EDMONTON PUBLIC SCHOOLS

November 7, 2000

TO:	Board of Trustees
FROM:	E. Dosdall, Superintendent of Schools
SUBJECT:	Edmonton Student Health Initiative Partnership Annual Report
ORIGINATOR:	A. McBeath, Department Head
RESOURCE STAFF:	Gloria Chalmers, Anne-Louise Charette, Brenda Higham

INFORMATION

The purpose of this report is to share with trustees the annual report of the Edmonton Student Health Initiative Partnership (ESHIP) and to provide an update on the initiative. The annual report is provided in Attachment I and reflects the situation as of August 31, 2000.

Much of the activity in the first year of the project was focused on developing operational models for each of the services, recruitment of staff, arranging accommodation, staff orientation and interdisciplinary team building.

Staffing and Accommodation: The large number of new staff added in the first year, and those we are currently in the process of hiring for the student health initiative could not be accommodated in existing offices. Some ESHIP staff are located in health centres and at the Belvedere Consulting Services office. To house interdisciplinary service teams from Capital Health and Ma'mõwe, four new centres were established in the Alberta School for the Deaf, Killarney School, St. Kevin's School and St. Thomas More School. Alberta Infrastructure provided some funding for renovations. Capital Health provided furniture and school districts provided the space including custodial services and utilities.

Demand for Service: A central intake system has been established at Capital Health to track ESHIP referrals and services provided. This will enable the partnership to get a more accurate picture of the nature and number of services requested. For instance, by the end of the 1999-2000 school year, 183 district schools sent referrals to central intake. In the first two months of the current school year, approximately 100 new referrals were received per day by central intake. Over two-thirds of the ESHIP referrals originate from Edmonton Public Schools, and most are for children of elementary school age.

The demand is far outstripping the resources available. The partnership will address this gap by redirecting resources, establishing priorities for service, and revisiting service delivery.

Reallocation of Funds: The partnership received \$5.2 million for the 1999-2000 school year, and will receive an equivalent amount for the 2000-2001 school year. Because of the time required to identify services, recruit staff and orient them, the partnership was in a surplus position at the end of the first year. As the province allows surplus funds to be carried forward to the next budget year, the partnership is using the surplus to increase the number of occupational therapists, physical therapists, speech-language pathologists, and emotional/behavioural services. As well, a pilot project in year two is investigating the impact of utilizing licensed practical nurses supervised by Home Care to provide the medical procedures in three centres for student with severe disabilities. This allows the teacher assistants to focus on instructional support. Capilano and Wellington are the participating district schools.

Collaboration: There is a commitment from the ESHIP partners that the partnership will use the principles, planning process, and increased understanding of the other organizations that evolved through this initiative to foster other collaborative endeavors in the city.

ALC/GC:jed

Attachment I - *Edmonton Student Health Initiative Partnership Annual Report 1999-2000* (pp. 1 – 11)