



Government of **Western Australia**
Child and Adolescent Health Service
WA Country Health Service

WA School Health Program Guide Summary



Healthy kids,
healthy communities





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Acknowledgement of country and people

The Child and Adolescent Health Service and the WA Country Health Service acknowledges the traditional custodians of the land, the Noongar people and the Aboriginal people of the many traditional lands and language groups of Western Australia. We acknowledge the wisdom of Aboriginal Elders both past and present, and pay respect to Aboriginal communities of today.

Introduction

Aim

It is anticipated that this document will support professionals from Health and Education sectors, along with the broader community, to better understand the key role of community health nurses (CHNs) working in schools and reinforces the collaborative relationship with the Department of Education that is essential to invest and optimise student health and wellbeing outcomes.

The School Health Program offers best practice services, shaped by the National Safety and Quality Health Service (NSQHS) Standards and provides a framework of service provision for children and young people (of school age) aged 3½ to 18 years.

This document provides guidance for all those who deliver school health programs or services for children and young people in Western Australia.

The full version of this report is available at cahs.health.wa.gov.au/For-health-professionals/Resources/Schools-and-Child-Care

Across Western Australia, CHNs provide school health services that promote the health, development and wellbeing of children and young people to help them reach their full potential.

CHNs working in schools provide support through the primary and secondary school years. CHNs work with students, school staff and parents to identify early signs of health or developmental concerns; facilitate health education and health promotion; contribute to development of health care plans for students with identified or chronic health needs; and connect children and young people with relevant health services and supports.

School-aged health service delivery model (3½ to 18 years)



UNIVERSAL

Universal services are provided for all children and young people.

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> • Early detection programs • Surveillance • Transition from Child Health | <ul style="list-style-type: none"> • Health promotion • Primary health care • Health counselling • Parenting support | <ul style="list-style-type: none"> • Liaison • Advocacy • Referral |
| <p>Primary:</p> <ul style="list-style-type: none"> • Screening/SEHA • Vision • Hearing • Lift the Lip (Dental health) • Growth/BMI • School readiness | <p>Secondary:</p> <ul style="list-style-type: none"> • Health promotion • Health education | <p>Other:</p> <ul style="list-style-type: none"> • School Based Immunisation Program • Triple P |



UNIVERSAL PLUS

Universal Plus services are provided for children and young people who need additional follow up care and support. Nursing services work in partnership with care givers, schools and other agencies.

- | | | |
|--|---|---|
| <ul style="list-style-type: none"> • Monitoring • Brief intervention | <ul style="list-style-type: none"> • Targeted screening/assessments | <ul style="list-style-type: none"> • Health care planning |
| <p>Primary:</p> <ul style="list-style-type: none"> • ASQ • Triple P • Ear health for Aboriginal students | <p>Secondary:</p> <ul style="list-style-type: none"> • HEADSS | <p>Other:</p> <ul style="list-style-type: none"> • Children in Care • Clients of Concern |



PARTNERSHIP

Partnership services are provided for children and young people with identified health needs and circumstances. Nursing services work in partnership with care givers, schools and other agencies.

- Health care planning and management for students with identified and/or chronic health conditions.
- Liaison with specialised health services.

Figure 1. School aged health service delivery model (3½ years to 18 years)



Principles

The WA Health System aligns with the core values of collaboration, openness, respect and empowerment.

School health services in Western Australia are committed to:

Child and family centred care: the child or young person is at the centre of all care, delivered in partnership with families and those involved in the life and care of the child or young person.

Providing **culturally secure care**, ensuring cultural diversity, rights, views, values and expectations of Aboriginal people, and those of other cultures, are recognised and respected within Australian legislation.

Collaboration with families, schools and other agencies. The partnership with the Department of Education ensures collaboration to identify and respond to emerging health priorities in order to maximise health outcomes for school-aged children.

Use of **primary prevention strategies** which reduce the likelihood of developing a disease or disorder through early identification and early intervention for health and developmental issues.

Use of the **Health Promoting Schools Framework** in collaboration with school communities, using a combination of strategies in three broad areas:

- curriculum, teaching and learning
- school organisation, ethos and environment
- partnerships and services.

