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THE LEGISLATIVE ASSEMBLY FOR THE

AUSTRALIAN CAPITAL TERRITORY

ELEVENTH ASSEMBLY

Standing Committee on Health and Community Wellbeing - Report No. 13

Inquiry into Raising Children in the ACT

Government Response

Presented by

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On 5 March 2024, the Standing Committee on Health and Community Wellbeing (the Committee) announced its inquiry into Raising Children in the ACT (the Inquiry).

The ACT Government provided a submission to the Inquiry on 26 April 2024, noting more than 25 ACT Government policies and strategies relevant to the Terms of Reference.

On 27 August 2024 the Committee released its report and made 33 recommendations and 3 findings.

The final ACT Government response to the recommendations contained in the Committee's Report is provided below.

Recommendation	ACT Government Response	
1. The committee recommends that the ACT Government consider funding a dedicated position with the Children and Young People Commissioner's office to support greater engagement of children and young people in Assembly committee inquiries by: • Creating child-friendly versions of committee inquiry terms of reference; and • Facilitating consultation with children and young people for relevant inquiries.	**Agreed in Principle**	The ACT Government supports greater engagement of children and young people in Assembly committee inquiries, especially given the unique perspective they can provide about issues that are important to them and to the ACT more broadly. To engage children and young people authentically and safely and appropriately amplify their views about matters that affect them requires a specialised skillset. The unique expertise of the Children and Young People Commissioner (CYPC) in facilitating this is reflected in the functions accorded to the CYPC. The creation of simplified material for Assembly inquiries and the engagement of children and young people as contributors to policy development and decision-making has the potential to have whole-of-government benefits, as well as benefits for the wider community. Simplified inquiry materials would also have broader utilisation opportunities, for example, to engage people with disability, people with English as an additional language, etc such that the proposed position may also beneficially support opportunities for the ACT Government to increase engagement with other marginalised cohorts across the wider ACT community. The Children and Young People Commissioner's Office currently sits within the ACT Human Rights Commission but does not have capacity to absorb the workload that would be associated with undertaking this work within existing resources. An additional budgetary allocation would therefore be required to enable the CYPC to take this on. The ACT Government also facilitates consultation with children and young people through the Youth Advisory Council and the Minister's Student Congress.

2. The committee recommends that the ACT Government obtain and report on data about the ACT's fertility rate and changing family demographics in order to better inform policy development and service delivery.	**Agreed in Principle**	Information about the ACT's fertility rate and family demographics can be provided where available. The timelines for information provision will need to be determined in consideration of other work priorities and available resources.
3. The committee recommends that the ACT Government consider developing a population strategy that works alongside population projections.	**Noted**	The ACT Government is committed to careful consideration and management of population growth. Drivers of population growth are considered in the *ACT Population Projects 2022 to 2060 Report*. Strategic documents like *the Canberra Region Economic Development Strategy*, *CBR Switched On: ACT's Economic Development Priorities 2022 – 2025*, and *Skilled to Succeed: Skills and workforce agenda for the ACT* provide intent and policy direction for economic development, creation of future jobs, and attraction of global talent. City planning documents like the *Territory Plan* and associated district strategies cover livability, and wellbeing is considered in broader planning and policy development. These and other frameworks ensure that the ACT's population growth outlook is appropriately considered in a variety of governmental planning contexts.
4. The committee recommends that the ACT Government ensure that bulk billed General Practitioners are available to more Canberrans.	**Existing Government Policy**	Individual general practitioners decide whether services are bulk billed. Primary healthcare funding is a responsibility of the Australian Government. Since 2015, the ACT Government has provided substantial support for GP and Nurse-led primary care services targeting at-risk children and young people, 12 – 25 years of age, that are free at the point of care. This includes the *Bulk Billing General Practices Grant Fund* measure in the 2017-18 ACT Budget, and the 2019-20 and 2022-23 *Delivering Better Care for Canberrans with Complex Needs Budget* measures. The triple bulk-billing incentive announced in the 2023-24 Federal Budget applied to under 16-year-old Commonwealth concession card holders has seen bulk-billing rates lift locally and nationally. ACT Government is considering options to increase bulk billing rates in the ACT, particularly for children, building on the investments the ACT Government has made and improvements seen since the investments made by the Federal Labor Government in tripling the bulk-billing incentive. There are a range of complex systemic factors affecting the provision of bulk billed services in the ACT, including workforce shortages, rising costs of service operations, staff costs and

