and delivered in a way that is resonate and respectful of the diverse needs of Rangatahi across the motu without losing integrity.

Embedding the model may include developing and providing workforce development, and support for any data collection tools, so is connected to the other projects in the enhancements programme.

We have engaged Francis Health to undertake the mahi. You can read more about Francis Health here:

<http://www.francishealth.co.nz/>.

Youth and SBHS web-based information

We take time and care to keep our web-based information up to date: <https://www.health.govt.nz/our-work/life-stages/youth-health>. The information is currently on the Ministry of Health website but will transfer to the Te Whatu Ora website at some later stage. The strategic documents for the enhancements programme will soon be available on this website, until then they are available on request using our SBHS email inbox.

We know that very few people have time to read websites, so we are happy to have questions sent to our SBHS inbox which we monitor: sbhs@health.govt.nz.

Youth Wellbeing promotion campaigns

He Tuinga Aroha is a campaign for rangatahi Māori and their whānau, highlighting the protective benefits of strong communication within families. You can find out more information here: <https://www.hpa.org.nz/campaign/he-tuinga-aroha>

Tapu Vā features a website tapu-va.nz where Pasifika peoples are encouraged to join the talanoa about Pacific attitudes to sex, its tapu nature, their own experiences and their aspirations for their communities' sexual health. The site features a growing collection of videos featuring young Pasifika people talking about Pacific sexual health. [Watch the promotional video.](#)

Ai, Let's talk about sex is a digital video series of 14 episodes. It features young, bilingual, Māori panellists discussing a wide range of topics to do with sexual and reproductive health. [Watch the promotional video.](#)

You can find out more about these projects [here](#).

Nā māua noa, nā

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Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz