

b) the delivery of child development services in both metropolitan and regional Western Australia, including paediatric and allied health services;
(c) the role of specialist medical colleges, universities and other training bodies in establishing sufficient workforce pathways;

I would like to first report on my experience with the Child Development Service (CDS) and then give some recommendations to assist with the long waiting time experienced by clients.

I was fortunate to be given a placement at CDS in my Final placement as part of the Masters in Speech Pathology course in 2020. Upon finishing the course, I applied for the advertised vacancy of Speech Pathologist for the CDS as part of the Child and Adolescent Health Service (CAHS) Pool Ref 00007662 as advertised on the JobsWA website on 25 November 2019. After a second attempt at the interview process, I secured a place in the pool. It took over 3 months, after the interview, to be notified about this pool placement and by then I had found another job. When I reported that the shortest contract that I would consider would be a year contract, I never heard back from CDS.

Whilst on my placement, I worked at the Hub in Middle Swan which is based on the Middle Swan Primary school. At least 80% of the clients never attended their appointments as parents had to bring their child to the Hub for therapy. This occurred for many reasons; some being that parents didn't understand the value of the therapy or parents were working or had other commitments.

From the above experience, I would like to make the following recommendations:

1. As there are extremely long waiting lists for clients to be seen at CDS, the process of employing more Speech Pathologists needs to be undertaken in a faster, more efficient manner. One shouldn't have to wait 3 months to find out if one has been successful in obtaining a place in the pool.
2. Once one has been successful in obtaining a place in the pool, they should stay in the pool until they accept a job, otherwise the entire employment process has to be conducted again when new positions arise, wasting more time.
3. With the amount of clients waiting to be seen at CDS, newly employed Speech Pathologists should be offered at least a one year contract. Short term contracts require more time and paper-work when needing to extend or reapply for contracts.
4. If there is a lack of therapy rooms for more Speech Pathologists (SP) at CDS, SPs should be able to see clients on the waiting lists at their schools, Kindy or daycares. We all know the benefits of Early Intervention but with waiting lists as long as they are at CDS, we are missing key windows of opportunities for clients in need. Children in need of therapy services, who attend schools nearby CDS, should be seen by SPs at their schools, under the care of their teachers, when parents are unable to bring them to therapy sessions.
5. With the long waiting lists at CDS, the therapy services should be extended to children over the age of 7 years as some clients are only being seen when they are 6 years old. There needs to be Speech\Language therapy sessions offered to older clients. After all CDS is part of the Child and Adolescent Health Service, yet there is very little support for older children and teenagers requiring support.

I hope the information above is helpful and will allow CDS to offer a more timely service to clients in need.