		overheads, low Medicare rebates, high demand for GP services and geographic variations. There is a cost implication to the private business of the general practice, as well as the GP, when not charging a gap fee for the services provided.
5. The committee recommends that, on the way to providing Midwifery-led Continuity of Care to at least 75 per cent of women and birthing parents by 2032, the ACT Government prioritise services for high-risk women and birthing parents who will benefit most.	**Existing Government Policy**	As part of the first Action Plan 2022-2025 of *Maternity in Focus: The ACT Public Maternity System Plan 2022-2032,* the ACT Government has committed to the expansion of access to midwifery led continuity of care to 50 percent of women and birthing people by 2028, and 75 percent of women and birthing people by 2032. In the interim, the ACT Government is working with stakeholders to develop a triage tool to identify women and birthing people with vulnerabilities and prioritise these people for Continuity of Midwifery Care. This will include appropriate postnatal transition, including improved access for Aboriginal and/or Torres Strait Islander peoples, individuals experiencing vulnerability or disadvantage, and those with complex medical issues or a disability.
6. The committee recommends that the ACT Government raise awareness of, and access to, the Midwifery-led Continuity of Care model through organisations such as Women With Disabilities ACT, Aboriginal and Torres Strait Islander health organisations, and other community groups.	**Existing Government Policy**	As part of the first Action Plan 2022-2025 of *Maternity in Focus: The ACT Public Maternity System Plan 2022-2032,* the ACT Government has committed to work with consumers, relevant non-government organisations and disability support services to ensure the maternity system can evolve to meet the needs of individuals with disability.
7. The committee recommends that the ACT Government increase the number of Endorsed Midwives who can offer a Midwifery Continuity of Care model.	**Agreed**	The ACT Government currently employs Endorsed Midwives across all areas of Maternity Services. The first Action Plan 2022-2025 of *Maternity in Focus: The ACT Public Maternity System Plan 2022-2032* has committed to at least 50 percent of eligible women and pregnant people having access to midwifery continuity of care by 2028. Workforce planning is part of this commitment. Additionally, the ACT Government is committed to implementing system-level changes as part of *Maternity in Focus: The ACT Public Maternity System Plan 2022-2032*. These changes will support endorsed privately practicing midwives in providing continuity of care within the public maternity system and enable endorsed midwives in public hospitals to work to their full scope, including prescribing medications and ordering diagnostic tests. To progress this, the ACT Government has engaged with the Australian Nursing and Midwifery Federation.

