

**Submission
No 20**

IMPROVING ACCESS TO EARLY CHILDHOOD HEALTH AND DEVELOPMENT CHECKS

Organisation: Australian College of Nursing

Date Received: 27 February 2024



Australian College of Nursing

INQUIRY INTO IMPROVING ACCESS TO EARLY CHILDHOOD HEALTH AND DEVELOPMENT CHECKS

Submission to the NSW Legislative Assembly Committee on
Community Services

Contents

Executive Summary	2
Summary of ACN's recommendations.....	3
Terms of Reference	4
1. Changes needed to address gaps in outcomes for vulnerable children, including those in rural and remote communities, Aboriginal communities, and culturally and linguistically diverse communities.....	4
Recommendations.....	7
2. Recruitment and retention of health professionals to address workforce shortages	7
Recommendations.....	8
3. Funding for early intervention programs and screening to ensure children are given support for developmental issues, including telehealth and other models	9
Recommendations.....	12
About ACN.....	12

Executive Summary

The Australian College of Nursing (ACN) thanks the Committee on Community Services for the opportunity to provide feedback on the New South Wales **Inquiry into improving access to early childhood health and development checks**.

ACN strongly believes that person-centred care is a critical component of a functional healthcare system.¹ As the largest healthcare profession in Australia,² nurses have a unique insight into the care experience of people in Australia and the healthcare workforce. ACN advocate for equitable access to health care for all members of the Australian community.

Nurses play an essential role in NSW's childhood health and screening programs, making substantial contributions to the overall wellbeing and early detection of health issues in children. As the single largest group of healthcare professionals, nurses are well-positioned to play a major role in monitoring the health and wellbeing of children in metropolitan, regional and rural New South Wales, providing accessible services for children and families across the State.

However, the shortage of nurses in Australia is impacting the services they can provide. ACN recognises that many registered nurses in Australia plan to leave their current roles within the next 12 months, potentially leaving 20,000 to 40,000 nursing positions unfilled.³ Retaining nurses at all stages of their careers, from university to the workplace, is a complex issue with various influencing factors.

Workforce shortages impact retention and contribute to ongoing retention issues. Burnout during the pandemic caused many to leave the profession; the resulting shortages post-COVID continue to influence nurses' decisions to leave.⁴ There is a need to break the cycle of nurses leaving the profession. Institutions must acknowledge they have a role in making a difference, developing policies that will make the workplace more attractive with improved working environments, better pay, and well-defined career opportunities.⁵

A nationwide review is underway to ensure that all healthcare professionals can work to the full extent of their scope of practice. The Unleashing the Potential of our Health Workforce - Scope of Practice Review⁶ focuses on all health professions. In terms of nursing, the review will address issues that cause frustration and dissatisfaction within the nursing workforce. The review will benefit the entire healthcare workforce, which will be positively impacted by the review's outcomes, creating a much-improved work environment. The ability to work to full scope of practice will lead to more effective and efficient services, improved health outcomes, ensure shorter wait times for consumers, and greater job satisfaction for health practitioners, leading to better staff retention. In turn, having

¹ Australian College of Nursing (ACN). (2019). Person-Centred Care, ACN, Canberra.

² Australian Institute of Health and Welfare (AIHW). (2022). Health Workforce, AIHW, Australian Government.

³ Berlin, G., Bruce, D., Lapointe, M., Luthra, K., & Maud, M. (2022, September 23). Should I stay, or should I go? Australia's nurse retention dilemma. McKinsey & Company. <https://www.mckinsey.com/industries/healthcare/our-insights/should-i-stay-or-should-i-go-australias-nurseretention-dilemma#/>

⁴ McGuinness, S. L., Johnson, J., Eades, O., Cameron, P. A., Forbes, A., Fisher, J., ... & Leder, K. (2022). Mental health outcomes in Australian healthcare and aged-care workers during the second year of the COVID-19 pandemic. *International Journal of Environmental Research and Public Health*, 19(9), 4951.

⁵ Buchan, J., Catton, H., & Shaffer, F. (2022). Sustain and Retain in 2022 and Beyond. *Int. Council. Nurses*, 71, 1- 71.

⁶ Department of Health and Aged Care 2023. [Unleashing the Potential of our Health Workforce -Scope of Practice Review](#)

nurses who are satisfied with their jobs and able to work to the full capacity of their training will improve the retention of experienced, valuable nurses.