Progressive universalism with a focus on vulnerable children and young people, providing more support for those who need it most. The use of this model supports the continuity of services from birth to adulthood. CAHS and WACHS use the following terms to describe the three levels of service:

- Universal services are provided for all children and young people. Services include health promotion and health education, population-based screening programs and delivery of school-based immunisation programs
- Universal plus services are provided for children and young people who need additional care and support. Services may include assessments, brief interventions, referral and/or support for specific health, wellbeing or developmental issues
- Partnership services are provided for children and young people with identified health needs and circumstances. Services may include more intensive support for health care planning, management, in collaboration with the family, school and health services.



Priority Health Issues and Health Service Delivery Approach

Our services work with school aged children applying a population-based service approach to facilitate health enhancement and the early detection of health concerns for children and adolescents as they grow and develop. Schools are ideally placed to support and promote the health and wellbeing of children and adolescents, and school health service staff are well positioned to support school communities with specialist skills and knowledge.

As a key workforce group in the WA health system's delivery of primary health care, school health service staff provide children, young people and their families with a first point of contact and access to the health system. School health services actively promote healthy knowledge, skills and behaviours for short-term and life-long outcomes.

Current state health priorities for children and young people population include:

- healthy child and adolescent development
- overweight and obesity
- mental health and wellbeing
- communicable disease (including COVID-19)
- ear health in Aboriginal children.

Nurses also respond to individual needs. Common health needs for adolescents include queries related to mental health and wellbeing, healthy relationships, sexual health, and alcohol and other drugs.

Our Program

CHNs support school communities with specialist skills and knowledge. A population-based approach is used to facilitate health enhancement and the early detection of health and developmental concerns and for children and adolescents as they grow and develop. CHNs also provide families with guidance around healthy growth, development and wellbeing.

CHNs advocate for the use of the Health Promoting Schools Framework to plan coordinated school health initiatives which address health issues using research evidence, school health promotion strategies. Advice is provided to schools

about planning and implementing health promotion initiatives. CHNs may support and engage in programs and initiatives existing in local schools

The progressive universalism model is used across community services in CAHS and WACHS and allows for greater investment in working with families who need a higher level of support to improve long term health outcomes for children and communities.

Support by CHNs to meet the needs of the school community is negotiated in partnership with teachers and other school staff.



Universal and Universal Plus

Observations, holistic assessments and provision of follow up support brief intervention and/or referrals.



Health information resources and support

Provision of health information and support.



School health promotion activities

Contribution to school health activities.



Partnership

Contribution to development of health care plans for students with identified and/or chronic health needs.

Primary School health services

Children 3½-11 years



Universal

The School Entry Health Assessment (SEHA) program, provided for all children commencing school, aim to identify health and developmental concerns. The SEHA program is offered to Kindergarten or Pre-primary children attending public and non-government primary schools and to children who are home schooled.

CHNs undertake a systematic enquiry of parent/caregiver and teacher concerns; gather information about the child's current abilities and functions; identify risks and protective factors; and complete age appropriate observations and screening assessments covering the following areas:

- Vision, hearing and ear health
- Growth, (including height, weight and Body Mass Index)
- Oral health
- Developmental and general health, if required.

Parent and guardians, along with CHNs and education staff work together to consider each child and prioritise assessments for those at greatest risk of health, developmental or wellbeing concerns.

Outcomes of assessments are discussed with families, and support, information, brief interventions and/or referrals are provided to meet the needs of the child and family.

Age-appropriate screening assessments, inclusive of hearing, ear health and vision, are offered to all new enrolments at Intensive English Centres (IECs) when it is identified this has not been undertaken earlier.



Health information resources and support

CHN provide specialist knowledge in key priority health and development areas to school communities.

Promotion of health and development emphasising healthy growth, nutrition and healthy eating, physical activity, social and emotional development and mental health and wellbeing may be provided through:

- promotion of approved parenting programs run locally
- delivery of kindergarten talks for families of children starting school
- delivery or referral to Triple P – Level 2 seminar series
- delivery of curriculum support as negotiated and in partnership with teachers
- facilitation of health information to enhance health literacy
- distribution of relevant CAHS-CH and WACHS age-specific resources in various formats.

