A STRATEGIC HEALTH PLAN FOR CHILDREN, YOUNG PEOPLE AND FAMILIES

2014–24

HEALTHY
+ SAFE
+ WELL
Facts and Figures
Health of Children, Young People and Families

- Almost 380,000 hospitalisations for children and young people to 24 years.
- Only 60% of mothers have first antenatal visit in first 14 weeks of pregnancy.
- Injuries and poisoning is the leading cause of hospitalisation for 1-24 year olds.
- 20% of children screened in first year of school were developmentally vulnerable.
- 23% of schoolchildren are classified as overweight or obese.
- 15% of babies born in NSW require specialised neonatal care.
- 40% of women reported physical violence and 20% sexual violence after age 15.
- Over 871,000 children and young people presented at emergency departments.
- Over 40% of women reported physical violence and 20% sexual violence after age 15.
- More than 50% of primary and 75% of secondary school students did not meet small screen time guideline.
- 1 in 200 infants had a potential hearing problem; 1 in 10 screened preschool children had a potential vision problem.
- 1 in 200 children were immunised at age one, 91.8% at age two, 92.1% at age five.
- Over 8,000 children were in out-of-home care.
- Aboriginal babies are more likely to be of low weight (11%) than non-Aboriginal babies (5.9%).
- Mental health disorders account for 50% of the burden of disease among 15-24 year olds.

MINISTER’S MESSAGE

The NSW Government is committed to supporting the development of children, providing care for their mothers during pregnancy and health services that are needed as they grow to maturity.

This strategic plan – Healthy, Safe and Well: A strategic health plan for children, young people and families 2014–24 – was developed as a response to recommendations by Peter Garling SC in his report on acute services in NSW.

Although some measures had been adopted to improve delivery of paediatric services, when I became Health Minister in 2011, I was convinced more could be done to better coordinate different levels of care across the state.

This plan provides the framework upon which services will grow in the future. It will drive the work of NSW Health and its partners in an integrated fashion. The partners have been engaged in the development of this plan and their continuing involvement is crucial, whether they be running hospitals, GP practices, other community based services or families and young people themselves.

The plan takes a life course approach, acknowledging the impact that the health of mothers will have on the unborn child. It follows their development until they reach maturity.

It addresses the following key themes:

Caring for women during pregnancy; with a focus on antenatal care, preparing for parenthood and providing evidence based medical advice about diet and lifestyle choices.

Supporting children and their families; starting with postnatal care and continuing to improving immunisation, encouraging healthier lifestyles and the early detection and intervention of health issues in infants and children, including disabilities, developmental and mental health matters.

Addressing risk behaviours in young people; by dealing with violence, bullying and abuse, addressing self-worth, reducing the incidence of accidents and intentional harm and, importantly, engaging young people themselves in identifying issues and dealing with them.

Getting the right care, in the right place, at the right time: ensuring integrated care across all health settings from GP’s to tertiary care, providing a blueprint for medical interventions highlighting what services should be provided at which facility level and promoting culturally-responsive, age-appropriate care.

Developing and supporting the health workforce; including supporting all levels of clinical staff, promoting coordinated health care for young people and implementing eHealth tools to support staff.

Implementation of the plan will be monitored and outcomes measured and reported.

Work continues on development of the strategic framework that spells out delivery of paediatric treatment across our hospital system.

I commend all who have worked with the team at NSW Kids and Families in the development of this plan.

Jillian Skinner MP
Minister for Health
Minister for Medical Research
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FOREWORD

The NSW Government and NSW Health established NSW Kids and Families in 2012 to help shape the way we care for mothers, babies, children and young people now and in the future. This followed two major NSW inquiries, the Garling and Wood inquiries, recommending a new vision for child health services and a mandate to ‘keep kids safe’.

To make that a reality, NSW Minister of Health, Jillian Skinner, commissioned NSW Kids and Families to develop a strategic health plan, detailing how to keep our children among the healthiest in the world over the next decade. The draft strategic health plan was further refined through a comprehensive consultation with consumers, NSW Health workforce, other government agencies, the private health sector, academics and community groups.

It also reflects and complements other important NSW planning reviews. These include the NSW State Plan, NSW 2021: A Plan to Make NSW Number One, the recently released NSW Health Plan: Towards 2021, the NSW Rural Health Plan and the Living Well: Strategic Plan for Mental Health in NSW, all of which identified children, young people and families as priorities.

Most of our children and young people are doing well, but this strategic health plan, Healthy, Safe and Well, will help NSW families do even better.

