

Protecting Victoria's Vulnerable Children Inquiry

Submission by:

**Mercy Health
O'Connell Family Centre**



Mercy Health

Care first

Our history: Protecting the best interests of children

Mercy Health O'Connell Family Centre is one of three statewide early parenting centres. The founders of O'Connell Family Centre, the Family Care Sisters, initially cared for families in their homes in disadvantaged Melbourne suburbs and in rural Victoria. Affectionately known as the Grey Sisters, they built the centre on its current site in Canterbury in 1949 and continued their work with a focus on the wellbeing of mothers, babies and young children. The Canterbury site was also a mothercraft training school from 1949 until 1978.

Registered as a public hospital in 1975, O'Connell Family Centre also became an Early Parenting Centre (EPC) in 1993. To ensure that their family centred work would continue into the future, in 2006 the Sisters gifted the Centre to the Mercy Sisters.

Mercy Health O'Connell Family Centre is strengthened as an entity of Mercy Public Hospitals Incorporated and enjoys an effective relationship with Mercy Hospital for Women (MHW) and the mental health service. This supports a holistic approach for vulnerable families from pregnancy until the child is 4 years old.

Building on these foundations, O'Connell has developed therapeutic programs and services to ensure care for vulnerable families and at risk children is current and informed by best practice models. O'Connell has worked collaboratively with the other two EPCs to develop a common protocol and agreed priority criteria for admission.

Providing a quality service

Mercy Health O'Connell Family Centre provides residential, day stay and group programs at Canterbury and day stay and group programs in the community. Interventions focus on partnership with the family to build on existing strengths and to promote secure attachment and sustainability of changes in parenting patterns. As O'Connell has a waiting list for admission, priority is given to families with very young infants and families with high risk, including risk to the child of abuse or neglect.

Families attending O'Connell residential programs over the past two years have had increased complexity and greater mental health diagnosis. In this period there was an increase in mothers with depression, with thoughts of self harm and 13% of mothers had psychiatric consultations. The average age of admitted children has lowered with 70% less than 12 months old.

Recent government funding via the National Perinatal Depression Initiative has provided funds to enhance our mental health services so that O'Connell now employs both a Psychologist and Psychiatrist.

Our unique opportunity: Integrated service delivery

Early intervention and support programs, from pregnancy to early childhood are proven effective strategies that reduce the incidence of neglect and abuse. O'Connell is in a unique position in Victoria to support an integrated approach to care pathways

for vulnerable families and at risk infants as there is a well established natural alignment with Mercy Hospital for Women and the mental health service. O'Connell has an MoU with MHW to prioritise admission to the centre. This enables vulnerable pregnant women and families to experience a whole of care approach from early pre birth identification and referral.

Mothers and infants who have been identified in pregnancy as requiring intensive early parenting intervention can transition from the maternity setting to the early parenting centre. This provides a safe and supportive environment for parenting education and opportunity for further assessment of risk, including developmental risk to the infant. This strategy may prevent referral to the child protection tertiary sector.

Indigenous families and children are over represented in the statutory child protection system. Mercy Health O'Connell Family Centre is also aligned with the MHW 'New Directions Program', Nangnak Wan Myeek, a program funded by the Office of Aboriginal & Torres Strait Islander Health (OATSIH) under the Federal "Closing the Gap" initiative with the aim of improving the health of Aboriginal women and their children up to the age of 8 years. OFC is working with the Nangnak Wan Myeek providers to modify our parenting programs to better meet the needs of Aboriginal mothers, infants and families.

Working with universal and secondary providers

Although O'Connell is strengthened by our positioning in Mercy Health, a minority of our referrals are via MHW. We are a statewide service with a focus on the Eastern region. Families are referred to O'Connell from both health and community sectors, with effective referral pathways from Maternal & Child Health services, General Practitioners and specialist health providers.

Referral of O'Connell clients back to universal and secondary services is often problematic especially in rural areas. Such services are often operating above capacity for example Enhanced MCH, mental health counselling and residential services, and rural GP services. ChildFIRST providers often appear overwhelmed with long or closed waiting lists. The inability of these secondary services to accept referrals for at risk families and children may leave referral to Child protection as the only 'safe' option.

Enhancing existing role

Mercy Health O'Connell Family Centre provides effective early interventions and parenting strategies within the secondary services sector and in recent years has enhanced service delivery to meet the increasing complexity of the health, developmental and psychosocial needs of vulnerable families and at risk young children. The majority of families referred to O'Connell have multiple risk factors that impact on parenting, attachment and maternal and infant mental health. O'Connell is well supported by tertiary health and mental health services at MHW. However we could support more children.

Mercy Health O'Connell Family Centre has the capability to provide Parenting Assessment and Skills Development Services (PASDS).

Currently child protection families are admitted to O'Connell only if they are voluntary clients. These referrals represent only a small minority of vulnerable families to whom we could provide a tertiary service, if funded for PASDS.

As outlined above O'Connell has a long history of providing parenting services to vulnerable families with complex psychosocial and health needs. The multidisciplinary staff are highly valued and have skills and experience to provide care and supports at the broader tertiary end. Of the three EPCs, O'Connell in the Eastern region is the only non PASDS provider.

Demand for PASDS has increased without increased capacity across the sector. O'Connell as a funded PASDS provider would also be in a position to provide other tertiary services including home based PASDS, Family Coaching and Access services. This would provide equity for families across the three EPCs and increase capacity across the state as well as fully utilise the facility.

Mercy Health O'Connell Family Centre, with our supports and expertise, is well positioned to provide increased tertiary child protection PASDS if funded to do so.