

MHiPS and Thriving Kids

Thriving Kids establishes a nationally unified model of early supports for children aged 0-8 years with developmental delay and/or autism who have low to moderate support needs. These supports are delivered outside the National Disability Insurance Scheme (NDIS) and are jointly funded by the Commonwealth and state and territory governments.

Mental Health in Primary Schools (MHiPS) represents an existing, scalable platform that state and territory governments can leverage to support delivery of Thriving Kids. Embedded within primary schools, MHiPS aligns strongly with Thriving Kids service principles by supporting children and families in everyday environments, strengthening early identification and navigation pathways for timely connection to supports, enhancing workforce capability, and delivering child-centred, accessible, inclusive and strengths-based support without requiring a diagnosis.

This paper outlines how MHiPS can be a core state-based, nationally aligned delivery mechanism for Thriving Kids, enabling states and territories to accelerate implementation, leverage existing infrastructure, maximise value for investment, and reduce downstream reliance on more intensive systems such as the NDIS.

Thriving Kids and the role of state and territory governments

Thriving Kids responds to longstanding evidence that children with low to moderate developmental support needs are often identified late, face fragmented service pathways, and have historically been funnelled into the NDIS due to gaps in mainstream and foundational supports. Under the agreed national approach, states and territories are expected to:

- co-fund Thriving Kids with the Commonwealth
- scale and align existing mainstream and community-based services
- strengthen early identification and establish ‘no wrong door’ access
- embed supports in everyday settings, including schools
- build workforce capability and system integration
- deliver culturally safe, evidence-informed and outcomes-focused supports.

Meeting these expectations requires delivery platforms that are already embedded in communities, trusted by families, and capable of responding early to emerging need.

Thriving Kids and schools

Developmental delay and autism frequently present through mental health-like symptoms such as anxiety, emotional distress, behavioural dysregulation, or peer relationship problems. These presentations are often experienced by teachers as ‘challenging behaviours’ and can obscure underlying developmental differences if not understood through a developmental lens.

Outside the family, teachers are the most consistent adult in a child’s life, observing children for approximately 6 hours a day, 5 days a week, across most of the year. This places teachers in a uniquely strong position to notice emerging patterns of distress, behavioural change, overwhelm, or disengagement that may indicate developmental vulnerability.

Schools are therefore critical everyday settings for early identification, family engagement, and connection to supports. When appropriately supported, schools can act as effective access points for Thriving Kids.

Overview: Mental Health in Primary Schools (MHIPS)

Mental Health in Primary Schools (MHIPS) was developed in partnership by the Centre for Community Child Health, Murdoch Children’s Research Institute and the Faculty of Education, University of Melbourne. It is an established initiative that embeds a Mental Health and Wellbeing Leader (MHWL) role in primary school settings, supported by structured professional learning and system-level guidance.

The role of the MHWL includes:

- building teacher capacity to support student social, emotional and behavioural wellbeing
- supporting teachers to recognise early signs of need and respond appropriately
- supporting implementation of evidence-based strategies and wellbeing supports
- embedding social and emotional learning approaches
- strengthening school-family engagement
- giving guidance to and supporting parents regarding their child’s mental health concerns
- strengthening care pathways, including connection to external services.

MHIPS is already operational at scale and provides a ready platform for delivering key Thriving Kids functions within primary school settings.

Alignment with the Thriving Kids model

MHiPS directly supports the following key elements of the Thriving Kids model:

1. Early identification and connection to supports, through enhanced teacher capability and school-based observation.

91% of staff report increased teacher confidence in supporting student mental health and wellbeing.

Staff in MHiPS schools also demonstrate greater recognition of concerns and stronger school-based support practices compared with non-MHiPS schools.

(2025 Statewide Survey, n=3,964)

‘Our teachers are really a lot more confident with recognising when there might just be a slight change in wellbeing with a student ...

...but then they’ve also been able to recognise when a student needs some further support.’

- Assistant Principal

2. Information on child development, through strengthening teacher understanding of developmental presentations and pathways.

68% of teachers are confident in recognising risk and protective factors that influence **positive mental health**.

56% of teachers are confident distinguishing **emerging mental health concerns** from typical developmental behaviours.

(2025 staff data, n=4,314)

‘It’s definitely made a huge difference; I think it’s just changed some staff’s perspective in that it’s not just being naughty or it’s not just refusing to do work. If you look at a student as a whole and the risk factors, there’s other things that might be contributing to behaviour. And you know, if we can understand that, then we can better support.’

- MHWL

3. Navigation of services, through supported care pathways and family engagement

Through MHiPS, MHWLs actively support navigation of services via structured care pathways and family engagement.

92% liaise with **external providers**

96% work with **families**

94% **collect data** to further understand student wellbeing concerns

(2025 MHWL data, n=684)

‘I’ve been able to make the connections with external services and then bring us all together as a team...we were working closely side by side and I was in regular weekly conversations with them.’

- MHWL

4. Referrals, through facilitation of timely and appropriate connections to community, health and allied supports.

86% of MHWLs report **improved referral quality** and appropriateness, including earlier identification and fewer crisis-driven cases.

87% coordinate referrals to **school-based supports**.

85% coordinate referrals to **external community and health services**.

(2025 MHWL data, n=696)

‘I realised we didn't have very clear internal referral pathways and I found one of the [MHiPS professional learning] modules really helpful in setting us up for that.’

- MHWL

5. Data collection, to monitor and evaluate effects on workforce capability and child outcomes.

MHiPS supports MHWLs within schools to collect and use data as part of their role, including tracking referrals.

67% of MHWLs conduct a **needs assessment** to understand their school's mental health and wellbeing needs.

84% of MHWLs identify **priority areas** based on these needs to inform their practice.

(2025 MHWL data, n=792)

‘Through my MHWL role I have a look at the data, especially the Attitudes to School Survey data, and see how that links in, and get some feedback on what's working.’

- MHWL

Through these functions, MHiPS operationalises Thriving Kids service principles in a way that is embedded, accessible and non-stigmatising for children and families.

Support for teachers

Numerous submissions to Thriving Kids raised concerns about the possible impact on workforces already facing workload pressures and burnout. MHiPS specifically aims to increase the capacity of schools in order to support teachers without increasing workload or burden.

94% of teachers felt supported by their MHWL.

(Year 2 MHiPS implementation, n=112)

93% of teachers felt more confident to support student mental health and wellbeing.

(Year 3 MHiPS implementation, n=365)

‘There's somebody specific, somebody knowledgeable, that teachers can go to for help that will take some of that load and help them navigate what the best thing to do is. Teachers' workloads are enormous, and I think they see that somebody's actually putting some resources towards trying to relieve some of that load, which is good.’

- Classroom teacher

Readiness, value and system impact

MHiPS has demonstrated effectiveness in strengthening early identification, building workforce capability, improving school-family engagement, and supporting timely connection to external services.

As an established initiative with existing governance, workforce, and professional learning infrastructure, MHiPS offers a low-risk, high-readiness mechanism for states and territories to meet Thriving Kids objectives within primary school settings.

By leveraging MHiPS, governments can accelerate Thriving Kids implementation, maximise return on existing investment, and reduce reliance on more intensive downstream systems, while ensuring children receive the right support, in the right place, at the right time.