We not only need to make sure NSW health services keep meeting the acute care needs of all children when and where they’re needed, but also work collaboratively with other partners to provide the right care for those who face long-term health issues like disability, developmental delay, chronic disease, or maltreatment and neglect.

We also know that navigating a health system with many providers, different layers of government, and mix of public and private, local and centralised services can also be hard, particularly if you’re Aboriginal, young, living in rural and remote NSW or come from a culturally diverse background.

Healthy, Safe and Well focuses on preconception to 24 years of age, setting out an ambitious agenda for renewed efforts to promote health, prevent illness, embed early intervention and deliver integrated, connected care for all NSW children and families no matter where they live. Five key Strategic Directions are underpinned by a series of service, performance, policy and planning objectives and actions, with special attention for those in our community most at risk, vulnerable or with special health needs.

Keeping NSW children, young people and families safe and well for the long term can only be done in partnership with others, including ‘all of government’, community agencies, primary care providers and the private health sector, as well as real engagement and participation with parents and families, health and research personnel, young people and, of course, our children.

This strategic health plan is the start of a decade-long journey to create a truly connected and responsive health system providing world-class care for children, young people and families in NSW, a task we can only achieve by working together.

The Hon Ron Phillips
Board Chair

Ms Joanna Holt
Chief Executive

“The children of NSW are our future.
If we do not take especially good care of them, we will always regret it.”

Peter Garling SC
SUMMARY
There is now considerable evidence that getting the best early start to life begins before birth, most specifically during pregnancy, and it is this care that is fundamental to the growth and development of children.

Professor of midwifery

### Key Life Stages

<table>
<thead>
<tr>
<th>Preconception</th>
<th>Pregnancy</th>
<th>Infant</th>
<th>Child</th>
<th>Middle Years</th>
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<tbody>
<tr>
<td>Preparing for new life</td>
<td>Giving me the best start</td>
<td>Nurturing and protecting me</td>
<td>Helping me to grow strong and healthy</td>
<td>Helping me to understand changes I am experiencing</td>
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### Factors Affecting Health and Development

- **Reproductive health** – relationships – nutrition – mental health – age – physical health – ready psychologically and socially
- **Parents’ lifestyle choices** – antenatal care – accessing information – mental health – safety
- **Playing and reading** – nutrition – relationships – immunisation – protection – parenting – screen time – safety
- **Peer and family relationships** – bullying – immunisation – body changes – exercise – nutrition – parenting – screen time – safety

- **Period of significant growth and brain development**
Healthy, Safe and Well is a 10-year strategic health plan for all children, young people and families in NSW, developed by NSW Kids and Families as part of NSW Health. The Plan provides a comprehensive planning, service and policy roadmap from preconception to 24 years of age, including pregnant women, babies, children, young people and families.

The Plan is structured around five key Strategic Directions, each with its own series of objectives, actions and performance benchmarks to improve health, early intervention and the delivery of integrated, best-practice care.

STRATEGIC DIRECTION ONE: CARING FOR WOMEN AND BABIES
Better access to care from early pregnancy, evidence-based options for birth, improved transition from postnatal to parenthood services, with a focus on preparing for pregnancy and promoting parental health and wellbeing.

STRATEGIC DIRECTION TWO: KEEPING CHILDREN AND YOUNG PEOPLE HEALTHY
Promote good health through improved screening and immunisation, encouraging individuals, families and communities to adopt healthier lifestyles, reducing risky behaviours and improving ‘health literacy’.

STRATEGIC DIRECTION THREE: ADDRESSING RISK AND HARM
Increase awareness of the health impacts of domestic and family violence, sexual assault and childhood maltreatment, identify and support children at risk of harm, and improve our ability to respond to, and treat, injuries caused by accidents and intentional harm.

STRATEGIC DIRECTION FOUR: EARLY INTERVENTION
Target children at risk, strengthen early intervention services and therapies, improve developmental and disability outcomes, and engage proactively with families and young people to improve their long-term health.

STRATEGIC DIRECTION FIVE: RIGHT CARE, RIGHT PLACE, RIGHT TIME
Deliver best-practice care as close to home as possible, integrate health care delivery across the State, raise safety and quality standards, and promote culturally-responsive, age-appropriate care.

To make sure the reform agenda happens, the Plan also proposes complementary, targeted action in six key areas – Workforce, Evidence, eHealth, Leadership, Metrics and Partnership.

Partnership is crucial. Caring for children, young people and families in NSW is already a broad effort, relying on multiple players but, over the next decade, NSW Health and NSW Kids and Families will work to strengthen whole-of-government service delivery in collaboration with community and private health sectors and other government agencies.

