



Maternal, Child & Family  
Health Nurses Australia

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# MATERNAL CHILD AND FAMILY HEALTH NURSES AUSTRALIA (MCAFHNA) SUBMISSION

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Inquiry into improving access to early childhood health and development  
checks (NSW Health)

**Supplementary questions – Monday 18 November 2024**

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

Child growth and development checks are conducted by child and family health nurses as per the NSW Child Health Record book which includes 1-4 weeks, 6-8 weeks, 6 months, 12 months, 18 months, 2 year, 3 year and 4 year checks. Identification of a child's developmental needs or delay can be noted at any point along this timeline by a child and family health nurse and then a referral is made to an early intervention service for further support and assessment. The earlier a problem is detected and addressed, then there is the potential for a better outcome for the child's development. If children are not accessing Child and Family health services but are accessing early childhood services such as daycare this would be an ideal place to do developmental assessments earlier with parental consent and utilise the known carer in the daycare environment to provide additional details about the child's progress. It would be important to consider that child and family health nurses have the necessary skills and knowledge to conduct these assessments and provide the necessary support and guidance to parents and carers. Ideally, collaboration between local health child and family health services and early childhood services would enable these health checks to be conducted as per the child health book to support the development of children.

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

Whilst we are not aware of any risk to making early childhood health and development checks mandatory, there would certainly be challenges. The benefit of making early childhood health and development checks mandatory would be that prevention and early intervention could occur and potentially improve outcomes for child health and development. Currently, only the 4 year check is linked to Family Tax Benefit Part A. The questions from MCaFHNA about mandating checks:

- How would parents be informed of the benefits of early childhood health and development checks so they would access services?
- Which government department would be responsible for overseeing this mandatory process?
- Would the early childhood health and development checks be linked to Centrelink payments?
- Would there be additional capacity created in the child and family health nursing workforce to ensure these checks are completed?
- Would there be additional capacity created in referral and assessment services such as developmental paediatricians or child psychologists if required?

**3. Can you elaborate on the three separate community health electronic records referred to during your evidence and their purpose?**

Currently, I am aware of CHIME, CHOC and eMR that are used in community health medical record documentation. The decision for the choice of the digital medical record is made by individual health districts. The purpose of these records is to document occasions of service with clients that provide data related to NSW Health KPIs and specific health assessments that are appropriate for each client. If clients move health districts to access different community health services within NSW their records may not be visible to the new health service, and this means that continuity of health care is not provided. The NSW Health Ministry would have current information for any plans to create statewide digital health records.