Restructure – Consultation Document (Procedure reference PR2014_016)

Document control sheet

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Stage 1 – Scope, Plan and Approval

1.1 The Need for Change

1.1.1 Description of Proposed New Services

1.1.1.1 Nurturing Connections: Caregiver- Child Relationship Service

NSW Ministry of Health Perinatal, Child and Youth, Mental Health Branch, have funded, through an open Expression of Interest process three Local Health Districts including Northern Sydney Local Health District, (NSLHD), to deliver a new evidence-informed therapeutic, mental health program. This new program is specifically for parents and caregivers who are pregnant or have children 0-4 years experiencing difficulties in the caregiver-child relationship associated with caregiver mental ill health and psychosocial vulnerabilities. The program is initially funded until June 2025 by NSW's Stronger Communities Investment Unit (SCIU) and delivered by NSW Health in partnership with local identified Non-Government Organisations (NGO's).

The Nurturing Connections: Caregiver- Child Relationship Service (NC) will be a multidisciplinary mental health service supporting these vulnerable priority populations. The service will be located within NSLHD Mental Health Drug and Alcohol, Child and Youth Mental Health Services under the umbrella of the Perinatal and Infant Mental Health Service; partnering with two local NGO's: - Catholic Care and The Northern Centre for additional collaborative and streamlined psychosocial supports.

The Nurturing Connections service will operate with an outreach model within NSLHD allowing families from across the district to access the service. It will be primarily a home visiting and centre-based group program, with evidence-based interventions to support the primary intervention goals.

1.1.1.2 NSW SAFESTART Service

Separately, NSLHD has received additional recurrent funding through the Bilateral Perinatal Mental Health Program funding to employ a permanent 0.5 FTE SAFESTART Coordinator also within the Mental Health Drug and Alcohol, Child and Youth Mental Health Services under the umbrella of the Perinatal and Infant Mental Health Service.

The NSW SAFESTART Policy and Service Guideline aims to proactively identify and support vulnerable families during the perinatal period. The guidelines also require an integrated approach to screening, assessments and care provision between health services working with parents who have or are at risk of developing, or who experience mental health issues and other psychosocial vulnerabilities during the perinatal period (pregnancy to infant age 2).

The SAFESTART Coordinator will work in in partnership with Maternity, Child Protection and Child and Family Community Health Services providing strategic leadership to support implementation, ongoing evaluation and improvement in the SAFESTART processes and provide high level perinatal mental health consultation and liaison across NSLHD and NGO service partners, working with families with complex mental health needs and significant psychosocial risks during the perinatal period. As stated, both the proposed new services will work within the Perinatal and Infant Mental Health Service.

1.1.2 Reason and Purpose for the Realignment

In NSW, there is an identified lack of public, comprehensive programs which focus on the parent child relationship, parent mental health and social requirements in high-needs groups.

The NSW Health First 2000 Days Framework articulates the need to address social, emotional, and developmental difficulties in infancy and early childhood through preventive interventions to assist in strengthening resilience and reducing the impact of adverse childhood events and family vulnerabilities on future mental health and development (Ministry of Health, 2019).

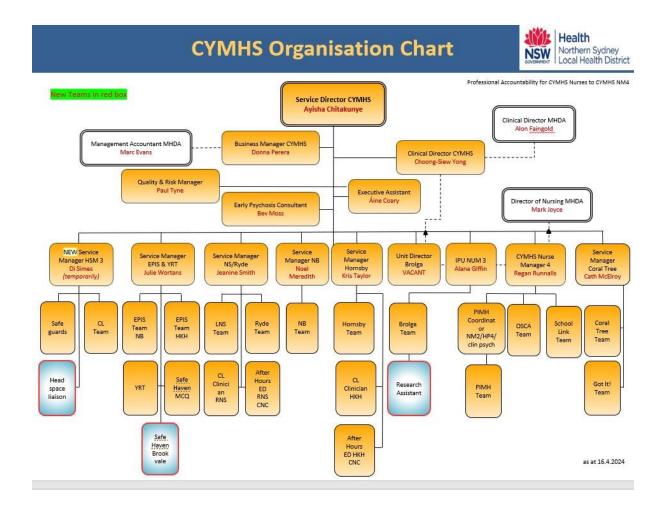
The NSLHD has had an acute Perinatal and Infant Mental Health Service since 2011, working with adult mental health services to provide dyadic focussed mental health care to caregivers with severe, complex and acute mental health difficulties who are pregnant or have infants up to age 2. The existing team reports to a Perinatal and Infant Mental Health Coordinator.

The two proposed new services will enhance the MHDA service capacity to meet the needs of families experiencing complex mental health and other vulnerabilities as well as provide collaborative leadership for the SAFESTART processes across the district.

The Nurturing Connections service will work in conjunction with the current acute Perinatal and Infant Mental Health Service to provide medium term multidisciplinary evidence-based caregiver-child relational assessment and interventions where caregivers complex non acute mental health difficulties and psychosocial vulnerabilities are impacting on their difficulties with their infant/young children.

The SAFESTART coordinator role will enhance the MHDA service capacity to respond to needs of families experiencing vulnerabilities in the antenatal and postnatal period who do not necessarily meet criteria for ongoing public mental health supports.