The Plan is informed by the concept of a ‘life-course’ approach to better understand the health of children from before birth all the way to young adulthood. The life-course approach is dynamic, mapping the way life experiences, as well as social, biological and behavioural issues, can impact health and development over time (see figure on this page).

Implementation of this Plan will be led by NSW Kids and Families in partnership with the recently established NSW Kids and Families Council who will develop a three-year implementation plan by early 2015 and a first stage review in 2018.
STRATEGIC DIRECTIONS
STRATEGY MAP

Healthy Safe + Well

Vision ➞ Children, young people and families in NSW are healthy, safe and well

HEALTHY

Strategic Directions ➞

Objectives ➞

1. Caring for women and babies
   1.1 Help parents prepare for pregnancy and improve their health
   1.2 Improve access to high-quality, woman-centred care from early pregnancy
   1.3 Strengthen provision of safe, evidence-based birth options
   1.4 Support transition from postnatal care to parenthood

2. Keeping children and young people healthy
   2.1 Boost community capacity to pursue good health
   2.2 Improve screening, health checks and immunisation rates
   2.3 Improve health literacy
   2.4 Reduce risk taking and minimise harm

Prime responsibility of NSW Health
Responsibility of NSW Health and partners
Influencing role for NSW Health

MAKING IT HAPPEN

Workforce ➞ Evidence ➞ eHealth

Healthy Safe + Well
3. Addressing risk and harm

3.1 Increase awareness of violence, abuse and neglect on health over time
3.2 Improve identification and triage care for those at risk of harm
3.3 Build capacity to appropriately respond to victims of violence, abuse and neglect
3.4 Reduce the incidence and health impact of accidents, injuries and self-harm

4. Early intervention

4.1 Identify children who need extra support
4.2 Intervene early to prevent poor health, growth and development for children at risk
4.3 Act early to help children with chronic health conditions
4.4 Engage with young people at risk of poor health or absence from school

5. Right care, right place, right time

5.1 Deliver best-practice care as close to home as possible
5.2 Provide safe, high-quality, and effective healthcare
5.3 Deliver integrated, connected healthcare
5.4 Provide inclusive, family-centred, culturally respectful and age-appropriate care
STRATEGIC DIRECTION 1: CARING FOR WOMEN AND BABIES

Most pregnant women and babies in NSW are healthy and well. Infant mortality rates have more than halved in the last 25 years, and the gap between Aboriginal and non-Aboriginal babies has closed more recently.

We know that pregnancy is a unique opportunity to improve the health of newborn babies, and the children, teenagers and adults they become, and the health of their parents. Poor nutrition, smoking and alcohol consumption during pregnancy raise the risk of miscarriage, prematurity and low birth weight, but also the chances of asthma, obesity and poor cognitive development later in life.

We also recognise that some families require extra attention. Mothers from rural or remote areas, teenagers, culturally diverse communities, Aboriginal people, the homeless, or those experiencing domestic violence, mental health and/or substance abuse issues can have poorer pregnancy and perinatal health outcomes, and may need more customised, targeted care.

NSW Health’s woman-centred maternity services already provide continuity of care before, during and after pregnancy. NSW’s networked system of tiered maternity and neonatal services ensure birthing care is managed at the right hospital for a woman’s level of risk, while the Newborn and Paediatric
Emergency Transport Service safely oversees the transfer of care for babies requiring specialist care. Culturally specific care for Aboriginal women and their babies is also delivered from specific maternal and infant health services at 80 locations across the State.

To make sure we keep creating the very best opportunities for healthy mothers and babies in NSW, we have set four major objectives over the next decade. These include better access to care from early pregnancy, evidence based options for birth, improved transition from postnatal to parenthood services, and a focus on preparing for pregnancy and promoting parental health and wellbeing.

Aboriginal babies are more likely to be of low weight (11%) than non-Aboriginal babies (5.9%).

The provision of public antenatal care and pregnancy care targeted at vulnerable and at risk groups of women using innovative models of care is an opportunity to address brain development much earlier.