8. The committee recommends that midwives should be able to prescribe and practice to their full scope of practice in ACT public hospitals.	**Existing Government Policy**	To facilitate public sector midwives to work to their full scope of practice a Governance Framework to support prescribing and the ordering of diagnostics by Endorsed Midwives in the public sector is being developed. The ACT Government is currently developing a credentialing pathway, scope of clinical practice and associated policy reform for employed Endorsed Midwives to extend their scope of practice to including prescribing scheduled medicines and other diagnostics in accordance with ACT legislation.
9. The committee recommends that the ACT Government investigate the benefits of establishing a Chief Midwife for the ACT.	**Noted**	The ACT Government is committed to supporting midwifery leadership and the development of midwifery leadership positions. The ACT Government currently employs a Chief Nursing and Midwifery Officer (CNMO) and dedicated midwifery leadership positions that support the CNMO, which is appropriate for a small jurisdiction at this time. The ACT Government is committed to working closely with key stakeholders to support, enhance and improve midwifery practice and services in the ACT. The CNMO role represents and gives leadership to both professions in the ACT and is structured to drive strategic agendas for both professions. The CNMO is supported by a Senior Midwifery Advisor, a Senior Nursing Advisor and an Advisor team, to ensure the midwifery profession has a strong voice in strategic policy and professional matters in the ACT. The ACT's CNMO also works closely with national, state and Territory CNMO's (or equivalent) through the Australia and New Zealand Council of Chief Nursing and Midwifery Officers, where policy and professional practice matters of national interest are discussed.
10. The committee recommends that the ACT Government confirm whether the North Canberra Hospital is Baby Friendly Health Initiative (BFHI) Accredited, and if not, investigate the viability of including BFHI as part of the maternity options offered there.	**Existing Government Policy**	All ACT public maternity hospitals, including North Canberra Hospital, and Maternal and Child Health Services are working towards achieving BFHI accreditation by March 2025. As part of *Maternity in Focus: The ACT Public Maternity System Plan 2022-2032,* the ACT Government is committed to improving breastfeeding rates and as part of this, emphasis is placed on evidence-based practices and accreditation frameworks like BFHI to provide optimal support for breastfeeding mothers or parents and babies.
11. The committee recommends that the ACT Government obtain data about whether forced sterilisations through	**Agreed in principle**	The ACT Government supports the intent of this recommendation and is concerned about reports of forced sterilisation where persons with disability are given contraceptives without their full and informed consent, or without lawful substituted decision-making arrangements in place.

contraceptives are occurring in the ACT.		The ACT Government has existing arrangements in place to monitor sterilisation through contraceptives within guardianship arrangements. Under the *Guardianship and Management of Property Act 1991,* persons appointed as guardians (whether private or through the Public Trustee and Guardian) do not have the power to lawfully consent to 'prescribed medical procedures', which includes reproductive sterilisation or medical procedures concerned with contraception. The ACT Civil and Administrative Tribunal (ACAT) may make an order granting consent to a person being given contraception, where the person is not competent to consent, with safeguards in the legislation including a requirement that an independent third party must represent the person in the hearing about the order. The ACT Government does not consider such approved procedures to constitute forced sterilisation. ACT Government agencies have limited visibility over situations where a person with disability may be given contraception by a carer or other person, outside of a guardianship arrangement, or where a private guardian may act outside the scope of their lawful powers. The *ACT Disability Health Strategy 2024 – 2033* describes the need for healthcare navigation for people with disability and proposes a navigation service for people with disability. This, plus the Canberra Health Services Integrated Care Program for parents with disability and parents of children with disability, may provide more visibility and insight on whether forced sterilisation is occurring. Systemic and regular data collection on this issue faces complex barriers, including difficulties in ascertaining when a person's consent is genuinely free and informed, and potential challenges for persons with disability self-advocating. The ACT Government will explore ways to improve visibility of this issue within existing resources. This may include consulting with relevant community groups, developing educational resources, and the promotion of avenues for complaint, including via the ACT Human Rights Commission.
12. The committee recommends that the ACT Government investigate options to provide a parenting navigation service in the health setting for parents with disabilities and parents of children with disabilities.	**Agreed in principle**	The *ACT Disability Health Strategy 2024 - 2033* highlights the need to improve the integration of healthcare services and navigation supports for people with disability and their families. The *Child and Adolescent Clinical Services Plan 2023 – 2030* includes the focus on continued roll-out of the new coordination and priority access options for children with chronic and complex

