

Integrated School Health Programme (ISHP)

Presentation to the Health Portfolio
Committee, 21 August 2013



health

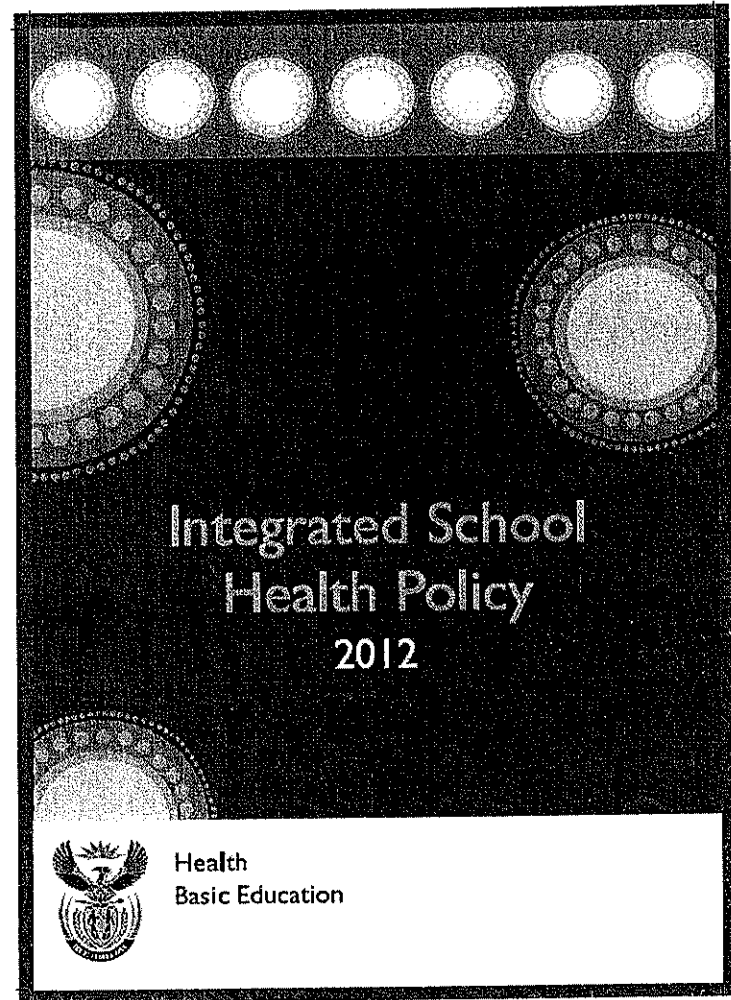
Department:
Health
REPUBLIC OF SOUTH AFRICA



Basic Education
Health

New School Health Policy

- New School Health Policy launched by President Zuma in October 2012.
- Represents one of the three streams of Primary Health Care (PHC) re-engineering
- Within the education sector, an important component of Care and Support for Teaching and Learning framework.



Integrated School Health Policy

The new Integrated School Health Policy replaces the 2003 School Health Policy

Vision

Optimal health and development of school-going children and the communities in which they live and learn.

Goal

To contribute to the improvement of the general health of school-going children as well as the environmental conditions in schools and address health barriers to learning.

Stakeholder Consultations

- 10th September 2012, at the NDOH building, a joint meeting comprising Minister of Health, Minister Basic Education, Deputy Ministers, DGs, DDGs and officials.
- 3rd October 2012, consultative meeting with:
 - SGBs (School Governing Bodies)
 - Unions
 - SAPA (South African Principal's Association).
- Purpose of meetings was to obtain consensus and a common understanding of the programme and the service package.
- Messages of support were presented at the launch.

Objectives of ISHP

To reach all learners with the following package of services

- Health promotion and education
- Individual learner assessment and treatment
- On-site provision of services
- Referral and Follow-up
- Environmental assessment of school

The ISHP aims to assess each learner once per educational phase (Grades R/1, 4, 8, 10)

Targeted Educational phases

EDUCATIONAL PHASES	GRADES
Foundation Phase	Grade R – 3
Intermediate Phase	Grade 4 – 6
Senior Phase	Grade 7 – 9
FET Phase	Grade 10 – 12
Any other learner referred by educator or caregiver – in any grade.	
Learners repeating grades.	

Package of services

- 1) Individual learner assessments (screening) & focus is on barriers to learning.
- 2) Service provision at the school
- 3) Health promotion & education (complements life skills/ orientation)
- 4) Sexual and Reproductive Health & Rights. Emphasizes abstinence & delayed sexual debut.
- 5) Environmental assessment of school
- 6) School Health services also cover ECD (Early Childhood Development) centres either attached to the schools, stand alone or children can be at home. Emphasis on the 1st 1000 days of life.

