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Tha Dev revi	ommendation 1: It the Department of Education and Early Childhood elopment, in consultation with the Department of Health, ew the development and implementation of the health noting schools approach in Victorian schools, with the aim	Agreed in principle.	The Victorian Government believes that a review of the health promoting schools approach in Victorian schools is important and timely, given the impending implementation of a National Partnership Agreement on Preventive Health (Healthy Children's Initiative) in July 2011. A strong and well evaluated model to guide developments would enhance the quality of health promotion efforts for children and young people.
a. b.	establishing realistic goals and expectations for school health promotion; guiding policy and practice at the regional and local		The Victorian Government also considers that a review of the health promotion approach in schools will provide the opportunity to consider options for health promotion in the years before school, when developing positive habits is critical to future health outcomes. This is consistent with the integration agenda being pursued by the Department of Education and Early Childhood Development (DEECD) for schools and early childhood services.
c.	level; facilitating effective collaboration between the health and		The Catholic and Independent school sectors provide in principle support for a stronger health promoting schools approach in schools and would welcome a closer collaborative approach with
	education sectors in planning, implementing and evaluating health promotion activities within schools;		DEECD and the Department of Health (DH) to that end. The Victorian Essential Learning Standards (VELS) have provided Victorian schools with a suitable
d.	identifying the health promotion competencies required by school staff to successfully implement health promotion programs;		and flexible basis for incorporating health promotion initiatives in schools. However, the move towards the implementation of AusVELS (including the Australian Curriculum) could see a shift in the curriculum content and structure of the Health and Physical Education Learning Area.
e.	coordinating and sustaining the wide range of health and wellbeing programs and services currently occurring in Victorian schools;		The Victorian Government will determine the structure, context, and overarching aims for adoption of the model. Given the number of existing frameworks in education and health, time would be required to review how these might be integrated to support a coordinated approach in schools and early
f.	ensuring longer-term funding for proven school-based health promotion programs and services;		childhood service platforms. These frameworks incorporate mental health, sexuality, healthy eating, drug education and respectful schools.
g.	and improving the dissemination of information and evidence, including case studies and practical resources,		DEECD and DH have already been working together to consider child public health issues through the Child Health Coordinating Group and the development of the National Partnership Agreement on Preventive Health implementation plan for healthy children.

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about the effectiveness of health promotion activities within schools.		The Healthy Children implementation plan was endorsed by the Minister for Health in December 2010 and is subject to agreement by the Commonwealth. Under the Healthy Children initiative, the Commonwealth is providing funds for four years (2011/12 to 2014/15) to deliver programs covering physical activity and healthy eating. The funds will support settings-based interventions in pre-schools and schools, while also recognising the role of family and community in supporting healthy lifestyles. Work is currently underway to develop an overarching policy for DEECD health and wellbeing services. This could become a vehicle through which health promotion can be better coordinated across services for children and young people. Any decision about funding and program delivery would be subject to Government consideration of budgetary implications.
Recommendation 2: That the Department of Education and Early Childhood Development and the Department of Health sign a Memorandum of Understanding outlining the goals, objectives, roles and responsibilities for health promotion within all Victorian schools.	Agreed	The Victorian Government agrees that review and redevelopment of the Memoranda of Understanding (MOU) between DEECD and DH would enhance cross-departmental work that contributes to the health and wellbeing of young people. There are two current Memoranda of Understanding between DH and DEECD that support public health activity. The first relates to child public health activity and has led to the formation of a joint DEECD/DH Child Health Coordinating Group; the second allowed for a number of joint initiatives, and so far, one has been developed for sexual health. A further schedule to this MoU is currently being prepared to govern DEECD-DH joint funding in child injury prevention. The opportunity exists to review and revise this MOU to support greater activity in broader areas of health and prevention across all the school sectors as well as to strengthen links into early childhood services. An MOU exists covering each of the school sectors that makes provision for drug education to all Victorian schools.
Recommendation 3: That the Victorian Government establish a high level interdepartmental committee responsible for planning and	Agreed in principle	The Victorian Government agrees an interdepartmental committee would facilitate a coordinated approach to health promotion in Victorian schools and early childhood services, and through the development of shared values and goals, may improve efficiency and better place government to

