



Northern Sydney Local Health District  
Child Youth and Family Restructure Proposal  
Establishing a CFHN Secondary Level Model of Care  
Consultation Document  
(Procedure reference Prompt [Restructuring in Northern Sydney Local Health District](#))

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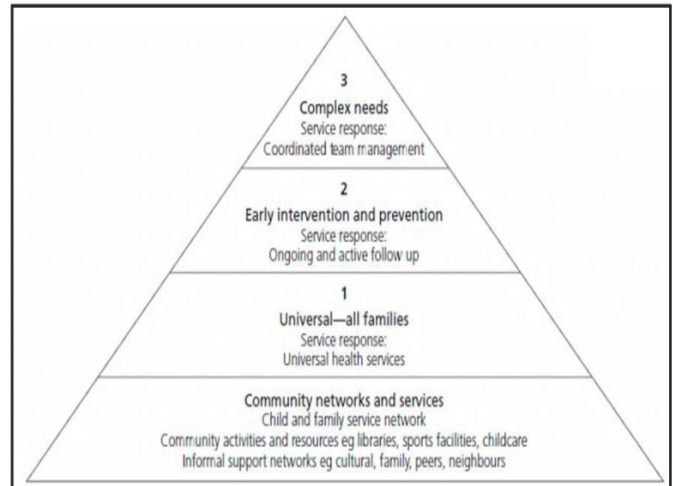
# 1 Current Child and Family Health Nursing Service Overview

## 1.1 Existing Child and Family Health - Nursing Services

The Child and Family Health (CFH) Nursing service stream within the overall Northern Sydney Local Health District (NSLHD) Child Youth & Family (CYF) service includes the following universal and early intervention services:

- CFH Nursing Universal teams:
  - Northern Beaches
  - North Shore Ryde
  - Hornsby Ku-ring-gai
- Northern Beaches - Family Care Centre and Parenting Support
- Hornsby - Family Care Centre (Koala Cottage)
- Lower North Shore Ryde - Vulnerable Families Service
- Statewide Eyesight Preschool Screening (StEPS) – Universal

Figure 1: Supporting Families Early – Levels of care and service response



Source: NSW Ministry of Health Supporting Families Early Package: Maternal and Child Health Primary Health Care Policy and SAFE STAR Guidelines.

### Child and Family Health Nursing - Universal Services (Level 1)

CFH Nursing Universal services offer evidence-based, well child and family health care to all families living in NSLHD, following the birth of an infant. The service also provides support to parents and caregivers and offers well child health and development checks to children until they go to school. The service is delivered to families in their home, clinics or via telehealth based on their preference and needs. The universal service is offered to all families with some short-term additional home-visiting offered to families with identified short-term health needs.

### Child and Family Health - Early Intervention Services (Level 2)

NSLHD offers other CFHN services to families with additional needs, until their child turns three years of age. These include Family Care Centre (FCC), vulnerable families and Parenting Support Services. These services provide extended CFHN home-visiting, centre-based appointments, day-stay programs for parents, counselling, and multidisciplinary parent groups for families. Each sector team has a counselling role (social worker and/or psychologist), however these positions are not distributed proportionately between the three CFH operating sectors.

NSLHD has a Sustaining NSW Families Team, offering secondary level, CFH nurse-led sustained home visiting program to eligible families living in the Hornsby, Northern Beaches and Ryde Local Government Areas.

### Statewide Eyesight Preschool Screening (StEPS) Service – Universal (Level 1)

Offers universal vision screening for 4-year-old children attending more than 600 preschools and long-day care centres in the Northern Sydney region, as part of the universal free health services offered for families by the Community CYF services.

## 2 The Need for Change

### 2.1 Service needs driving the proposed organisational changes

Child and Family Health (CFH) Nursing services are offered and managed in three sectors across the District. Currently each sector has different nursing skill mix profiles. In the Lower North Shore Ryde and Northern Beaches CFH Nursing service sectors, Registered Nurse level staff are undertaking complex CFH nursing care - equivalent to Clinical Nurse Specialist Level 2 (CNS2) responsibilities.

Each of the three sectors currently offer different care models for families with multiple psychosocial vulnerabilities (Secondary Level Services). There is a need to standardise a model of care to ensure more consistent care delivery for families whose children are developmentally vulnerable before they start primary school. This care needs to be provided by CFH Nurses with advanced practice skills and specialist knowledge.

