

Child Health Integrated Response Pathway

For all Tamariki and their whānau, who have **behavioural, neuro-developmental and associated mental health concerns** to experience timely, responsive and integrated care that matters to them.

Chirp 

Presenters:

Kim Blair – Programme Manager, Innovation and Improvement, Te Whatu Ora, Hauora a Toi

Anja Theron - Child Wellbeing Programme Director, Te Whatu Ora, Hauora a Toi



How our
CHIRP story
began . . .

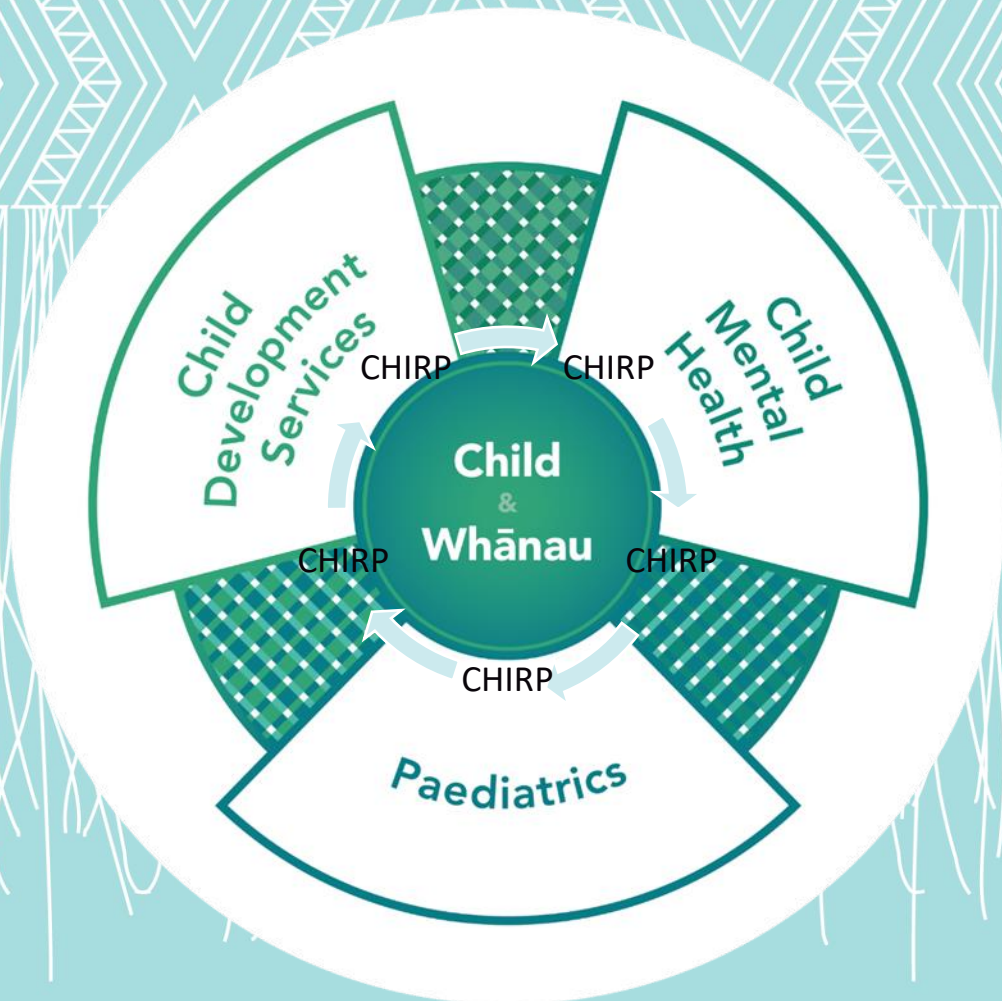


Ko te ahurei o te tamaiti arahia o tatou mahi.

Let the uniqueness of the child guide our work.



