bestchance

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Boosting the use of the Key Worker Model to meet the increasing need for ECI service

Introduction & Objectives

- The transdisciplinary Key Worker Model (KWM) is an under-utilised but highly valuable service delivery model for Allied Health (AH) teams in ECI.
- One of the major challenges for children with disabilities is limited supply of therapists and an emphasis on specific therapies. KWM increases clinical ability to meet client needs across multiple domains, reducing client necessity to engage with multiple therapists.
- By promoting KWM and transdisciplinary practice (TDP), we will better meet the needs of children with a disability.



Methods

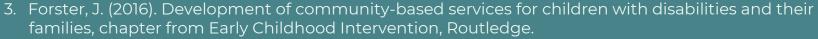
AUSTRALIA IN NUMBERS (2019) 1, 2

Population: 25,364,300

Allied Health Professionals: 200,00

Children aged 0-14 with a disability: 329,000

- The NDIS was originally designed to promote a TDP model in which one ECI team member is the main service provider, as per the KWM³.
- Currently there is a tendency to refer to and offer single discipline supports.
- Research shows KWM benefits for children with a disability include improved engagement with clients, more parental involvement, and better understanding of services⁴.
 - 1. The Department of Health & Aged Care, 2021, https://www.health.gov.au/topics/allied-health/about.
 - 2. Australian Bureau of Statistics, 2019, Australia's children, Children with disability, last updated 2019 https://www.aihw.gov.au/reports/children-youth/australias-children/contents/health/children-disabilities



4. Young D, Gibbs L, Gilson K-M, et al. (2021). Understanding key worker experiences at an Australian Early Childhood Intervention Service. Health Soc Care Community. 2021;29:e269–e278.



Results

- AH professionals apply a transdisciplinary KWM grounded in child development, using skills from their own discipline, while actively building knowledge transferred from clinicians in other disciplines.
- TDP provides clients with access to a wider team of professionals, while benefitting from the 1:1 relationship with a single Key Worker⁵.
- Many children would benefit from the expertise offered by a wide range of AH professionals⁶ e.g. Play Therapists to support regulation, Specialist Teachers to support social skills, Music Therapists to support communication, etc.

5. Early Childhood Intervention Australia (ECIA) Guidelines, Feb 2016, www.ecia.org.au 6. Twyford, K (2008). Collaborative and Transdisciplinary Approaches with Children









Results

- Limitation to TDP/KWM: in certain circumstances children require access to specific disciplines e.g. for assessment, for specialist skillset.
- Limitation: currently there are inconsistencies in how TDP is applied and limited systematic research⁷.
- KWM could have particular benefit for low-socioeconomic groups and regional/rural clients, who have limited choice and access capacity.

• By promoting transdisciplinary KWM practice, we provide children and families in ECI with alternate ways to "ride the wave" and meet their

individual goals.

7. Fitzmaurice E, Richmond JE. An Investigation of Service Providers' understanding, perspectives and implementations of the Transdisciplinary model in Early Intervention settings for Children with Disabilities. The Internet Journal of Allied Health Sciences and Practice. 2017 Jan o1; 15(2), Article 5.



Conclusions

- By promoting a wider range of AH professionals providing ECI support, there will be an increase in accessibility to service.
- An increase in evidence-based research would be beneficial to highlight the efficacy of KWM and transdisciplinary practice.
- Planned implementation of the model is achieved through supporting services to upskill professionals and teams, as well as educating referrers and communities.