In addition, there are increasing numbers of mothers-to-be and families with an infant needing more specialist Child and Family Health Nursing support and parent-child relationship focussed counselling and therapeutic parent-group programs.

### 2.2 Policy and strategy drivers for the proposed restructure

The following key policies support the establishment of standardised NSLHD Secondary Level Child and Family Health Services:

- [NSW Health Maternal and Child Health Primary Health Care Policy \(PD2010\\_017\)](#)
- [NSW Health First 2000 Days Policy Framework \(PD2019\\_008\)](#)
- [NSW Health First 2000 Days Policy Implementation Strategy](#)
- [National Action Plan for the Health of Children and Young People 2020–2030, Australian Government Department of Health, Disability and Ageing](#)
- [National Best Practice Framework for Early Childhood Intervention](#)

## 3 Proposed Restructure Overview, Purpose and Rationale

The proposed, cost-neutral organisational structure [Section 4] and the associated sector-based team staff profiles and skill mix changes [Section 5.1] proposed aim to:

- Establish standardised secondary-level CFH services and model of care for vulnerable families across NSLHD, to offer consistent, evidence-based care for increasing numbers of families experiencing significant psychosocial stress.
- It is proposed that an additional 5.52 CNS2 Full Time Equivalent (FTE) roles are created by realigning vacant 6.12 FTE CFH Registered Nurse positions to bring the total number of CFHN CNS2 roles to 10.62 FTE across the District
- The new proposed, cost-neutral team profiles with increased CNS2 FTE in two sectors would address the senior CFH nursing skill mix disparity between the three sectors and result in CNS2 roles making up approximately 15% of the total CFH nursing workforce in each sector - to enhance resources allocated to the most vulnerable children and their families, including children living in out-of-home care..
- Currently, there are two part-time counsellor roles allocated to the Northern Beaches sector and less than 1 FTE in each of the other sectors. Part of the proposal aims to create more parity in the Counsellor (Social Work/Psychologist) support allocated to each of the three sectors, by transferring part of a longer-term vacant counsellor role (Psychologist) from the Northern Beaches to the North Shore Ryde Sector counsellor (Social Worker). Please refer to the organisational charts in Section 4 for FTE details.

- As per table one in section 5 of this paper, the CNS2 FTE roles would increase in the Northern Beaches and Lower North Shore Ryde sectors but remain the same in the Hornsby Ku-ring-gai sector.
- Enhance continuity of care for vulnerable children up to five-years of age, including those living in out-of-home care (OOHC) or kinship care, and to offer more support for their foster carers.

### 3.1 Rationale for grading CFH Nursing positions working in secondary-level services at CNS2 level

- The CFH nursing care responsibilities outlined below (and in the attached CNS2 PD) are commensurate with a CNS2 role, under the NSW Nurses and Midwives Award provisions.
- Families experiencing complex psychosocial vulnerabilities, including families from priority populations groups, often take longer to engage and need the skills of nurses with advanced practice CFHN skills to establish rapport, a sense of safety and trust in health services.
- These families also need more proactive follow-up and complex care coordination to optimise parent engagement with services and to ensure their children receive the health checks they need and are supported to optimise their development.
- Nurses working with vulnerable families work autonomously in the community to:
  - undertake complex comprehensive child and family assessments, including child-at-risk assessments
  - provide evidence-based CFHN interventions and to coordinate care for children, and
  - coordinate complex care across multiple service providers.
- Clinicians working in the secondary-level CFH services will also support children living in out-of-home care and their foster/kinship carers. This and other work with the more vulnerable families, needs advanced CFH nursing skills, knowledge and understanding of how adverse childhood experiences and trauma affect parenting capacity, child development and parent capacity to engage with health services.

The responsibilities listed above align with the existing, previously graded, NSLHD CFH CNS2 position description. [**Attachment A**]

### 3.2 Rationale for creating a new 0.84FTE CYF CNC2 role

- A CNC2 role is needed to provide support and clinical leadership for staff working with families in CFH secondary-level services
- This position will also assist with conducting primary nursing psychosocial and health assessments for primary school age children living in out-of-home care.
- Given the proposed scope of the CNC2 role, the nurse employed in this position will need to have advanced practice skills in working with vulnerable families with children 0 to 5-years-of-age as well as paediatric nursing knowledge and skills.
- The draft CNC2 position description is attached for consultation. [**Attachment B**]