Integrating Child Specialist Services “Let’s Work Together”



The problems we are trying to solve

Confused pathways to access support

Long waiting lists

Children falling through gaps or not getting anywhere

Duplication of service

Inequity of access

Fragmented and siloed approaches to service delivery

Not capturing demand/unmet need across the population

Services no longer configured to meet the growing demands of the population

Service centered response – criteria driven

Acute/crisis presentations that could have been avoided with earlier proactive intervention

Data for Māori at beginning of project - 2021

- 70% of children referred to Child facing Services in the Eastern Bay are Māori
- 30 - 35% of children referred to CHIRP in Western Bay are Māori
- Māori were over-represented in the families 'discharged without contact' – families that we fail to reach
- Initial data indicated that Māori waited 31% longer than non-Māori to move through waiting lists.



Voices from our community

“This really concerns me that as a parent, I have asked for help for a young child and that it will basically be 2 school years before assessments are completed, forget treatment or recommendations from this”

“I don't think I could adequately explain in words the agony, terror, grief, despair and confusion we have gone through”

“As a parent of a young adult I found it appalling that it was so difficult to access the help”

“specialists would focus on only one aspect of my problems (and as my various symptoms are by-products of my autism, rather than simpler specific psychoses or illnesses, I would just be written off completely as needing to be referred for something else!”

Poor communication

Long waits

27 months to
complete assessment

Referred from one
service to another.

Repeat story telling

Not listened too

A pathway to care and support that is easy for whānau to understand and access

Tamariki/whanau centred care

Equity of access and outcomes for Māori

To deliver care that is timely, responsive and efficient

Opportunity for earlier diagnosis, assessment and intervention

Collaborative, positive and supportive workforce experience

Informative and measurable data capture

What do we want to deliver?



Child Health Integrated Response Pathway

Phase 1

Sep 21 – June 2022



Project Framework set - roles and responsibilities

CHIRP Steering group

CHIRP Project delivery group

Reduce bottleneck waitlists – utilising spare fte and private contracts

Collate best practice guidelines for ASD/ADHD assessment locally, nationally and internationally

Collaborative design of an integrated cross service/sector model – drawing on consumer and professional feedback and experience

Whakawhanaungatanga

Phase 2

June 2022 – October 2022



Implement and test a single point of access

Implement and Test an integrated triage and assessment model

Implement and Test Integrated diagnostic pathways

Develop Data and IT capabilities

Wider stakeholder communication and collaboration

Phase 3

October 2022 – To date



Operationalise an integrated model

Co-location of Child facing specialist services – A Child Wellness Centre

Build on stronger partnerships with Primary Care, Education and Community agencies

