



Review of Victorian paediatric services

Department of Human Services response

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Introduction

The Department of Human Services commissioned the Review of Victorian Paediatric Services, as a component of the Metropolitan Health Strategy and the Victorian Rural Human Services Strategy.

The aim of the review was to identify the health needs of Victorian children and adolescents, examine the level and distribution of paediatric services that would best meet these needs, and prepare a planning framework for the future provision of paediatric services in Victoria.

The main focus of the review was paediatric hospital services, however, the interface between these services and key non-acute health services and other relevant services, was included in the project scope.

La Trobe University undertook the review which was overseen by an advisory group, comprising metropolitan and rural service providers, departmental representatives, a consumer representative and a range of clinical staff with expertise in various aspects of paediatrics and children's health.

The project methodology involved extensive consultation with the Victorian health sector, departmental officers, tertiary paediatric providers and government health authorities in Queensland and New South Wales. More than 60 written submissions were received.

The Review of Victorian Paediatric Services – final report was completed by the project consultants and accepted by the advisory group in December 2002.

The final report includes more than 40 recommendations for the development and enhancement of paediatric services in Victoria. The department has responded to each recommendation.

Implementing the recommendations

The agreed recommendations of the review cover a broad range of departmental programs that have an impact on the health, wellbeing and development of children and young people. These recommendations will be implemented through work to be undertaken in and across departmental program areas and through the development and implementation of key departmental initiatives including:

- Early childhood policy framework
- *Directions for your health system–Metropolitan Health Strategy*
- *Directions for your health system–Metropolitan Health Strategy–ambulatory care services* (2003)
- *New directions for Victoria's mental health services–the next five years* (September 2002)
- *Victorian State Disability Plan 2002–2012* (September 2002)

A departmental policy action group, chaired by the Under Secretary, Policy and Strategic Projects, will be established to provide a whole of department view on child and young persons' health and wellbeing issues. This group will oversee the implementation of the agreed recommendations of the Review of Victorian Paediatric Services and the intradepartmental Early Childhood Policy Framework Working Group.

The agreed recommendations of the review will also be progressed through government policy and initiatives aimed at enhancing the development and planning of services for children and young people, including:

- Growing Victoria Together policy, which commits the Victorian Government to improving the health, learning and wellbeing of young children (aged 0–8 years), including the development of Best Start as a model of integrative innovation; the Child Protection Innovation Projects; and Safe Start projects.
- Children First policy which sets out further initiatives to deliver on the Growing Victoria Together policy, including the establishment of a Victorian Children's Advisory Committee to assist the government in achieving its objective to ensure that the development and learning are optimised for all children from pregnancy to transition to school.
- The Office for Youth, within the Department for Victorian Communities, which provides a whole of government focus on youth issues and was established to ensure the achievement of the Government's vision for young people as documented in *Respect: The Government's vision for young people. A framework for policy and program development (2002)*.

Conclusion

The agreed recommendations of the Review of Victorian Paediatric Services and the strategies to ensure their implementation will be important components in ensuring a coordinated approach to the planning and development of policy and programs that affect the health, wellbeing and development of children and young people.

Review recommendations and department response

Table 1 lists the review recommendations along with the department's response to each recommendation.

Table 1. Review recommendations and department response

Recommendations	Department response
Section 7.1 Parents and families	
7.1a Department of Human Services ensure continuing consultation with parents and families in future policy and service planning and development, including participation on working groups.	Agreed.
Section 7.2 Tertiary service providers	
7.2a Royal Children's Hospital (RCH) be designated by the Department of Human Services as the high complexity tertiary paediatric centre for Victoria.	Agreed.
7.2b Monash Medical Centre (MMC) develop a strategic plan for its paediatric service that incorporates: <ul style="list-style-type: none"> adequate secondary care for the local population appropriate high volume tertiary services improvements to the paediatric emergency department expansion of the paediatric beds in operation, including establishment of a ward-based paediatric high dependency unit a focus on community child and adolescent health. 	Agreed.
7.2c The development of specific recommendations on siting services between RCH and MMC be assigned to broadly representative working groups, ensuring providers, consumers and the Department of Human Services work together.	Agreed. This recommendation will also be addressed through development of strategic service plans for Southern Health and Women's and Children's Health, and the current service plan review for the RCH.
7.2d The Department of Human Services review paediatric transplantation and establish policy to ensure best quality practice for this low volume service.	Agreed. Organ transplants have been identified within the Metropolitan Health Strategy as a super-speciality area for service framework development.