### 3.3CFH Secondary-Level Service Model of Care Overview

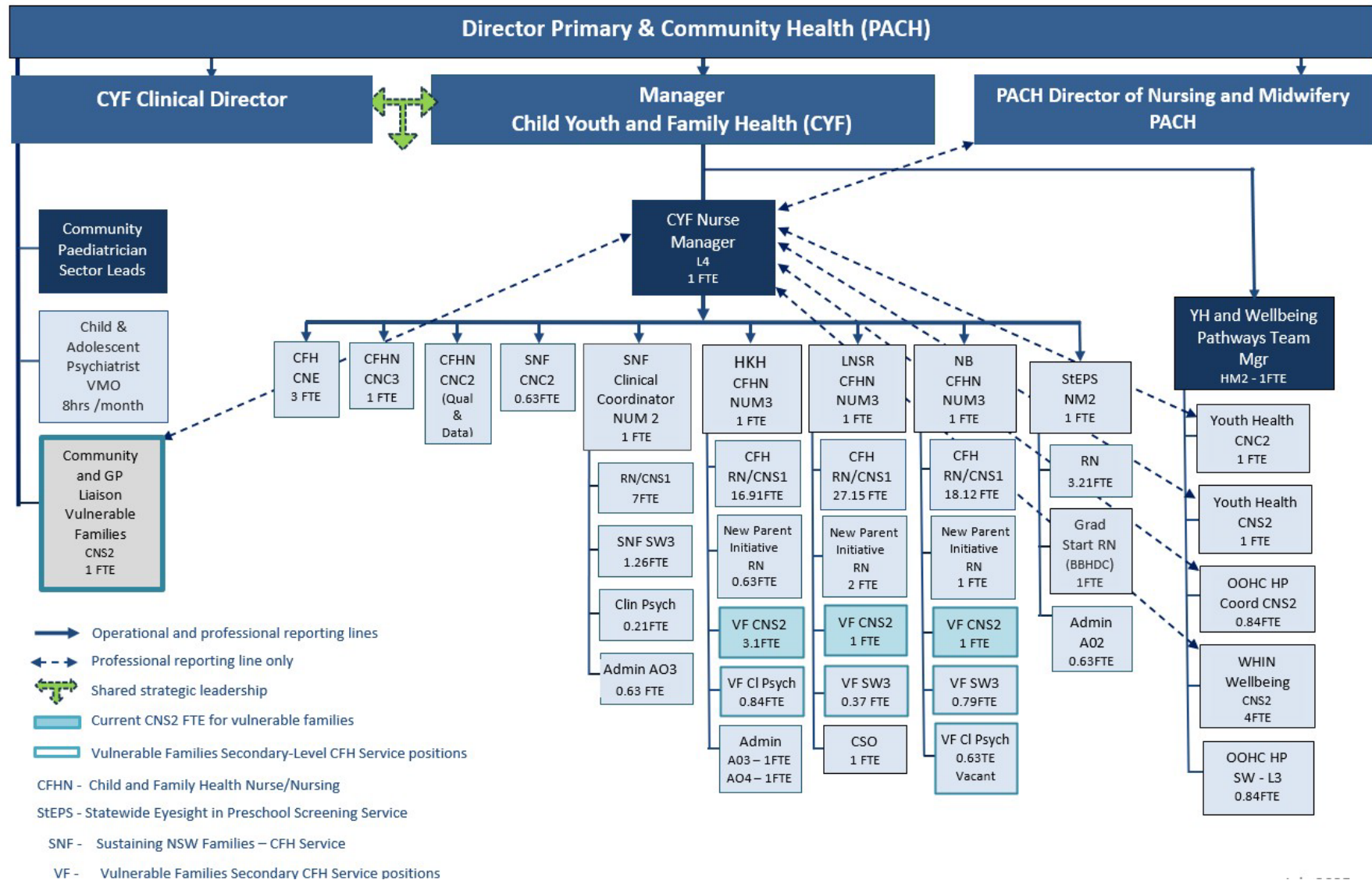
The proposed secondary-level service model of care aligns with evidence-based CFH nursing interventions, which have been shown to optimise early parenting confidence, parent-child relationships, child development and healthcare outcomes for both children and their parents. The model of care offers extended home-visiting and centre-based appointments.

