Feedback on the Head to Health Kids Hub draft Model of Service

Our holistic support to children, young people, and families

Parkerville is a For Purpose organisation that supports children, young people, and their families to build skills and capacity, address the impacts of trauma and adverse childhood experiences, and develop capabilities that will enable them to be the best versions of themselves. We see a future where Western Australia is the safest place in the world and all children, young people, and their families feel safe to dream, to thrive, and to reach their fullest potential. We have been working alongside vulnerable children, young people, and their families for 120 years, and every year, we support more than 13,000 people across WA through our therapeutic, out of home care, youth, and education services. The future of those we serve depends on what we do in the present to support them to reach their potential.

Introduction

We welcome the model of the Kids Hub and the inclusive and compassionate approach it promotes to improve early intervention outcomes for children's mental health and wellbeing, by providing easy access to comprehensive, multidisciplinary care for children and their families. We also appreciate the weight given to a place-based approach that fosters relationships within the community, and emphasises strong connections, integration and potential co-location with other services that support the mental health and well-being of the child and their family.

The element of no referrals and a 'no wrong door' policy is strongly aligned with our recommendation to the Select Committee into child development services (CDS) to remove rigid appointment criteria for families in crisis and/or recovering from trauma, and creating an approach that meets children/families where they are, not where the system thinks they should be.

Responding to the needs of priority cohorts

In responding to the needs of priority cohorts mentioned in the draft service model, further definition about the engagement period would be beneficial.

We understand that the Adult Head to Health Hub model in Midland are funded to provide up to 10 sessions of mental health support, with the option of a client returning for a second set of 10 sessions as needed. The Midland H2H Hub have reported that their adult clients engage on average for 6 sessions.

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Our data shows, however, that children and families need to engage with evidence-based therapeutic interventions for a much longer period to achieve positive outcomes – an average of 20 sessions. Further, for families with more complex needs, experience from practice demonstrates that up to 50 sessions are required to achieve similar positive outcomes.

With this in mind, we recommend that the model allow flexibility for working with children and their families over longer periods of time, and for a larger number of sessions.

Supporting the early years

We recommend that the model place a greater focus on how the Kids Hub will support the first years of a child's life, including the time spent in utero, offering early childhood initiatives and expert interventions that support both the infant and the primary carer. We know that early childhood is one of the most significant periods of human growth, critical in determining physical, social and emotional behavioural and cognitive development in ways that have lifelong impacts on health and wellbeing. We note that the recommended assessment tool is the Commonwealth Initial Assessment and Referral (IAR) Tool for 5–11-year-olds: consideration should also be given to the 0-4 cohort.

Care Navigation and Peer Support

We note that the draft service model recommends that the Care Navigator role be filled by a suitably trained peer, Aboriginal or support worker. As an organisation that works primarily with children, young people and families who have suffered from adverse childhood experiences and other trauma, we appreciate the importance of both hearing and learning from lived experience and providing services that are strength-based and empowering.

We would like to highlight the need for this role, in having responsibility for triage and warm referrals, to require strong experience/training in listening to lived experience with a trauma-informed lens, ability to effectively assess the often complex and nuanced needs that may present, and have a strong understanding of community agencies. It is essential that families feel welcomed and comfortable, however, they also need to have trust that the professional support they receive, and possibly have been seeking for a long time, will assist in navigating the entry points to an array of services (whether within the Hub, and/or beyond). We note the distinction between care navigation and care coordination, and see this as an effective approach, provided clear escalation and communication processes are in place.

At the same time, we note the intersection points for peer support, and welcome this as an essential part of the model. These touchpoints could be provided through the peer support groups, community engagement and other important roles taken on by peer, Aboriginal and support workers.

Summary

Parkerville CYC welcomes the opportunity to provide feedback on the draft Head to Health Kids Hub Model of Service. We are strongly in favour of effective and meaningful efforts to improve early intervention outcomes for children's mental health and wellbeing, and complement and enhance existing services provided to children and their families.