



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON PUBLIC ACCOUNTS

Mrs Elizabeth Kikkert MLA (Chair), Mr Michael Pettersson MLA (Deputy Chair),
Mr Andrew Braddock MLA

Submission Cover Sheet

Inquiry into Responses to Auditor-
General recommendations for reports
5/2017, 7/2019 and 6/2020

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Minister for Transport and City Services

Minister for Skills

Special Minister of State

Member for Murrumbidgee

Mrs Elizabeth Kikkert MLA

Chair for Standing Committee on Public Accounts

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Dear Mrs Kikkert,

On behalf of Ms Rachel Stephen-Smith MLA, Minister for Health and Minister for Families and Community Services, thank you for your letter of 26 October 2022 regarding the Committee's inquiry to the recommendations listed in *Audit Report 7/2019: referral processes for the support of vulnerable children*.

I am pleased to provide the Committee with the Government's submission to the inquiry, and I apologise for the delay in responding to your letter.

Yours sincerely

Chris Steel MLA

Acting Minister for Health

15 December 2022

Encl



ACT Government Submission
 Referral processes for the support of vulnerable children
 Auditor General’s Report No. 7/2019

Recommendation	Status Update – As of 18 November 2022
<p>RECOMMENDATION 1 UNIVERSAL FIRST HOME VISIT Canberra Health Services should identify opportunities to improve take-up of the universal first ‘home’ visit offered by the Maternal and Child Health (MACH) service by:</p> <ul style="list-style-type: none"> a) Improving communication and coordination with maternity services and privately practicing midwives in the ACT to promote the referral of babies born with a registered ACT address to the Maternal and Child Health service. This could also be through earlier antenatal engagement or engagement at the hospital; and b) Seeking information on, and analysing, reasons for non-take-up in order to identify and remove any potential barriers to accessing the service. 	<p>Commenced Maternal and Child Health (MACH) at Canberra Health Services (CHS) prioritises the initial home visit for all families in the ACT.</p> <ul style="list-style-type: none"> a) Communication and coordination with maternity services and private midwives are embedded in MACH workflows b) Non-take-up of first home visit. Data is kept at point of referral to MACH Liaison. Main reasons include being non-eligible and not wishing to pay for the service, preferring to see their GP, and being unable to contact. c) No data is available for the non-take-up reason clients choose not to access MACH services overall. d) If a client declines a home visit or the environment poses a safety risk for the nurse to visit, women will be offered a clinic appointment <p>The <i>Best Start Strategy</i> released in November 2022 consulted parents and caregivers, frontline workers including Maternal and Child Health (MACH) nurses, early childhood educators and family support service providers through a series of focus groups and interviews to determine what is helpful and challenging during the first 1000 days. The <i>Best Start Strategy</i> outlines key goals to continue improving access to information and services that support the first 1000 days. This work intersects with the <i>Maternity in Focus: The ACT Public Maternity System Plan 2022-2032</i> and actions outlined in the <i>Maternity in Focus: First Action Plan 2022-2025</i> to increase individual and family supports through enhanced service provision and information for women and families. A key action in <i>Maternity in Focus</i> is to improve access to evidence-based postnatal care that will commence with a review of current community-based postnatal care to improve health and wellbeing of the woman, birth person and baby through long-term supports.</p> <p>The new Digital Health Record (DHR) went live across ACT public health services in November 2022 that will further support communication, information sharing</p>

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	<p>and referrals across public maternity and community health services. Access to a person’s digital health record is also facilitated through the MyDHR functionality that further enables consumers to see details about their health interactions with ACT public health services. The DHR does not currently provide access to privately practicing midwives.</p>
<p>RECOMMENDATION 2 HEALTH AND DEVELOPMENTAL CHECKS Canberra Health Services should identify opportunities to improve take-up of the health and development checks offered by the Maternal and Child Health service by seeking and analysing reasons for non-take-up in order to identify and remove any potential barriers to accessing the service.</p>	<p>Commenced At the start of the COVID-19 pandemic, in response to the initial lockdown, MACH stood up the Early Pregnancy and Parenting Support (EPPS) line. The EPPS line has been effective in providing timely support for parenting concerns, including child health and development, and enables MACH nurses to book families into clinics to see the child face to face where there are concerns regarding development.</p> <p>MACH nurses anecdotally note increased complexity in social determinants of health in those families that attend face to face. A Quality Improvement project commenced in 2022 to explore the benefits and opportunities of MACH clinics to run alongside Immunisation clinics. This is intended to increase the presence of MACH and provide opportunistic health promotion and support for all families including vulnerable families access the immunisation service. A pilot program will commence in February 2023.</p>
<p>RECOMMENDATION 3 ADMINISTRATIVE GUIDANCE Canberra Health Services should develop administrative and procedural guidance for the Maternal and Child Health service for the referral of children and their families to other programs and services, including:</p> <ul style="list-style-type: none"> a) Communication protocols with other programs and services, particularly external agencies; and 	<p>Commenced - Delayed MACH operates according to their Model of Care (MOC) that outlines communication and referral protocols. MACH nurses and midwives use clinical assessment and professional judgement to identify vulnerable infants or infants within families that may be part of a population group known to experience barriers in accessing services.</p>

