



Clerk of the Legislative Assembly Committee on Community Services
6 Macquarie Street
Sydney NSW 2000
Email: communityservices@parliament.nsw.gov.au

Supplementary questions – Improving access to early childhood health and development checks – 18 November 2024

Question 1: *We have heard that four years old may be too late to identify developmental needs.¹ Should the age of Brighter Beginnings child health and development checks offered at early childhood services be brought forward?*

Offering the Brighter Beginnings health and development checks at age four (4) maximises uptake, given that the highest numbers of children are enrolled in preschool in the year before they commence school.

However, four (4) years of age is the final year of early childhood and leaves approximately one year between the time of the check and the time that the child commences school (five (5) years of age). As such, if issues are identified at age four (4) there is a limited opportunity to intervene and change developmental trajectories.

The window of opportunity to influence a child's development is further limited by barriers to accessing allied health professionals, paediatricians and diagnostic teams, due to referral pathways, long waitlists and often financial constraints.

The effectiveness of having early childhood educators identify developmental concerns in children younger than four (4) years of age is unknown, and no additional funding has been provided to formally support children identified through this screening process.

From the perspective of maximising a child's developmental potential, it would be beneficial to expand the Brighter Beginnings health and development checks to three (3) years of age. However, this can only be effective if uptake is maximised by implementing universal access to quality early childhood education for three-year-olds.

The Royal Australasian College of Physicians (RACP) has consistently advocated for governments to implement universal access to quality early childhood education and care and subsidised preschool places for all children from three (3) years of age.²

Health and development checks would also be more beneficial if 'blue book' checks are consistently completed, and if rapid access to appropriate support is made available, which requires additional investment in paediatricians, allied health professionals and diagnostic teams.

¹ [Submission 51](#), Royal Far West, p. 3.

² For further information, refer to: RACP, Early Childhood: The Importance of the Early Years Position Statement, May 2019, [early-childhood-importance-of-early-years-position-statement.pdf](#), RACP, Submission to the Productivity Commission: Early Childhood Education and Care, May 2023, <https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission-to-the-productivity-commission-early-childhood-education-and-care.pdf>, RACP, Submission on the draft Thrive by Five Early Childhood Guarantee Bill 2024, August 2024, <https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission-on-the-draft-thrive-by-five-early-childhood-guarantee-bill-2024.pdf> and RACP, Kids Catch Up Campaign, 2022, kidscatchup.org.au.



RACP
Specialists. Together

EDUCATE ADVOCATE INNOVATE

Clerk of the Legislative Assembly Committee on Community Services
6 Macquarie Street
Sydney NSW 2000
Email: communityservices@parliament.nsw.gov.au

Supplementary questions – Improving access to early childhood health and development checks – 18 November 2024

Question 2: *Are there any risks with making early childhood health and development checks mandatory?*

Making early childhood health and development checks mandatory, without informed parental consent, could risk disengaging families and delaying a child's access to supports. Developmental delay and/or childhood disability can be distressing and confronting for parents and families.

The best approach is to work cooperatively with families and provide support for parents and carers to understand the developmental concerns, the implications, and how to best support their child. Families should be supported with education and information to understand the importance of early identification and intervention, but not forced to intervene in their child's development.

Targeted and culturally sensitive strategies should be prioritised to maximise uptake of health and development checks, and ensure families receive education and appropriate information resources (such as translated materials, Easy Read, etc) about the importance of early identification and intervention.

This is particularly important for First Nations communities, culturally and linguistically diverse communities, rural and regional communities, families living with disadvantage and more. These strategies should aim to combat the barriers that limit the ability of families to access all their child's health and development checks and to seek appropriate support for any concerns.¹

¹ Please refer to the [RACP Submission](#) to the NSW Inquiry into Improving Access to Early Childhood Health and Development Checks for further detail.