The CHN's role in communicable disease surveillance and prevention is to:

- ensure each school has access to the latest WA Health Communicable Disease Guideline
- providing advice in the event of a communicable disease in the school
- provide information on local immunisation clinics as required.



School health promotion activities

CHNs provide advocacy for whole school health promotion initiatives targeting the following key priority areas:

- healthy child development
- overweight and obesity
- mental health and wellbeing
- communicable disease (including Covid-19)
- ear health in Aboriginal children and other health issues of importance as identified through the Health Promoting Schools framework process.



Universal Plus

Throughout the primary school years, CHNs provide support for children and young people with specific health issues. This can include:

- support and provision of health information, assessment, brief intervention and referral
- provision of additional age-appropriate assessments where a concern is raised by an individual, parent or teacher throughout the school years including healthy growth assessments and identification of children and young people at risk of developmental, wellbeing and psychosocial concerns
- provision of hearing and ear health assessments for all Aboriginal children in pre-primary and year one (unless SEHA has already been conducted in that school year).

Comprehensive Health Assessments for Children in Care are a priority and are conducted in response to referrals from Department of Communities Child Protection and Family Support. These are conducted when children move into care initially, and annually.



Health information resources and support

- **Delivery of Triple P** – level 3 discussion groups and Level 4 Group Triple P support parents of children with a concern about their child's behaviour and development.



Partnership

Contribution to development of health care plans for students with identified and/or chronic health needs.

CHNs contribute to the development of health care plans for students with identified and/or chronic health needs. The CHNs support school staff and families with health care planning and management for clients with identified health needs and/or chronic conditions. This includes responding to requests for health information by parent/caregiver or school staff for their child and providing clinical handovers if the student moves schools.

Transition to Secondary School

Adolescence is a life transition period for students which is characterised by rapid physical and psychosocial changes. During transition to secondary school, adolescents often experience increased psychosocial and academic challenges. Issues such as mental health and wellbeing concerns, depression, and anxiety may arise.

Community Health nurses in schools are well placed to support students at this time through the Universal offer of health and wellbeing presentations to students transitioning to secondary school. The presentations aim to enhance awareness about possible challenges and ways to seek help if needed.



Health information resources and support

- **Universal offer of health and wellbeing presentations to year 7 (along with other years as requested) students, covering:**
 - role of CHN working in secondary schools
 - starting high school
 - access to reliable health services and websites/apps
 - adolescent mental health
 - physical health
 - social health
 - screen time/safety online.

Secondary school health services – Children 12-18 years



Universal

Provision of health information to enhance health literacy in the priority health areas, including healthy adolescent development and healthy growth.



Health information resources and support

Provision of health information to enhance health literacy in the priority health areas, including healthy adolescent development and healthy growth.

CHNs provide parents with support and health information about key health, developmental and wellbeing issues through individual and group contacts. The CHN can promote and/or conduct groups to provide support and health information to young people.

CHNs may provide support, information and contribute specialist knowledge to teachers around key priority areas, using approved resources and standard presentations, including:

- healthy child and adolescent development
- overweight and obesity
- mental health and wellbeing
- communicable disease (including Covid-19)
- ear health in Aboriginal children and other health issues of importance as identified through the Health Promoting Schools framework process.

Delivery of Teen Triple P – Teen Triple P supports parents of teenagers with identified risk factors known to impact on development to develop skills to enable them to support their children.

Services for secondary school-aged children include promotion and delivery of immunisation programs and prevention of communicable disease, including:

- ensuring schools have access to the latest WA Health Communicable Disease Guideline
- providing advice in the event of a communicable disease in the school
- providing information on local immunisation clinics as required
- facilitating (delivery of) the school-based immunisation program.



School health promotion activities

Advocacy for whole school health promotion initiatives targeting key priority areas including:

- healthy adolescent development
- overweight and obesity
- mental health and wellbeing
- communicable disease (including Covid-19)
- ear health in Aboriginal children and other health issues of importance as identified through the Health Promoting Schools framework process.



Universal Plus

Primary health care is provided to adolescents to support with physical, emotional or psychosocial health concerns. Nurses provide a first point of contact and access to the health system for adolescents.