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<p>b) Guidance for follow-up of referrals, including mechanisms to identify the take-up rate of referrals and ongoing service response.</p>	<p>A dedicated framework and service delivery model in the MOC allows for the MACH nurses and midwives to offer short-term intervention to support and intervene early to mitigate the family’s vulnerability, allowing for the continued interaction with universal services to be sufficient to meet their social and healthcare needs.</p> <p>Further work on review of the MoC and improving communication protocols and follow up of referrals has been delayed by the impact on services of the health response to COVID-19.</p> <p>The new Digital Health Record (DHR) went live across ACT public health services in November 2022 that enables communication within services and enhanced workflows for information sharing and referrals across public health and community services to monitor and track referrals and ongoing service responses.</p>
<p>RECOMMENDATION 4 ADMINISTRATIVE GUIDANCE As part of its development of an Integrated Management System for the Child Development Service and the Child and Family Centres, the Community Services Directorate should develop administrative and procedural guidance for the referral of children and their families to other programs and services, including:</p> <ul style="list-style-type: none"> a) communication protocols with other programs and services, particularly external agencies; and b) guidance for follow-up of referrals, including mechanisms to identify the take up rate of c) referrals and ongoing service response. 	<p>Community Services Directorate (CSD) developed the Referral Out Policy and Practice guide. The guide was endorsed by the Integrated Management Committee in July 2022 and distributed to staff for implementation in August 2022.</p>

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<p>RECOMMENDATION 5 STRENGTHENING SERVICE PLANNING</p> <p>In order to improve program management and service delivery, and the collection of data and needs analysis information that informs strategic and systemic planning, the Canberra Health Services and the Community Services Directorate should regularly report on:</p> <ul style="list-style-type: none"> a) Identifying gaps in service pathways for clients and how these are being addressed; b) Unmet need, where there is a limited service capacity to provide timely responses to children and their families; and c) Any emerging trends in referral patterns which may indicate changes to need, and/or which could indicate areas where additional early support capacity would be beneficial. 	<p>Commenced - Delayed</p> <p>This recommendation was agreed-in-principle. CHS and CSD are jointly progressing work on service planning and service pathways. Progress on joint needs analysis and service planning was delayed by the COVID-19 pandemic response.</p> <p>This work is ongoing within CSD with improved referral pathways and integrated service delivery key priorities under this work.</p>
<p>RECOMMENDATION 6 CROSS-AGENCY PERFORMANCE AND ACCOUNTABILITY FRAMEWORK</p> <p>Cross-Agency Performance and Accountability Framework</p> <p>In order to improve cross-agency planning and delivery of services to vulnerable children and their families, the Community Services Directorate, as the lead agency for the Early Support initiative, should develop and implement a cross-agency performance and accountability framework that identifies:</p> <ul style="list-style-type: none"> d) outcomes sought for vulnerable children and their families, including key strategic indicators of effectiveness in the delivery of the outcomes; and e) a mechanism by which: <ul style="list-style-type: none"> I. agencies’ individual contributions to the outcomes that are sought are identified; and II. agencies’ individual contributions are regularly and publicly monitored and reported against. 	<p>Complete</p> <p>The Community Services Directorate and ACT Health Directorate are working together to undertake a commissioning approach for the planning and delivery of health and community services. This provides opportunity to ensure the needs of vulnerable children and their families are addressed during service design, implementation, and the evaluation of health and community services.</p>