

BRIEFING PAPER

Workshop Five: Mental health supports for children and young people

Background

Mental health interventions are at the core of the occupational therapy profession, and occupational therapists work across a wide range of mental health settings that offer services for children and young people. However, the profession is often overlooked as a key provider of mental health services by referrers and policymakers. There is a real need to increase understanding of the unique skills and contribution of occupational therapists individually and as part of a multidisciplinary team. It is also important to understand how the interventions delivered by occupational therapists, and the issues those clinicians face, vary across funding schemes, in different settings, and for different client cohorts.

Mental health and children and young people

Mental health supports for children and young people cover a wide range of different settings and funding schemes. Some of the issues that occupational therapists will experience will be related to funding schemes and particular settings and may overlap with the content of other workshops, however there are also likely to be a range of specific challenges associated with supporting children and young people.

Mental health issues can begin impacting children at a young age. Up to one in five pre-school children will experience emotional difficulties that are likely to impact their ongoing development and ability to participate in learning. The recent Productivity Commission report canvassed and recommended options to increase the role of maternal and child health checks to identify potential behavioural and other checks to support early access to supports. The Commission did note that potential risks were identified, including over-prescription of psychotropic drugs. Recommended actions also included increased support for early childhood education and care services to better support social and emotional development.

Medicare-funded services for children and young people

Medicare services funded under the Better Access program are a key funder of mental health services for many families with children with mental health needs, providing a key means of supporting access to services for those whose needs are not severe enough for Child and Adolescent (or Youth) Mental Health Services (CAMHS/CYMHS). Medicare funding also underpins the current Headspace model for young people with most service users accessing individual Medicare-rebated services. Previous reviews and occupational therapist feedback both suggest that Medicare-funded services may not be the best source of funding for services for children and young people due to limits on ability to charge out of pocket fees, higher cancellation rates, and ability to establish longer term therapeutic relationships.

Feedback suggests that access to Medicare-funded private services for children and young people is being heavily impacted by a lack of available services with allied health practitioners reporting long or close waiting lists for services.

Community mental health services for children and young people

States and territories fund Child and Youth (or Adolescent) Mental Health Services (CYMHS/CAMHS). These services are intended to support children and young people with complex mental health issues. In practice, access can be difficult and only available once someone is in crisis rather than when needed. Both the Productivity Commission and recent Royal Commission into Mental Health in Victoria found significant issues in relation to the availability of community mental health services for children and young people.

A wide range of recommendations have been made by both reviews to increase access to services, including through an increase in the availability of low intensity and digital services. Recommendations for Victoria include an increase in the availability of higher intensity services through the establishment of 13 new Infant, Child and Youth Area Mental Health and Wellbeing Services delivered through partnerships between public health services or public hospitals and non-government organisations. These services will also deliver specialist youth forensic mental health programs as part of the development of a state-wide model.

The Victorian Royal Commission has also recommended a significant increase in the number of bed-based services for young people. This includes the establishment of Youth Prevention and Recovery Centre for young people aged 16 to 25 in each region. Higher acuity services will be increased through a new stream of inpatient beds across Victoria for young people aged 18 to 25.

Education-based services for children and young people

Education settings are an important part of the mental health development of children and young people. A range of initiatives exist to provide access to mental health supports in schools ranging from broad programs for all students to individually focused services provided by mental health occupational therapists and other allied health professionals. For example, Victoria has trialled or introduced primary and secondary school programs such as the *Mental Health Practitioners in Schools* program that employ allied health mental health professionals. Over 1500 mental health professionals work in Victorian schools. The latest Victorian budget has also allocated \$277 million dollars to support mental health services in schools allowing schools to put in place evidence-based measures that are considered proven. These include the 'Positive Education' model, therapy dog programs, and mental health first aid training.

The Productivity Commission Inquiry into Mental Health proposed a series of actions to be undertaken by Australian, State and Territory Governments focused on schools. Their proposals include an update to the National School Reform Agreement, to include specific targets and measures of student wellbeing that the education system should work towards. These include guidelines for the accreditation of social and emotional learning programs offered to schools by external providers, including suicide prevention programs.

NDIS-funded services for children and young people

Services funded by the NDIS for children and young people fall into two broad categories, those funded as Early Childhood Early Intervention (ECEI) services for children under 6 (recent changes

are increasing this age to 8), and those for children over that age who are full participants in the scheme. NDIS services under either program are limited to addressing the functional impacts of the mental health issues being experienced rather than clinical interventions to address symptoms. NDIS services may in some cases fund supports provided in a school setting.

Workshop aims

This workshop is one of a series of advocacy-focused workshops that will bring together occupational therapists who work with clients with mental health needs to talk about the issues and barriers that most impact them in their day-to-day work. The workshops will seek to identify opportunities for improvement and reform. This will support work that Occupational Therapy Australia (OTA) is undertaking to develop a strategic advocacy plan and campaign, focused on the mental health work of occupational therapists. OTA is being supported in the development of the mental health paper by SquareCircle Consulting.

Workshop questions

The questions below will be used to guide the discussion during the workshop. As the workshops may not provide sufficient time for all feedback to be discussed, participants are encouraged to provide written feedback on the questions before or after the workshop.

General questions

1. What are the key challenges for you as a clinician working with children or young people?
Please identify the scheme or setting where these apply.
2. What are the key challenges for your clients and/or quality clinical care? Please identify the scheme or setting where these apply.

Funding and workforce

3. What are the major funding issues that impact your work?
 - a. How adequate is resourcing in relation to supporting clients to access appropriate services and role sustainability for clinicians?
 - b. Does funding limit your clinical interventions (e.g., because of rationing or due to funding constraints on some interventions)?
4. What are the key workforce-related issues that impact you as a clinician working in this area?
 - a. How adequate is the resourcing for the OT role?
 - b. How difficult is it to keep on top of professional development?
 - c. Do you feel that OTs working in this area have the requisite skillset and experience?
5. How well are you able to interact with other health and non-health professionals in support of your role? What barriers are there to that interaction?

Demographics and client needs

6. How would you describe the key diagnoses and support needs of the client cohort you support and what age range do they fall in (e.g. 0-3, 4-12, 12+)?
7. Do you identify specific outcomes and do you measure progress against these? How? Are measures consistent across clients or individual (e.g., goal setting)?

Clinical supports

8. What do you define as a mental health related intervention for the client group(s) you work with?
9. Which of these interventions would you consider OT-specific interventions, and which are general mental health style interventions?
10. Are there OT-specific interventions that are particularly relevant in this context and how does your work differ from other professions in this setting?
11. Are there OT interventions that you feel that you are unable to utilise due to constraints on accepted therapies?
12. Are there clear role definitions that differentiate your own work and that of other allied health professionals such as psychologists and social workers?
13. What is the role of social prescribing in your clinical work and to what extent is this enabled or prevented by the scheme or setting in which you work?

Additional information about the Thinking Ahead: Mental Health project

If you are interested in keeping up-to-date with the work being undertaken as part of the OTA Thinking Ahead mental health project, please visit: <https://otaus.com.au/media-and-advocacy/mental-health-paper>. The website will include updates about progress on the project as well as providing information about any opportunities to participate in additional workshops or consultation activities. Updates will also be provided via OTA member communications channels.

If you would like to provide feedback or register interest in upcoming consultations, please contact: haveyoursay@otaus.com.au.