

Child, Adolescent and Youth Mental Health & Counselling Pathways

South Eastern Sydney Local Health District (SESLHD)

Document initiated by School-Link

2011-2012

Mental Health and Counselling services for children, adolescents and young people living in South Eastern Sydney are located across three areas: Eastern Suburbs, St George and the Sutherland Shire. These are confidential and free services for the community and all have access to interpreter services when required. This document details the child, adolescent and youth mental health teams that operate in each area and information about how to refer a child, adolescent or young person to the service.

Table of Contents

Eastern Suburbs – services for children, adolescents and young people residing in Botany, Randwick, Waverley and Woollahra council areas and parts of City of Sydney council area

Child and Family East (CAFÉ).....	3
The Adolescent Service	4
Youth Mental Health Team.....	5
Early Psychosis Program.....	6
Flow Chart of services in Eastern Suburbs.....	7

St George – services for children, adolescents and young people residing in Rockdale, Kogarah and Hurstville council areas

St George Child & Adolescent Mental Health Service (CAMHS).....	8
Youth Mental Health Service	9
Recent Onset Psychosis Team.....	10
Flow Chart of services in St George	11

Sutherland Shire – services for children, adolescents and young people residing in the Sutherland Shire council area

Child, Youth and Family Counselling Service	12
CAMHS/ Youth Mental Health Service/ Early Psychosis Services	13
Flow Chart of services in Sutherland Shire	14

SESLHD Services for children with intellectual and developmental disabilities

Definitions of Intellectual Disability	15-16
Flow chart of services for children with intellectual and developmental disabilities	17

SESLHD Area Child and Adolescent Mental Health Programs

School-Link	18
Coordinator – Eating Disorders.....	18
Children Of Parents with Mental Illness (COPMI).....	19
Safe Start.....	19

EASTERN SUBURBS

SERVICE

Child and Family East (CAFÉ)

Cnr Avoca and Barker Street
Prince of Wales Hospital
Randwick NSW 2031

Phone: (02) 9382 8213 (8.30am – 5pm, Monday to Friday)

Fax: (02) 9382 8105

WHAT THE SERVICE PROVIDES

Child and Family East offers assessment and treatment for a wide range of difficulties encountered by infant, pre-school and school-aged children and their families (children aged 0 – 12 years). Problems may include:

- Behavioural difficulties
- Anxiety disorders
- Emotional disturbance
- Attention difficulties
- Social skills difficulties
- Neuropsychiatric disorders
- Coping with family changes, illness, death or trauma

Treatments may include:

- Counselling
- Parent education
- Individual and family therapy
- Medication therapy
- Consultation to pre-schools, schools and other community agencies
- Consultation and liaison service to Sydney Children’s Hospital

HOW TO MAKE A REFERRAL

A parent or guardian is required to make the referral via phone. Other referring agents (e.g., school personnel, GP, other professional) can call to inform CAFÉ of the referral. Paediatricians and other health professionals working in the Sydney Children’s and Prince of Wales Hospitals and their associated services may also refer. A child can only be seen with the consent of a parent/ legal guardian.

Referrals can be made by contacting the Intake Worker on:

(02) 9382 8213, Monday – Friday, 8.30am – 5pm

Telephone calls received outside these hours will be recorded on an answering service.

EASTERN SUBURBS

SERVICE

The Adolescent Service

Avoca Street Campus
Prince of Wales Hospital
Randwick NSW 2031

Phone: (02) 9382 4347 (8.30am – 5pm, Monday to Friday)

Fax: (02) 9382 4358

WHAT THE SERVICE PROVIDES

The Adolescent Service is for teenagers aged 12 – 18 years and their families who are trying to adjust to changes and manage difficulties in their lives. Difficulties may include:

- Relationships – with parent or friends
- Sexuality
- Eating Disorders
- School
- Health concerns
- Depression
- Anxiety
- Anger Management

Interventions provided include:

- Individual counselling
- Family counselling
- Group programmes for adolescents

HOW TO MAKE A REFERRAL

The Adolescent Service is available to young people of high school age (Year 7 – Year 12) who live in the Eastern Suburbs. A referral can be made by the adolescent themselves, family members, school counsellors, GP's or other professionals. Adolescents 16 years and older can attend the Adolescent Service independently. Those under 16 years require parental consent.

Referrals can be made by contacting the Intake Worker on:

(02) 9382 4347 Monday – Friday, 8.30am – 5pm

Telephone calls received outside these hours will be recorded on an answering service.

EASTERN SUBURBS

SERVICE

Youth Mental Health Team

The Bondi Junction Centre
26 Llandaff Street
Bondi Junction

Ph: (02) 9366 8610 (8.30am – 5pm, Monday – Friday)

Fax: (02) 9387 1070

The Youth Mental Health Team aims to improve access for young people aged 14 -24 years to specialist mental health care, with a particular focus on young people who may be at risk of developing psychosis or emerging mental health disorders. The team works together with the young person's family/ carers and existing adolescent and adult mental health services.