Summary of ACN's recommendations

ACN recommends that the NSW Government:

- Encourages migrant nurses to rural and remote communities in NSW.
- Supports building healthcare professional services that are culturally appropriate to First Nations Communities.
- Supports the creation of a mobile health service for community housing residents and homeless people.
- Works with nursing peak bodies on recruitment, training, and retention strategies for nurses working in Indigenous health in NSW.
- Supports a drive to recruit more young people into the nursing profession.
- Funds opportunities for Nurse Practitioners in NSW.
- Plans for environments that welcome and support nurses.
- Supports Maternal, Child and Family Health Nursing (MCFHN) as a nursing specialisation through a range of strategies, including supporting registered nurses with scholarships for postgraduate qualifications in MCFHN.
- Supports a nurse-led leadership program for early-career nurses interested in a career in MCFHN.
- Supports Local Health Districts to establish a pathway and support MCFHN to advance their leadership skills throughout their career.
- Supports the provision of clinical supervision for all MCFHNs.
- Develops and implements a Statewide mentoring program for nurses.
- Develops an education and training framework for nurses that supports and funds their annual requirement of continuous practice development.
- Increases the number of school nurses in NSW schools so that every school-aged child can access a qualified registered nurse. This will address students' diverse health needs and contribute to a more supportive and inclusive learning environment.
- Ensures that the upcoming National School Reform Agreement in 2025 addresses the need to strengthen partnerships between schools, local health networks, and primary health networks, focusing on recognising and expanding the role of school nurses.
- Actively supports the Commonwealth Government's Australian Universities Accord Final Report's recommendation that students on mandatory work placements should be paid for their work.
- Increases funding to Local Health Districts to deliver multi-disciplinary and evidence-based programs targeted at reducing childhood obesity.
- Fully funds the recommendations of the reviews of the StEPS and SWIS-H screening programs to address identified gaps and ensure comprehensive follow-up.
- Works with the nursing profession, through their peak bodies, to strengthen recognition and support for the diverse roles of nurses in preventing and responding to child abuse and neglect.

Terms of Reference

In undertaking the inquiry, ACN considered the following terms of reference:

1. Changes needed to address gaps in outcomes for vulnerable children, including those in rural and remote communities, Aboriginal communities, and culturally and linguistically diverse communities.
2. Recruitment and retention of health professionals to address workforce shortages.
3. Funding for early intervention programs and screening to ensure children are given support for developmental issues, including telehealth and other models.

1. Changes needed to address gaps in outcomes for vulnerable children, including those in rural and remote communities, Aboriginal communities, and culturally and linguistically diverse communities

ACN acknowledges there are gaps in the outcomes for vulnerable children, particularly for those in rural and remote communities, Aboriginal communities and in culturally and linguistically diverse communities.

Rural and remote communities are at a disadvantage; lack of healthcare workers in rural settings, lack of healthcare facilities, distances involved in visiting clinics of any kind, and cost involved in travelling to healthcare services all mean that access to healthcare services cannot be conducted in a timely or cost-effective manner.

There is a shortage of healthcare workers, including nurses, in rural and remote Australian regions. Increasing the number of nurses in rural and remote areas can be an important step towards monitoring and managing the health and wellbeing of children in remote and rural Australia. ACN supports all measures to increase the number of people entering nursing but recognises that there will continue to be shortfalls.

Children living in rural and remote areas of NSW face specific health challenges due to a range of factors, including lower socioeconomic status, social isolation, and limited access to services⁷. Nurses are often the only health professionals locally accessible for families in remote communities and are crucial for providing health services in these complex and isolated settings.

Evidence for the impact of innovative nurse-led and person-centred initiatives in rural and regional areas⁸ demonstrates the potential for nurses to play a more significant role in meeting the needs of rural and remote communities in NSW. ACN believes that increasing the number of rural and remote nurses will improve the health outcomes of all people in the community, including children.

⁷ AIHW 2023. [Rural and remote health](#)

⁸ Beks, H., Clayden, S., Shee, A.W., Binder, M.J., O’Keeffe, S. and Versace, V.L., 2023. Evaluated nurse-led models of care implemented in regional, rural, and remote Australia: A scoping review. *Collegian*.

