

**Submission  
No 43**

## **IMPROVING ACCESS TO EARLY CHILDHOOD HEALTH AND DEVELOPMENT CHECKS**

**Organisation:** Professional Association of Nurses in Developmental Disability Australia  
Inc (PANDDA Inc.)

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## Improving access to early childhood health and development checks

### [Improving access to early childhood health and development checks \(nsw.gov.au\)](https://www.nsw.gov.au/early-childhood/early-childhood-health-and-development-checks)

The Committee's inquiry is considering barriers that affect parents' access to early childhood health and development checks that track their child's progress against developmental milestones, and changes to address gaps in outcomes for vulnerable children. The Committee is also looking at recruitment and retention of health professionals to address workforce shortages, and funding for early intervention programs and screening to ensure children are given support for developmental issues.

This inquiry was self-referred on 4 December 2023.

That the Committee on Community Services inquire into and report on improving access to early childhood health and development checks, including:

<p>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.</p>	<p>Introduction of Telehealth assessment services to rural and remote communities, as easier to recruit staff in metropolitan centres. This can then be a team that then also provides onsite based service certain times pe year in a designated geographical area.</p> <p>Funding at community level primary health care – Continuing and extending professional learning/mentoring opportunities for those in primary health care.</p> <p>Medicare and/or NDIS subsidised developmental assessments by psychologists/speech pathologists/occupational therapists.</p> <p>Funding for more clinicians working in tertiary diagnosis and assessments – to address lengthy waiting lists for assessments</p> <p>Continuing professional learning for childcare/preschool educators to assist with identification and support of children with developmental differences. Strengthening partnerships between health and education to help identify with earlier identification of children in need</p> <p>Funding of stigma reduction programs in CALD communities</p>
<p>Barriers that affect parents' access to routine health and development checks that track their child's progress against developmental milestones.</p>	<p>Reintroduce program of regular child health nurse checks in the first five years of life – as per previous program where parents were linked in by team at hospital where child was born (including in-home visits) to local community health centres</p> <p>Stigma in CALD communities</p>

<p>Recruitment and retention of health professionals to address workforce shortages</p>	<p>Consider broader provision of telehealth services (direct assessment/partnership with local teams) to rural and remote communities.</p> <p>Structured support, supervision, and education opportunities (including secondments) for staff working in primary health care settings, particularly rural and remote areas.</p>
<p>Funding for early intervention programs and screening to ensure children are given support for developmental issues, including telehealth and other models.</p>	<p>State funding for Early intervention programs such as Early Start Denver Model, Stepping Stones Triple P (not so reliant on NDIS plan).</p> <p>Need to reintroduce system where direct referral can be made for families to be contacted to engage in early intervention therapy in a timely manner. ECEI NDIS process is too long and private practitioner waitlists are too long. Children are missing out on vital early intervention to make long term significant impact on their development.</p> <p>Increased support for evidence-based telehealth intervention services</p> <p>Funding of research programs aimed at feasibility and acceptability of such programs across various developmental needs, models of care and communities- developed in collaboration with health, childcare education and university</p>
<p>Any other related matters.</p>	<p>Growth of local diagnostic assessment centres in areas where not available</p> <p>Funding scholarships for health professionals to build skills or offer opportunity for more education to better understand and diagnosis early.</p> <p>More support for tiered system and better integration between health and education</p> <p>NDIS flexibility to get diagnostic assessments in private sector .</p> <p>Better pathway support for families to seek intervention by introduction of Nurse Navigator positions</p> <p>Core team in all LHD"s to provide diagnostic assessments.</p> <p>Research evidence identifies that early intervention is the best start and provides better long-term outcomes in terms of severity of the disability, for some children this means being able to speak, have better mobility or even attend mainstream school with support.</p> <p>More supported preschool placements equipped with allied health support to assist with school preparation and assessments to identify learning needs for future placement.</p>