Young people may be referred to the team if they have one or more of the following issues:

- Significant decline or change in psycho-social functioning
- An increase in out of character behaviour
- Unusual thought content, perceptual abnormalities and disorganised speech/thoughts that may indicate an emerging mental illness. These symptoms are not of the intensity, frequency or duration to meet criteria for a psychotic illness.
- A parent or sibling with a mental illness

WHAT THE SERVICE PROVIDES

- Specialist youth mental health assessment
- Flexible access/ outreach mental health service delivery
- Specialised assessment for young people at risk of developing mental illness
- Early intervention mental health services
- Referral to a mental health rehabilitation clinician for Vocational, Education, Training and Employment (VETE)
- Referral to appropriate agencies/ services for support and ongoing care as indicated
- Youth friendly mental health information
- Referral and support regarding access to mainstream health and youth services

HOW TO MAKE A REFERRAL

Referrals to the Youth Mental Health Team can be made via The Adolescent Service (9382 4347) or Acute Care Team intake service (9366 8611). The Youth Mental Health Team does not take referrals directly. Referrers can request the Youth Mental Health team service when referring or the intake worker may recommend the Youth Mental Health team if this is an appropriate service for the young person being referred.

EASTERN SUBURBS

SERVICE

Early Psychosis Program (EPP)

The Bondi Junction Centre
26 Llandaff Street
Bondi Junction

Ph: (02) 9366 8610 (8.30am – 5pm, Monday – Friday)

Fax: (02) 9387 1070

The Early Psychosis Program provides specialist multidisciplinary assessment and a individualised package of care for young people aged 15 to 25 years who have experienced a first psychotic episode. These young people are usually within the first two years of acute psychosis and first five years of functional decline. The team works together with the young person's family/ carers and existing adolescent and adult mental health services.

Young people may be referred to the team if it is clear that they are experiencing symptoms of psychosis:

- Perceptual abnormalities
- Disorganised speech/thoughts
- Significant decline in psycho-social functioning
- An increase in out-of-character behaviour
- Unusual thought content
- Paranoid thoughts

