

Independent Chair Communique No.

I am pleased to share this final update as the Chair of the Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents aged 0 – 18 years in Western Australia (the ICA Taskforce).

Taskforce submitted its draft Final Report to the former Minister for Health and former Minister for Mental Health on 30 November 2021 as required by the terms of reference.

In the final months leading up to the submission of the Report Taskforce engaged in a series of targeted consultations with key groups of young people, families and carers including: Aboriginal young people, families and carers; children and families from culturally and linguistically diverse backgrounds; LGBTQIA+ children and their families and carers; families and carers of children under 12; children with eating disorders and their families and carers; young people in out of home care; young people in the criminal justice system; and young people with neurodevelopmental disorders, families and carers. We also held a series of regional workshops involving young people, families and carers and clinicians and service providers, and held further engagement sessions with key clinical staff from Health Service Providers. What we heard both reinforced the Emerging Directions paper and identified further information to guide the implementation of the future infant child and adolescent mental health strategy and roadmap.

In October we held the final Expert Advisory Group (EAG) workshop. During the workshop we shared what we have heard from stakeholders, and built upon the proposed future infant, child and adolescent mental health system. We discussed what needs to be put in place to make the future system work, and identified what outcomes are expected for children, families, health workers and services. The final EAG workshop was also a celebration of the collective contributions of EAG members to the work of Taskforce enabling the Minister for Mental Health to acknowledge the important contributions of all members.

The demand and economic modelling was also completed and validated by clinical and non-clinical members. The outcome is a macro level picture of the workforce and skill mix needed and its distribution across the state. In addition to uplift in FTE, work needs to be done to continually engage people in services and we have recognised that investment in infrastructure and technology will be needed to support service delivery.

The scale of engagement informing the Taskforce and the Final Report cannot be understated and reflects a shared commitment to improving mental health outcomes for Western Australian infants, children and adolescents. The Taskforce is very grateful for the participation, engagement, strength and compassion seen from the children, young people, family members, carers, staff, service providers, and other stakeholders who have contributed to our work. Stakeholders have made it consistently clear that they want to see their input translate into action and meaningful transformation. The scale of change sought by all participants will not happen overnight, nor quickly - and will require an enduring commitment to collaboratively carrying this work forward with the voice of lived experience a key driver of ongoing service reform.

On behalf of the all Taskforce members thank you for sharing your time and expertise in developing an infant, child and adolescent system for Western Australia.

If you have any questions, comments or feedback for the ICA Taskforce please email CATaskforce@mhc.wa.gov.au

Thank you

Robyn Kruk AO

Independent Taskforce Chair