CHNs provide:

- drop-in and/or appointment sessions for adolescents
- information about consent requirements and limits of confidentiality, discussed at each contact
- additional age-appropriate assessments where a concern is raised by individual, parent or teacher
- assessments, brief interventions, follow-up and ongoing support as required in response to a holistic consideration of the young person's needs
- brief interventions to support young people to develop health literacy and skills, and to help them access care as needed
- non-judgemental information and strategies to help young people build skills and knowledge about how to deal with their difficulties and can empower young people to become more resilient and better able to deal with problems in the future
- referrals to appropriate external services if issues identified require further assessment and intervention that is outside the CHN's scope or experience..

In addition age-appropriate health assessment, inclusive of hearing/ear health and vision, are offered to all new enrolments at Intensive English Centres (IECs) when it is identified this has not been undertaken.

Comprehensive Health Assessments for Children in Care are a priority and are conducted in response to referrals from Department of Communities Child Protection and Family Support.

The HEADSS psychosocial assessments is used as a framework in which information can be gathered about a young person's life, their strengths, supports and challenges. HEADSS helps build rapport between the CHN and young person, and supports planning care in a way that empowers the individual.

HEADSS is an acronym representing the following domains:

- Home
- Education and employment, eating and exercise
- Activities and peer relationships, social media
- Drug use, including prescribed medications, cigarettes, vaping, alcohol and other drugs
- Sexuality and gender
- Suicide, self-harm, safety and spirituality.

Support is provided to young people who have identified risk factors known to impact on health, wellbeing and/or safety. CHNs participate in the Student Services Team at their school to support young people identified as at risk.



Partnership

Support is provided for children with identified and/or chronic health needs.

CHNs support school staff and families with health care planning and management for clients with identified health needs and/or chronic conditions. This includes supporting families with health information. Additionally, this may include providing clinical handover if the student moves schools.

For individual students at risk of suicide, nurses provide support in collaboration with school staff in line with the Department of Education policy guidance (see Department of Education policies internet page).

Clinical Nursing Leadership and Governance

Professional governance as a system ensures alignment with legislation, regulations, standards and policies that govern the nursing and midwifery professions. Developing and implementing effective professional governance is core to the profession. This ensures that nurses are appropriately prepared for practice, and that they continue to uphold the highest standards of professionalism which is essential to ensuring health care quality and safety.

National Safety and Quality Health Service Standards

The National Safety and Quality Health Service (NSQHS) Standards are a series of eight national standards that all public health services across Australia must comply with. NSQHS Standards provide a nationally consistent statement of the level of care consumers can expect from health service organisations.

Community health nurses working in schools support children's healthy development and wellbeing using a primary health care approach through a combination of assessments, related follow-ups such as brief interventions and referrals; provision of health information and advice; support around school health promotion activities and healthcare planning.

Nursing and Midwifery Board (NMBA) - Professional Practice Frameworks

The Nursing and Midwifery Board of Australia (NMBA) protects the public by ensuring that anyone who is registered as a nurse and/or midwife is safe and competent to practise. Nurses and midwives must be registered with the Nursing and Midwifery Board of Australia (NMBA), and meet the NMBA's professional standards in order to practise in Australia.

Policy guidance

A suite of policy documents provides guidance to CHNs working in WA schools. An overarching policy notes the background to the provision of school health services and provides broad descriptions of the service. Associated school aged health services,

primary and secondary guidelines provide further details about what is provided to schools and students at each level. The guidelines are then supported by procedures for particular health areas such as growth, vision and hearing/ear health, as well as other documents about areas such as health promoting schools or student health care plans. Policy documents are developed and reviewed based on current epidemiological evidence, peer reviewed research and consultation with nurses, other staff working in schools as well as content experts.

Education and school health service staff follow and must be aware of relevant health and education guidelines and policy documents. This includes documents referring to responses around child safety, suicide/self-harm and student health care planning.

Clinical Supervision in Community Health Nursing

CHNs working in Schools have access to clinical supervision. The aim of clinical supervision is to support professional nursing practice in order to provide safe, effective and high quality nursing care for the community. A number of benefits and objectives associated with clinical supervision have been identified (e.g., job satisfaction, reduced stress and burn-out rates, acquisition of new skills, confidence, reflection, and quality assurance).