Design and develop a Māori assessment/support pathway

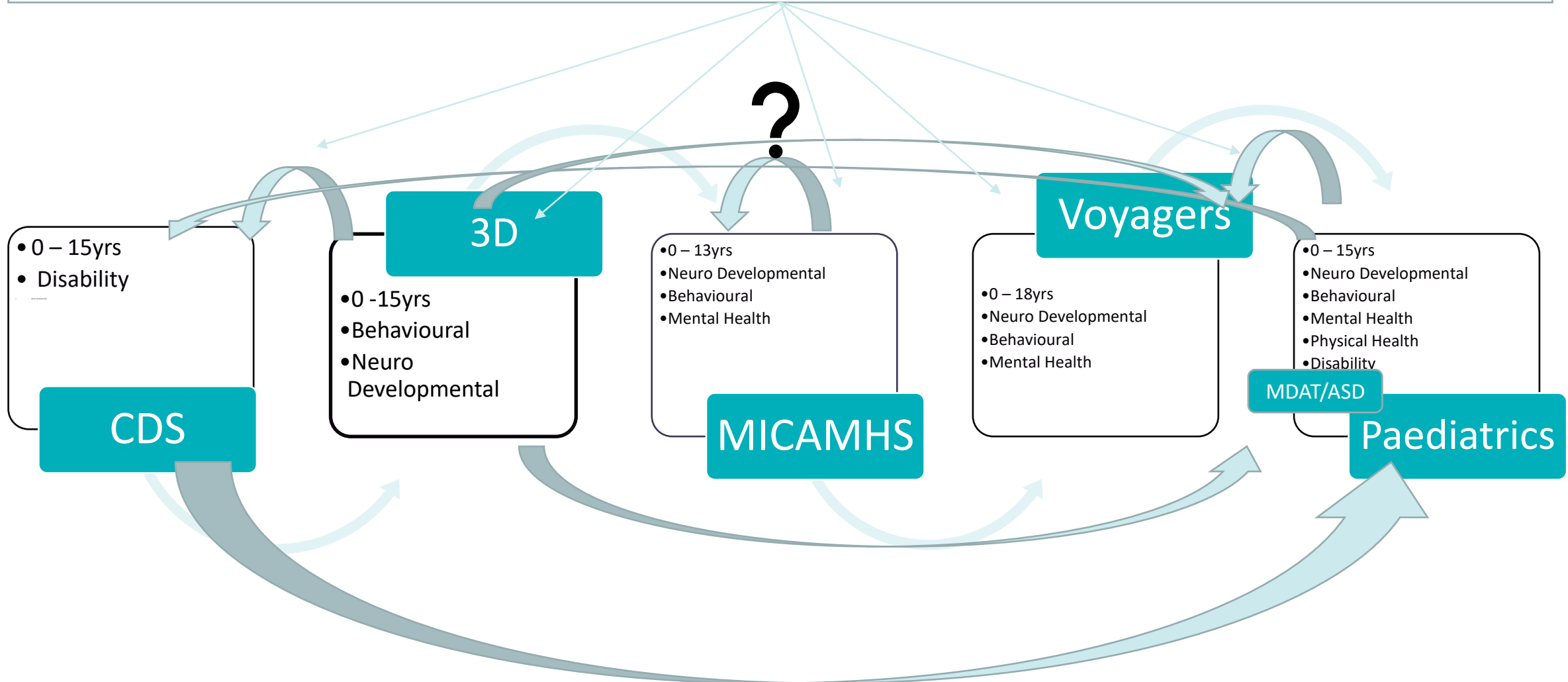
Establish a Child Health directorate to support an integrated structure

Establish a clinical applications system to support an integrated structure

Journey towards excellence

Addressing the confusion – the case for a direct single referral point

Referrers
G.P / Midwife / Self / Hauora / Schools / Private / Specialist / Community / Primary Health / NGO



Phase 1 & 2 Providing ease of access through a single point of referral

Children experiencing neurodevelopmental, behavioural and associated mental health concerns can be referred directly to CHIRP

Referrers
G.P / Midwife / Hauora / Schools / Private / Specialist / Community / Primary Health / NGO