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Table 1. Review recommendations and department response continued

Recommendations	Department response
Section 7.3 Metropolitan paediatric and adolescent services	
7.3a As at the present time all the metropolitan hospitals with paediatric services have a valuable role in providing local access to paediatric services for their communities, they should continue.	Agreed.
7.3b Within the metropolitan growth corridors (Northern, Western and Southern) ambulatory, outpatient and community services be developed.	<p>The department recognises the need to develop ambulatory and community-based paediatric services in growth corridors.</p> <p>This recommendation will be progressed through the department's ambulatory care services framework detailed in <i>Directions for your health system – Metropolitan Health Strategy – ambulatory care services</i>.</p>
7.3c Outside the growth corridors ambulatory services in the community be enhanced to provide integrated multidisciplinary care for the large number of children who present with non-acute and more long-term problems.	<p>Agreed.</p> <p>The development of ambulatory services is consistent with the themes of the Metropolitan Health Strategy, however, short to medium term priorities will focus on the metropolitan growth corridors.</p>
7.3d Department of Human Services re-examine the paediatric bed allocations for the communities in the Southern Metropolitan Region, served by Dandenong, Frankston and Berwick Hospitals and MMC. Specifically, the provision of paediatric beds at Berwick should be reviewed in the light of the needs of the community and the role of MMC in responding to these needs.	<p>Agreed.</p> <p>This recommendation will be addressed as part of strategic service plans for Southern Health and Peninsula Health.</p>
7.3e Department of Human Services establish suitable policy for the management of adults in children's wards.	<p>Health services will be required to develop site-specific policies on the management of adults in children's wards as part of strategic service plans or regional health service planning.</p> <p><i>Design guidelines for hospital and day procedure centres</i>, released for comment in July 2003, considered the specific facility needs of children.</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
<p>7.3f Department of Human Services explore the feasibility of coordinated children’s after hours services.</p>	<p>The department will examine jointly funded collocated general practice (GP) clinics with hospital emergency departments, as a strategy to relieve emergency department pressures.</p>
<p>Section 7.4 Regional paediatric and adolescent services</p>	
<p>7.4a There be no change in the number of paediatric services in hospitals in regional areas.</p>	<p>The department agrees that there will be no change in the number of paediatric services in regional areas, in the short to medium term.</p> <p>Medium to longer term planning of paediatric services will be based on a re-examination of local trends and issues, as part of regional health service planning.</p>
<p>7.4b Three paediatricians should be recognised as the minimum number for funding purposes.</p>	<p>The department agrees that three paediatricians per paediatric service is an optimal number for service planning. While this is the optimal number, this recommendation is agreed to without prejudice to those services currently functioning with less than three paediatricians.</p>
<p>7.4c The Department of Human Services investigate the establishment of a ‘package of care’ funding model for regional paediatric centres that enables the provision of the package of required services and maintains expertise and capacity to respond to the increasingly more infrequent needs of the acutely ill child.</p>	<p>The department supports the longer-term development of a flexible funding model at whole-of-service level.</p>
<p>Section 7.5 Shared Care</p>	
<p>7.5a A networking structure for Victoria be established and supported through dedicated funding by Department of Human Services to:</p> <ul style="list-style-type: none"> • promote shared care among paediatric providers • facilitate the development of a partnership culture • formally define responsibilities for all providers of paediatric care • ensure workable standards and protocols are in place. 	<p>The department agrees to the establishment of a networking structure for Victoria.</p> <p>This will be progressed through the development of a shared care model, which includes treatment protocols and guidelines.</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
Section 7.6 Emergency services	
7.6a Department of Human Services establish a policy on emergency department facilities and staff competencies required for services to children.	<p>Health services should ensure that staff have the credentials and competencies to provide emergency department services to children, based on evidence-based practice.</p> <p>Health services will be required to document their policies on managing children in emergency departments as part of strategic service plans or regional health service planning.</p> <p><i>Design guidelines for hospital and day procedure centres, released for comment in mid-2003, considered the specific facility needs of children.</i></p>
Section 7.7 Neonatal and paediatric emergency transport services	
7.7a Department of Human Services ensure the capacity of Paediatric Emergency Transport Service is expanded to meet the emergency transport needs of the state.	The department agrees to undertake an analysis of paediatric emergency transport needs and how those needs can be met.
Section 7.8 Mental health services for children and adolescents	
7.8a Department of Human Services continue to work with the Commonwealth to ensure appropriate incentives for private psychiatrists to provide public service.	Agreed.
7.8b Training be provided for community GPs to provide ongoing support within a shared care model to children and adolescents with mental health needs.	<p>The department supports the principle of shared care for children and adolescents with mental health needs. Child and adolescent mental health services (CAMHS) currently provide specialist psychiatric care to consumers and families as well as consultation and training to schools and other health care providers. In addition to CAMHS, primary mental health and early intervention services support primary care providers in delivering mental health care to people of all ages.</p> <p>Any expansion of the capacity of CAMHS to provide training and ongoing support within a shared care model will be considered as part of longer term planning. This will follow the current strategic plan for mental health services in Victoria—<i>New directions for Victoria's mental health services – the next five years.</i></p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
<p>7.8c Child and Adolescent Mental Health Services (CAMHS) be aligned administratively with other child health services.</p>	<p>The department supports the direction of increasing collaboration and collocation between child and adolescent services, however, careful consideration is required to ensure existing relationships between CAMHS and the specialist mental health service system are not diminished.</p>
