## Checklist: Reviewing Service Model fit for Our Community

The research that informed the CASCADeS Framework identified 43 elements important to consider when reviewing a specialist CFH service model fit for local context. These elements can be used to consider aspects of the service model under consideration (or previously implemented), to identify whether adaptations are needed in order to achieve the expected outcomes your group developed in Tier 2 (Outcomes Expected), outcomes that are meaningful and key priorities for your community. The elements may relate to the key target groups, the principles, practices and processes included in the service model as well as resources and roles.

While 43 sounds like a lot, the participants in the research (which included parents, clinicians, service managers, academics/researchers, and government agency representatives) indicated that all were important to consider. To facilitate this step, the following information is provided as a <u>checklist</u> of the elements that should be considered.

As per Tier 2, you may wish to complete the checklist as individuals and then use your completed checklist as a reference point for discussion with the rest of the group. Coming to collective agreement about importance and relevance of the elements of the service model for your community, and identifying those that may need be to adapted in some way, is a key focus of this tier of the CASCADeS Framework.

As you complete the checklist on the following page, consider whether the element presented is reflected in the Service Model you are reviewing, or is in not included. Is the element present but in a form that needs to be adapted to be relevant and effectively implemented in your local community to address the needs of children and their families. There is a section to include some comments to use as prompts when you meet again with the group as a whole, or you may wish to journal these separately to refer to. Over to you now...

Specialist CFH Service Model Elements to consider	Yes – Present (Y = Yes)	Not Included (N = No)	Important (tick) / Not important (cross)	Adaptation Needed (Mark with A for adaptation)	Comments/Thoughts to share with group
Flexibility in the service model to address different community contexts and needs					
Flexible modes of delivery					
Flexible pathways into the service					
Maintaining a <b>balance</b> between flexibility and productivity					
A service model that <b>reflects real life</b>					
Are there aspects of the service model that must remain <b>stable</b> and those with <b>flexibility</b> for our community context					
A focus on <b>interventions</b> able to be <b>tailored to the needs</b> of the child, parent and family					
No wrong door access to the service					
Care navigation support for families					
Key workers identified as care coordinators					
A service model which embraces diversity and community inclusion					

Specialist CFH Service Model Elements to consider	Yes – Present (Y = Yes)	Not Included (N = No)	Important (tick) / Not important (cross)	Adaptation Needed (Mark with A for adaptation)	Comments/Thoughts to share with group
A service model that reflects best practice <b>evidence-based</b> service delivery					
Place-based systems of care					
Collaborative cross sector <b>integrated service model</b> based on trust, respect and mutual expertise					
Integrated service delivery including <b>sharing of information</b> regarding the needs and care of the family					
Collaborative workforce models across organisational boundaries					
A <b>communication strategy</b> to enhance interagency stakeholder understanding of the service model					
Interprofessional team approach to address the diverse needs of communities					
Interprofessional team approach to maximise workforce resources					
Interprofessional teams to build workforce capacity through <b>sharing</b> of knowledge and expertise					
Recruitment and retention strategies to ensure appropriately skilled clinicians					
Recruitment and retention strategies to secure multi-skilled clinicians to work across a broad scope of practice					

Specialist CFH Service Model Elements to consider	Yes – Present (Y = Yes)	Not Included (N = No)	Important (tick) / Not important (cross)	Adaptation Needed (Mark with A for adaptation)	Comments/Thoughts to share with group
Mentorship of clinicians across / between communities					
Training and mentorship by experts to overcome implementation challenges when establishing new services or programs					
Support and professional development, particularly for those working in extended scope of practice					
Flexible access to professional development					
Workforce development to build capacity for culturally safe healthcare service delivery					
Telehealth to improve access, overcome barriers and improve health outcomes					
Telehealth as an optional mode of delivery, not a last resort					
<b>Telehealth as an adjunct</b> , providing additional access to specialist services between face-to-face consultations					
Clinical practice guidelines or protocols to support the use of telehealth as a mode of service delivery					
Reliable internet, equipment and technological connectivity					
Technology to facilitate information sharing between healthcare providers					
Technological support for clinicians					

Specialist CFH Service Model Elements to consider	Yes – Present (Y = Yes)	Not Included (N = No)	Important (tick) / Not important (cross)	Adaptation Needed (Mark with A for adaptation)	Comments/Thoughts to share with group
Telehealth to increase access to clinical support and consultation for clinicians					
Telehealth to increase flexible clinician access to professional development and capacity building					
Harnessing technology for innovative solutions to local challenges					
Committed longer-term funding to support sustainable change rather than short-term funding cycles					
External grants to enable piloting of service models					
Funding and billing streams to <b>support the use of telehealth</b> and other technologically-based service delivery					
Incentive schemes for recruitment and retention in difficult to staff settings					
Bulk billing to address financial barriers to healthcare access					
Government rebates to enable coordinated care in vulnerable communities					
Is there <b>anything missing</b> in this Service Model that is important to us/our community?					