The most recent report published predicting nursing needs⁹ into 2030 suggests that there will be a shortfall of around 125,000 nurses by 2030. The paper was published in 2014, so the prediction might be considered conservative.

ACN supports a robust migration program to ensure sufficient nurses to manage our current and future needs. ACN has long recognised the vital role migration plays in strengthening the Australian nursing workforce to meet the growing healthcare needs of our community.¹⁰ Australia has historically attracted Internationally Qualified Nurses and Midwives (IQNMs) to support workforce sustainability. Prior to the COVID-19 pandemic, many nurses migrated to Australia through a range of temporary and permanent visas. In 2021, almost 20 percent of nurses working in Australia received overseas qualifications, and nearly 40 percent were born overseas¹¹. IQNMs have played a particularly important role in rural and regional areas of Australia, where attracting and retaining skilled nurses can be difficult.

To improve the attraction and retention of IQNMs, Australia should prioritise ongoing integration pathways to support nurses settling into Australia and the local workforce, particularly in rural and regional areas. Recent research indicates that integration and retention are host countries' primary issues when recruiting IQNMs to supplement the domestic workforce.¹²

At the Health Workforce Roundtable in September 2022, ACN suggested that skilled migrants be linked with and supported by professional organisations and community groups in the State or Territory where they settle. Connecting migrants supports their integration into Australian society and culture, creating a 'sense of belonging and connecting with people who have a lived skilled migrant experience'.

Mechanisms to enhance integration and retention include dedicated mental health and wellbeing pathways tailored to IQNMs; pastoral care and mentoring resources that are nurse-led and designed; avenues for connecting nurses from similar backgrounds; English-language and culture courses; possibilities for partner employment, a mentoring or buddying system, as well as relocation services and information on local community opportunities.

ACN also proposed at the Health Workforce Roundtable that 'recent migrants be profiled to become mentors for the next generation of migrants working in the health sector'. Such programs should be designed and funded to encourage maximum uptake by being free of charge to successful IQNMs who fill a designated visa quota.

Finally, pathways to permanent residency should also be made available for any migrating family members of IQNMs. Partners of IQNMs or other family members must be included in the migration pathway, including taking opportunities to apply their skills and knowledge in the workforce.

⁹ Health Workforce Australia (2014) Australia's Future Health Workforce - Nurses

¹⁰ Parliamentary Inquiry into Migration, Pathway to Nation Building, 2023, Submission 90 [Submissions – Parliament of Australia \(aph.gov.au\)](https://aph.gov.au/submissions)

¹¹ Australian Government Department of Health and Aged Care Dashboard 2021, <https://hwd.health.gov.au/nrmw-dashboards/index.html>

¹² Zanjani, Ziaian, Ullrich & Fooladi 2021, Overseas qualified nurses' sociocultural adaptation into the Australian healthcare system: A cross-sectional study

These are all actions that NSW could take to encourage migrant nurses into their rural and remote communities and to ensure that their stay is embraced and encouraged, and communities have improved access to care.

First Nations communities may feel uncomfortable accessing health services they feel do not cater to their unique cultural needs or beliefs. Being told by a non-Indigenous person that their child is not developing in line with other children may be unacceptable and completely inappropriate. Ensuring that the First Nations Communities have access to culturally appropriate healthcare is a priority, allowing them to have a culturally appropriate health professional for all their care needs.

Addressing the care needs of First Nations People is critical, as a significant disparity exists in infant and child mortality rates between Aboriginal and Torres Strait Islanders and non-Indigenous Australians in all Australian states. Contributing factors to this gap include low birth weight, pre-term births, maternal health factors (such as nutrition during pregnancy, smoking, and alcohol use), socioeconomic status, and access to healthcare services.¹³

Nurses play an important role in addressing many of these factors, including access to quality medical care, including pre-natal and birthing services, as well as health promotion and education.

Throughout NSW, nurses work in community settings, including Aboriginal Medical Services and the Indigenous community-controlled health sector, to provide culturally safe health care and screening services to Indigenous children and their families.

Indigenous children also experience poorer outcomes in hospitals and other healthcare settings. A NSW study found that Indigenous children are almost twice as likely to die as non-Indigenous children in tertiary children's hospital networks¹⁴. Nurses can play a key role in caring for and advocating for Indigenous children in healthcare settings to help address this gap.