1.1.3 Current Structure



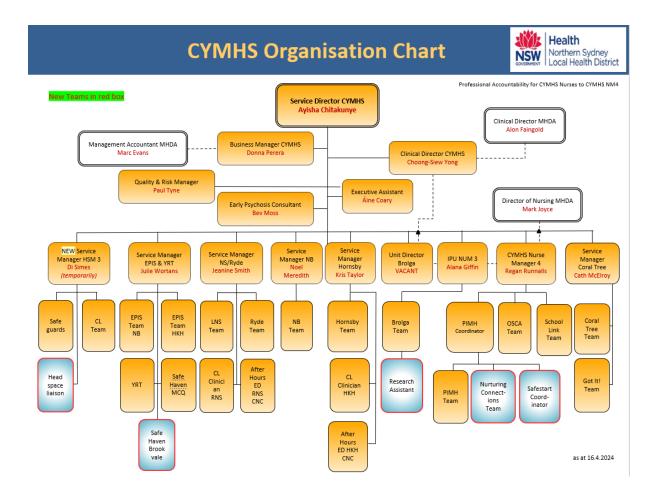
1.1.4 Current Position Description

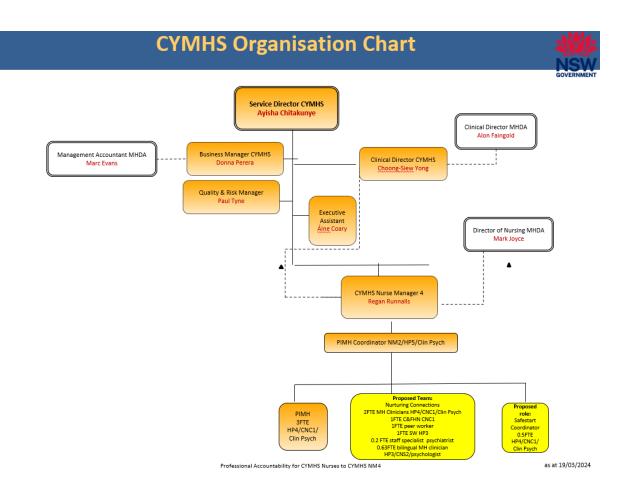
The Perinatal and Infant Mental Health Coordinator role is currently graded at Nurse Manager 2/Health Professional 4/Clinical Psychologist and reports to the CYMHS Nurse Manager 4.

The current position requires management of staff in the existing acute PIMH Team (3 FTE graded CNC1/HP4/Clinical Psychology); a significant increase in the direct reports of the position and increased role complexity will occur with the inclusion of the new Nurturing Connections Team and the SAFESTART Coordinator. The proposed amended PIMH Coordinator position description is attached with this document (TAB A).

1.2 Restructure Plan

1.2.1 Proposed New Structure





1.2.2 Proposed Change to Position Descriptions

The change requires creation of a new temporary Nurturing Connections team and a separate new permanent SAFESTART coordinator position to report to the Perinatal and Infant Mental Health Coordinator role. This will impact on the grading of coordinator role which will be graded as NM2 / HP5 / Clinical Psychologist; as well as require creation of new positions as outlined below.

Proposed Position descriptions are attached in TAB A

1.2.3 Impact on services and functions

The new teams will enhance existing service provision. It will increase the responsibility of the PIMH Coordinator but will not reduce staffing or service provision by other teams.

Proposed Team establishments below.

Position	FTE	Status
Perinatal & Infant Mental Health Coordinator (NM2 HP5/Clinical Psychologist)	1.0	Permanent (Job Share)
PIMH Clinicians CNC1/HP4/Clinical Psychologist	3.0	Permanent
Nurturing Connections Consumer Peer Worker HEOG	1.0	Proposed
Nurturing Connections Clinical Nurse Consultant C&FHN CNC1	1.0	Proposed
Senior Mental Health Clinician CNC1/HP4/Clinical Psychologist	2.0	Proposed
Senior Social Worker HP3	1.0	Proposed
Staff Specialist	0.2	Proposed
Bilingual MH Clinician HP3	0.63	Proposed
SAFESTART Coordinator CNC1/HP4/Clinical Psychologist	0.5	Proposed

There is significant enhancement to service provision as part of the proposal.

Stage 2 – Consultation

2.1 Notification to employees

Director, Mental Health and Drug & Alcohol will provide letters to affected staff: NSLHD CYMHS Director NSLHD CYMHS Nurse Manager PIMH Coordinator Executive will consult with staff from the PIMH Team of the proposed changes.

2.2 Notification to Union/Industrial Bodies and other relevant parties

The relevant unions that need to be consulted include:

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

A copy of the 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 the new staffing structure be completed by the end of June 2024 to allow for recruitment early in FY 2024/25.

The table below indicates the key actions to occur and an indicative timeframe.

Action	Timeframe (by when)
Send correspondence to the affected staff, all impacted staff and unions-Consultation Period commences.	9 May 2024
Two Week Consultation Period concludes	22 May 2024
Progression of structure/recruitment activities	June 2024

Stage 4 – Review

The Nurturing Connections Team will be externally evaluated in its first year of operation; both services will be reviewed in 6 months after the operational commencement date to analyse whether the Service was able integrate within the PIMH-CYMHS Service.