

**MIND MATTERS PLUS PROGRAMS ACTIVITY REPORT AS AT****12/12/2005.****FINAL****School Name: Trinity Bay State High School, Qld****Objectives: (commonwealth requirements)**

- Information gained from the MM Plus initiative is widely disseminated at national, state and local levels and within the three education sectors to increase the number of MindMatters Plus schools and promote the initiative as “ best practice” approach for supporting students with high support needs in mental health.
- Stronger partnerships are developed between schools, AGCA and APAPDC and organisations and activities which support greater youth participation in mental health promotion in secondary schools such as AICAFMHA
- Current and useful Information about mental health intervention strategies and programs and good practice in application is available on the internet.
- A sustainable plan for universal and targeted mental health promotion and suicide prevention is developed by each demonstration school with support from APAPDC and AGCA
- Elements of MindMatters Plus good practice are embedded into school policies, practices and structures, learning and curriculum areas and their broader community partnerships to ensure sustainability.
- All students with high support needs in mental health have access to timely and accessible support within schools including appropriate referral pathways to service providers

**Brief Project description and target groups: (**

Trinity Bay State High School, situated in Cairns with a population of 1070 (students of whom 28% are of indigenous,30% are from a CALD background, seeks to:

- reduce bullying and harassment
- develop conflict resolution skills through curriculum areas Drama, Society and Environment, and English
- address alienation by supporting students in danger of exclusion; applying the programs, Talk Sense and [Heart Masters](#) into individual mentoring program
- support students at risk of alienation who are showing signs of depression; using [RAP](#)and HeartMasters
- provide cultural awareness for new staff and encourage student/staff connectedness.

**Intended Project Outcomes:**

- Students at risk of disengagement from school experience reduced suspensions/exclusions and misbehaviour
- Students exhibiting signs of depression have improved self confidence and resilience and improved school attendance and engagement in the academic program

**Sustainability plan**

*.Embedding a wide range of programs across all year levels described in a Curriculum Matrix. The Matrix ensures sustainability by building a critical mass of staff and students who share a common language and understanding of mental health literacy programs and resources to maintain the Curriculum Matrix are supported through a Supportive School Environment budget line which cuts across individual learning areas.*

Significant Milestones (dated)	Deliverables Achieved Against Each Milestone ( include quantitative data)
Universal Mental health promotion strategy in place for staff and students ( by Dec 2002)  Level 1 WHO; organisational ethos	<ol style="list-style-type: none"> <li>1. Universal mind matters training provided to all staff ( Dec 2002)</li> <li>2. Interested staff from across all faculties invited to participate in MMplus training ( Dec 2002)</li> <li>3. Local community members and parents have access to MM training through Families Matter ( June 2003).Three parent workshops held in 2004.</li> <li>4. information sessions about MM and MmPlus for 2005 will be held during regularly scheduled parent information nights.</li> </ol>
Strategy to embed student well being within curriculum ( by Dec 2003)  Level 2, WHO; Teaching, learning and curriculum	<ol style="list-style-type: none"> <li>1. Health Education matrix developed across all year levels and revised annually</li> <li>2. All HoD's,all physical education and health teachers, selected teachers in Social Sciences, English,performing Arts and Special Needs at the school trained in <b>RAP-A</b> and implemented in Yr 8-10 health and physical education classes.( June 2004) N= 20 students, N=20 staff</li> <li>3. Above teachers trained in <b>Heartmasters</b> programs and implement in small groups ,classes and selected students YR 8 to 10 .( by June 2004) N= 200 studets, 30 staff</li> <li>4. Above steps reviewed and implemented on an annual basis through the Curriculum Matrix( 2004,2005)</li> <li>5. AT least one teacher from every faculty has been trained in Heartmasters(2005)</li> </ol>
Target programs implemented on an ongoing basis  Level 3, WHO; Teaching, learning and curriculum	<ol style="list-style-type: none"> <li>1. Programs are selected after audit of needs conducted( by Dec 2002)</li> <li>2. Health &amp; PE staff identified to deliver RAP-A</li> <li>3. <b>RAP – A</b> implemented with selected year 8 students at risk of depression(2003)N=12</li> <li>4. The <b>HeartMasters</b> implemented with individual students and small groups by counselling teacher after taining in 2003( March, 2004) N= 16 students</li> <li>5. <b>RAP-A</b> implemented with small groups and individaul year 8 students (2004) N=60 students, N= 20 selected staff</li> <li>6. The <b>HeartMasters</b> implemented with screened students in groups of 2-3 students(from April,2004) N= 30students, N=20 staff</li> <li>7. Staff members trained around suicide awareness – <b>ASIST</b> N= 4 staff (2004)</li> <li>8. Teachers from 14 feeder primary schools trained in <b>Aussie Optimism</b> N=20 staff (October ,2005) expected N=420 year 7 students from feeder primary schools</li> <li>9. <b>RAP – A</b> implemented with year 8 students (2005) N= 260</li> <li>10. The <b>HeartMasters</b> implemented using same methodology as 2004 (2005) N= 30 students</li> </ol>

<p>Enhanced referral pathways and promotion of mentalhealth awareness through association with ADGP ( building on existing partnerships) and other agencies</p> <p>Level 4 WHO Partnrships and services</p>	<ol style="list-style-type: none"> <li>1. Steering committee formed to build on existing partnership and develop protocol and practice for MMPlus(2003)</li> <li>2. Agreed first step for identified MMPlus GP's to contribute to school's health curriculum (2004)</li> <li>3. GP's identified (2004) N=6 attended training in microskilling for teching young people in the classroom</li> <li>4. Website promotional material developed and disseminated (2004)</li> <li>5. Workshops held by GP's for targeted students (2005) N=30 students in year 10 art class,( developed promotional pack), all year 11 students (N=229)</li> <li>6. Referrals from school based health nurse to identified GP's commenced N= 2 students (2005)</li> <li>7. pamphlets targeted at GP's about working effectively with young people and how to refer to other local services developed (2005)</li> <li>8. Wallet cards targeted at young people with information about accessing GP's and posters in surgeries to continue past 2005 with separate funding from ADGP.</li> </ol>
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**Stories and emerging themes:**  
 Elements of sustainability such a maintaining core committee of health promotion ( 5-7 members), using language of RAP to link to behaviour management strategies  
 Universal screening process at end of Semester one ( year 8)