		conditions. This includes the Paediatric Liaison and Navigation Service (PLaNS) that was established in 2022. Improving the accessibility, design, and delivery of healthcare services and navigation supports will ensure people with disability and their families can access timely and targeted supports according to their needs. The ACT Government acknowledges that any investigation into providing a parenting navigation service in the health setting for parents with disability and parents of children with disability should be undertaken in collaboration with existing initiatives across directorates and with regard to recommendations and actions arising from the review of the NDIS.
13. The committee recommends the ACT Government continue efforts to recruit paediatricians to the Territory to ensure easier access for ACT families to local paediatric services.	**Existing Government Policy**	The ACT Government is actively recruiting general pediatricians and community pediatricians (including those with subspeciality). Additionally, work is underway in collaboration with Sydney Children's Hospital Network for the provision of fractional paediatricians to provide services for ACT families. The *ACT Health Workforce Strategy 2023 – 2032* sets out a Territory-wide approach to building a sustainable health workforce.
14. The committee recommends that the ACT Government offers more specialist services in the ACT to provide timely assessment and diagnosis of neurodevelopmental conditions.	**Existing Government Policy**	The ACT Government is continuing to work with the Commonwealth Government on future planning of foundational supports, building on recent expansions of publicly funded autism assessments for children and the Child Development Service. Work is currently underway across directorates to remove the need for a paediatrician referral being made prior to a child being accepted for an Autism Spectrum Disorder Assessment. This measure is in line with the National Guidelines for assessment and diagnosis of Autism. The removal of this requirement will also expediate access to assessment for children (and increase capacity of community paediatricians to see children with other neurodevelopmental and behavioural conditions).
15. The committee recommends that the ACT Government ensure more psychology, psychiatry and mental health support services are available and accessible for children and families.	**Existing Government Policy**	The ACT Government has committed to the establishment of a range of child and youth mental health services in the ACT, including: • Head to Health Kids – delivering community-based multidisciplinary mental health assessment, intervention and support for children 0 – 12 years and their families, experiencing mild to moderate and emerging mental health concerns. • Funding a Youth at Risk project – to support young people with, or at risk of, moderate mental ill-health who have been exposed to trauma.

		• Perinatal Mental Health Project – seeking to progress improvements to perinatal mental health supports via three steams of work and aligns *with ACT Health Maternity in Focus First Action Plan 2022 – 2025.* • Delivering a residential mental health service for mother/birth person and baby unit following scoping study and model of care development. • Initiating universal perinatal mental health screening, and • Improving referral pathways, including from primary care to mental health services and non-government providers.
16. The committee recommends that the ACT Government advocate, and further investigate opportunities, for improved access to public dental care for children, so that children needing treatment do not need to wait for up to 18 months.	**Agreed**	The ACT Government is required to balance theatre time for dental surgery with other surgical schedules across the service. An arrangement is in place for additional dental procedures to take place at Calvary John James private hospital in order to increase capacity. Consideration is being given to increased training for general dentists in the provision of dental treatment under general anesthetic.
17. The committee recommends that the ACT Government provide more frequent, affordable, and more convenient public transport, as well as better footpaths so that people are not forced into the high costs of private car transport, or forced into isolation if they cannot afford these.	**Agreed in principle**	The ACT Government is committed to providing flexible, reliable and sustainable travel options for all Canberrans. To meet this commitment, the delivery of a public transport system that is designed to share a more compact, walkable and livable city, with connected communities, more accessible services and greater transport choice is ongoing. There are several programs in place to improve community paths including the annual path maintenance program, and projects/programs to add new and upgrades to existing connections.
18. The committee recommends that the ACT Government extend free early childhood education and work towards universal free early childhood education.	**Existing Government Policy**	Universal free early childhood education is existing government policy for children from three years old to five years old. Through *Set Up for Success: An Early Childhood Strategy for the ACT,* the ACT Government has committed to work towards providing universal access to 600 hours per year of free quality early childhood education for 3-year-olds. Universal access to 300 hours per year of free quality early childhood education for 3-year-olds commenced on 1 January 2024. Three-year-old children experiencing vulnerability or disadvantage can currently access 2 free days per week of quality early childhood education through partnered Early Childhood Education and Care providers. Universal access to free 4-year-old preschools is available for 15 hours per week through ACT public preschools.