NSW Health clinician

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### Strategic Direction 1: Caring for women and babies

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<tr>
<th>Objectives</th>
<th>Strategies</th>
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| 1.1 Help parents prepare for pregnancy and improve their health | 1.1.1 Support women and their partners to prepare for pregnancy and birth  
1.1.2 Promote the health of prospective parents for the future health of their children  
1.1.3 Inform and include fathers/partners in pregnancy, antenatal care and preparation for parenthood |
| 1.2 Improve access to high-quality, woman-centred care from early pregnancy | 1.2.1 Early engagement with evidence-based antenatal care for all pregnant women and partners  
1.2.2 Provide equitable access to maternity care that ensures continuity of care and carer and improves women’s experience and outcomes  
1.2.3 Strengthen partnerships with Aboriginal communities to jointly design and deliver maternity care  
1.2.4 Customise care and information for those from culturally and linguistically diverse backgrounds |
| 1.3 Strengthen provision of safe, evidence-based birth options | 1.3.1 Inform pregnant women and partners about birth options in their local area appropriate to their level of risk  
1.3.2 Provide birthing care that promotes normal birth in an environment that is inclusive of fathers/partners and families  
1.3.3 Develop evidence-based standards of clinical care and promote their uptake  
1.3.4 Provide clinicians with consistent processes to escalate care for at risk mothers and babies |
| 1.4 Support transition from postnatal care to parenthood | 1.4.1 Promote breastfeeding in accord with World Health Organisation Standards and the Baby Friendly Health Initiative  
1.4.2 Support parents to provide a safe, nurturing and stimulating home environment  
1.4.3 Ensure all parents have access to culturally appropriate, universal child and family health services  
1.4.4 Provide targeted health services for vulnerable families and actively connect them to additional support services  
1.4.5 Research, develop and implement innovative, integrated maternal, child and family health care, with particular emphasis on rural and remote communities |
STRATEGIC DIRECTION 2: KEEPING CHILDREN AND YOUNG PEOPLE HEALTHY

Australian children are among the world’s healthiest. In the last 20 years, childhood mortality has halved while full immunisation at four years old is now 94 per cent in Aboriginal and 92 per cent in non-Aboriginal children. NSW children and young people also rank highly for healthy eating, exercise and dental health, with lower rates of smoking and alcohol use.

However, they can still face some significant challenges. Forty-three per cent of child deaths still occur in the first year of life, while we are also seeing rising rates of childhood diabetes, behavioural problems, autism, depression, anxiety, self-harm and eating disorders. In fact, in NSW, around 23 per cent of five to 17 year olds are overweight or obese.

Young people aged 12 to 24 years also face their own particular health issues and can be reluctant to use services. Adolescence, with its rapid physical, mental and hormonal changes, can trigger risky behaviours around smoking, alcohol and poor diet that can lead to chronic health problems as adults.

A public health approach is critical to keeping all children healthy and well in the future. NSW Health’s immunisation programs, Healthy Children Initiatives, our well-established network of 500 Early Childhood Health Centres and whole-of-government initiatives have rapidly lifted healthy eating, active living, screening and prevention in children across the State, but more work needs to be done on reducing obesity and helping young people to build resilience and form life-long healthy habits.

Over the next decade, we have set four key objectives to make sure we keep NSW children and young people healthy, including reducing preventable diseases through improved screening and immunisation, decreasing risky behaviours, and encouraging individuals, families and communities to adopt healthier lifestyles and improve their ‘health literacy’.

The Plan must also support parents, carers, families and communities, as well as young people themselves, to better understand what they can do to foster good health, growth and development. This includes deliberate actions to help improve the health literacy of these groups.

“Child protection manager”

23% of schoolchildren are classified as overweight or obese
More than 50% of primary and 75% of secondary school students did not meet small screen time guideline.

90% of children were immunised at age one, 91.8% at age two, 92.1% at age five.

### Strategic Direction 2: Keeping children and young people healthy

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| 2.1 Boost community capacity to pursue good health | 2.1.1 Promote healthy eating and active lifestyles in families, schools and communities  
2.1.2 Encourage a whole-of-government approach to better health for children, young people and families  
2.1.3 Identify and tackle health inequities through targeted health promotion programs  
2.1.4 Guide appropriate screen time viewing for infants, children and young people to counter any negative impact on health, including weight, sleep and development |
| 2.2 Improve screening, health checks and immunisation rates | 2.2.1 Drive participation and effectiveness of universal health screening and immunisation programs for all children  
2.2.2 Promote use of the Personal Health Record (Blue Book)  
2.2.3 Support development of the NSW electronic Blue Book and a national Child Electronic Health Record |
| 2.3 Improve health literacy | 2.3.1 Improve knowledge of health promotion and health services among parents, carers and school children  
2.3.2 Communicate effectively so parents, carers, children and young people make healthy life choices  
2.3.3 Assist schools and local communities to create age-appropriate health promotion programs |
| 2.4 Reduce risk taking and minimise harm | 2.4.1 Better identify and address risk-taking behaviours and psychological distress among parents, children and young people  
2.4.2 Support parents and carers to prevent and/or intervene in behaviours that are detrimental to their children’s health  
2.4.3 Help build early intervention services to address sexual and reproductive health, drug and alcohol misuse, and psychological distress in young people |
STRATEGIC DIRECTION 3: ADDRESSING RISK AND HARM

Childhood injury in NSW continues to fall, following a series of cross-government initiatives in the last decade, mandating safer playgrounds, pools, windows and balconies, targeted road safety, and improved car design.