SLT / Nurse / Social Worker / Psychologist / Administrator
CHIRP

Refer single service response

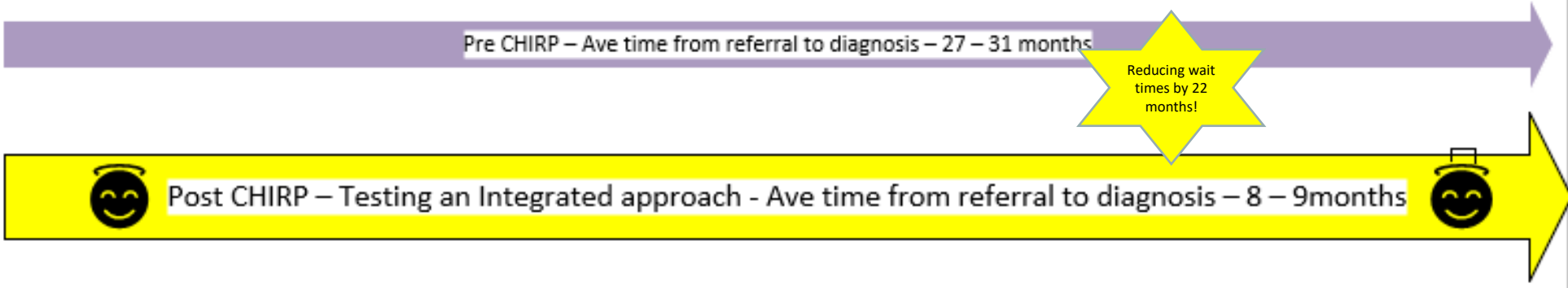
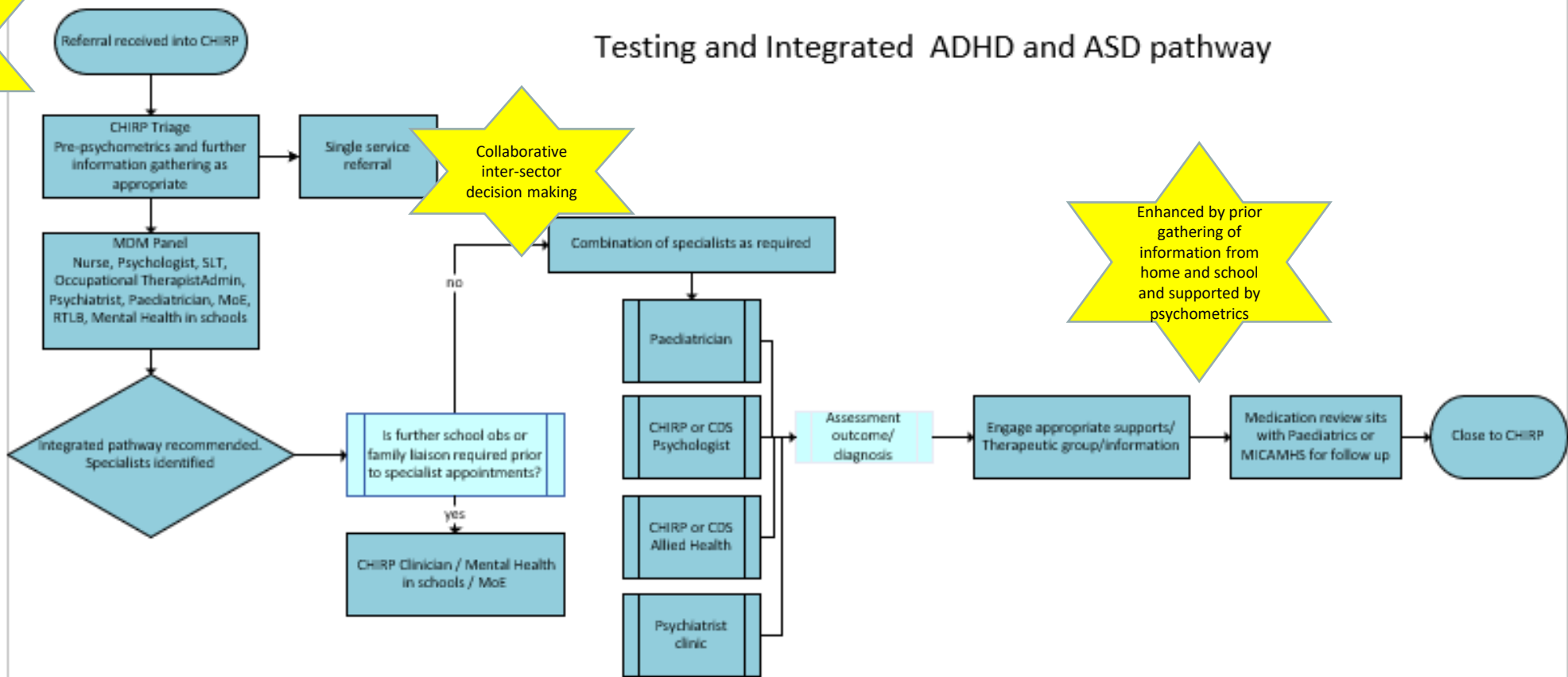
Requires a coordinated multi specialist/service response

CDS / MICAMHS / Paediatrics / Psychology / MoE Learning Support / RTLB / PHN / Mental Health in schools – Psychology / Psychiatry / Allied Health
CHIRP
Multi-Sector/ Multi Discipline Team
Coordinated response plan