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implementing a coordinated, systemic approach to health promotion within Victorian government, Catholic and independent schools.		identify and respond to gaps in the service system from birth. The Catholic education sector and Independent Schools Victoria are both supportive of this recommendation. A number of high-level cross-department committees already exist that focus on children and young people e.g. the Children's Services Coordination Board supported by the Inter-Departmental Committee on Outcomes for Children and Youth and Children, the Children and Youth Senior Officers Group (CYSOG) and the recently formed Victorian Prevention and Population Health Advisory Board. There is an opportunity to review the contribution these committees make to health promotion and decide whether one of these committees can assume the responsibility for oversight of this health promotion approach for children from birth, or whether a new interdepartmental committee for health promotion is needed.
Recommendation 4: That the Department of Education and Early Childhood Development continue to promote strong partnerships between schools, early childhood services, health agencies and the broader community as a means of achieving optimal educational and health outcomes for Victorian students.	Agreed	DEECD will continue to support effective partnerships between schools, early childhood services, health agencies and the broader community as a way of enhancing prevention, early intervention and health promotion efforts. This approach is contained within the work currently being undertaken within DEECD looking at service coordination that aims to provide a clear and shared understanding of how departmental health and wellbeing services can work in a coordinated way to improve and support children and young people's health, wellbeing, learning and development outcomes. This work clearly articulates the importance of developing strong internal workforce and external community relationships to promote effective service coordination and referral practices. The scope of the National Partnership Agreement on Preventive Health (Healthy Children Initiative) includes a strong focus on settings-based initiatives in schools and early childhood services, while also taking into account the key role and involvement of family and community.

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		The Catholic education system has a strong priority in the area of Student Wellbeing and parent and community partnerships. The Catholic Education Office Melbourne has launched a strongly recognised Student Wellbeing Strategy 2011– 2015, incorporating the appointment of Student Wellbeing Leaders with relevant credentialing to a Masters level to support a whole-of-community systems approach to health promotion efforts. Student wellbeing is integral to the philosophy and practice of independent schools in Victoria. Independent Schools Victoria provides support and services to member schools in this area. Youth Partnerships is a whole of government initiative designed to better support 'at risk' young people by working at the local level to improve coordination of youth services: Seven demonstration sites will be established across the state to trial approaches to youth services such as schools, drug and alcohol and non-clinical mental health services working in a more coordinated and collaborative way to best support the needs of young people. Youth Partnerships aims to improve engagement in education and training and to reduce the escalation of social, individual and behavioural problems for vulnerable young people. Strong partnerships will also be promoted through interdepartmental working groups and Local Governance Committees that are made up of representatives from DEECD, DHS, DH, Victoria Police, local government and major service providers.
Recommendation 5: That the Department of Education and Early Childhood Development, in consultation with the Catholic and independent education systems, work to ensure that all Victorian schools establish a health and wellbeing team responsible for:	Agreed in principle	DEECD supports health promotion in Victorian schools, including through health and wellbeing teams. DEECD will continue to work with DH in ensuring broader preventive health and health promotion resources align to support schools and their communities in becoming health promoting. To maximise prevention and early intervention efforts, there is an opportunity to consider appropriate health promotion models for professionals working in the early years services. This would be subject to Government consideration.
a. developing a whole-school health promotion policy;b. identifying the specific health needs of various groups		A number of government school staff perform health promotion and wellbeing roles including secondary school nurses, student welfare coordinators, primary welfare coordinators and the health and physical education teachers. However, not all schools uniformly have these staff.

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within the school community; c. auditing how the school's policies and practices respond to the specific health needs within the school community; d. designing and implementing appropriate programs and strategies for responding to the priority health needs within the school community; and e. undertaking a triennial review of the school's success in implementing health promotion initiatives which respond to the current and emerging health needs within the school.	, coponer	Secondary school nurses, in targeted schools, currently work closely with teachers, wellbeing staff and principals to develop an annual action plan for schools, identifying health and wellbeing priorities, implementing health promotion activities and evaluating their impact over time. Implementation of health and wellbeing teams in all Victorian schools would require the development of guidelines, coordination of health and wellbeing staff, as well as coordination with the numerous community based health promotion agencies already undertaking this work, both directly with schools and with the wider community. This would be subject to Government consideration. The triennial review process should be incorporated into the existing 3-year strategic planning process undertaken by all schools. Independent Schools Victoria provides services and support to member schools in relation to student health and wellbeing. The role of the student wellbeing coordinator and the team supporting this area of work are valued in member schools. The Catholic education sector prioritises Student Wellbeing and supports the appointment of Student Wellbeing Leaders (as part of the Leadership Team) or the establishment of core teams.
Recommendation 6: That the Department of Education and Early Childhood Development establish a network of regionally based health promotion coordinators who are responsible for supporting the health and wellbeing teams of the schools in their network to plan, develop, implement and evaluate their health promotion policies, strategies and programs.	Agreed in principle	It is agreed that experts in health promotion who can support health and wellbeing efforts in schools are integral to the successful dissemination of health promotion knowledge. This has been demonstrated by the health and wellbeing staff employed by DEECD in its regional offices, who support the implementation of new policy and programs in schools on health promotion, drug education and student wellbeing activities. However, these staff members usually relate to drug education in the main. In particular regard to drug education, there is an MoU covering each of the education sectors that makes provision for drug education to all Victorian schools. At a local level, secondary school nurses, where available, are tasked to advise and implement health