ACN supports the NSW Government's Aboriginal Nursing and Midwifery Strategy¹⁵, which supports Indigenous nurses and midwives within the NSW Health system. We recognise the importance of increasing the representation of Aboriginal and Torres Strait Islander nurses and midwives within NSW, enhancing career development prospects for Indigenous staff within the public health sector, and delivering culturally safe and competent nursing and midwifery services to Indigenous communities.

ACN undertakes a number of initiatives to support the role of nurses in Indigenous health through our First Nations Faculty,¹⁶ which is a space for Indigenous and non-Indigenous nurses who work within the specialty of Indigenous health to collectively come together to push Indigenous health agendas.

¹³ National Indigenous Health Agency n.d. Aboriginal and Torres Strait Islander Health Performance Framework ([1.20 Infant and child mortality - AIHW Indigenous HPF](#))

¹⁴ Singer, R., Zwi, K., & Menzies, R. (2019). Predictors of In-Hospital Mortality in Aboriginal Children Admitted to a Tertiary Paediatric Hospital. *International journal of environmental research and public health*, 16(11), 1893. <https://doi.org/10.3390/ijerph16111893>

¹⁵ NSW Health 2023 NSW Aboriginal Nursing and Midwifery Strategy ([Aboriginal Nursing and Midwifery Strategy \(nsw.gov.au\)](#))

¹⁶ Australian College of Nursing n.d. [First Nations](#)

For those people experiencing levels of disconnection from the community, including homelessness, taking health services to the street will improve health outcomes for some of the more disadvantaged communities in our cities. Services such as these are needed to monitor and care for the health and wellbeing of vulnerable young people. One such service, active in the Brisbane area, is OneBridge. CEO of OneBridge, Sonia Martin, MACN, is passionate about her mission to bridge the gap in healthcare and vulnerable communities. The OneBridge team delivers "healthcare directly to social housing residents, and we understand complex medical and mental health needs".¹⁷ This is a model NSW could adopt to support marginalised communities in the cities of NSW.

Recommendations

ACN recommends that the NSW Government:

- **Encourages migrant nurses to rural and remote communities in NSW.**
- **Supports building healthcare professional services that are culturally appropriate to First Nations Communities.**
- **Supports the creation of a mobile health service for community housing residents and homeless people.**
- **Works with nursing peak bodies on recruitment, training and retention strategies for nurses working in Indigenous health in NSW.**

2. Recruitment and retention of health professionals to address workforce shortages

ACN is advocating for a national recruitment drive to bring more nurses to the profession – similar to that developed to recruit more teachers. The plan would bring more nurses into the nursing pipeline in a few years after their educational programs are completed. One of the reasons trainee nurses leave their programs is the lack of financial support to complete their work placements. ACN is extremely pleased to hear that the Australian Universities Accord Final Report¹⁸ recommends that students should be funded to complete mandatory work placements. This recommendation will profoundly affect students' wellbeing undertaking their mandatory work placements. It should also mean that a higher percentage of students will graduate as nurses, able to add their numbers to the healthcare workforce, providing better services to all community members.

The number of Nurse Practitioners (NP) in Australia is relatively small, with around 2,700 recorded in 2023.¹⁹ Reasons for RNs not taking up the opportunity to become NPs include the cost of education, the small number of opportunities available for NPs, and restrictions on NPs working to their scope of practice.

Increasing the number of NPs nationwide will improve person-centred care by increasing access to care for all Australians. The Nurse Practitioner Workforce Plan²⁰ wants to offer financial incentives to

¹⁷ bhc 2024. [Grant to support health and wellbeing outcomes for vulnerable community housing residents.](#)

¹⁸ Australian Universities Accord Review Panel 2023, [Australian Universities Accord Final Report](#)

¹⁹ Nursing and Midwifery Board of Australia (2023) [Registrant Data](#)

²⁰ Department of Health and Aged Care (2023) [Nurse Practitioner Workforce Plan](#)

RNs to undertake their training, enable workplaces to plan how to engage and utilise NPs in their work environments, and ensure better access to medication prescribing and Australia's Medicare Benefits Schedule (MBS).

Growing the NP workforce is a vital opportunity for all Australians.

