

My interest in the Royal Commission

[REDACTED]

[REDACTED]

I fully understand the importance of a child's first 1000 days and the need to intervene early to provide supports and interventions to support all children reach optimum health and developmental milestones including achievements social/emotional milestones. Also this includes from birth to 5 years of age and onwards.

To achieve this government needs to:

- **Increase the number of specialist Health and Developmental professionals** to provide interventions in the Antenatal and immediate post-natal space
- **Increase the number of specialist Child Health and Developmental professionals in Child and Family Health Service (nurses and Allied Health professionals---Social Workers and Parent-Infant Therapists)** to provide a service to families antenatal through to 5 years of age. This number of professionals needs to be increased to match the number of Health and Developmental checks/screening that are required for all children in South Australia (Checks at 1-4weeks, 8 weeks, 6/12, 12/12, 18/12, 24/12, 36/12, 48/12 and 60/12)
- **With increased screening the Allied Health workforce also needs to be extended** as more referrals will be done for therapies (Speech, Occupational Therapy, Physiotherapy, Dietician) and also for further specialist screening/assessment at major Hospitals (**Child Development and Out-of-Home Care clinics-----**there are already major waitlists for these services and then delays in appropriate intervention services being put in place)
- **Along with above increase in staff we also need enough staff to provide a qualitative service** that is responsive to infants/children's and families changing needs for example: parental struggles---Mental Health, DV and infants/children----nutrition—breast feeding, sleep, understanding of infants/children's health & developmental needs.
- **With the CaFHS Enhanced Care service---**health and developmental checks and interventions for children in-out-of-home-care, this service needs to be extended to families in kinship care that are not on a formal order. **Also specialist Paediatrician and Nurse Consultant Child Health & Development to sit in DCP** to advise guide the recommendations for health/developmental interventions, so these can be actioned quickly.
- **Ear Health checks** are completed as part of health screening in other states----this could be either carried out by GP's when children are having immunisations or Child Health staff are trained to provide this at health/developmental checks (early recognition of issues and ENT referrals to correct this, then allows child's language development)

- **The Pregnancy Family Conferencing Program (an intervention in the antenatal space)** was introduced in Western Australia and then piloted in Royal Prince Alfred Hospital in Sydney (for Aboriginal & Torres Strait Island families to reduce the number of infants assumed in to care) this program was successful and then rolled out to include all council council areas in NSW see links;

-



<https://www.familyisculture.nsw.gov.au>



Hurley.pdf

-

- See attached from National Family News: part of above document chapter 10 focuses on Antenatal/post birth removals and includes below

- ‘The Review notes that early casework with expectant parents should ideally be delivered by specialist prenatal caseworkers who are trained in effective intervention approaches for expectant parents and skilled in the inter-agency coordination of services. For this reason, the Review recommends that the DCJ invest in the substantial expansion of the number of prenatal caseworkers in NSW. Further, the Review recommends that the DCJ develop, trial and publicly report on a ‘triage’ system for prenatal reports that ensures that the parents of the most frequently reported unborn babies are given priority access to early casework support and early intervention services. This will also help to reduce the number of newborn Aboriginal babies removed from their families.

Recommendation 44: The Department of Communities and Justice should expand the **Pregnancy Family Conferencing program** and monitor and report on its effectiveness in reducing entries into out-of-home care.

Recommendation 45: The Department of Communities and Justice should significantly expand the number of specialised prenatal caseworkers to ensure that expectant Aboriginal parents have access to early, targeted and coordinated intervention services and support.

Recommendation 46: The Department of Communities and justice should develop, trial and publicly report on a ‘triage’ system for prenatal reports that ensures that the parents of the most frequently report unborn babies are given priority access to early casework support and early intervention services’

- From Western Australia:

-



Familypregnancymee
tingpathway.pdf

-

3 year old pre-school service for children will be great, Aboriginal and Torres Strait Islander children and those children with extra needs and/or environmental vulnerabilities to be prioritised for places first.

Need also to ensure that interventions that are put in place prior to Pre-School and School continue seamlessly through Kindy and School for these children and there is no need for new assessments---their care-plan continues and Allied Health & CAMHS support continues, if additional education support is also needed, that is provided by the Education department in a timely fashion

Out-of-Hours Care (OSCH)

I believe more OSCH places are needed to prevent children being home alone in some circumstances when they are under-age.