Package of Services contd

- Barriers to learning
- Individual learner assessments (screening)
In foundation phase, focus is on barriers to Learning - vision, hearing, speech, nutrition, chronic disease, psychosocial vulnerability
- TB screening
- Increasing focus in later educational phases (Senior & FET) - on Sexual, Reproductive Health & Rights, Mental Health & psychosocial vulnerability

Package of services contd

- **On site services:**

- Immunisation, de-worming, treatment of minor ailments
- Oral & Dental care

- **Health promotion:**

- Support the life skills program in each of the 4 educational phases
- Promotion of hand washing is key

- **Environmental assessment of school:**

- Creating linkages so that school has sanitation, clean water, fencing, promotion & creating a safe environment.

Package of Services : Diseases of Lifestyle

Information and counselling:

- Tobacco
- Alcohol
- Drugs
- Obesity
- Healthy diets
- Physical activity and exercise

HCT (HIV Counselling and Testing)

- Governed by the national HCT policy.
- Confidential counselling
- Consent must be obtained
- Rapid HIV test with results given the same day.
- CD4 count if HIV +
- Referral to health facility for follow-up care, support and treatment.
- Responsibility of the school health nurse to follow-up the learner with regards that the learner is receiving the services.
- Records will be kept by the school health nurse.

School Health Package of services - Sexual, Reproductive Health & Rights.

SRHR

Information provided:

- Puberty
- Menstruation
- Pregnancy
- Sexuality, Gender Based Violence, Sexual Assault
- Sexually Transmitted Infections (STIs)
- HIV Counselling & Testing (HCT)
- Medical Male Circumcision (MMC) and referral
- Contraception - promoting dual protection

Children's Act No. 38 of 2005. As Amended.

Access to contraceptives

134. (1) No person may refuse-

- (a) to sell condoms to a child over the age of 12 years; or
- (b) to provide a child over the age of 12 years with condoms on request where such condoms are provided or distributed free of charge.

(2) Contraceptives other than condoms may be provided to a child on request by the child and without the consent of the parent or care-giver of the child if-

- (a) the child is at least 12 years of age;
- (b) proper medical advice is given to the child; and
- (c) a medical examination is carried out on the child to determine whether there are any medical reasons why a specific contraceptive should not be provided to the child.

(3) A child who obtains condoms, contraceptives or contraceptive advice in terms of this Act is entitled to confidentiality in this respect, subject to section 110.

[Date of commencement of section 134: 1 July 2007]

[Subsection (3) of section 134 amended by section 5(b) of Act 41 of 2007]

Implementation model

- ISHP Task Teams at National, Provincial and District levels
- School health teams visit schools
- School Based Support Team (SBST) should facilitate access to schools
- Specialised School Health Mobile Units have been deployed – starting in ten (10) NHI pilot districts
- Elsewhere learners who require referral should be referred to PHC mobiles or fixed health facilities.
- SBST and school health team must work together to ensure that learners who require referral and further services receive these services

Phased Implementation 2012 - 2016

	Year 1					Year 2					Year 3					Year 4					Year 5				
	Quintile					Quintile					Quintile					Quintile					Quintile				
	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
INDIVIDUAL LEARNER ASSESSMENT																									
Foundation	■	■				■	■				■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Intermediate						■	■				■	■				■	■	■	■	■	■	■	■	■	■
Senior	■					■	■				■	■				■	■	■	■	■	■	■	■	■	■
FET	■					■	■				■	■				■	■				■	■	■	■	■

Provincial implementation

- Staffing
 - redeployment, deployment of retired nurses
 - training/reorientation on new programme
- Ensure availability of transport, equipment and supplies
- Define the role of partner organisations (many peer education programmes currently in 2^o schools)
- Screen Grade 1s during School Health Week (March 2013)

Progress to date

- ISHP task teams established at national and provincial levels
- Policy and programme launched in October 2012
- Development of guidelines and training package for school health nurses
 - Training has taken place in all provinces
- Implementation plans for each province
 - Based on distribution/number of Q1 and Q2 schools
 - Redeployment of existing staff to areas of need, recruitment of retired nurses
 - Support systems in place
- DBE has agreed in principle that SRH services can be provided in schools, but approval from each school's SGB is required. A toolkit has been approved by the National Consultative Forum, and is awaiting approval by DBE.
- Recording and reporting system in place: ISHP indicators incorporated into DHIS

