

Restructure – Consultation Document (Procedure reference PR2014_016)

Document control sheet

Contact for enquiries and proposed changes:

Diana Simes diana.simes@health.nsw.gov.au

Project sponsor

Name Ayisha Chitakunye

Position Service Director CYMHS

Executive Project sponsor

Name: Andrea Taylor

Position: Service Director Mental Health

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Stage 1 – Scope, Plan and Approval

1.1 The Need for Change

1.1.1 Description of Proposed New Services

The Minister for Mental Health has approved additional recurrent funding for the establishment of a new Child and Youth Mental Health (CYMHS) Consultation-Liaison (CL) Hospital In-Reach service within Northern Sydney Local Health District (NSLHD).

The new service will provide targeted mental health assessment and brief intervention for young people admitted to hospital, who are experiencing mental health concerns, including comorbid substance use.

This proposed realignment within NSLHD CYMHS includes the recruitment of an additional 6.9 Full Time Equivalent (FTE) staff members including psychiatry, senior multidisciplinary health clinicians and administration, with specialised training and expertise in child and adolescent mental health, as well as some prudent changes to existing structures and roles.

1.1.2 Reason and Purpose for the Realignment

From clinical stakeholder consultations, a rapid evidence review, and gap analysis, a Model of Care (MoC) and service framework has been developed. This will ensure that the CYMHS CL Hospital In-Reach service is evidence-based and trauma-informed, that it enhances service offered, and that it is well integrated within existing CYMHS and other key service structures.

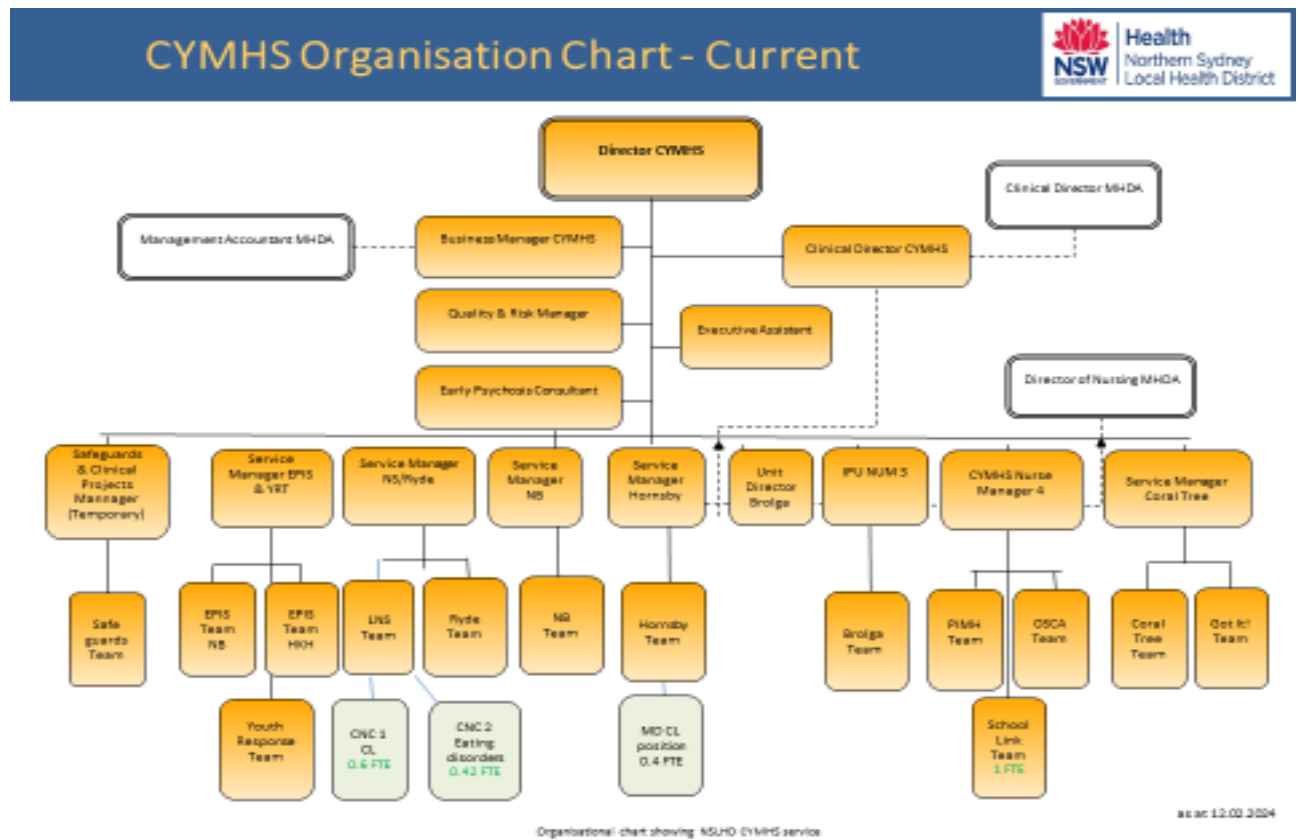
Young people with medical comorbidity are at significantly higher risk of developing emotional, behavioural, and mental health concerns (Bowling et al., 2021; Luther et al., 2020), mental health diagnoses, and more complicated health outcomes (Bowling et al., 2021; Hines et al., 2023).