<p>7.8d Consultation and liaison mental health services for children and adolescents be enhanced.</p>	<p>The department supports the need for expanding consultation and liaison mental health services for children and adolescents. In addition to services provided by CAMHS, described above, psychiatric consultation liaison services are currently provided to the emergency departments and some clinical units of tertiary teaching and some metropolitan hospitals. Twenty-four hour access to specialist psychiatric advice is also available through hospital emergency departments.</p> <p>Building the capacity of CAMHS to provide advice and consultation to schools and primary care practitioners, and strengthening CAMHS outreach services, subject to the availability of funding, are key future priorities for the implementation of <i>New directions for Victoria's mental health services – the next five years</i>.</p> <p>Any expansion of CAMHS capacity to provide further consultation and liaison to schools, health services and primary care providers will be considered as part of longer term planning following the life of the current strategic plan for mental health services in Victoria <i>New directions for Victoria's mental health services – the next five years</i>.</p>
<p>Section 7.9 Rehabilitation for children and adolescents</p>	
<p>7.9a A statewide specialised paediatric and adolescent rehabilitation service be developed as a priority.</p>	<p>The department recognises the need to develop a statewide specialised paediatric and adolescent rehabilitation service. The development of the service will be subject to the availability of additional funding resources.</p>
<p>7.9b Department of Human Services complete a study to define in detail the requirements of the specialist paediatric and adolescent rehabilitation service for the State.</p>	<p>Agreed.</p> <p>The study will be undertaken through a working party, with representatives from the department, and individuals with expertise and experience in paediatric and adolescent rehabilitation.</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
<p>7.9c The funding of paediatric rehabilitation should recognise the specialised nature of this service, as level 1 specialist rehabilitation.</p>	<p>Funding of paediatric rehabilitation will be included within the scope of the working party analysis.</p>
<p>7.9d Department of Human Services allocate interim brokerage funding to respond to the immediate needs.</p>	<p>Current funding arrangements for rehabilitation services will remain in place pending the outcomes of the working party analysis.</p>
<p>Section 7.10 Services for children and adolescents with chronic conditions and disabilities</p>	
<p>7.10a In local communities, services for children be colocated for improved coordination and communication, with consideration given to establishing community child and young person's health centres.</p>	<p>Opportunities to colocate services for children in local communities will be examined within the department's ambulatory care services framework detailed in <i>Directions for your health system – Metropolitan Health Strategy – ambulatory care services</i> and within the Government's Children's First policy.</p> <p>In addition, strategies to enhance coordinated service delivery for children with a disability will be implemented as part of the <i>Victorian State Disability Plan 2002–2012</i> (September 2002). Specific strategies include:</p> <ul style="list-style-type: none"> • the development of a family focused assessment and planning framework for children with a disability and their families • consolidation of existing flexible care programs • alignment of disability-specific intake screening and referral process with other programs (for example, through Primary Care Partnerships).
<p>7.10b Department of Human Services and the Department of Education and Training set up a working group looking at establishing a framework, principles and specifications for the important relationship between child health and education. The objective of this working group is to ensure both government Departments are focused on effectively meeting the linked health and education needs of children and adolescents, with common goals.</p>	<p>The department is committed to working with the Department of Education and Training, on areas where health and educational goals for children intersect.</p> <p>The relationship with DET will be strengthened through implementation of the <i>Victorian State Disability Plan 2002–2012</i> (September 2002).</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
<p>7.10c Current review of the equipment for people with disabilities take into consideration equipment needs of children and adolescents currently being met by hospitals.</p>	<p>The current review by the Aids and Equipment Committee of the equipment available through the Aids and Equipment Program for people with a disability has recommended a reconsideration of the program's structure in providing aids and equipment to children with a disability.</p> <p>This recommendation will be addressed as part of the implementation of the <i>Victorian State Disability Plan 2002–2012</i> (September 2002).</p>
<p>Section 7.11 Prevention and early intervention</p>	
<p>7.11a Department of Human Services ensure that, following the review of child protection services, plans be made to more closely link child protection with paediatricians, maternal child nurses and obstetrics/neonatology services in local communities.</p>	<p>The Child Protection outcomes project being undertaken by the Department has a focus on clarifying and improving outcomes for children and young people who are in statutory care or at risk of entering the child protection system. The project will also examine the current legislation and practice of child protection in Victoria and will identify areas for improvement.</p> <p>The department will continue to work towards strengthening the links between child protection services and health and community services, through high risk infant initiatives, the Best Start project and Child Protection Innovation projects.</p> <p>Improving links between services will also be an ongoing area for consideration, as part of the development and implementation of an early childhood policy framework by the department.</p>
<p>7.11b In the establishment of community paediatric positions (see recommendation 9.1b), these positions have a defined role in child protection services.</p>	<p>The department will explore strategies and initiatives aimed at building pathways between child protection services and community-based paediatricians.</p>
<p>Section 7.12 Dental health</p>	