Despite great progress, injuries and poisoning remain the major causes of hospitalisations and death among one to 24 year olds. Hospitalisation is highest for 15 to 24 year olds – especially males, Aboriginal people, and children living in rural and remote areas – with falls, car accidents, self-harm and suicide among the leading causes.

Some of the harm faced by women and children, however, is more insidious. Domestic and family violence, sexual assault, child abuse and neglect, bullying, stress and trauma can have major health, social, physical and psychological impacts into adulthood, including poorer brain development, autoimmune disease and mental health problems.

NSW has made great strides in addressing risky behaviour and harm in children and young adults through whole-of-government, statewide initiatives like Keep Them Safe and the recently launched It Stops Here, as well as targeted projects in Local Health Districts and Aboriginal communities.

Reducing intentional and unintentional injuries and harm, while boosting health, self-esteem and wellbeing, will be built around new efforts that focus attention on the health impacts of domestic and family violence, and childhood maltreatment, training health professionals to better identify and support adults and young children at risk, and improving our capacity to respond to injury and harm.

"Trauma-informed approaches need to be universal across health settings not just in the obvious teams or services. We need the emergency departments, wards, child and family health nurses, general practitioners to be as trauma informed as any other service because they see a larger population."

Survey respondent
Over 40% of women reported physical violence and 20% sexual violence after age 15

### Strategic Direction 3: Addressing risk and harm

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| 3.1 Increase awareness of violence, abuse and neglect on health over time | 3.1.1 Build public awareness of the long-term health impact of adverse events on children and young people  
3.1.2 Support parents and schools to reduce peer-to-peer abuse among young people  
3.1.3 Educate health professionals to recognise signs of violence, abuse and neglect |
| 3.2 Improve identification and triage care for those at risk of harm | 3.2.1 Reinforce the roles and responsibilities of health workers to screen, report and triage care for those at risk  
3.2.2 Embed a trauma-informed approach to assessing those who have been harmed or are at risk  
3.2.3 Work with partner agencies to better care for those at risk of domestic and family violence, sexual assault, or child abuse and neglect |
| 3.3 Build capacity to appropriately respond to victims of violence, abuse and neglect | 3.3.1 Adopt appropriate psychosocial, medical and forensic responses for sexual assault, child abuse and neglect  
3.3.2 Work with government and community partners on integrated care for victims of domestic and family violence, sexual assault, child abuse and neglect  
3.3.3 Build capacity for proactive, trauma-informed services for victims of intentional harm  
3.3.4 Create evidence-based, family-centred programs to change abusive behaviours in children and young people |
| 3.4 Reduce the incidence and health impact of accidents, injuries and self-harm | 3.4.1 Work with partners to investigate evidence-based interventions that reduce intentional or non-intentional injury  
3.4.2 Adopt best-practice health strategies to mitigate harm and improve recovery from accidental injuries  
3.4.3 Develop targeted health services to better treat and protect young people from intentional self-harm, psychosocial disorders and suicidal behaviour |
STRATEGIC DIRECTION 4: EARLY INTERVENTION

Australian and international studies overwhelmingly support the importance of prevention, early intervention and family engagement in improving the health of children as they grow.

Identifying health or development issues early not only benefits children but the whole health system. In 2012, nearly 20 per cent of NSW children screened in their first year of fulltime school were considered developmentally vulnerable, while around 12 per cent of hospitalisations of children and young people last year were thought to be potentially preventable.

NSW Health takes a lead role in early intervention efforts, including Child and Family Health Services, Child and Adolescent Mental Health Services, targeted first-trimester antenatal care, Child Wellbeing Units and Family Referral Services that triage care for vulnerable families. Our Building Strong Foundations program for Aboriginal children is also strengthening family and community capacity to keep these children healthy and ready to learn, while we have also begun establishing targeted programs for children who we know need sustained or whole-of-family care.

Early intervention needs to be built around a whole-of-government, statewide approach and NSW Health already works collaboratively with other government departments, community agencies and local health providers to make it happen.

To strengthen early intervention capacity, investments, services and research over the next decade will require collaborative partnerships in government, and the private and community sectors. With their help, we will work to improve the identification of at-risk children and families, strengthen the range of early intervention services and therapies, optimise the outcomes for developmental and disability issues, and engage proactively with families and young people on their health.

