

Operational structure

Legislation

Enabling legislation

The Child and Adolescent Health Service (CAHS) was established as a Board governed health service provider in the Health Services (Health Service Provider) Order 2016 made by the Minister for Health under section 32 of the *Health Services Act 2016*. CAHS is responsible to the Minister for Health and the Director General of the Department of Health (System Manager) for the efficient and effective management of the organisation.

Accountable authority

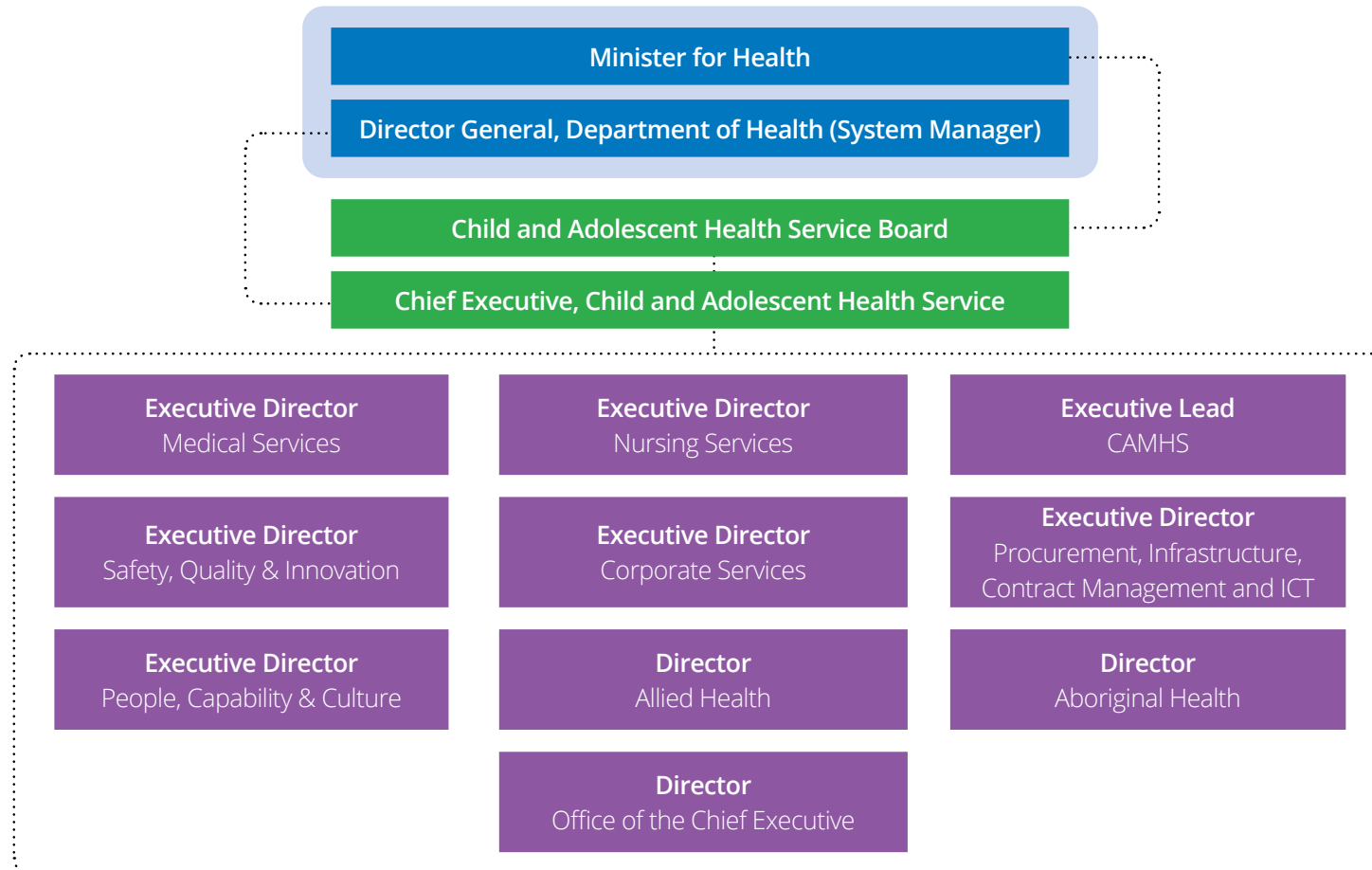
The CAHS Board was the accountable authority for CAHS in 2020–21.