Target client groups for the CFH secondary level service:

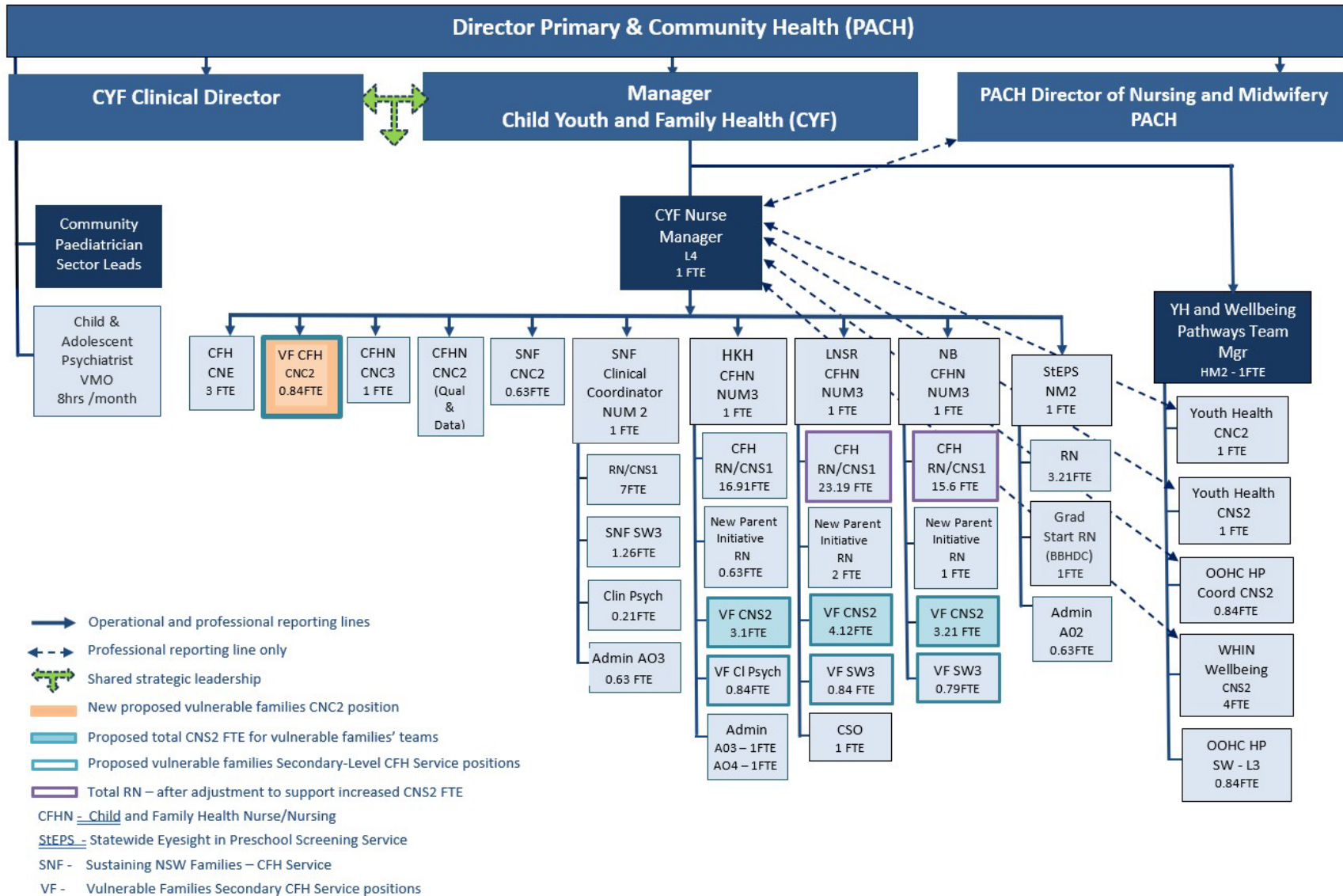
- Families, with children from newborn to 5-years-old, who are experiencing Level 3 and complex Level 2 vulnerabilities as defined under the NSW Safe Start Policy Guidelines.
- Children living in out-of-home care, and their carers
- The proposed CYFH CNC2 will assist with providing health and development checks for any Primary school aged child living in out-of-home care.

In the new standardised secondary-level service model each FTE CNS2 would have an active caseload of 20 to 25 families. This workload aligns with the Sustaining NSW Families Home-visiting Program guidelines.