		Aboriginal and Torres Strait Islander children aged 3 to 5 years can also access free culturally safe learning through Koori Preschools. Provision of early childhood education for children younger than 3-years-old in the ACT is a Commonwealth responsibility.
19. The committee recommends that the ACT Government investigate the viability of providing an after-hours childcare facility to accommodate shift workers.	**Agreed**	Exploring flexible options for access to extended hours of early childhood education and care is an action under Phase 2 of *Set Up for Success: An Early Childhood Strategy for the ACT*. Further work is required to consider the feasibility of this model. The ACT Government is not a provider of Long Day Care (LDC), Family Day Care (FDC), or Outside School Hours Care (OSHC) services. These services are provided by a mix of for profit, community and independent not for profit providers. The sector is market based and driven by demand and viability. Service hours are also restricted by the availability of suitably qualified staff. Extended hours are offered by FDC providers. Should other providers wish to extend their hours of service, they must notify the Regulatory Authority, Children's Education and Care Assurance (CECA). CECA would then need to support the provider to ensure they were meeting all relevant legislative requirements, including additional risk assessments and sleep and rest policy and procedures.
20. The committee recommends that the ACT Government require all ACT Government-owned Early Learning Centres be able to accommodate children with a disability.	**Noted**	All Early Childhood Education and Care (ECEC) service providers are required to comply with Human Rights and Disability Discrimination legislation, which include all reasonable steps being taken to accommodate children with disability. The *Disability Discrimination Act 1992 (DDA)* applies to all ECEC services, regardless of whether they use a government-owned facility.
21. The committee recommends that the ACT Government ensure that incursion activities taking place as part of the ACT public school curriculum are free of charge.	**Noted**	Education in ACT public schools is free, as per the *Education Act 2004.* Voluntary financial contributions to the school may be requested, and are made on a voluntary basis. Parents may be expected to pay for enrichment activities. All ACT public schools are resourced to help students access everyday essentials. This is part of making access to education more equitable for all students, regardless of personal circumstances. Schools can help students access meals, personal hygiene products including sanitary items, school uniforms, stationery packs, school excursions and incursions, camps, transport and enrichment activities. The *Future of Education Equity Fund* provides low-income families and independent students from preschool to year 12 in ACT

		public schools with a one-off payment to help with education expenses.
22. That committee recommends that the ACT Government provide better transition support for children at IEC English language specialist schools into mainstream schools.	**Agreed**	The ACT Government provides transition supports for students who exit Introductory English Centres (IECs) into their Priority Enrolment Area (PEA) school. These students receive support from school staff, tailored to their academic and social needs, which may include one-on-one or small group settings in the PEA school, in line with relevant policy and procedures. The ACT Government welcomes the committee's feedback on this service and is committed to continuous improvement to achieve the best possible outcomes for our students. ACT public schools provide culturally inclusive learning environments for all Cultural and Linguistically Diverse (CALD) students and their families to help them feel welcomed, respected and supported. Through needs-based funding called the Student Resource Allocation, PEA schools are funded to support students who exit IECs. The data that determines needs-based funding is gained through assessment of student English proficiency and reported by schools in the February and August EAL/D census to the Directorate each year.
23. The committee recommends that the ACT government provide additional funding for free and low cost recreational spaces, events and activities for children and young people, particularly teenagers.	**Agreed in principle**	The *ACT Play Space Strategy* recognises the need for the diverse allocation of recreational spaces for all age groups. Focus areas contained in the *ACT Play Space Strategy* are consistent with this recommendation. The ACT Government, through Sport and Recreation, provides funding and support to aid in the delivery of community sporting activities, including for young people. This includes funding for a variety of targeted introductory programs in 2024, including girls AFL, Rugby Union and culturally inclusive netball. Government support for programs does not necessarily make them free, however investment subsidises elements of delivery that can ultimately reduce cost, whilst also reducing common participation barriers. In addition to the *Future of Education Equity Fund*, which does have scope to support extracurricular sporting activities, the ACT Government has committed to $225,000 over 3 years (from 2022-23) to *Every Chance*, a scheme to support sport participation costs of children in need (maximum of $250 per child per year). Further, the ACT Government has funded the Heart Foundation $300,000 over this same period to deliver 'free' six-week *Skipping for Heart Health* programs at multiple locations. ACT Libraries perform a valuable community hub function within