Working in rural and remote Australia can be daunting. In many communities, the nurse is the one healthcare worker available and is expected to fulfil various roles with support offered via technologies to connect the nurse with other healthcare workers when required. Ensuring technologies are available in remote and rural healthcare facilities is essential to provide the backup required for nurses to work effectively. Nurses working in this environment must be self-sufficient and have a broad range of skills, knowledge, and abilities. This shortage of healthcare workers in rural and remote Australia impacts doctors and nurses. Strategies are being designed to help encourage more healthcare workers to take up opportunities in this environment.

A range of strategies needs to be consistently adopted across all NSW healthcare settings to ensure an adequate supply of skilled nurses to deliver health and screening services to children, and address current equity and access gaps.

These include a role in mentoring and leadership programs, such as those offered by ACN,^{21 22} clinical supervision, and formal training programs in key specialty areas such as maternal, child, and family health nursing (MCFHN). MCFHNs play a crucial leadership and service provision role in delivering care to children and families in NSW. MCFHNs have a highly specialised skill set, obtained through practice as a registered nurse and completion of a postgraduate MCFHN qualification.

Currently, there are shortages in the MCFHN workforce across Australia, which can be addressed through greater support for transition to practice, succession planning, enhanced employment conditions, and adherence to State and Federal standards.²³

Supporting nurses to work at full scope of practice would strengthen their role in providing children's health and screening programs and enhance their capacity to advocate for vulnerable and at-risk populations.

ACN also highlights the need for ongoing leadership development to ensure the next generation of nursing leaders can partner with the NSW government to develop policies and programs that maximise the health and wellbeing of NSW children and drive system-wide change.

Recommendations

ACN recommends that the NSW Government:

- **Supports a drive to recruit more young people into the nursing profession.**
- **Funds opportunities for NPs in NSW.**
- **Plans for environments that welcome and support nurses.**

²¹ Australian College of Nursing (ACN). 2024. [Institute of Leadership](#)

²² Australian College of Nursing (ACN). 2024. [Career Mentoring](#)

²³ Australian College of Nursing (ACN). 2021, '[Maternal, Child and Family Health Nursing – Position Statement](#)', ACN, Canberra.

- Supports MCFHN as a nursing specialisation through a range of strategies, including supporting registered nurses with scholarships for postgraduate qualifications in MCFHN.
- Supports a nurse-led leadership program for early-career nurses interested in a career in MCFHN.
- Supports Local Health Districts to establish a pathway and support MCFHN to advance their leadership skills throughout their career.
- Support the provision of clinical supervision for all MCFHNs
- Develops and implements a Statewide mentoring program for nurses.
- Develops an education and training framework for nurses that supports and funds their annual requirement of continuous practice development (CPD).

3. Funding for early intervention programs and screening to ensure children are given support for developmental issues, including telehealth and other models

School nurses play an indispensable role in promoting children's and adolescents' physical and mental health. The responsibilities of school nurses vary²⁴ from acute health care for illnesses and injuries to managing chronic and complex health needs, such as administering medications for seizures, ADHD, or diabetes. They also play a pivotal role in coordinating health care for boarding school students and participating in school events. Beyond physical health, school nurses contribute significantly to health promotion and early interventions, including screening for speech, vision, or hearing problems and delivering health education on crucial topics. School nurses serve as a vital bridge between the health and education sectors²⁵ and act as advocates for children, addressing a range of issues such as family, sexual health, stress, or drug use problems. Their multifaceted approach contributes to facilitating access to health care, managing chronic diseases, coordinating care, and reducing absenteeism.

A recent Rapid Evidence Summary looked at the effectiveness of school-located nurse models on student health, education, and wellbeing, and found that having a school nurse and school nursing interventions improved health promotion, early intervention, and timely care for at-risk students. In particular, the Summary states that where nurses are an integral part of the school team and act as a central point of communication, there is greater capacity for understanding students' needs and mobilising targeted, appropriate, and coordinated care.

One program of note in this area is the *Wellbeing and Health In-Reach Nurse* (WHIN) program,²⁶ initiated in response to a cluster of youth suicides. This program involves embedding nurses within school communities, has effectively improved absenteeism, and connected hundreds of families to essential health and welfare support.

²⁴ Australian Nursing and Midwifery Federation, 2019, [National School Nursing Standards for Practice: Registered Nurse](#), Australian Nursing and Midwifery Federation Federal Office, Melbourne.