The CYMHS CL Hospital In-Reach team will provide additional resourcing to enable improved screening, assessment, early intervention, and referral for these young people and their caregivers and will enhance current care for young consumers admitted to hospital.

The analysis has identified that:

- The new service should be co-located with existing CYMHS Hornsby and Royal North Shore Hospital campuses.
- Three existing part-time clinical positions within Hornsby and Lower North Shore CYMHS teams duplicate aspects of the new roles in the CYMHS CL Hospital In-Reach service (see 1.1.3 and 1.2.2, below) Some realignment of these positions is required to enable effective implementation of the new service, and to enable clear referral pathways for best-practice consumer care.

1.1.3 Current Structure



1.1.4 Current Position Descriptions

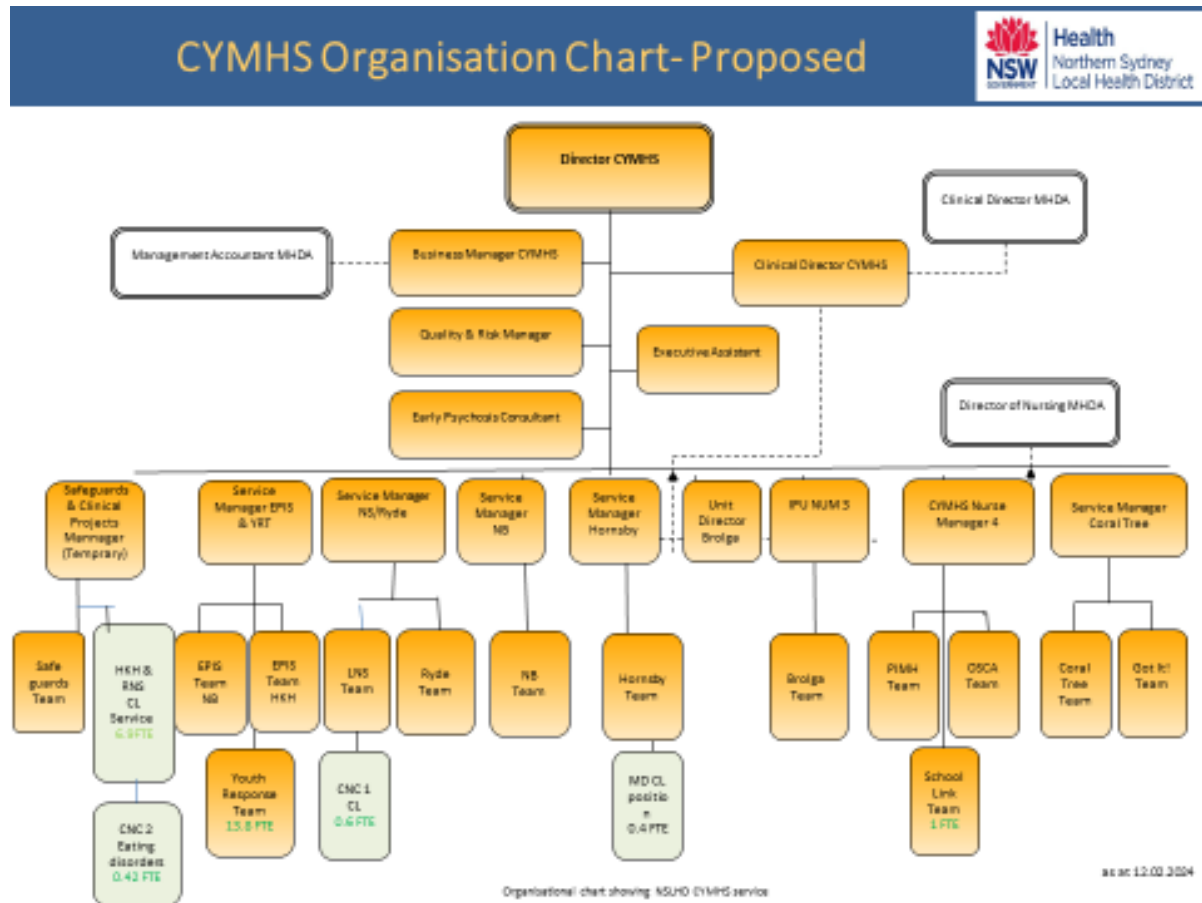
The proposed realignment will require a minor change to one existing position for the HKH based Multidisciplinary CL clinician (0.4FTE). Currently, Community CYMHS teams at LNS and Hornsby are asked to undertake in-reach into medical and PECC environments in addition to their core community and emergency department work when the treating team requests a specialist MH consultation. Hospital teams requiring specialist child and youth mental health assessment or consultation request CYMHS to provide this service.