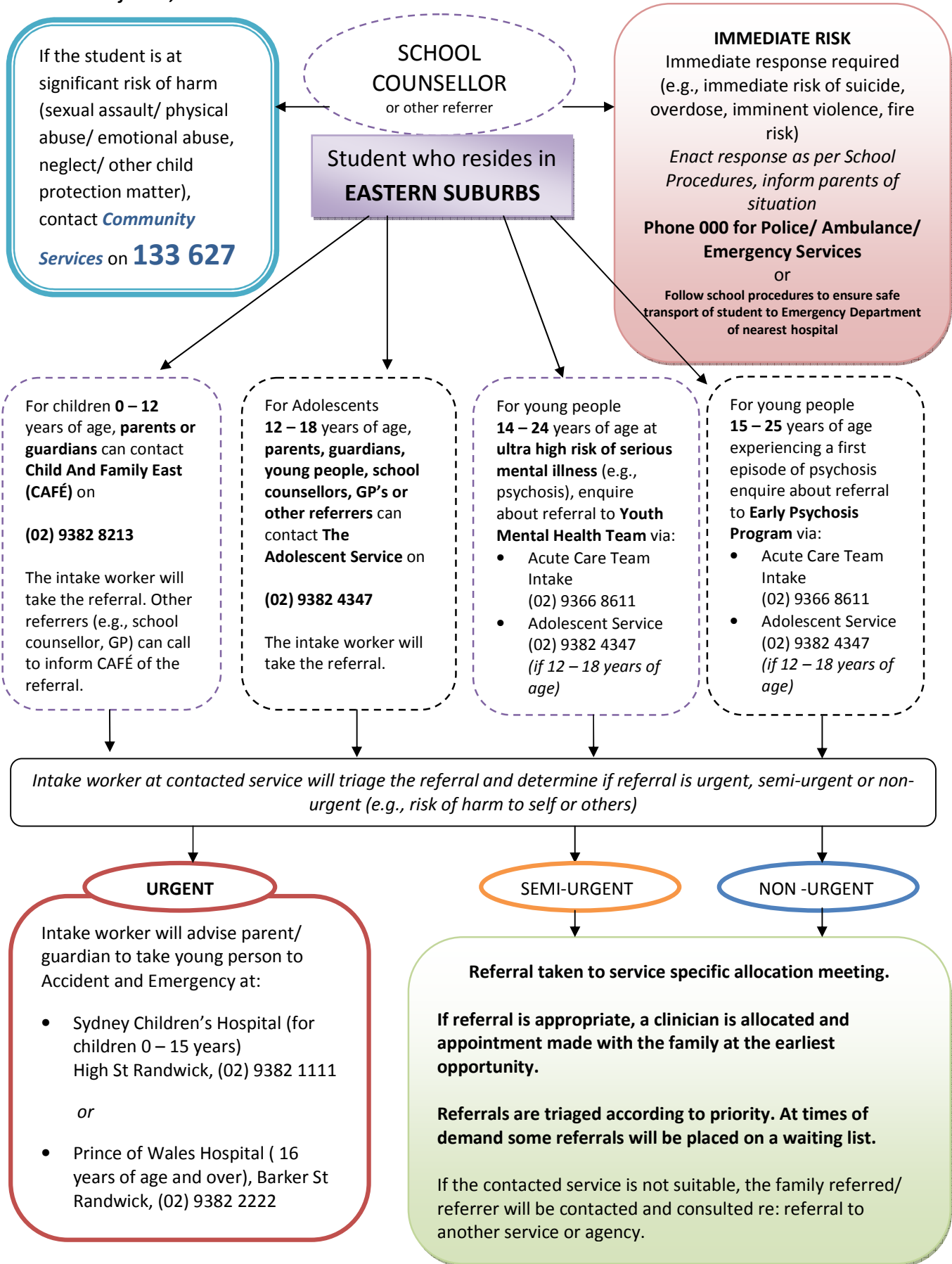
WHAT THE SERVICE PROVIDES

- Flexible access/ outreach mental health service delivery
- Comprehensive multidisciplinary assessment of the young person using a biopsychosocial approach that also considers the family system.
- Pharmacological interventions to address the symptoms of psychosis while minimising side effects
- Individualised family support, education and therapy, and multiple family groups
- Individualised supportive psychotherapy within a solution focussed and competency based framework
- Individualised occupational therapy intervention to maintain school, study, vocational, leisure and self-care roles.
- Referral to appropriate agencies/ services for support and ongoing care as indicated
- Youth friendly mental health information
- Referral and support regarding access to mainstream health and youth services

HOW TO MAKE A REFERRAL

Referrals to the Early Psychosis Program can be made via the Acute Care Team intake service on (02) 9366 8611. The Early Psychosis Program does not take referrals directly. Referrers can request the Early Psychosis Program when referring or the intake worker may recommend the Early Psychosis Program if this is an appropriate service for the young person being referred.

Flow Chart of Child, Adolescent and Youth Mental Health Services EASTERN SUBURBS



ST GEORGE

SERVICE

St George Child & Adolescent Mental Health Service

34 Woniora Rd
Hurstville NSW 2220

Ph: (02) 8198 7300
Fax: (02) 8198 7317

WHAT THE SERVICE PROVIDES

The St George Child and Adolescent Mental Health Service (CAMHS) is a community based counselling and mental health service for Children and Young People (under 18) and their families who live in the St George Area. The service also sees mothers who are experiencing difficulties with attachment and bonding with their child. Counsellors within the CAMHS team include Psychologists, Social Workers & Clinical Nurse Consultants. A Child & Adolescent Psychiatrist is also part of the team and appointments with them are scheduled as required. The team offers individual, group and family interventions.

People referred to the CAMHS Team may be experiencing:

- Worries or concerns around school, friends, family, parenting, etc.
- Sadness, depression or feeling overwhelmed
- Stress and anxiety
- Anger, frustration or confusion
- Any other social, emotional or behavioural issues that may be concerning the young person and their families.

St George CAMHS also offers *ACUTE ASSESSMENTS* and management for acutely distressed young people up to 18 years of age (e.g., risk to self and others, an emerging psychosis).

HOW TO MAKE A REFERRAL

Referrals can be made by contacting:

Intake on (02) 9540 7474 (number operates 24/ 7).

Referrals can be made by family members, the young person themselves (if aged 16 years or older), schools, General Practitioners, or any other professionals. Children 15 years and under require parental or guardian consent.

ST GEORGE

SERVICE

Youth Mental Health Service

St George Community Mental Health Centre

Level 1, 15 Kensington Street,

Kogarah, NSW, 2217

Ph: (02) 9553 2500 (8.30am – 5pm, Monday – Friday)

Fax: (02) 9553 2525

The Youth Mental Health Team aims to improve access for young people aged 14 -24 years to specialist mental health care, with a particular focus on young people who may be at risk of developing psychosis or emerging mental health disorders. The team works together with the young person's family/ carers and the St George Child & Adolescent Mental Health Service and Adult Mental Health Services.

Young people may be referred to the team if they have one or more of the following issues:

- Significant decline or change in psycho-social functioning
- An increase in out of character behaviour
- Unusual thought content, perceptual abnormalities and disorganised speech/thoughts that may indicate an emerging mental illness. These symptoms are not of the intensity, frequency or duration to meet criteria for a psychotic illness.
- A parent or sibling with a mental illness

WHAT THE SERVICE PROVIDES

- Specialist youth mental health assessment
- Flexible access/ outreach mental health service delivery
- Specialised assessment for young people at risk of developing mental illness
- Early intervention mental health services
- Referral to a mental health rehabilitation clinician for Vocational, Education, Training and Employment (VETE)
- Referral to appropriate agencies/ services for support and ongoing care as indicated
- Youth friendly mental health information
- Referral and support regarding access to mainstream health and youth services

HOW TO MAKE A REFERRAL

Referrals to the Youth Mental Health Team can be made via the **Intake** service, (02) 9540 7474. The Youth Mental Health Team does not take referrals directly. Referrers can request the Youth Mental Health team service when referring or the intake worker may recommend the Youth Mental Health team if this is an appropriate service for the young person being referred.

ST GEORGE

SERVICE

Recent Onset Psychosis Team

St George Community Mental Health Centre
Level 1, 15 Kensington Street,
Kogarah, NSW, 2217
Ph: (02) 9553 2500 (8.30am – 5pm, Monday – Friday)
Fax: (02) 9553 2525

The Recent Onset Psychosis Team provides specialist multidisciplinary assessment and an individualised package of care for young people aged 16 years and over who have experienced a first psychotic episode in the past two years. The team works together with the young person's family/ carers and existing adolescent and adult mental health services.