**4 Current NSLHD Child Youth and Family Primary and Community Health Organisational Structure**



5 Proposed CYF Structure – with additional CFH Secondary level Program Positions



## 5.1 Proposed CFH Nursing Sector-based Team Skill-Mix Profile changes

Table 1 - Proposed CFH Nurse – Sector-based Team Profile and Skill-mix Changes

	Current Team Profile		Proposed Team Profile	
	Pos No.	FTE	FTE	Net FTE Change
<b>Lower North Shore Ryde (LNSR) Sector Team (excl NUM)</b>				
RN8 (incl CNS1)	64291	27.15	23.19	↓3.69
CNS2 (Secondary Service)	502856	1.00	4.42*	↑3.42
Total Nursing FTE (cc257532)		28.15	27.52	↓0.63
<b>Total CFH Nursing FTE - LNSR Sector</b>		<b>30.15</b>	<b>29.52</b>	
<b>Northern Beaches (NB) Sector Team (excl NUM)</b>				
RN8 (incl CNS1)	549281	18.12	15.60	↓ 2.43
CNS2 (Secondary Service)	61084	1.00	3.10*	↑ 2.10
Total Nursing FTE (cc261968)		19.12	18.79	↓ 0.33
<b>Total CFH Nursing - NB Sector FTE</b>		<b>21.12</b>	<b>20.79</b>	
<b>Hornsby Ku-ring-gai (HKH) Sector Team (excl NUM)</b> (No change proposed for this sector)				
RN8 (incl CNS1)	549280	16.91	16.91	-
CNS2 (Secondary Service)	60751	3.10	3.10*	-
Total Nursing FTE (cc260460)		20.01	20.01	-
<b>Total CFH Nursing - HKH Sector FTE</b>		<b>20.64</b>	<b>20.64</b>	

## 5.2 Proposed New Structure Impact on Services and Function

No substantial negative service impacts have been identified. Extensive service design, planning, and structured implementation of services will occur, to ensure that the new secondary-level services complement and integrate with existing CYF and NSLHD services to support client continuity of care.

The proposed additional Child and Family Health CNS2 roles align with the proposed District-wide secondary-level service model of care, which aims to provide more support and continuity of care for families needing help with significant health and psychosocial challenges from mid-pregnancy until their child is 5 years old, or until they start school.

## 5.3 CFH Secondary-Level Role Change Impacts and New Position Descriptions

It is proposed that a new CNC2 position, listed in the table 2 on the next page, is established and integrated within the NSLHD Child and Family Health secondary-level service. The proposal seeks to replace a vacant 1FTE Community and GP Liaison CNS2 role with the new 0.84FTE Vulnerable Children and Families CNC2 position. The proposed 0.21FTE reduction is proposed to ensure cost neutrality. The proposed CNC2 PD is attached to this consultation paper for review. **(Attachment B)**

**Table 2 – Proposed new positions with a new position description and reporting line**

New Position	Grade	Recruitable FTE	Reports Operationally to	New Position description Yes/No	Comments
CYFH Vulnerable Children and Families CNC (cc 253582)	CNC2	0.84	CYFH Nurse Manager 4	Yes (attached)	CNC2 role to replace vacant, 1 FTE Community & GP Liaison CNS2
*The proposed CYF CNC2 will report to the CYF Nurse Manager in line with other CYF CNC roles.					

### 5.4 New Structure Impact on Current Permanent Employees

No current employees will be significantly impacted by the proposed team skill-mix changes. It is proposed that only currently vacant Child and Family Health Registered Nurse 6.12 FTE roles are realigned to create the proposed 5.52 FTE CNS2 roles.

The table below lists the current CYF Nurse Unit and Nurse Manager positions with a proposed minor change in the total nursing FTE reporting to their role to support increase in CNS2 roles.