At Hornsby, young people who are inpatients in Psychiatric Emergency Care Centre (PECC) or Paediatrics ward are seen by Community CYMHS clinicians. Young people who are in other medical wards are seen by the Adult Consultation Liaison Mental Health team as needed.

At RNSH, young people who are inpatients at PECC, Childrens ward, and in any other inpatient medical ward are seen by Community CYMHS clinicians.

1.2 Restructure Plan

1.2.1 Proposed New Structure



The new CYMHS CL Hospital In-Reach service will have a total establishment of 7.32 FTE, made up of an additional new 6.9 FTE, plus an existing 0.42 FTE, as follows:

Position	FTE	Days/hours work	Location
Clinical Lead	1.0	Full time (Mon-Fri)	HKH and RNSH
Staff Specialist	0.8	Part time -to be determined	HKH and RNSH
Registrar (Stage 2/3)	2.0	Full time (Mon-Fri)	1.0 FTE based at HKH, and 1.0 FTE at RNSH with potential for pre-planned cross coverage
Administration Officer	0.5	Part time-to be determined	HKH or RNSH
Multidisciplinary clinician: CNC 1, Clinical Psychologist, OT 4, SW 4	2.6	Full or part time	Based either at HKH or RNSH with potential for pre-planned cross coverage
Eating Disorders CNC 2 - Existing Position	0.42	Part time	Based between HKH and RNSH dependent on clinical need
TOTAL FTE (new and realigned)	7.32		

1.2.2 Proposed Changes to existing Positions

As above, the current Eating Disorders CNC 2 will move to join the CL Hospital In-Reach team, for the purpose of clinical/ operational governance. It is not envisaged that the clinician's day-to-day clinical role will change.