Young people may be referred to the team if it is clear that they are experiencing symptoms of psychosis:

- Perceptual abnormalities
- Disorganised speech/thoughts
- Significant decline in psycho-social functioning
- An increase in out-of-character behaviour
- Unusual thought content
- Paranoid thoughts

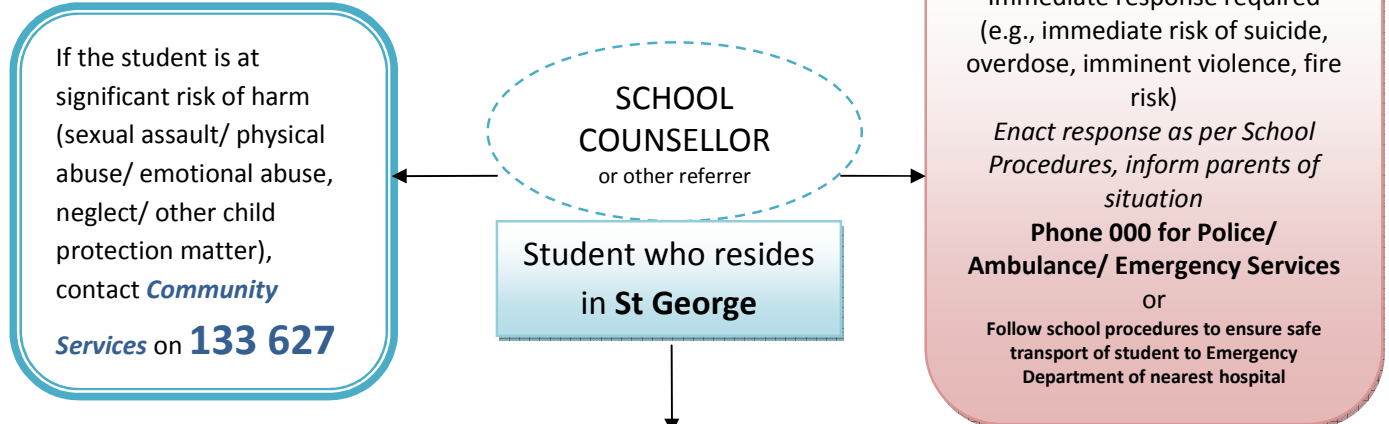
WHAT THE SERVICE PROVIDES

- Flexible access/ outreach mental health service delivery
- Comprehensive multidisciplinary assessment of the young person using a biopsychosocial approach that also considers the family system.
- Pharmacological interventions to address the symptoms of psychosis while minimising side effects
- Individualised family support, education and therapy
- Individualised supportive psychotherapy within a solution focussed and competency based framework
- Individualised occupational therapy intervention to maintain school, study, vocational, leisure and self-care roles.
- Referral to appropriate agencies/ services for support and ongoing care as indicated
- Youth friendly mental health information
- Referral and support regarding access to mainstream health and youth services

HOW TO MAKE A REFERRAL

Referrals to the Recent Onset Psychosis Team can be made via **Intake** on (02) 9540 7474. The Recent Onset Psychosis Team does not take referrals directly. Referrers can request the Recent Onset Psychosis Team when referring or the intake worker may recommend this team if this is an appropriate service for the young person being referred.

Flow Chart of Child, Adolescent and Youth Mental Health Services ST GEORGE



For **referrals** to St George Child and Adolescent Mental Health Service (CAMHS) or Youth Mental Health (YMH) or Recent Onset Psychosis Team, contact **Intake (02) 9540 7474**. Intake staff will help determine the particular service that the young person should be referred on to. Staff will complete a Triage and action the referral to the relevant service. All services are listed below. These services communicate with one another on a regular basis.

St George CAMHS work with children 0 – 18 years who are experiencing social, emotional or behavioural difficulties. St George CAMHS also offers an **ACUTE ASSESSMENT** and management for acutely distressed young people up to 18 years of age (e.g., suicidal, serious self-harm). Phone **(02) 8198 7300** for further enquiries.

For *urgent after hours referrals*, the St George ACUTE CARE TEAM can be contacted on (02) 9553 2595 and an acute assessment may be offered.

To assist St George CAMHS with further follow-up, complete a Referral Follow-up Form (if available) and fax to (02) 8198 7317 after the referral is made to Intake.

Youth Mental Health Service for young people 14 – 24 at ultra high risk of serious mental illness (e.g., psychosis).

(Referrals for young people 14 – 18 years will be allocated via the CAMHS allocation meeting. Referrals for young people 18 – 24 years will be allocated via Adult mental health allocation meeting.)

Recent Onset Psychosis Team for young people aged 16 years and experiencing a recent episode of psychosis.

(Referrals for young people 16 – 18 years will be allocated via the CAMHS allocation meeting. Referrals for young people 18 – 24 years will be allocated via Adult mental health allocation meeting.)

Intake workers will determine if the referral is acute or non-urgent

ACUTE

A clinician will contact the referrer and/ or the family to confirm the referral details. If the service is suitable, an appointment will be arranged with the family *as soon as possible*.

NON -URGENT

After a referral has been received, a clinician from one of the services will call the referrer and/ or family to confirm referral details. The referral will be taken to the next allocation meeting. If the referral is appropriate, a clinician will be allocated as soon as possible.

If the service is not suitable, the referrer/ family will be contacted and consulted re: referral to another service.