**Table 3 - Permanent positions with minor impact**

Position Name	FTE	Current grading	Position No.	Reporting Proposed Change
NSLHD CYF Nurse Manager (CYF NM)	1.0	NM4	765488	<b>Direct nursing reports proposed increase of 0.84 FTE</b> <ul style="list-style-type: none"> <li>11.63 FTE current total direct reports</li> <li>CNC2 0.84FTE (Proposed addition)</li> <li>12.47 FTE proposed total direct reports</li> </ul>
CFH NUM Lower North Shore Ryde	1.0	NUM3	64287	<b>Direct nursing reports proposed decrease of 0.63 FTE</b> <ul style="list-style-type: none"> <li>RNs (including CNS1) 27.1FTE to 23.19FTE</li> <li>CNS2 1.00 FTE to 4.42 FTE</li> <li>30.15 total FTE current total direct reports</li> <li>29.52 total FTE proposed direct reports</li> </ul>
CFH NUM Northern Beaches	1.0	NUM3	61085	<b>Direct nursing reports proposed decrease of 0.33 FTE</b> <ul style="list-style-type: none"> <li>RNs (including CNS1) 18.12 FTE to 15.60 FTE</li> <li>CNS2 1.00 FTE to 3.21 FTE</li> <li>21.12 FTE (Current total nurse reports)</li> <li>20.79 FTE (proposed new structure)</li> </ul>
NSLHD CYF Clinical Director	0.5	Sen SS	636231	<b>Direct reporting staff proposed decrease of 1.0 FTE</b> <ul style="list-style-type: none"> <li>CNS2 1.0 FTE – regrade to CNC2 (0.84 FTE) and reporting line changed to CYFH NM</li> <li>4.8 FTE current permanent direct reports</li> <li>3.8 FTE Staff Specialists (proposed structure)</li> </ul>

Position Name	FTE	Current grading	Position No.	Reporting Proposed Change
Child and Family Health Clinical Nurse Consultant	1FTE	CNC3		<p><b>Scope of role change</b></p> <ul style="list-style-type: none"> <li>Responsibility for GP liaison nurse functions previously undertaken by the CFH GP Liaison CNS2 role, will transfer to the CFH CNC3 role. This is a more appropriate alignment of external health provider liaison work for a district-wide CNC3 role.</li> </ul>

## 6 Consultation

### 6.1 Consultation, Notification to Employees & Industrial Associations

- The CYFH Nurse Manager and CFH Nursing Unit Managers have been involved in discussions about the proposed structure, reporting lines, and grading changes, and they are all supportive of the proposed new structure and positions.
- The CFH Nursing teams are aware that NSLHD has been reviewing its CFH Secondary Level Service model of care to standardise the Model of Care and provide equity across the 3 sectors.
- Any impacted staff, and the Health Services Union, NSW Nurses and Midwives Association, and the Australian Salaried Medical Officers Federation will receive a copy of this consultation paper, including the current and proposed organisational charts and new CYF CNC2 position description.
- A formal three-week consultation period will be conducted with staff and unions.
- Any issues that emerge during the formal consultation period will be given genuine consideration, with a view to reaching a collaborative resolution where possible.
- All current staff employed in the secondary-level services will be afforded the opportunity to provide feedback on the proposal and to meet with senior managers one-on-one or in small groups should they seek to do so.
- Townhall style consultation meetings are planned with the CFH Nursing and Allied Health Teams. From those meetings, some frequently asked questions/answers will be developed and circulated for information to all interested staff.
- Once the final staffing profiles and organisational structures are endorsed the CYF Leadership Team will work together with the nurses and Family Care Counsellors (Social workers/Clinical Psychologist) to further refine the Secondary-level service model of care.

## 7 Proposed Restructure Implementation

- Once approved, the proposed staffing changes will be implemented in a phased approach.
- Following the completion of the restructure consultations, any existing e-lists for CFHN CNS2 roles will be reviewed in the first instance to identify potential candidates. The balance of the vacant CNS2 FTE will then be advertised.
- The proposed new CNC2 positions will be created, and recruitment will then commence.
- Recruitment to the new CNS2 roles may be undertaken in two phases, to minimise potential impacts of numerous nurses transferring simultaneously from the existing universal CFH service to the secondary-level services.
- Recruitment to the proposed additional part-time Social Work role in the Lower North Shore Ryde Sector, will be undertaken following the first round of recruitment to the new CNS2 roles.

The table below indicates the key actions to occur and an indicative timeline

Action	When
Inform staff & unions via correspondence of formal consultation period commencement	January 2026
Commence Staff Consultation Meetings	January 2026
Staged recruitment commencement	Commencing late February 2026
Additional training organised for staff working in the secondary services	Through-out 2026

## 8 Post-restructure Review

If approved, the restructuring will be implemented with an initial review against the objectives outlined in this proposal at six and twelve months following the implementation of the new reporting lines and governance structure.

## 9 Attachments

The following Position Descriptions are attached

- A. Existing CFH Clinical Nurse Specialist Grade 2 (Secondary Level Services) - for CFH CNS2 role detail
- B. Draft CYFH Clinical Nurse Consultant 2 - grading confirmation