Coverage for 2012/13

	No. Of Q1 schools by province	Q1 Schools target : 80%	Q1 and Q2 Schools visited	% coverage schools reached	No. of G1 learners by province	Grade 1 Learners Screened	% G1 learner coverage reached	No. of G8 learners by province	Grade 8 Learners Screened	% G8 learner coverage reached
Eastern Cape	1 949	1 559	1 280	65%	121 423	73 494	82%	50 493	851	73%
Free State	839	671	586	98%	34 587	28 048	93%	17 534	5 982	68%
Gauteng	211	168	211	100%	43 501	96 815	100%	12 350	69 108	100%
KwaZulu-Natal	1 911	1 528	2 410	100%	110 747	120 454	100%	54 070	2 008	4%
Limpopo	1 580	1 264	3 109	100%	78 291	129 930	100%	43 303	3 654	7%
Mpumalanga	463	370	226	43%	40 918	24 001	41%	14 133	176	1%
North West	590	472	391	66%	32 882	12 745	23%	15 912	1 065	5%
Northern Cape	246	196	57	23%	14 592	2 291	15%	5 863	479	7%
Western Cape	279	223	844	100%	17 499	24 606	83%	3 306	47	1%
							82%			
							(Average)			
Total	8 068	6 454	9 114	73% (average)	494 440	512 384		216 964	83370.453	

2012/13: Coverage of Q1 schools visited by School Health Teams by Province

Target: 80% of schools visited

	Total number of schools= 100%	Annual Provincial Target=80%	Actual achieved	% reached
Eastern Cape	1 949	1 559	1 280	65%
Free State	839	671	823	98%
Gauteng	211	168	1 451	100%
KwaZulu-Natal	1 911	1 528	2 410	100%
Limpopo	1 580	1 264	2 744	100%
Mpumalanga	463	370	226	48%
North West	590	472	391	66%
Northern Cape	246	196	79	32%
Western Cape	279	223	733	100%
South Africa	8 068	6 454	10 137	125%

Additional schools in other quintiles were visited by GP,KZN, LP and WC: Coverage's above 100%

2012/13: Coverage of Grade 1 learners in Q1 and Q2 schools assessed using ISHP learner assessment, by Province.

Target: (80% of total no. of learners assessed)

	Total number of Grade 1 learners	Annual Provincial Target=80%	Actual achieved	% reached
Eastern Cape	121 423	971 38	100 632	82%
Free State	34 587	2 766	34 135	98%
Gauteng	43 501	3 480	95 726	100%
KwaZulu-Natal	110 747	88 597	120 454	108%
Limpopo	78 291	62 632	130 947	100%
Mpumalanga	40 918	32 734	19 166	46%
North West	32 882	26 305	12 745	48%
Northern Cape	14 592	11 673	2 503	17%
Western Cape	17 499	13 999	14 605	83%
South Africa	494 440	339 324	530 913	107%

National APP Target: 680 000 learners assessment: 78%
Target included Grade R

Targets in the 2013/14 Annual Performance Plan

Performance indicator	Reporting period	Annual target 2013/14	Q1: Target	Q1: Actual
ISHP coverage of Q1 and Q2 schools	Quarterly	70% 9 666 of 13 809 schools	17.5% 2 416 of 9 666 schools	30.7% 742 of 2 416 schools
ISHP coverage of Grade 1 learners in Q1 and Q2 schools	Quarterly	60% 297 500 of 495 000 learners	15% 74 250 of 297 500 learners	43.3% 32 163 of 74 250 learners
ISHP coverage of Grade 8 learners in Q1 and Q2 schools	Quarterly	20% 80 400 of 402 000 learners	5% 20 100 of 80 400 learners	53.8% 10 831 of 20 100 learners

Mobile clinics designated for the NHI districts.

- 30 vehicles purchased in partnership with the EU (European Union).
- Instruments and equipment:
 - 10 PHC mobile clinics equipped with an operating theatre
 - 10 Eye care mobile clinics
 - 10 Dental / Oral health mobile clinics
- In the process of purchasing an additional 60 Vehicles.