“Specialist health services play a key role in working in partnership with specialist disability and mainstream services in multidisciplinary approaches to improve the health and wellbeing outcomes for mutual clients.”

NSW Department of Family and Community Services representative
Mental health disorders account for 50% of the burden of disease among 15-24 year olds.

Strategic Direction 4: Early intervention

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| 4.1 Identify children who need extra support | 4.1.1 Identify risk early in pregnancy/parenthood and address factors that may impair parenting capacity or healthy development of child  
4.1.2 Develop assessment tools to identify early children at risk of poor health, growth and development  
4.1.3 Use population health measures and trends to guide the provision of targeted health services |
| 4.2 Intervene early to prevent poor health, growth and development for children at risk | 4.2.1 Engage earlier with parents with mental health and/or drug and alcohol issues to better support parent-child relationships  
4.2.2 Connect children with therapeutic services to promote school readiness and learning  
4.2.3 Work with government and community partners to develop locally driven, integrated services for children and young people at risk of harm or poor health and wellbeing |
| 4.3 Act early to help children with chronic health conditions | 4.3.1 Support early access to genetic counseling and health services for families of children born with congenital conditions  
4.3.2 Act early to support and link children with disability, developmental delay or other chronic health conditions to primary healthcare services and community supports  
4.3.3 Work with Department of Family and Community Services and the National Disability Insurance Agency to safeguard timely health and therapy services for children and young people with long-term disability or disease |
| 4.4 Engage with young people at risk of poor health or absence from school | 4.4.1 Strengthen the health and resilience of vulnerable children and young people, particularly those who are in out-of-home-care, homeless, in the justice system, or are new migrants or refugees  
4.4.2 Increase health service capacity to proactively engage with young people and young carers on emerging health, education and psychosocial concerns  
4.4.3 Involve young people in the design and delivery of services that meet their needs |
STRATEGIC DIRECTION 5: RIGHT CARE, RIGHT PLACE, RIGHT TIME

The majority of the 100,000 babies born in NSW each year are already well cared for in both small and large public maternity services right across the State. General practitioners primarily meet the health needs of children as they grow, with over 84 per cent of NSW’s 2.4 million children and young people seeing their local doctor at least once every year.

However, we know more can be done to deliver hospital care as locally as possible. Emergency departments manage over 870,000 presentations from children and young people each year and around 380,000 children are hospitalised. The highest hospitalisation rates occur in infants under one year for conditions associated with birth or congenital disease, while for one to 24 year olds, the leading causes are injury and poisoning.

Improving access to care locally must tackle a number of barriers. One of the biggest is geography, given that just over one-quarter of people under 25 years live outside major cities, with one-third estimated to have difficulty accessing care. Other hurdles include low income, language, culture, Aboriginality and poor access to health service information. At the same time, the cumulative impact of chronic complex conditions is increasingly challenging families and health services.

NSW Health and our partners are working to create seamless, networked services, from primary to highly specialised care, as well as longitudinally over the life-course. Strengthening supports for local clinicians to deliver best-practice care in primary and hospital settings is an important priority of this Plan. When children require more specialised care, escalation protocols at both regional and statewide levels link clinicians to the 24/7 Newborn and Paediatric Emergency Transport Service and the three specialist children’s hospitals. The NSW Children’s Healthcare Network brings expertise and education to regional areas, and digital health technologies expand our reach.

To drive comprehensive, integrated child- and family-centred health services over the next decade, we will boost the delivery of best-practice care as close to home as possible, strengthen our networked system of healthcare delivery across the State, keep raising safety and quality standards, and promote culturally-responsive, age-appropriate care.

“[Our statewide commitment ensures that wherever a child lives and needs healthcare, the whole system is connected and responsive in meeting those needs and delivering the right care.]”

NSW Chief Paediatrician
## Strategic Direction 5: Right care, right place, right time