SUTHERLAND SHIRE

SERVICE

Child, Youth and Family Counselling Service

Sutherland Hospital and Community Health Services

All referrals for counselling to be made through the Intake Officer: Ph (02) 9522 1000

Counsellors are based across three centres:

Community Health Caringbah, Ph: (02) 9522 1000

For clients living in Sutherland Shire areas not covered by Menai and Engadine Community Health Centres

Menai Community Health Centre, Ph: (02) 9543 1111

For clients living in Alfords Point, Bangor, Barden Ridge, Illawong, Lucas Heights, Menai, Woronora

Engadine Community Health Centre, Ph: (02) 9520 4644

For clients living in Audley, Bundeena, Engadine, Heathcote, Loftus, Maianbar, Waterfall, Woronora Heights, Yarawarra

WHAT THE SERVICE PROVIDES

The Child Youth & Family Counselling Service is staffed by Social Workers and Psychologists. Counselling is available to children, adolescents (up to age 18) and their parents/carers, who live in the Sutherland Shire. Adolescents 14 years or over can see a counsellor without parent/guardian consent. Specific services provided include:

- Family counselling
- Individual counselling about family and parenting issues
- Counselling for children and adolescents
- Domestic violence counselling for women over 18 years
- Group programs for adults, children and adolescents
- Information on health and community resources available for families

Examples of common problems the counselling service deals with:

- Parenting difficulties
- Children and adolescents who have behavioural problems
- Children and adolescents who are anxious
- Children and adolescents who are depressed and sad
- Children and adolescents who have poor social skills
- Children and adolescents who have sleep problems
- Children and adolescents who have adjustment issues
- Children and adolescents who have loss, change and bereavement issues
- Children and adolescents who have experienced trauma or past abuse and are not eligible for counselling through specialised services such as the Child Protection Unit
- Children and adolescents who have other emotional problems

HOW TO MAKE A REFERRAL

Contact the *Intake Officer* at Community Health Caringbah on **(02) 9522 1000**.

Counselling is available 8:30am to 5pm weekdays by appointment. When requests for services are higher than normal, waiting times do increase. Clients who require appointments out of school hours may have to wait longer.

In the case of emergencies and for young people who are at significant risk of harm, carers/ parents/ guardians should call the Acute Care Team (ACT) on (02) 9540 7831 or take the young person to Emergency at The Sutherland Hospital (The Kingsway Caringbah 2229, (02) 9540 1111).

SUTHERLAND

SERVICE

CAMHS/ Youth Mental Health Services /Early Psychosis Services

Specialised multidisciplinary services for young people who are experiencing acute mental health issues, are at ultra high risk of psychosis, or experiencing a first episode psychosis. The services also work closely with the young person's family and carers.

Services based at Caringbah Community Health and Sutherland Mental Health Service (all on the grounds of Sutherland Hospital).

Ph: Intake Service (02) 9540 7474

WHAT THE SERVICE PROVIDES

- Specialist mental health assessment
- Flexible access/ outreach mental health service delivery
- Early intervention mental health services
- Referral to a mental health rehabilitation clinician for Vocational, Education, Training and Employment (VETE)
- Referral to appropriate agencies/ services for support and ongoing care
- Youth friendly mental health information
- Referral and support regarding access to mainstream health and youth services
- There is a Clinical Nurse Consultant who is also available for consultations around young people with acute mental health issues (e.g., suicidal, serious self-harm) who are referred via the Sutherland Hospital Emergency Department or Acute Care Team.

HOW TO MAKE A REFERRAL

People aged 14 – 25 who live, study or work in the Sutherland area may be referred if they have one or more of the following issues:

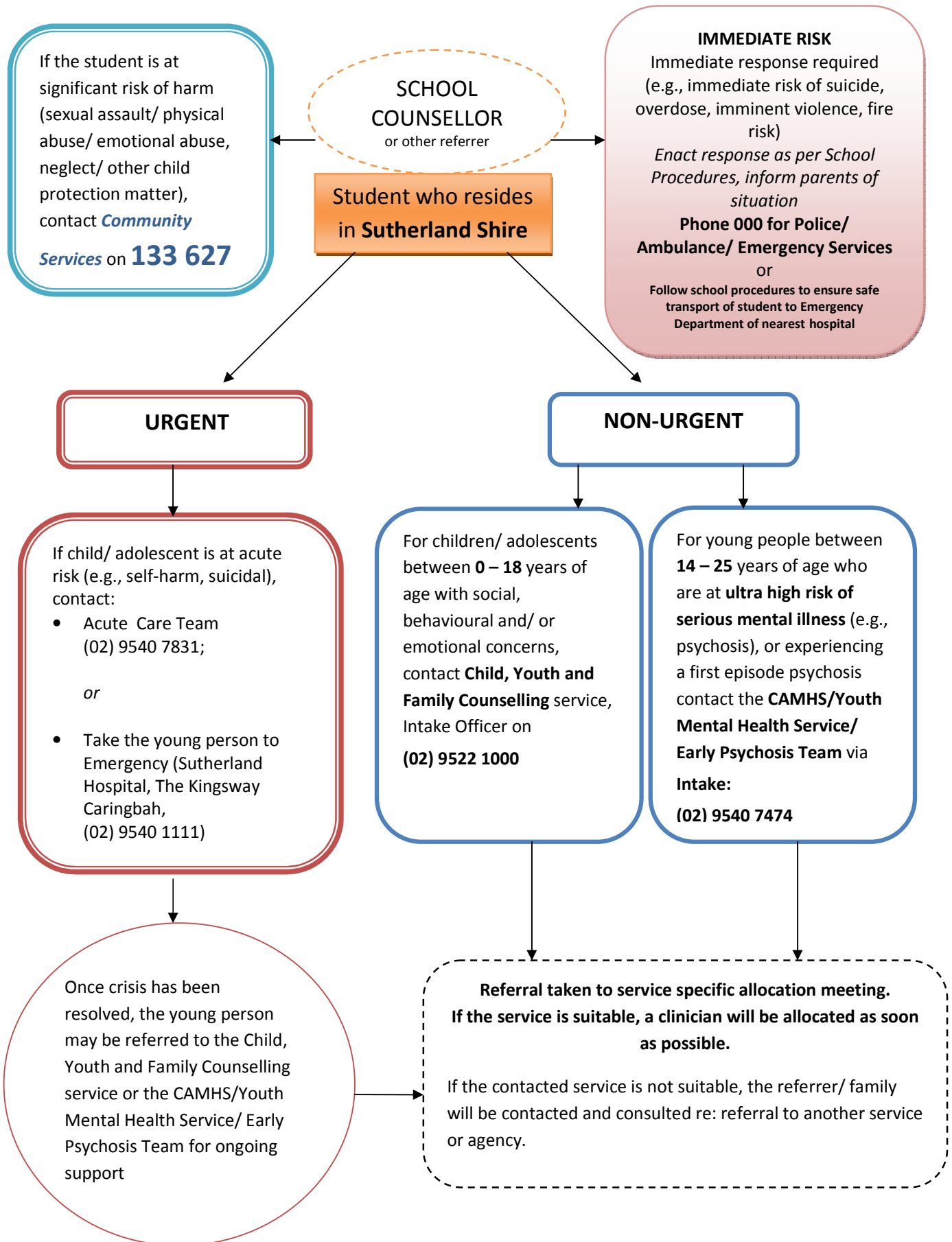
- Acute mental health issues
- A noticeable/ significant decline in psychosocial functioning
- An increase in out of character behaviour
- A parent or sibling with a major mental illness
- A previous history of mental health issues (e.g., anxiety/ depression/ OCD)
- Unusual thought content
- Perceptual abnormalities
- Disorganised speech/ thoughts

Referrals can be made by contacting:

Intake on (02) 9540 7474 (number operates 24/ 7).

Young people who are already attending the Sutherland Child, Youth and Family Counselling Service can also be referred to these services via their allocated clinician.

Flow chart of Child, Youth and Family and CAMHS/ Youth Mental Health Services SUTHERLAND SHIRE



SESLHD Services for Children and Adolescents with Intellectual and Developmental Disabilities

Intellectual Disability is defined as:

- **A valid global IQ score more than 2 standard deviations below the mean (below 70 on most IQ tests).**
An IQ score is valid if the obtained IQ score is not an artefact of other factors such as a visual problem, hearing problem, physical disability, intoxication, drugs, illness, English as a second language, symptoms of a mental illness or other factors which interfere with a person's ability to respond to items in an IQ test.

An IQ score is a global measure of intelligence if there are no (or a relatively small number of) significant differences between subtests and no significant differences between sub-indices of IQ. Some conditions such as autism often lead to abnormal profile differences on IQ tests because some abilities (usually non-verbal) are stronger than others. Another example is acquired brain injury which often leads to specific cognitive deficits side by side with unaffected cognitive functioning. In both cases the full scale IQ score is not a good measure of overall intellectual functioning and should not be used to classify someone as intellectually disabled.

As a general principle intellectual disability is developmentally acquired. Because the child, for some reason (e.g. a syndrome) is less able, than same age peers, to cognitively process information and learn, they develop cognitive abilities and adaptive life skills at a slower rate and peak (in early adulthood) at a lower level of cognitive ability and adaptive behaviour skills.

- **Adaptive Behaviour that is significantly below that of same age peers.** This is usually measured by using an adaptive behaviour scale (such as the Vineland of the SIB-R) with population norms. The child scores below two standard deviations below the mean and scores in the disabled range in most (if not all) sub domains (areas such communication, socialisation, community access, self-help or similar areas).
- **Onset prior to age of 18 years.** Usually not a consideration for a child or adolescent. Most conditions that cause an Intellectual Disability are present from birth or pre-school. However for a small number of people with an intellectual disability the disability is due to a condition that was onset at a later age. Usually an illness or accident that causes brain damage. This can include febrile convulsions, head injury or very early onset psychosis (ages 12 to 15 years). As a general principle the earlier in life the causal condition occurs the more likely that the child will have an intellectual disability which is global in nature. The same or similar events later in life can have different outcomes, because overall development is less compromised and the pattern of deficits tends to be more specific and less global.

For educational and other purposes Intellectual Disability is often sub-classified as Mild, Moderate, Severe and Profound:

Borderline Intellectual Disability: This is an ill-defined category for students with an IQ score in the 70s. It signifies low intellectual functioning, but is not an Intellectual Disability. About 6% of the population have an IQ in the range 71 to 79.