²⁵ Buchan, N. 2022. [School nurses – the secret superheroes](#). APNA

²⁶ NSW Health 2023. [Wellbeing and Health In-reach Nurse Coordinator program](#)

This program is currently undergoing a comprehensive evaluation,²⁷ which should be used to inform future policy and funding decisions for school nurse programs in NSW.

School nurses can monitor children more readily. They build rapport between themselves and students and become important support people for families with care needs.

NSW, as with all other Australian states, is experiencing a concerning increase in childhood obesity. Currently, nearly one-quarter of Australian children (2-17 years) are overweight or obese, and projections indicate a continued increase.²⁸ Additionally, over one-third of children in outer regional and remote areas are affected by overweight or obesity.²⁹

Obesity imposes a substantial cost burden on healthcare systems, and the strong correlation between childhood and adulthood obesity highlights the urgency of addressing this issue to prevent the onset of conditions such as diabetes, fatty liver disease, and cardiovascular disease.³⁰

Nurses are well-positioned to provide crucial support in the prevention and management of overweight and obese children and young people³¹ and, in NSW, work in community settings with General Practitioners and other health professionals on individual and population-wide interventions.³²

One example is the *Growing Healthy Kids Program* run by the South Western Sydney Local Health District.³³ This multi-disciplinary program involves nurses, dietitians, paediatricians, and other health professionals, taking a comprehensive family-centred approach to childhood obesity.

Interventions such as these have been shown by evidence to be effective in delivering small to moderate decreases in overweight and obese children, improved dietary habits, and increased physical activity.³⁴

Conducting vision and hearing screenings is another vital aspect of a nurse's role in early childhood health care. This proactive measure identifies potential issues early, allowing for timely intervention and support to address emerging concerns.

NSW Health's *Statewide Eyesight Preschooler Screening* (StEPS) program is a universal, evidenced-based program that offers visual acuity screening to all 4-year-old children in NSW prior to school entry. The program aims to identify childhood vision problems early so that treatment outcomes can

²⁷ URBIS 2023. [Wellbeing and Health In-reach Nurse \(WHIN\) Coordinator Program](#)

²⁸ AIHW Australian Institute of Health and Welfare (2020) *Overweight and obesity among Australian children and adolescents*, AIHW, Australian Government, accessed 09 February 2024.

²⁹ AIHW Australian Institute of Health and Welfare (2020) *Overweight and obesity among Australian children and adolescents*, AIHW, Australian Government, accessed 09 February 2024.

³⁰ Simmonds, M., Llewellyn, A., Owen, C. G., & Woolacott, N. (2016). Predicting adult obesity from childhood obesity: a systematic review and meta-analysis. *Obesity reviews : an official journal of the International Association for the Study of Obesity*, 17(2), 95–107. <https://doi.org/10.1111/obr.12334>

³¹ Australian College of Nursing (ACN). 2020, '[The effectiveness of nurse-led interventions in the assessment and management of overweight and obese children and young people – Position Statement](#)', ACN, Canberra.

³² Australian College of Nursing (ACN). 2020, '[Working with children above a healthy weight in primary health care: ACN Toolkit for nurses](#)', ACN, Canberra

³³ NSW Government 2024. [Growing Healthy Kids Service](#).

³⁴ Whitehead, L., Kabdebo, I., Dunham, M., Quinn, R., Hummelshoj, J., George, C., & Denney-Wilson, E. (2021). The effectiveness of nurse-led interventions to prevent childhood and adolescent overweight and obesity: A systematic review of randomised trials. *Journal of advanced nursing*, 77(12), 4612–4631. <https://doi.org/10.1111/jan.14928>

be maximised. StEPS screening is conducted in various settings, including preschool, early childhood centres, NSW Health Child & Family Health Services, and catchup StEPS clinics. Screening can be conducted by a range of health professionals, including nurses, optometrists, and GPs.

A similar program, the *Statewide Infant Screening - Hearing (SWIS-H) Program*,³⁵ targets hearing issues and aims to identify all babies born with significant permanent bilateral hearing loss by three months of age and link them to appropriate services as soon as possible after birth. Midwives and nurses working in the State's three children's hospitals typically perform or facilitate screening.