Skills and Education

It is the responsibility of the relevant Health Service Providers to ensure that CHNs delivering school health services are registered with the Australian Health Practitioner Regulation Authority (AHPRA). Nurses are required to have relevant qualifications, skills, training and supervision as identified by the Registered Nurse Standards for Practice and the National School Nursing Standards for Practice.)

Operational Guidance

Infrastructure

Accessibility

Services for school-aged children in Western Australia should be accessible at times and locations that meet the needs of children and young people. The primary location for service delivery is usually at school. Where possible children and young people will be offered a choice of locations which best meets their needs, and in settings that enable confidentiality.

A level of service is maintained throughout the year, including alternative modes of support during school holidays. Services are flexible and responsive to client needs, demand and priorities. Local service delivery is planned and implemented accordingly, involving periodic review and adjustment based on feedback from key stakeholders.

Technology

Technology is central to the delivery of contemporary services in the school setting. Equipped with contemporary platforms,

Community Health staff can readily access health related resources to support students and their families, and school staff. In addition, health service providers use electronic health records which facilitate integrated care with related services, for example, child health services and child development services.

Service planning can be informed by relevant data and information to support whole school approaches to the provision of health care support and promotion.

Work Health, Safety and Wellness

All service providers delivering School Health Services are required to ensure the safety, health and wellbeing of employees, students, clients and visitors.

Incident and hazard reporting occurs as per the WA Occupational Safety and Health Act 1984 to ensure that all hazards and incidents are identified and appropriately managed in support of a safe and healthy work environment.

CHNs working in Schools are employees of the health service provider and work within health service policy and procedure. As nurses are considered visitors whilst on the school site their practice will also be informed by relevant education sector policy and occupational Health and Safety regulations. As such, the CHN will ensure that the principal is kept informed of any safety and health issues as required.

Duty of confidentiality and Information sharing

As per Western Australian legislation and policy, Health Service Providers will ensure that all staff have access to guidance in relation to information sharing, to safeguard or protect children, improve coordination and communication between agencies.

The School-aged health services policy guides nurses in this area. Health professionals have a duty to maintain the confidentiality of all information obtained in the course of providing health care to clients of any age. The duty means that information cannot generally be released to others without the client's consent or, where 'incompetent' due to age and maturity, or conditions such as intellectual disability, psychiatric illness or an acquired brain injury, the permission of the client's legal guardian (usually a parent). Client confidentiality is a fundamental legal duty of health professionals.

Safeguarding

Every child has the right to be safe and to live without fear, abuse or violence in their family and community. CHNs in schools have an obligation to work with children and their families so that children are protected, cared for and given the opportunity to develop to their full potential.

The Children and Community Services Act 2004 prescribes the responsibilities for identified staff, including nurses, regarding mandatory reporting of child sexual abuse. This Act underpins mandatory reporting of child sexual abuse in WA. Nursing staff are legally required to report when they have a belief, formed on reasonable grounds, that child sexual abuse has occurred or is occurring.

The Department of Child Protection support children and young people in the Chief Executive Officer's care, protect children and young people from abuse and support individuals and families at risk or in crisis.

The role of the WA health system (the Department of Health, Health Service Providers and contracted entities) is to promote and protect the health status of the community, of which the safety and wellbeing of children is central.

The Statewide Guidelines for Protecting Children 2020 provides clinicians with information to appropriately address child abuse concerns they identify through the provision of health services.

Children in Care

Assessments and managing referrals for children in care

Community Health staff must meet legislative and departmental requirements for referral management within the health care planning pathway for children in care. Children in care will have been exposed to a range of adverse experiences and are at high risk of health and developmental vulnerability. For this reason, Health Service Providers should prioritise undertaking comprehensive health assessments and health care planning to identify and address any health and development concerns.

Student Health and Wellbeing

Health care planning

Students who experience health conditions that may require support while at school should have a current student health care plan. These documents are owned by the school and specify the support required to cater for a student's health care needs while at school or engaged in school activities outside of the school, such as excursions. When required, student health care plans should incorporate an emergency response plan. Standardised plans are available to school staff. Risk management plan templates are also available for students for whom there is a concern regarding suicidal behaviour.