		local society. They are free, openly accessible places that Canberrans of all ages can access.
24. The committee recommends that the ACT Government explore further legislative changes to improve the rights of renters in the ACT, including ensuring more secure and stable housing for families.	**Agreed**	Since 2016, the ACT Government has undertaken progressive reforms to renters' rights. This includes committing through National Cabinet to further reform as part of the Better Deal for Renters package, which is aimed at strengthening renters' rights.
25. The committee recommends that the ACT Government increase public housing.	**Existing Government Policy**	The ACT Government has committed to grow the Housing ACT property portfolio to 13,200 homes by the end of 2030. That is over 1,000 more public housing homes, on top of the existing *Growing and Renewing Public Housing Program* and the Australian Government's *Social Housing Accelerator*. The *Growing and Renewing Public Housing Program* started in July 2019 and is set to deliver 1,400 new public housing homes by June 2027, replacing 1,000 end-of-use public housing homes and adding 400 public housing homes to grow the social housing portfolio. The Australian Government's *Social Housing Accelerator* funding of $50 million is being spent on public housing and is expected to deliver between 55 and 65 new homes by June 2028. These measures are documented in the ACT Housing Strategy 5 year snapshot.
26. The committee recommends that the ACT Government increase the amount of public housing at the Gold Standard for accessibility in the ACT.	**Existing Government Policy**	The *Growing and Renewing Public Housing Program* is increasing the amount of adaptable and accessible dwellings in the public housing portfolio. The Program has set a target of 90 percent construction designed to meet adaptable / liveable housing standards by the end of the program. To date, the Program is exceeding this target.
27. The committee recommends that the ACT Government provide additional funding to community groups providing support to parents, particularly to those parents who are financially or otherwise vulnerable.	**Existing Government Policy**	The ACT Government's Child and Family Centres provide a range of free parenting programs for families with children up to 8 years old. With additional funding the Child and Family Centres could provide more specifically targeted parenting programs. The ACT Government funds Parenting Support through the Child, Youth and Family Services Program (CYFSP) to provide targeted evidence-based and strengths focused parenting interventions and supports tailored to individual families. Any additional funding to community groups would require consideration through a future budget process.
28. The committee recommends that the ACT Government conduct an audit of all playgrounds in the ACT on disability access.	**Agreed in principle**	Disability access is an identified focus area in the *ACT Play Space Strategy.*