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| **5.1 Deliver best-practice care as close to home as possible** | 5.1.1 Develop ‘Service Capability Frameworks’ to help create a networked health system which drives delivery of accessible, equitable and safe care as close to home as possible  
5.1.2 Develop evidence-based standards of practice to improve consistency of care and reduce unwarranted clinical variation  
5.1.3 Engage and support clinicians to drive local uptake of best-practice care  
5.1.4 Progress inclusive and innovative care to close the gap in health outcomes for Aboriginal and rural families |
| **5.2 Provide safe, high-quality and effective healthcare** | 5.2.1 Strengthen analysis of health data to continuously learn from incidents, adverse events and morbidity/mortality review  
5.2.2 Support health providers to meet or exceed National Safety and Quality Health Service Standards  
5.2.3 Collaborate on clinical redesign strategies to improve the quality, safety and effectiveness of healthcare  
5.2.4 Establish a statewide system to provide expert advice to health practitioners and facilitate escalation of care |
| **5.3 Deliver integrated, connected healthcare** | 5.3.1 Better connect care across the continuum of maternal and early child health services  
5.3.2 Bring together and enhance services to encompass the physical and mental health needs of parents, children and young people  
5.3.3 Connect care across service sectors and over time for children and young people with chronic or complex conditions  
5.3.4 Ensure young people receive seamless clinical care in the most appropriate setting for their disease as they transition to adulthood |
| **5.4 Provide inclusive, family-centred, culturally respectful and age-appropriate care** | 5.4.1 Customise care to be culturally inclusive, age-appropriate and responsive to diversity  
5.4.2 Support parents, carers, children and young people to navigate health systems as active, informed participants in healthcare  
5.4.3 Incorporate the experiences of new parents, children, young people and their families in the design and delivery of child and family-centred practice  
5.4.4 Adopt the Charter of Rights for Children and Young People in Healthcare across NSW Health services |
Healthy, Safe and Well is a comprehensive blueprint for improving the health of our children, young people and families over the next decade. To deliver on initiatives in prevention, early intervention and integrated care, our work will be guided by six core enablers in workforce, evidence, eHealth, leadership, metrics and partnership.

WORKFORCE
Attracting, training and keeping highly skilled personnel is key to all of NSW Health, but is crucial in child and family care where the range of skills and geography covered necessitates a flexible, skilled and culturally competent workforce with ready access to training, best-practice knowledge and specialist advice.

EVIDENCE
NSW Health policy, planning and services are informed by evidence-based research, world’s best practice and extensive consultation, an approach that will underpin the future of our health, and drive research and innovation.

eHEALTH
NSW Health already has one of the country’s most ambitious eHealth agendas, a capacity that will now be embedded across all child and family services to help drive integration, service delivery, access, communication, treatment and innovation for the next decade.
**Making it happen**

<table>
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<tr>
<th>Objectives</th>
<th>Strategies</th>
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| **1. Workforce** – foster an empowered and capable workforce | 1.1 Improve recruitment, retention and placement of maternal, neonatal, paediatric, child and youth health professionals, particularly in rural and remote areas  
1.2 Enable access to critical training and education for clinicians wherever they work  
1.3 Increase health professionals’ capacity to recognise the signs and impact of adverse childhood experiences, and to deliver trauma-informed care  
1.4 Provide easy access to evidence summaries, standards and tools  
1.5 Increase capacity and cultural competence of the health workforce to deliver effective health services to Aboriginal families  
1.6 Improve the competence of health professionals to provide care to families from linguistic and multicultural diverse backgrounds  
1.7 Build capacity to adapt and customise care to ages, developmental stages, special needs, and those who are gender variant and sexuality diverse |
| **2. Evidence – generate and translate evidence into policy and practice** | 2.1 Facilitate research partnerships to guide service and systems improvement, evaluation and clinical practice  
2.2 Translate evidence to inform policy and guideline development, public knowledge and resource allocation  
2.3 Share new evidence and innovations with clinicians and support system-wide implementation of best practice |
| **3. eHealth – develop and expand eHealth** | 3.1 Apply technology like Wiki sites, online solutions, telehealth and mHealth to drive health gains  
3.2 Grow system connectivity to improve patient management and integrated care, including maternal and infant health record linkage  
3.3 Develop systems to better capture, measure and report on activity, quality and cost effectiveness  
3.4 Use technology to boost clinician skills via access to specialist advice, peer review, simulation and video |
| **4. Leadership – encourage leadership for future generations** | 4.1 Build local and system leadership to drive implementation of this Strategic Health Plan  
4.2 Promote adaptive leadership capability in line with the HETI Leadership Framework  
4.3 Advocate a whole-of-government response to improving the health and wellbeing of all children and young people  
4.4 Actively participate in human and social policy leadership and learning forums |
| **5. Metrics – measure outcomes to inform future strategy** | 5.1 Ensure new programs have accompanying monitoring and evaluation plans  
5.2 Undertake analysis and reporting of performance and outcome data to boost performance and quality improvement  
5.3 Apply outcome-based funding models to better measure, monitor, allocate resources and report on relative cost effectiveness |
| **6. Partnership – building partnerships** | 6.1 Work collaboratively with government partners on policy and strategy to achieve equitable health status for children and young people  
6.2 Build integrated, multi-system services within local communities  
6.3 Partner with Aboriginal, multicultural and other diverse communities for better health solutions |

**LEADERSHIP**

Building leadership, innovation and creativity at all levels is critical for our success and, from its lead advocacy role, NSW Kids and Families will work to build that capacity at a state, regional and local level.

