



Royal Far West

Select Committee on Remote, Rural and Regional Health

Supplementary question:

1. *Your submission highlights proposed reviews of funding models in NSW, in response to the recommendations of the upper house inquiry*
 - a. *Have you seen any improvements in funding for services for children and related services, like maternity care and obstetrics, or paediatric developmental programs?*

Answer:

Royal Far West (RFW) delivers developmental, mental health and disability services to country children aged 0-12, and we are therefore unable to comment on maternity and obstetric services.

In response to your question about paediatric developmental programs, we make the following remarks:

- **Brighter Beginnings**

In 2022, RFW congratulated the NSW Government for bringing the Departments of Education, Health, Communities and Justice, Customer Service, Regional NSW, Multicultural NSW, Aboriginal Affairs, and Premier and Cabinet together to drive transformational change in early childhood development with the announcement of Brighter Beginnings and broader early learning reform.

Screening for developmental vulnerabilities in pre-school and assisting with early learning and transition to school in rural and remote communities will give children the best chance in life and we have advocated for this for many years.

For 10 years, RFW conducted our own screening program – the Health Kids Bus Stop – which screened 4,188 NSW preschool aged children; conducted 69 bus stops clinics in 426 communities; and completed 17,733 assessments. 80% of those children required a referral to a local service or our own developmental assessment and diagnosis service. We concluded this service with the announcement of Brighter Beginnings.

Unfortunately, Brighter Beginnings has been slow to commence in rural and remote communities, and we have heard from partners in Bourke that full developmental screening will not be made available in Western LHD in 2024 and when it is available one child and family nurse will screen the 3000 children in the district.

The Brighter Beginnings reforms have the potential to change the life trajectory of some of NSW's most disadvantaged young people through access to early childhood education and early intervention, but this is contingent on the delivery of the reforms as announced.

- **Connected Beginnings**

Co-funded by the Commonwealth Department of Education and Department Health and Aged Care, this program aims to increase Aboriginal and Torres Strait Islander children's and families' engagement with health and early childhood education and care. It improves access to existing early childhood, maternal and child health, and family support services so children are safe, healthy and ready to thrive at school by the age of five.

Connected Beginnings supports 40 sites across every state and territory in Australia. Sites in NSW rural and remote areas including:

- Taree - established in 2019
- Bourke - established in 2020
- Wagga Wagga - established in 2022
- Broken Hill - established in 2023

In 2021, the Australian Government committed \$81.8 million to expand the program to 50 sites nationally by 2025.

- **Paediatrician and allied health access**

As outlined in our original submission, access to paediatric services for developmental concerns is an ongoing and worsening crisis for many regional communities, with waitlists of up to five years

Recruitment and retention of allied health staff, who are critical in addressing developmental health, also remains a critical issue in rural and remote NSW. Allied health practitioners working in rural and remote areas have populations spread over vast geographical areas, serve a wide range of clients and clinical presentations, are often isolated and typically, are not paediatric specialists. The serious shortage of allied health professionals in country NSW, especially psychologists, along with a lack of paediatric and diagnostic services is creating exceptionally long waiting lists.

However, there are some localised examples where successful recruitment has had a huge impact on waitlists and improved access dramatically. For example, Southern LHD and Bega Hospital ran a concerted campaign to recruit paediatricians to Bega. The campaign included videos about the South Coast lifestyle, as well as the allied health and nursing support that was available within the hospital. A few years ago, Bega was renowned for having limited paediatric outpatient services available for families and waitlists of hundreds of families. This situation is reportedly improving thanks to the successful recruitment campaign.

- **Other Services**

There are several localised examples of recently developed services that are supporting children with disabilities and development vulnerabilities including but not limited to:

- *Specialised Intellectual Disability Health Service (SIDHT)*

There are six teams that operate around the state, who provide care recommendations and short-term support once a child is diagnosed with an intellectual disability. The hub and spoke models with metro LHDs supporting regional LHDs seems to be working well.

- *ELVER program:*

The Elver Program is an Intensive Support Services that works with out of home care children (age 6-17) affected by chronic trauma. It is a South Western Sydney LHD and Department of Communities and Justice partnership program. The number of regional children able to access this program is quite low.

- **Future improvements:**

Post the 2019 Henry Review of health services for children, young people and families within the NSW Health system, the scoping review of Developmental Services is in progress. RFW has been pleased to contribute to this work, which will guide how developmental assessment services across NSW should develop.

- **Final comments:**

One of the key challenges for NGOs operating in the paediatric development and youth mental health space is that it falls into the intersecting responsibilities of multiple state and federal agencies. RFW currently receives grants/block funding or sessional funding from: NSW Health, NSW Department of Education, NSW Department of Communities and Justice, Department of Regional NSW, Federal Department of Health, Federal Department of Industry, Science, Energy and Resources, multiple Primary Health Networks, multiple Catholic Dioceses, individual schools, Medicare, NDIS, IPTAAS. It takes a well-resourced team to navigate this highly complex funding landscape, which can be overwhelming for families in crisis if there is no one who is able to directly support them as they seek assistance for their children.

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