Responsible Minister

CAHS is responsible to the Minister for Health, the Hon Roger Cook MLA.



CAHS Management Structure 2020–21



Senior officers



Child and Adolescent Health Service
Chief Executive
Aresh Anwar
 1 July 2020 – 14 February 2021
 19 April 2021 – 30 June 2021



Nursing Services
Acting Executive Director
Terri Barrett
 15 February 2021 – 30 June 2021



Allied Health
Director
Emma Davidson
 1 July 2020 – 30 June 2021



Child and Adolescent Health Service
Acting Chief Executive
Simon Wood
 15 February 2021 – 18 April 2021



Safety, Quality and Innovation
Executive Director
Mary Miller
 1 July 2020 – 30 June 2021



Aboriginal Health
Director
Mel Robinson
 12 October 2020 – 30 June 2021

Medical Services
Executive Director
 1 July 2020 – 14 February 2021
 19 April 2021 – 30 June 2021



Corporate Services
Executive Director
Tony Loiacono
 1 July 2020 – 30 June 2021



Office of the Chief Executive
Acting Director
Joanne Mizen
 1 July 2020 – 30 June 2021



Medical Services
Acting Executive Director
Louise Houlston
 15 February 2021 – 18 April 2021



**Procurement, Infrastructure,
 Contract Management and ICT**
Executive Director
Danny Rogers
 1 July 2020 – 30 June 2021



CAMHS
Executive Lead
Katie McKenzie
 15 February 2021 – 30 June 2021



People, Capability and Culture
Executive Director
Valerie Jovanovic
 1 July 2020 – 30 June 2021

Nursing Services
Executive Director
 1 July 2020 – 14 February 2021

About CAHS

The Child and Adolescent Health Service (CAHS) is proud to be the leading service provider for paediatric healthcare in Western Australia, as the state's only dedicated health service for infants, children and young people. CAHS is made up four service areas: Neonatology, Community Health, Child and Adolescent Mental Health Services (CAMHS), and Perth Children's Hospital (PCH).

Our health service is uniquely positioned to ensure all children get the best start in life and receive the best possible care. Our services are delivered at PCH and across a network of more than 160 community clinics across the metropolitan area, ensuring the many aspects of care we provide are accessible close to where children and families live.



At CAHS, we strive to exemplify six core values: compassion, collaboration, respect, equity, accountability and excellence in all we do as we work toward our vision of *healthy kids, healthy communities*. Our strategic objectives provide a clear direction for our core services, and a focus for continuous quality improvement, excellence and innovation:

1. **Care for children, young people and families**
2. **Value and respect our people**
3. **Provide high-value healthcare**
4. **Promote teaching, training and research**
5. **Collaborate with our key support partners**

Neonatology provides Statewide tertiary neonatal services to the sickest newborn babies and infants in WA. Neonatology encompasses a range of services, including the Neonatal Intensive Care Unit (NICU), Special Care Nursery, Newborn Emergency Transport Service and Perron Rotary Express Milk Bank. Neonatology services are delivered at King Edward Memorial Hospital and PCH.

Community Health provides a comprehensive range of community-based early identification and intervention services, as well as health promotion, to infants, children, adolescents and families across the Perth metropolitan area; a region spanning 7,250 square kilometres. A key focus of Community Health is growth and development in the early years, and promoting wellbeing during childhood

and adolescence. Service delivery is both universal and targeted, with services provided in a variety of settings, including homes, local community health centres, child and parent centres and schools. The service includes a number of specialist community based services, including immunisation, enuresis, and Aboriginal and refugee health.

Child and Adolescent Mental Health Services

(CAMHS) provide mental health services to children, adolescents and their families across the Perth metropolitan area. Services include community-based programs as well as inpatient care and a range of specialised services for children with complex mental health conditions.