Both the StEPS³⁶ and the SWIS-H³⁷ programs have been positively evaluated and found to deliver effective early intervention services for NSW children with vision and hearing issues. Both evaluations also identified a need to address gaps in these programs, including some specific population groups with low screening rates and/or low rates of follow-up treatment.

ACN emphasises the crucial role of nurses in a public health response to prevent, identify, respond to, and report child abuse and neglect.³⁸

Child maltreatment is a complex public health crisis in Australia, with widespread prevalence. The Australian Child Maltreatment Study³⁹ found that 62.2% of Australian children have experienced at least one type of child maltreatment.

Evidence shows that there is a significant correlation between the social determinants of health and child maltreatment.⁴⁰ Lack of resources within families, compounded by factors like intergenerational trauma, increases the risk of abuse and neglect, known as cumulative harm.

Nurses possess unique characteristics and skills, including relational practice, child-centeredness, reflective practice, and cultural safety. These skills are essential for responding effectively to child abuse and neglect.

Nurses' roles in this area vary based on practice contexts. Primary health and community nurses can develop trust with families, while emergency nurses play a crucial role in identifying high-risk cases, such as sentinel injuries. Nurses also contribute to preventative strategies, such as raising awareness and preventing childhood sexual assault. Preventing childhood sexual assault can significantly improve future health outcomes, avoiding risks like suicidal behaviour and substance abuse.

Currently, nurses report that their roles in the prevention and early intervention of child abuse and neglect are poorly recognised. They often feel unprepared, under-resourced, and unsupported and,

³⁵ NSW Health 2023. [Hearing services](#).

³⁶ NSW Health 2019. [Statewide Eyesight Preschooler Screening \(StEPS\) Program Evaluation Final Report 2018](#)

³⁷ NSW Health 2011. [Evaluation of the Statewide Infant Screening – Hearing \(SWISH\) Program](#)

³⁸ Australian College of Nursing (2023). [The role of nurses in a public health response to child abuse and neglect – Position statement](#). ACN Canberra.

³⁹ Haslam D, Mathews B, Pacella R, Scott JG, Finkelhor D, Higgins DJ, Meinck F, Erskine HE, Thomas HJ, Lawrence D, Malacova E. (2023). The prevalence and impact of child maltreatment in Australia: Findings from the Australian Child Maltreatment Study: Brief Report. Australian Child Maltreatment Study, Queensland University of Technology.

⁴⁰ Hunter, A. A., & Flores, G. (2021). Social determinants of health and child maltreatment: a systematic review. *Pediatric research*, 89(2), 269–274. <https://doi.org/10.1038/s41390-020-01175-x>

as a result, experience high levels of stress and burnout.⁴¹ This reduces the effectiveness of NSW's response to the prevention of child abuse and neglect throughout the State.

Recommendations

ACN recommends that the NSW Government:

- **Increases the number of school nurses in NSW schools so that every school-aged child has access to a qualified registered nurse. This will address students' diverse health needs and contribute to a more supportive and inclusive learning environment.**
- **Ensures that the upcoming National School Reform Agreement in 2025 addresses the need to strengthen partnerships between schools, local health networks, and primary health networks, focusing on recognising and expanding the role of school nurses.**
- **Actively supports the Commonwealth Government's Australian Universities Accord Final Report's recommendation that students on mandatory work placements be paid for their work.**
- **Increases funding to Local Health Districts to deliver multi-disciplinary and evidence-based programs targeted at reducing childhood obesity.**
- **Fully funds the recommendations of the reviews of the StEPS and SWIS-H screening programs to address identified gaps and ensure comprehensive follow-up.**
- **Works with the nursing profession, through their peak bodies, to strengthen recognition and support for the diverse roles of nurses in preventing and responding to child abuse and neglect.**

About ACN

The Australian College of Nursing is the peak professional body and leader of the nursing profession. We are a for-purpose organisation committed to Shaping Health and advancing Nursing.

We support nurses to uphold the highest possible standards of integrity, clinical expertise, ethical conduct, and professionalism through our six pillars of Education, Leadership, Community, Social Impact, Advocacy and Policy.

We are the Australian member of the International Council of Nurses headquartered in Geneva in collaboration with the Australian Nursing and Midwifery Federation (ANMF).

⁴¹ Australian College of Nursing (2023). [The role of nurses in a public health response to child abuse and neglect – Position statement](#). ACN Canberra.