CHNs may support the development of health care plans for students with identified needs, including support of paediatric goals of care, when required.

Instructions included in Paediatric Goals of Patient Care plans, developed by the parents and the child's health care team, are followed by school health service staff as applicable in the school health context. These care plans are an important step in the process of planning for quality end of life care for young people and their families. Goals of care can be used to plan for interventions that reflect the preferences and priorities of the child/young person, and their family in the event of acute deterioration.

Ear Health

The WA Child Ear Health Strategy 2017-2021 and subsequent WA Auditor General recommendations promote a strong focus on prevention, early intervention and effective management of ear health and disease for all children aged 0-5 years with additional screening and prevention activities and support to access referral pathways for Aboriginal children.

All children are provided with newborn hearing screening by maternity services. Community Health Nurses screen all children at the five universal contact schedules from 0-14 days to the 2-year-old contact using age appropriate screening questions. In addition, Aboriginal children are provided with screening questions, otoscopy and tympanometry at the five scheduled contacts up to 2 years old. CHNs working in school health provide screening questions, otoscopy and audiometry at the School Entry Health Assessment (SEHA), with the addition of tympanometry for Aboriginal children at school entry. Annual ear health screening is conducted for all Aboriginal children in pre-primary and year one.

Referrals are provided to a medical practitioner/other health practitioner where responses to screening questions and/or results from assessments indicate a need.

Role of Community Health Nursing for identified health needs

Children with identified health needs often require additional support to ensure that their health and learning needs are supported at school.

School health service delivery in this area is currently under review and will continue to be informed by relevant strategic documents

Within education support settings, and for students with disability, school health services currently focus on supporting the range of social, emotional and physical health needs experienced by these students.

Nursing services for children with identified health needs will continue to be informed by the principles of inclusive education and school health reform.

First Aid

All schools are required to have clearly defined procedures for managing first aid and emergency situations, which are independent of CHN availability.

All registered nurses practice in accordance with nursing and midwifery board standards for practice and decision making framework. As part of their duty of care and within the scope of their skills, knowledge and availability, the CHN may assist in a medical emergency at school if they are present at the time of an incident. They may also be utilised as a secondary consultation where there is concern about the nature of the injury or where incidents are recurrent. Although not responsible for development of first aid policy and procedures, the CHN can use their expertise and knowledge to provide guidance.

Anaphylaxis management

All schools are required to develop a whole of school plan to manage the prevention and emergency management of anaphylaxis. In an emergency as part of their duty of care, the CHN may administer an adrenaline auto-injector to a student with an anaphylactic reaction.

Communicable diseases prevention

Infection prevention and control programs aim to increase and maintain target levels of immunisation coverage across all our immunisation programs and promote infection prevention strategies for clients, staff, and the broader community through all aspects of service delivery.

Infection prevention and control strategies are in place to ensure the environment is safe for students, staff, and families.

Immunisation

Immunisation services are provided by multiple service providers across WA. Immunisation Strategy Implementation Steering Committee oversees best practice pathways, with a strong commitment to achieving the best immunisation outcomes for all Western Australians to prevent vaccine preventable diseases.

The delivery of the National Immunisation Program is an important part of an overall strategy to reduce the burden of vaccine preventable diseases within the community. CAHS and WACHS partner with schools to provide immunisation programs for secondary students, in alignment with the National Immunisation Program and the WA Immunisation Schedule. The School Based Immunisation Program offers protection against human papilloma virus, diphtheria-tetanus-pertussis, meningococcal, and other vaccinations to address specific needs of the population, such as COVID-19 vaccinations. Immunisation activities improve protection against vaccine preventable diseases for individuals and the community. Key functions of the program are:

- delivery of the WA Immunisation Schedule targeting secondary school aged children through the School Based Immunisation Program
- to provide clinical leadership regarding immunisation and infection prevention to partner and other agencies
- Infection prevention and control strategies that support minimisation of healthcare associated infection transmission, with specific focus on vaccine preventable diseases relevant to healthcare workers and clients.



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