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Conference Abstract

SchoolKit® Clinics – a Model and Online Toolkit of Multiagency Collaborative Care for Students with a Disability

Robert Peter Leitner, South Eastern Sydney Local Health District, Australia

Lesley Bruce, NSW Department of Education and Communities, Australia

Anna Lachowicz, South Eastern Sydney Local Health District, Australia

Linda Sheldon, NSW Department of Education and Communities, Australia

Lif O'Connor, South Eastern Sydney Local Health District, Australia

Annemaree Bickerton, South Eastern Sydney Local Health District, Australia

Jane Kim, South Eastern Sydney Local Health District, Australia

Correspondence to: **Robert Peter Leitner**, South Eastern Sydney Local Health District, Australia, E-mail: Robert.Leitner@sesiahs.health.nsw.gov.au

Abstract

Objective: Children and young people with an intellectual disability (ID) have complex needs which are best addressed through strong partnerships between the family and carers, health, education, disability services and other agencies. The SchoolKit® Clinic project is an initiative of the Metro-Regional Intellectual Disability Network (MRID.net) based on nearly three decades of provision of multidisciplinary 'clinics' conducted in the school setting. The SchoolKit® Clinic model provides interagency assessment and care planning in the naturalistic setting of the school optimising trust, open communication and collaborative processes, and allowing observation and involvement of the student in a familiar environment with minimal disruption to their routine. The SchoolKit® web-based multimedia resource toolkit provides the guiding principles, tools and resources for anyone who wishes to develop and establish SchoolKit Clinics in their community. This presentation will outline the model and introduce the online resource.

Methods: The SchoolKit® Clinic model was based on the longstanding collaboration between the Kogarah Developmental Assessment Service (NSW Health) and Cairnsfoot Special School (NSW Department of Education and Communities) in the running of school-based health clinics. A collaborative, partnership approach with families, the school, specialist service providers and other government and non-government services was used to inform all aspects of current practise. Key features of the model were:

- Multidisciplinary, interagency assessment and care planning meetings held at, and facilitated by, a child's school to support children and adolescents with disability and complex health and educational needs

- Partnerships between the child, families and carers, education, health and other professionals with the family and child at the centre of all decisions ensuring individualised care
- Inclusion of all people and agencies involved in a student's care in round-table discussions to address health and educational issues in a holistic manner and collaborative, achievable action plans.

Key Findings: Schoolkit® Clinics were conducted regularly in ten different special and mainstream schools in metropolitan and regional areas. The multidisciplinary health team provided access to a comprehensive range of paediatric, medical, rehabilitation, psychiatric, specialist nursing and allied health staff depending on the needs of the students. Feedback received through the survey of 33 parents and carers and 19 school staff attending transition clinics for students leaving school was very positive.

Conclusions: SchoolKit® Clinics offer an integrated care model to children and young people with high support needs. The model builds the knowledge and skills of those working in health, education and disability services, and has the capacity to improve quality of life in children with disability and their families. The SchoolKit® model is neither definitive nor prescriptive, but has been shown to be an adaptable model that is sustainable and transferrable to children with complex needs, and to other metropolitan and regional areas. The newly developed Schoolkit® website and the expansion of the model to include videoconferencing clinics will allow the model to be readily implemented in other areas.

Keywords

disability; co-design; regional and remote; comorbidities; multiagency

PowerPoint presentation

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