Impacted Position	FTE	Days/hours work	Location
Eating Disorder CNC2	0.42	Part time	Position is proposed to be realigned from LNS Community CYMHS to come under clinical/ operational governance structure of CYMHS CL Hospital In-Reach Service, and share available clinical time between LNS and HKH, according to clinical demand at each campus. This will be a reporting line change only, with nil changes to existing duties.

CYMHS CL CNC1	0.6	Part time	Position will remain under clinical/operational governance of LNS Community CYMHS and will support CYMHS with assessments within RNSH Emergency Department (in-reach). No change to PD.
CYMHS CL Multidisciplinary clinician: CNC 1, Clinical Psychologist, OT 4, SW 4	0.4	Part time	Position will remain under clinical/operational governance of HKH Community CYMHS and will support CYMHS with assessments within HKH Emergency Department (in-reach). Minor changes to PD (no longer providing in reach to young people admitted to wards)

1.2.3 Impact on Services and Functions

Due to the additional 6.9 FTE staff, it is envisaged that this new service will have positive impact on the CYMHS service provision, as it will allow Community CYMHS clinicians more time for their core community assessment and intervention support for young people and families in the NSLHD.

The introduction of the CYMHS CL Hospital In-Reach service will facilitate improved outcomes for a population who has identified to be currently vulnerable, providing timely, collaborative and integrated care.

Co-location of the new CYMHS CL Hospital In-Reach team is essential to enable the effective implementation of the new service and will promote an 'all of CYMHS service' approach to care, providing a larger pool of Mental Health practitioners to work together in support of young people and their families.

The realignment of current positions whose roles include significant service overlap and duplication will allow those clinicians to provide additional resourcing to the community CYMHS team, and to support mental health assessment services in the Emergency Department in each location.

Implementation of the new service without colocation and realignment would result in continued overlap, inefficiencies, confusing referral pathways, fragmented consumer care, and poorer health outcomes for consumers.

Stage 2 – Consultation

2.1 Notification to employees

The Director, CYMHS will provide letters to impacted staff within CYMHS, and additionally, CYMHS Executive will consult with those staff about the proposed changes.

Consultation meetings outlining the new services are planned to be held with impacted staff, with an opportunity to ask questions. Staff can also seek to meet Executive one-on-one.

2.2 Notification to Union/Industrial Bodies and other relevant parties

The relevant unions that need to be consulted are:

- NSW Nurses and Midwives Association
- Australian Salaried Medical Officer Federation
- Health Services Union.

A copy of this consultation paper, including the current and proposed new structure and the amended position descriptions will be provided to the unions. Feedback will be requested within two weeks of issuing the consultation paper, and a meeting with the unions can be held should any issues arise.

Stage 3 – Implementation

It is intended that genuine consultation be completed by August 2024 to allow for formal embedding /recruitment thereafter. The table below indicates the key actions to occur and an indicative timeframe.

Action	Timeframe (by when)
Send consultation correspondence to impacted staff and unions.	September 2024
Meetings with impacted staff	September 2024
Progression of structure/recruitment activities	From 01 October 2024

Stage 4 – Review

The CYMHS enhanced Consultation-Liaison project will be evaluated in its first year of operation; and will be reviewed in 6 months after the operational commencement date to analyse whether the Service was able integrate within the CYMHS Service and meet set targets from the Ministry of Health.

Recommendations made within this document have been made on a review of best practice guidelines, empirical and qualitative evidence-based practice, and consultation with consumer, caregiver, and clinician representatives.

The CYMHS CL Hospital In-Reach MoC development and service implementation process includes local co-design, including a stakeholder reference group with multi-disciplinary representation from paediatric, mental health and drug and alcohol services across the district. The implementation of the new service will be supported by consultation with young people and parents/caregivers to ensure that lived experience perspectives are incorporated in the design, and implementation of the service.

As a new service, it is essential that the MoC is reflexive and responsive to feedback from consumers, caregivers, clinicians, and stakeholders across the NSLHD. The MoC will also be evaluated within its first twelve months of operation.