29. The committee recommends that the ACT Government should better use existing consultation with people living with a disability to make sure all services are accessible for those who need them including public transport, paths, parking, playgrounds, birthing services and medical services and consider if this community would like further consultation.	**Existing Government Policy**	The ACT Government has a range of existing mechanisms to consult with people with a disability. The ACT Government will continue to use these to ensure the voices of people with disability are heard and to minimise consultation fatigue. These include: • the Disability Reference Group • Disability Health Reference Group • the Transport Canberra Cand City Services Accessibility Reference Group (TCCS ARG), and • targeted stakeholder consultations. The ACT Government funds disability people's organisations for systematic advocacy and to provide government with advice. The *ACT Disability Strategy - Listening Report* is available publicly and summarises key themes from extensive consultation undertaken with the disability community in 2022-23. On 29 August 2024, the ACT Legislative Assembly passed the *Disability Inclusion Bill 2024*. Expected to commence in early 2025, the Act introduces a minimum requirement for community consultation as disability inclusion strategies and plans are in development.
30. The committee recommends that the ACT Government fully fund the wraparound community services and support needed for the small number of families who have contact with the ACT criminal justice system, with a particular focus on the over-representation of Indigenous children in detention.	**Agreed in principle**	Functional Family Therapy – Youth Justice, delivered by OzChild, has been funded to specifically support young people and their families within the criminal justice system. FFT is a high quality, evidence-based, strength focused program that aims to help young people and families overcome behavioural and emotional problems and facilitate growth and development. Referrals to OzChild will occur from 1 December 2024. A budget bid would be required to secure funds for broader wraparound community services and support as part of the whole of government budget process.
31. The committee recommends that the ACT Government provide additional active and effective support to families before taking statutory intervention through the Child and Youth Protection Service.	**Agreed**	Work is underway to reform *the Children and Young People Act 2008*, and to reform the delivery of Child Protection and Youth Justice supports and services which aligns with the intent of this recommendation. Child and Family Centres provide case management which incorporate active support for families who require intensive family support. The Child, Youth and Family Services Program (CYFSP) is undergoing a commissioning process, which includes a spectrum of support from early intervention through to intensive therapeutic support for children, young people and families to

		prevent entry into and provide a step out of, the statutory system.
32. The committee recommends that the ACT Government explore options to formalise the rights of kinship and foster carers providing out of home care in the ACT.	**Existing Government Policy**	As part of the reform of delivery of Child Protection and Youth Justice supports, the reform of the *Children and Young People Act 2008*, and extensive consultation to develop *Next Steps for Our Kids 2022 – 2030*, a new *Charter for Carers* was created and notified on the ACT Legislation Register in September 2024. The Charter is underpinned by the key principles of *Next Steps for Our Kids 2022 – 2030* and seeks to improve the way carers experience Child Protection services and build a mutual understanding of what they can expect.
33. The committee recommends that the ACT Government consider whether a new commissioner is needed to provide oversight for the mother or birthing parent, baby and family for the first 1000 days.	**Noted**	The ACT Government and the Children and Young People Commissioner (who is also the Public Advocate) is committed to providing the best start for children and families, particularly in the first 1000 days. At a systems level, consideration for the rights, safety, and wellbeing of children and young people (including within the context of their families and of services providing support) is already part of the role of the Children and Young People Commissioner (CYPC). Further to this, the Public Advocate has a broad range of oversight functions, including monitoring services for the protection of children and young people, and advocating for improvement to services and supports for children and young people – the focus again being on the rights, safety, and wellbeing of children and young people themselves. Adding an additional requirement to expressly consider and potentially provide support to/advocacy for the mother or birth parent, with a specific focus on the first 1000 days (noting that this includes the period before birth), would be additional to the current remit and focus of the respective roles of Public Advocate and CYPC. Given that the Public Advocate's remit also extends to adults with disability (including those with mental health concerns), and the associated resourcing and attention required to be directed to this by the Public Advocate herself, consideration would need to be given to different models and ways of operating to more adequately resource a targeted focus on the rights, safety, and wellbeing of babies and children (from conception to 2 years) within the context of their mother/birth parent/families, alongside the needs of *all* children and young people.

		This could be done as part of the consultations for the development of the Phase Two Action Plan of the *Best Start for Canberra's Children: The First 1000 Days Strategy.* It is highly like that a budget process would be required to expand the role of the CYPC with consideration for embedding existing CYPC functions, Public Advocate functions as they relate to children and young people, and new functions relevant to the first 1000 days within a dedicated Commissioner role. Should this be supported, consideration would then also need to be given to alternate ways of ensuring that remnant responsibilities of the Public Advocate in respect of adults are not compromised. Any separation of roles would need to be considered as part of an omnibus budget business case.