Perth Children’s Hospital (PCH) is WA’s only dedicated paediatric hospital and provides tertiary services for the State. The hospital provides inpatient, ambulatory and outpatient services. PCH is the home of WA’s only paediatric trauma centre and the State’s first intraoperative magnetic resonance imaging machine. PCH also houses the Stan Perron Immunisation Centre, which is available to all children and families attending the hospital to help them stay up-to-date with their scheduled immunisations.



Shared responsibilities with other agencies

CAHS partners with a large number of community and non-profit organisations that make significant contributions to support our patients, clients, families and carers. CAHS values these partnerships, as they are integral to the safe and high quality delivery of paediatric health care services.

CAHS works closely with numerous agencies, including, but not limited to the Mental Health and Disability Services Commissions and the Departments of Health, Education, Aboriginal Affairs, Child Protection and Family Support, and Justice, and the Health and Disability Service Complaints Office.

CAHS recognises the contribution of non-government organisations (NGOs) to the health service, with 'collaborate with key support partners' being one of the five objectives of the CAHS Strategic Plan 2018–2023. Strong partnerships with NGOs facilitate the transition of care from tertiary services to the community and not-for-profit sector, contributing to better health outcomes and a more sustainable health care system.

In 2020–21, CAHS partnered with over 75 NGOs through a range of contractual arrangements, including:

- Those who have a licence agreement for the occupancy of a dedicated space at PCH. These organisations provide services to patients and families without remuneration from CAHS.

- Visiting NGOs who have an access agreement with CAHS, enabling them to visit PCH to provide advocacy, support and education without remuneration from CAHS.
- Those with whom we have a formal contract, awarded after a procurement process, and are funded to provide a range of health-related services in the community.

Performance management framework

To comply with its legislative obligations, CAHS operates under the WA health system's Outcome Based Management Framework. This framework describes how outcomes, services and key performance indicators are used to measure agency performance towards achieving the relevant overarching whole-of-government goal. Key performance indicators measure the effectiveness and efficiency of services provided by the WA health system in achieving the stated desired outcomes.

All WA health system reporting entities contribute to achieving the outcomes through health services delivered either directly by the entities or indirectly through contracts with non-government organisations.

The WA health system's outcomes and key performance indicators for 2020–21 are aligned to the State Government goal of *strong communities: safe communities and supported families* (see Figure 1).

The outcomes for achievement in 2020–21 by CAHS are:

Outcome 1: Public hospital-based services that enable effective treatment and restorative health care for Western Australians.

Outcome 2: Prevention, health promotion and aged and continuing care services that help Western Australians to live healthy and safe lives.

Figure 2 shows how the different services CAHS provides align to Outcome 1 and 2.

Performance against activities and outcomes is summarised in the Agency Performance section, and described in detail under Key Performance Indicators in the Disclosures and Legal Compliance section commencing on page 122.



Figure 1: Outcomes and key effectiveness indicators aligned to the State Government goal for CAHS



Figure 2: Services delivered to achieve WA Health outcomes and key efficiency indicators for CAHS

Outcome 1

Public hospital based services that enable effective treatment and restorative health care for Western Australians.

Outcome 2

Prevention, health promotion and aged and continuing care services that help Western Australians to live healthy and safe lives.

Services delivered to achieve Outcome 1		Services delivered to achieve Outcome 2	
Services delivered to achieve Outcome 1	KPIs measured	Services delivered to achieve Outcome 2	KPIs measured
1. Public hospital admitted services	Average admitted cost per weighted activity unit	5. Aged and continuing care services	(none)
2. Public hospital emergency services	Average Emergency Department cost per weighted activity unit	6. Public and community health services	Average cost per person of delivering population health programs by population health units
3. Public hospital non-admitted services	Average non-admitted cost per weighted activity unit		
4. Mental health services	Average cost per bed-day in specialised mental health inpatient services Average cost per treatment day of non-admitted care provided by mental health services		

Changes to Outcome Based Management Framework

The WA health system Outcome Based Management (OBM) Framework received minor updates 2020–21. One surgical procedure within the key performance indicator *Unplanned hospital readmissions for patients within 28 days* was removed on the basis it was no longer appropriate.