Mild Intellectual Disability: defined by having an IQ score in the 55 to 70 range. About 1.5% of the population

Moderate Intellectual Disability: defined as have an IQ score in the 40 to 54 range. About 0.5% of the population

Severe Intellectual Disability: IQ tests cannot measure below an IQ score of 40, but a person can be diagnosed as having a severe intellectual disability if they cannot be assessed due to lack of ability. About 0.1% of the population.

Children and adolescents with an Intellectual Disability have three different kinds of mental health problems which may require assessment and/or intervention:

These three kinds of mental health problems vary in prevalence with level of intellectual disability:

	Mild	Moderate and Severe
Mental Disorders. The same kinds of mental health problems (anxiety, depression, ADHD, Psychosis, etc) as non Intellectually disabled	High rates compared to non intellectually disabled	High rates but diagnosis can be more difficult due to a lack of communication skills leading to an inability to express thoughts and feelings
Behaviour Problems. Behaviourally defined problems, such as aggression, self-injury, absconding	Low rates compared to more intellectually disabled	Higher rates than mild
Autistic behaviour, such as strict adherence to non-functional routines, very odd behaviour and becoming very upset over small changes.	High rates compared to non intellectually disabled	Higher rates than Mild, but can be more difficult to diagnose

As a general rule Mental Disorders are dealt with by Mental Health Services and Behaviour Problems and Autism by ADHC or ADHC funded services. However, diagnostic difficulties can make it hard to identify what kind of mental health problem a student has. In the St George and Sutherland Areas the Developmental Assessment Service (DAS) can take referrals of all kinds and carry out specialised assessments.

Developmental Assessment Service (St George and Sutherland)
Cnr Railway Pde and Belgrave St
Kogarah NSW 2217

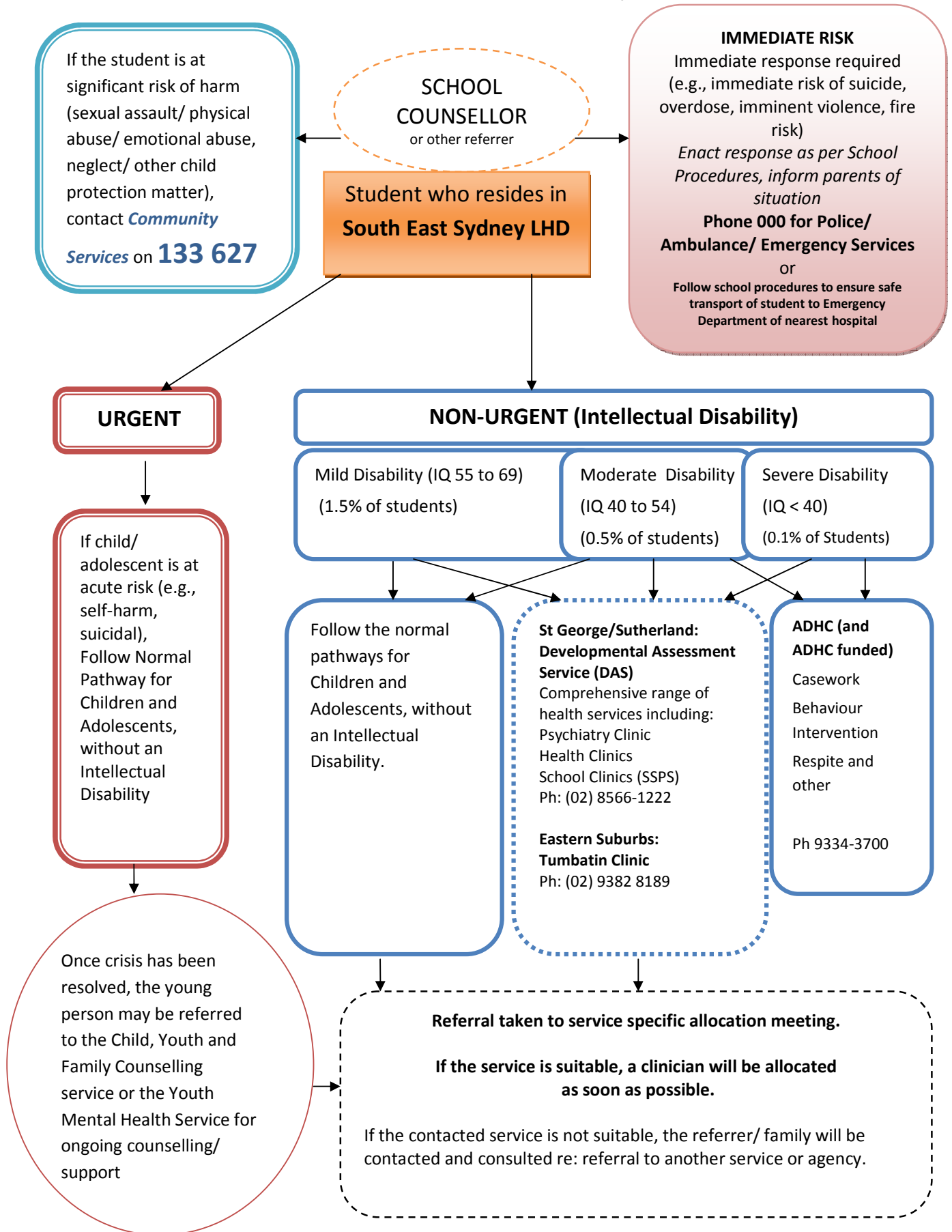
Phone: (02) 8566 1222

In the Eastern Suburbs, the Tumbatin Clinic provides diagnostic and assessment services, for children 0-6 years of age. Children with identified intellectual disability can be offered medical reviews until 16 years of age.