Testing a coordinated response pathway

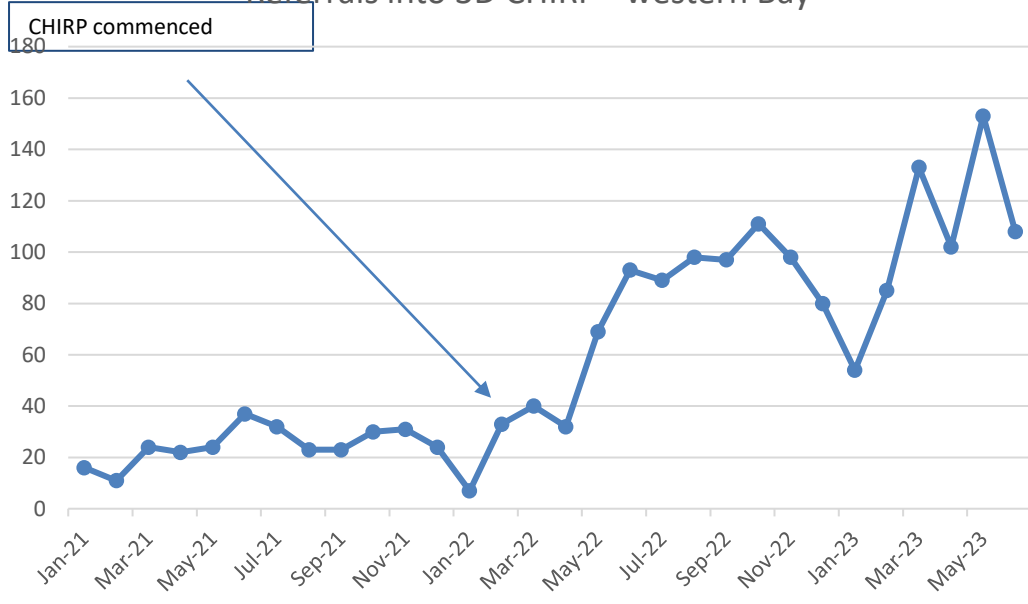
Increase in fte. Proactive approach to engaging whānau, gathering story, and linking with support