<p>7.12a Working with Department of Human Services, Dental Health Services Victoria and local providers, RCH should be supported to enhance dental outreach services to facilitate local access to qualified practitioners through the provision of community-based clinics and education and training to local providers.</p>	<p>The department recognises the need to improve access to paediatric dental services, including special needs, through community clinics and education and training for community providers.</p> <p>Dental Health Services Victoria, as the peak public dental agency, will take the lead in progressing and coordinating initiatives, working with RCH as a specialist agency.</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
<p>7.12b Appropriate local responses to improve dental health also be considered in the evolving focus of the Best Start initiative.</p>	<p>Agreed.</p> <p>The Best Start program encourages statewide local partnerships to consider dental health when considering the health, development, learning and wellbeing of children within their communities.</p>
	<p>The Government has also committed, in the 2003–2004 State Budget, \$21 million over four years to improve dental services. This initiative includes funds for the promotion of oral health within preschools and other early childhood services.</p>
Section 7.13 Transitioning to adult services	
<p>7.13a A statewide survey be completed by Department of Human Services to identify the needs for and issues related to transition to adult services prior to planning and developing the needed transition programs.</p>	<p>The department agrees to examine transition needs in Victoria, in consultation with providers and individuals with expertise and experience in transition issues.</p> <p>This will be progressed initially through the development and piloting of two models to assist the transfer and medical management of young people with developmental disability and complex medical needs from the paediatric to the adult health care system.</p> <p>The pilot models will be guided by a separate evaluation project, which will actively research the pilot models, provide best practice recommendations and indicate how the recommendations can be applied, as well as examine transition needs in Victoria.</p>
<p>7.13b Based on the results of the survey, transition programs be developed for adolescents who require ongoing care into adulthood, such as children with chronic diseases.</p>	<p>The development and implementation of transition programs beyond the two pilot models discussed above will be informed by the evaluation project.</p>
Section 7.14 Use of technology to improve access	
<p>7.14a Department of Human Services explore the feasibility of a call centre (possibly in association with after hours services, see recommendation 7.3f)</p>	<p>The department is exploring the feasibility of a call centre to provide health information and advice to the wider community, including paediatrics.</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
<p>7.14b Appropriate support be provided for telemedicine services to further link the metropolitan and regional sectors (potentially designed to assist in development of the networking structure, see recommendation 7.5a)</p>	Agreed.
Section 7.15 Private hospital services	
<p>7.15a A feasibility study be undertaken by the Royal Children's Hospital for a private hospital collocation with Royal Children's Hospital. This should consider the model established by MMC and Jesse McPherson Private Hospital.</p>	Any model for the provision of private sector services on the RCH site must be fully contestable and consistent with master-planning for the hospital.
Section 8 Policy and service planning structure	
<p>8a Structures be established within the Department of Human Services to plan the integration and provision of a system of child health services; supported by mechanisms that ensure advice from providers and consumers, such as an advisory committee and working groups.</p>	<p>The department recognises the need for a coordinated approach to planning and developing policy and programs that have an impact on the health, wellbeing and development of children and young people.</p> <p>This will be progressed through:</p> <ul style="list-style-type: none"> • establishing a departmental policy action group, chaired by the Under Secretary, Policy and Strategic Projects • developing and implementing an early childhood policy framework • establishing a Victorian children's advisory committee, in keeping with the government's Children First policy.
Section 9.1 Workforce issues	
<p>9.1a Department of Human Services monitor recruitment of general paediatricians in regional areas and contribute to making regional practice safer through a funded locum service.</p>	<p>The department understands that, on average, there is an adequate supply of paediatricians; however, there appears to be a shortage of services in rural areas.</p> <p>The department agrees to explore strategies to encourage paediatricians to provide services in rural areas.</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
<p>9.1b Department of Human Services establish positions for community paediatricians, initially within central Department of Human Services and each Department of Human Services region.</p>	<p>The department does not support the direct employment of medical providers by the department.</p> <p>The department agrees to undertake analysis of the distribution of community-based paediatricians and the services they provide, with the aim of exploring strategies to encourage existing paediatricians to provide community-based paediatric services.</p>
<p>9.1c Department of Human Services investigate options to continue funding for the current training of community paediatricians.</p>	<p>The department notes that the Commonwealth Department of Health and Ageing is undertaking an evaluation of the training program, which is due to be finalised early 2004.</p> <p>The department agrees to provide transitional funding for one year only to give the Women's and Children's Health Service and the Centre for Community Child Health sufficient time to secure longer term funding for the training program.</p>
<p>9.1d Department of Human Services investigate the feasibility of sponsoring the training of a cohort of paediatric nurse practitioners.</p>	<p>The department supports the development of nurse practitioners in Victoria.</p> <p>The nurse practitioner role in Victoria is not limited by geographical location or by context of practice. In theory, there is no impediment to the establishment of nurse practitioners in paediatric emergency departments, subject to:</p> <ol style="list-style-type: none"> 1) nurses meeting the endorsement requirements of the Nurses Board of Victoria 2) organisations determining the nurse practitioner role should be part of their staffing complement and allocating resources accordingly. <p>The department has funded 34 nurse practitioner demonstration projects to determine the feasibility of nurse practitioner models in a range of clinical settings throughout Victoria, including paediatric specialties, adolescent/young people's health and maternal and child health. In addition, the department has funded scholarships for Masters Degree studies to assist nurses to meet the educational requirements of endorsement as nurse practitioners.</p>