Tumbatin Clinic
Sydney Children’s Hospital Community Health Centre
Cnr Avoca & Barker Sts
Randwick NSW 2031

Phone: (02) 9382 8189

SESLHD Services for Children with Intellectual and Developmental Disabilities



South Eastern Sydney Area Child and Adolescent Mental Health Programs

School-Link

Coordinator based at Prince of Wales Hospital, Euroa Centre
Barker St Randwick NSW 2031
Phone: (02) 9382 4543
Fax: (02) 9382 2320

In 1999, the NSW Government launched *School-Link* as a collaborative initiative between NSW Health and the Department of Education and Communities to improve the mental health of children and young people in NSW. School-Link focuses on:

- Assisting in strengthening the links between schools, TAFE Institutes & colleges, school & TAFE counsellors and Area Mental Health Services for children, adolescents and young people
- Facilitating education and training about child and adolescent mental health issues for Health and Education staff
- Coordinating the planning, implementation and evaluation of evidence-based programs aimed at promoting mental health, preventing mental health problems and intervening early for children and adolescents with signs and symptoms of mental health problems.

The School-Link Coordinator for South Eastern Sydney Local Health District covers the Eastern Suburbs, St George and Sutherland Shire areas.

Clinical Coordinator - Eating Disorders

Coordinator based at Prince of Wales Hospital, Euroa Centre
Barker St Randwick NSW 2031
Phone: (02) 9382 8361
Fax: (02) 9382 3762

The Clinical Coordinator- Eating Disorders position is part of a state government funded project entitled "Enhancement to Statewide Eating Disorder services". The purpose of the role is to help the area health service coordinate, support and expand existing services in order to provide treatment to consumers presenting with eating disorders across the lifespan. The primary focus of the position is to develop local capacity to treat within the community within specialist and general health and mental health services. The coordinator is also involved in fortifying patient transitions between services locally and across the state. This involves close networking with other area health services and non-government organisations to maximise training opportunities and service development resources, in order to enhance the capacity of clinicians to effectively apply evidenced based treatment approaches. Particular tasks that the coordinator undertakes include responding to emergency needs and requests, establishing relationships in order to assess facilities' current and potential eating disorders' services, following up ad-hoc requests with policy development, and providing supervision and training.

Children Of Parents with Mental Illness (COPMI)

Contact the COPMI Coordinators

Eastern Suburbs: (02) 9382 3791

St George and Sutherland: (02) 9540 7800 or 0409 893 772

The COPMI programme is a specialist service which provides support for children of parents with a mental illness and their carers, who are clients of the Adult Mental Health Services or CAMHS. The programme is part of the NSW Health COPMI Framework. The COMPI position provides support in the following areas:

- Consultancy to adult mental health clinicians around care planning for COPMI and the parenting support needs of their adult clients
- Provision of short term needs assessment and psycho education to COPMI and their families in conjunction with the adult and child mental health clinicians
- Provision of training for health staff with regards to development of COPMI inclusive practice to enable better recognition of COPMI issues
- Provision of training for community services / non government organisations (NGOs) to raise awareness about COPMI issues for their organisation and practice implications
- Liaison with community services including schools, NGOs and welfare services, to develop service links with adult mental health services
- Attendance at clinical meetings and other team meetings to raise the awareness of COPMI issues
- Development of resources for adult mental health clinicians to enhance their capacity to respond to COPMI support needs
- Liaison with the state COPMI network to share service information and obtain information on state and national COPMI initiatives, and to distribute new resources.

Safe Start

Coordinator based at Prince of Wales Hospital, Euroa Centre

Barker St Randwick

Ph: (02) 9382 4474

The Families NSW Strategy is the NSW Government's prevention and early intervention strategy aimed at giving children aged up to 8 a good start in life. Families NSW is based on a universal population based approach to prevention and early intervention and is implemented through a range of service models. SAFE START is the mental health component of Families NSW.

SAFE START provides a model for the provision of coordinated and planned mental health responses to vulnerable families who are expecting or caring for an infant (up to 2 years age). Health workers who provide psychosocial assessment and depression screening in the primary health care setting are trained to identify and refer vulnerable families who are at risk of or experiencing mental health problems.

The SAFE START model presents a rationale for maternity, child and family and other primary health professionals (such as General Practitioners) to identify psychosocial or mental health risk during the perinatal period. It proposes a spectrum of coordinated clinical responses to the various configurations of psychosocial risk factors and mental health and drug and alcohol problems. These issues are identified through universal psychosocial assessment and depression screening during pregnancy and the first two years of parenting. It also examines the broader specialist role of Mental Health Services in addressing the needs of parents with, or at risk of, developing mental health problems.

The SESLHD SAFE START model has been developed and endorsed to provide a pathway for women in the perinatal period. It is intended to assist you, as the clinician, to negotiate service provision and policy requirements for the assessment and treatment of women in the perinatal period.

The SESLHD SAFE START Project positions contribute to the consolidation of integrated care pathways and sustainable performance monitoring frameworks according to the NSW SAFE START Policy and can be contacted for further information as required.