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		promotion strategies and programs within their schools. Such a role would need further scoping and collaboration between DEECD and DH and any decision about funding and program delivery would be subject to Government consideration.
Recommendation 7: That the Department of Education and Early Childhood Development, in consultation with the Department of Health, develop and promote a comprehensive suite of practical resources to assist schools seeking to apply the health promoting schools process.	Agreed in principle	The Victorian Government agrees that practical health promotion resources are the key to successful implementation of health promoting schools. A range of resources currently exist addressing health promotion activities including, for example, healthy eating, and a canteen advisory service. Health promotion resources are currently provided through the Maternal and Child Health Service in DEECD to families with children aged 0-6 years. School nurses, where available, are able to assist in the assessment and collation of health promotion materials for individual schools, based on the local needs. The mental health promotion resource, <i>Promoting Healthy Minds for Living and Learning</i> , was informed by the health promoting schools model and provides an evidence-based framework and web
		site with tools and guidance for implementing core elements of a mental health promoting school or early childhood setting. The framework was developed in conjunction with Catholic Education Office and Independent Schools Victoria and assists schools and early childhood settings to incorporate activities that promote mental health in their students and staff, as well as create safe environments where children and young people can build positive relationship and learn interpersonal skills. The development of any new resources or review of existing resources, to ensure they remain up-to-date and evidence-based, would be subject to Government consideration.
Recommendation 8: That the Department of Education and Early Childhood Development establish a comprehensive professional development program for teachers and school leaders to	Agreed in principle	It is agreed that increased awareness, knowledge and skills of staff are important for health promotion in schools. This knowledge can lead to linking health promotion to school strategic plans, help build collaborative links with community and regional experts in health promotion, and encourage collaboration of schools with their local communities.

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develop the advanced knowledge and skills required to plan,		DEECD is currently developing a professional learning strategy for DEECD's Student Wellbeing
implement and evaluate school-based health promotion		Workforces and will implement a Student Support Leadership Development Program in 2011. This
initiatives.		strategy will include, but is not limited to, issues such as drug education, mental health, bullying, and
		sexuality education. This is being supported by internal DEECD funding.
		School nurses, where available, would be able to assist in the professional development of teachers and school leaders, through direct education and support, as well as facilitating links with relevant professional organisations.
		The National Partnership Agreement on Preventive Health (Healthy Children Initiative) outlines the importance of training professionals as one element of a broad settings-based approach to interventions in schools and early childhood services.
		Independent Schools Victoria provides staff of member schools with a range of professional development opportunities in the area of student health and wellbeing.
		The Catholic Education Office Melbourne, as part of its Student Wellbeing Strategy, has a focus on improving the qualifications of their Student Wellbeing leaders through the completion of a Masters in Education (Wellbeing). As at 2010, 65% of Student Wellbeing leaders have completed the qualification.
		DEECD, as part of its Strategic Partnerships Program 2010-2011, has a current MoU with the Australian Council for Health, Physical Education and Recreation (ACHPER) Victorian Branch, to develop teacher capacity through professional learning for teachers from Prep to VCE in health, physical education, sport and outdoor education.
Recommendation 9: That the Department of Education and Early Childhood	Agreed in principle	It is agreed that formal recognition of school achievement in health promotion would be appropriate and encourage greater participation of the whole school community.

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Development implement a formal recognition and award program to acknowledge and celebrate outstanding achievements by schools, communities and individuals in promoting healthy community living.	-	School are currently offered a range of health promotion awards through existing programs. DEECD holds annual award ceremonies for Early Years and Education Excellence. Health promotion awards could be incorporated into these existing ceremonies.
		Other options for awards and incentives will be explored as part of the National Partnership Agreement on Preventive Health (Healthy Children Initiative).