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Table 1. Review recommendations and department response continued

Recommendations	Department response
	<p>It should be noted that the nurse practitioner role is primarily an advanced clinical role with extensions to practice outside the scope of other registered nurses in Victoria. The role is about providing advanced clinical care rather than training, policy or protocol development. The role is an expanded role of the registered nurse in Victoria and aims to improve client access to health services and improve operational efficiency.</p>
<p>9.1e Department of Human Services take account of the findings of this Review in its review of the allied health workforce and ensure planning to provide sufficient allied health professionals with paediatric training, as well as initiatives to facilitate mentoring and support of regional allied health professionals.</p>	<p>The department is currently funding a range of allied health recruitment and retention projects designed to support and mentor rural and remote allied health professionals.</p> <p>The department is also undertaking data collection on the allied health professions to quantify rural shortages and inform future initiatives in this area.</p>
<p>9.1f Department of Human Services explore ways to ensure appropriate training and support to encourage general practitioners to take a greater role in the ambulatory care of children and young adults.</p>	<p>The department is exploring ways GPs can be supported to pursue up-skilling in areas of specific workforce need in Victoria.</p> <p>This recommendation is currently being progressed through initiatives such as continuing professional development and advanced training posts for rural GP trainees.</p>
<p>9.1g Victoria establish appropriate paediatric outreach services as part of the package of care model and negotiate with the Commonwealth about the conditions attached to the Medical Specialists Outreach Assistance Program (MSOAP).</p>	<p>The department agrees to enter into discussions with the Commonwealth on how community paediatric outreach services to rural and remote areas might be expanded and collaborative approaches to encourage more metropolitan-based paediatricians to provide rural outreach services.</p> <p>The department will participate in the planned evaluation of the MSOAP, including providing input on the conditions attached to the program.</p>
<p>Section 9.2 Teaching, training and research</p>	
<p>9.2a RCH continue to provide leadership in teaching, training and research, with RCH and MMC working together in developing defined modules of paediatric education for medical as well as nursing and allied health practitioners, as part of their formal outreach programs.</p>	<p>Agreed.</p>