**METRICS**

NSW Health services are already underpinned by a range of sophisticated metrics to generate systemwide improvements, efficiencies and resource allocation, a capacity that will be further embedded to drive future delivery of high-value health services for children, young people and families.

**PARTNERSHIP**

Building partnerships is central to the success of this Plan, not only across all government agencies, but between local health providers, the community and private sectors, families and the community.
Implementation of Healthy, Safe and Well will be led by NSW Kids and Families in a staged process to allow ongoing refinement over the next 10 years. NSW Kids and Families will monitor the impact of the Plan’s objectives and strategies, which inform our Service Compact with the Ministry of Health. At the local level, the Plan will guide the health service priorities of Local Health Districts and Specialty Health Networks, and will be integrated within their Service Agreements.

We have also established a NSW Kids and Families Council, made up of senior leaders from each Local Health District, the Specialty Health Networks in maternal, child and youth health, and from the Ministry of Health and Pillar organisations, to provide expert guidance to the rollout.

The Council will oversee the development of a three-year implementation plan by early 2015, outlining the key deliverables for each strategy, metrics and the partners involved. It will also help guide decisionmaking on priorities for each three-year period, support stakeholder engagement and partnership initiatives, and promote local innovation. The Council will direct a first stage review of the Plan in 2018 to provide independent feedback on progress against each of the objectives as a guide to policy adjustments and to identify areas for potential improvement.

An initial framework of indicators will guide how we measure our performance in meeting the objectives outlined in the Plan, and will be finalised by the NSW Kids and Families Council as part of the implementation plan.
MEASURING PROGRESS

Monitoring and evaluating the success of this Plan is key to continuous improvement. A steering group made up of NSW Kids and Families Council members, and experts in monitoring and evaluation, will be formed to provide direction to NSW Kids and Families on the development and implementation of the framework.

Given the breadth of maternal, children and family services across NSW, the framework will need to be broad and the indicators below provide a starting point for measuring the health status of children, young people and families over 10 years. Baseline levels for indicators will be set and monitored routinely as new data becomes available, and additional key indicators will be added where appropriate.

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<tr>
<th>Strategic direction</th>
<th>Key indicators</th>
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<td><strong>1: Caring for women and babies</strong></td>
<td>Reduce the percentage of low birth weight babies + Reduce the percentage of mothers who smoke during pregnancy + Reduce the rate of infant mortality + Increase the percentage of infant breastfeeding at discharge from hospital and at six months + Increase the percentage of women who commence antenatal care in the first 14 weeks of pregnancy + Increase the percentage of clients who are satisfied with their public maternity care +</td>
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<td><strong>2: Keeping children and young people healthy</strong></td>
<td>Reduce the rate of child mortality due to injury or poisoning + Reduce the percentage of secondary school students who smoke + Reduce the percentage of school children who are overweight or obese + Increase the percentage of school children who meet the small screen time recommendation + Increase the percentage of children who are fully immunised at one, two and five years +</td>
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<tr>
<td><strong>3: Addressing risk and harm</strong></td>
<td>Reduce the number of deaths due to domestic violence + Reduce the percentage of intentional and non-intentional child deaths due to injury and poisoning + Reduce the number of fractures in children less than one year old + Reduce the rate of hospitalisations related to injury and poisoning for children and young people + Reduce the rate of children who were the subject of child protection substantiation in a given year +</td>
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<td><strong>4: Early intervention</strong></td>
<td>Reduce the percentage of children rated as being vulnerable on one or more domains of the Australian Early Development Census + Reduce the percentage of potentially preventable hospitalisations among children and young people + Reduce the rate of emergency department presentations for mental health problems in young people + Increase (or maintain where appropriate) the percentage of newborns, infants and children receiving early detection screening: newborn hearing • vision screening • bloodspot screening +</td>
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<td><strong>5: Right care, right place, right time</strong></td>
<td>Achieve the target set for children and young people seen within clinically recommended times for elective surgery + Achieve the target set for children and young people with total time in the emergency department of less than or equal to four hours + Increase the proportion of children whose paediatric surgical procedures are managed locally + Increase the percentage of parents/carers rating their child’s hospital care as very good or good +</td>
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healthy, safe and well