ISHP School Health Mobiles







NHI Pilot Project

NHI Pilot Project

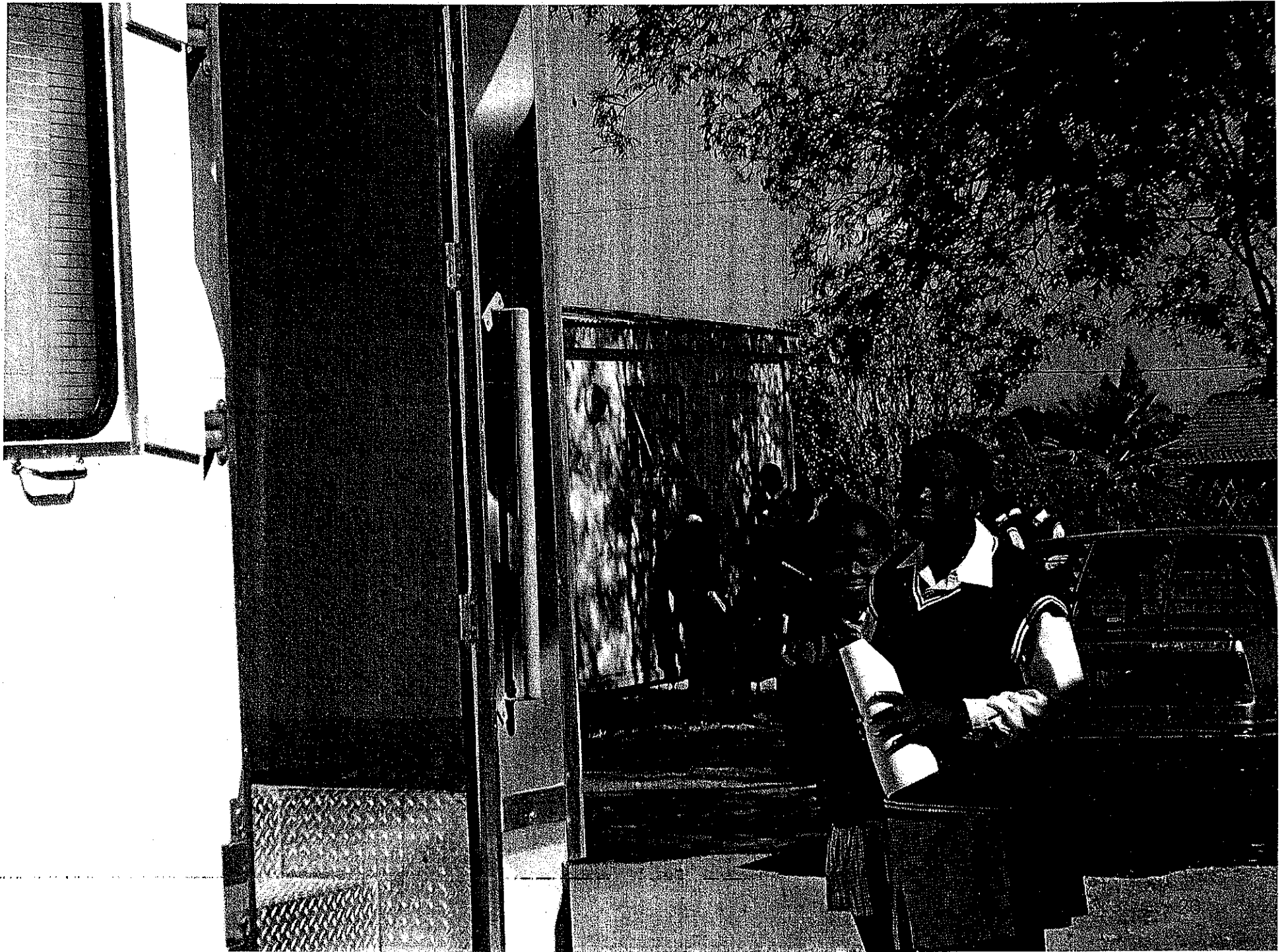
In Partnership with the



European Union

CARE

HEALTH PR





Challenges

- Although coverage of Grade R/1 learners has increased substantially, coverage of secondary school learners remains low.
- Screening of additional learners in 2013/14 will require
 - Additional school health nurses
 - Transport
 - Medication, equipment, etc.)
- Although DBE has agreed in principle that SRH services can be provided in schools, approval from each school's SGB is required.

Challenges (cont)

- Reporting and collation of data has been a problem: this has been addressed by incorporation of school health indicators into the DHIS.
- Implementation in some provinces and districts remains weak with insufficient numbers of school health nurses/lack of transport.

Priorities for 2013/14

- Emphasis on reaching secondary school learners
- Fast-tracking of agreement from SGBs for delivery of SRH services
- Strengthening of recording and reporting of activities and referrals.
- Ensuring that resources for school are available (staff and transport)
- Working with other stake-holders – especially with strengthening and co-ordinating Health Education and Health Promotion activities e.g. Lovelife and sSoulCity's Soul Buddies
- Ensuring close collaboration between DOH, DBE and DSD at all levels
- Planning for introduction of HPV vaccine in 2014/15
- Advocate for redeployment of existing staff to areas of need and recruitment of retired nurses

Thank you

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