Testing and Integrated ADHD and ASD pathway

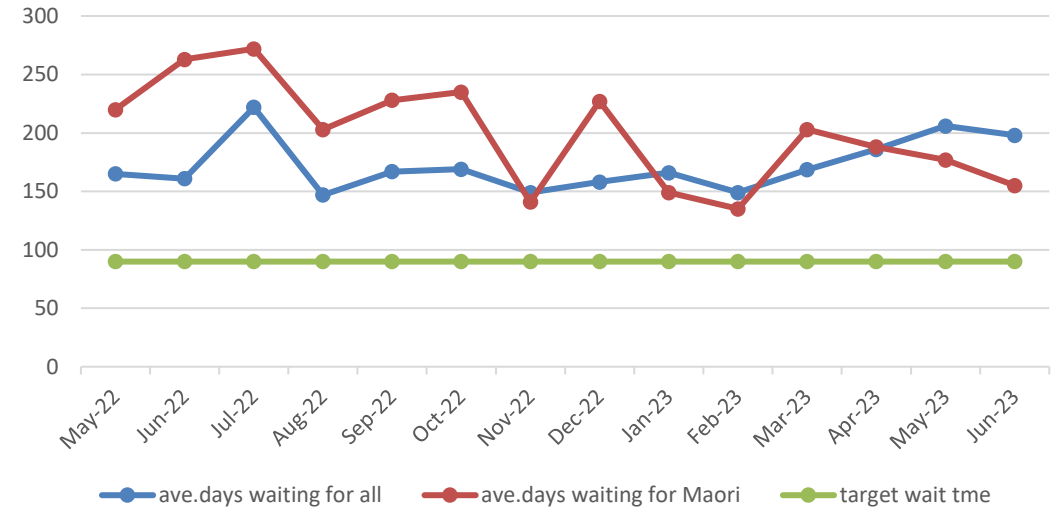


Wait times reduce and single point of entry takes off

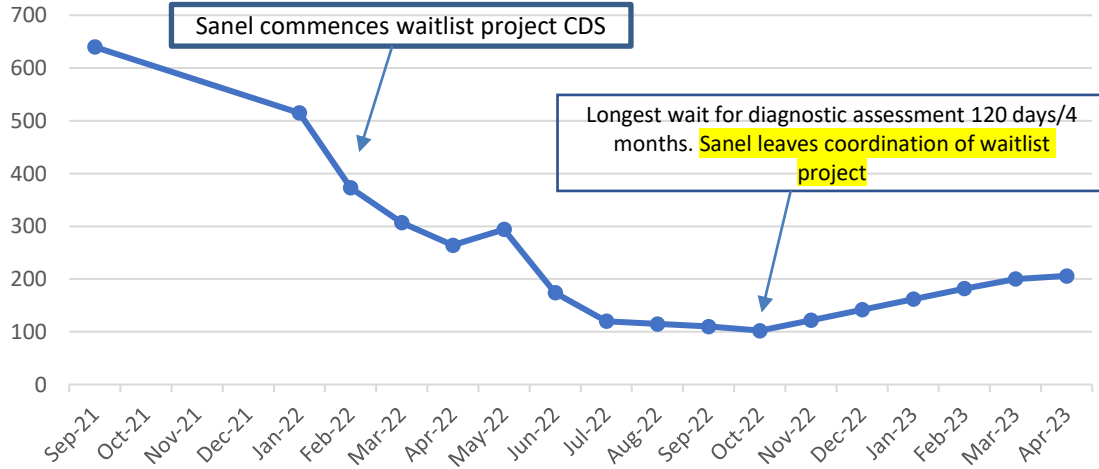
Referrals into 3D CHIRP - western Bay



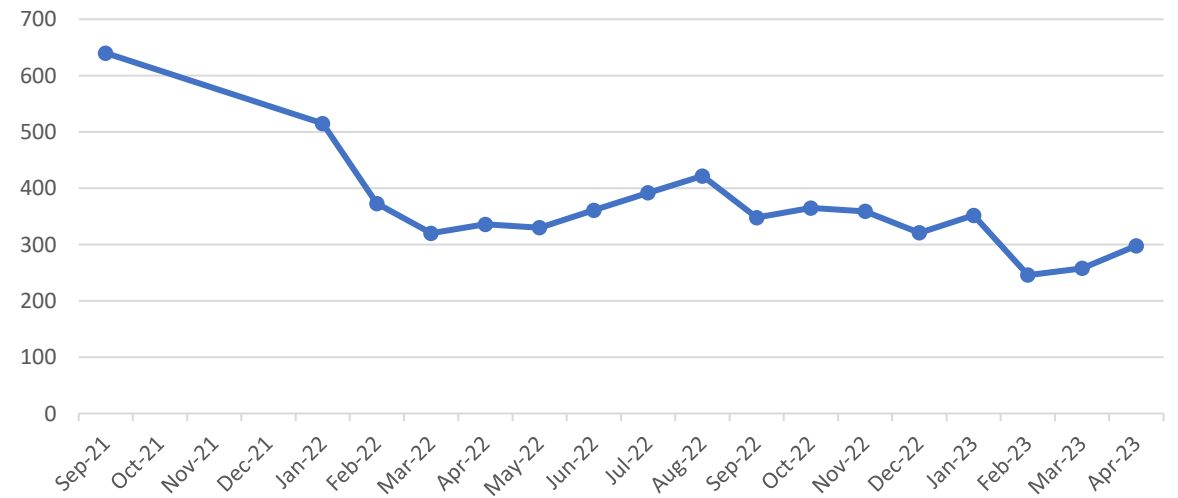
Average days waiting from referral to CHIRP, to MDM



CDS Psychology Over 7yrs - longest wait for assessment



CDS Eastern Bay - Longest wait for a psychology assessment



Whānau Feedback

Hi Darron Happy New Year!

Just wanted to thank you and Karin so much for your support with Manaia last year. We were really happy how quickly we as a family got through the system after a few horror stories we'd heard. The system we were under was fabulous, and didn't feel like too much of a wait between each separate step of the journey into diagnosis.

Having your support and advice at the end of the phone or email when needed was such a relief, and we both felt the follow up appointments and care you took ensuring the plan for Manaia was the right fit for us, was crucial in him having his absolute best year at school yet and receiving an academic award.

Manaia is a different kid to this time last year and we are so proud of the effort he has put in along with your help. Thank you again!

"This is my second child that has been through CAMHS- I have found this second one to be a breeze- diagnosed so quickly, and within weeks on medication- a life changer/ saver!"

*"She is the 3rd child of mine to go through the diagnosis process and it was such a different experience. What I experienced this year was much quicker appointment timeframes and a much broader support. Rather than just have a diagnosis and sent on our way (previous experience) we had pediatrician, psychologist, SLT, yourself and we were offered the Inside Out course which did wonders for her. On top of this, we had the home support you provided with talking to her and helping her take some ownership of the eating habits. It really felt like we had a whole of person and family approach as compared to our previous experience".
(feedback on CDS Project)*

Clinician Feedback

"The new process allows a much more informed assessment due to the extra CHIRP staff available including the additional coordinator, psychologist and admin support.

The greater use of Standardised tools and psychology assessments before the MDM discussion is a major improvement. I felt we were much better informed and able to make the right decision regarding secondary and community services.

This additional work up will later support secondary service efficiency by reducing the number of appointments necessary before diagnosis can be reached and management/ interventions recommended".

Improvement over 12 months

Tamariki and Whanau waiting on specialist waitlists

	January 2022 – Project Start		January 2023 – One year with CHIRP	
Service	Clients waiting	Longest wait time in service	Clients waiting	Longest wait time in service
Tauranga CDS Psychology	139	515 days	83	270 days
Eastern Bay CDS Psychology	44	640 days	43	320 days
MDAT	52	182 days	68	210 days
Paediatrics Tauranga	466	180 days	472	120 days
Paediatrics Whakatane	99	92 days	88	90 days
3D now CHIRP	172	693 days	474	183 days
Average time from request for help to diagnosis – Tamariki & whānau journey across services.	27 months		11 months	

Learnings

Integrated care pathways save time and make better use of resources

Integrated pathways enhance meaningful care

Integrated care pathways enhance the specialist response

A single point of referral makes sense for communities and services

Specialists can partner better with community agencies when they partner better together.

Be guided by the overall whānau journey – not just within siloed services/sectors.

Challenges

Siloed funding models

Siloed services

Response driven by service criteria/scope and eligibility – rather than need

Absence of a child health directorate or structure

Competing priorities

Covid -19 pandemic

Shifting change in a changing Health system

Consumer feedback / co design

Fte

Introducing a Māori Pathway

Golden moments

Letting the uniqueness of the child guide our work

Shared responsibility

Courageous conversations

Together we are better.

Collaboration with Education

Collaboration with Primary Health.

Engagement with Kōhanga Reo, Māori Hauora and community agencies to support whānau

The ‘single point of entry’ and ‘collaborative assessment’...
“...best thing to come out of the DHB in years...” Spectrum Collective



Ngā mihi nui

CHIRP Project Delivery Team:

Dr Sarah Moll, Dr David Jones, Judie Smith, Dr Michael Gudex, Evelyn Aranas, Victoria Collinge, Heather Stewart, Te Paea Muir, Chris McAlpine, Katharine Blackman, Dr Rebecca Maltby, Hayley Every, Glenda Gillgren, Fiona Putty

Child Wellbeing Programme director: Anja Theron
Project manager: Kim Blair
Project Support: Nicola Chadwick

Presenters:

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Ahakoā he aha te rākau he hua kei roto

No matter the species of tree, each bears its own unique fruit



Celebrate diversity