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# **Queensland Child and Youth Clinical Network (QCYCN)**

# **Core Business Statement - Specialist Child Development Services**

This document describes the role of **Specialist Child Development Services** within Queensland Health and the interface between Health and Disability Services.

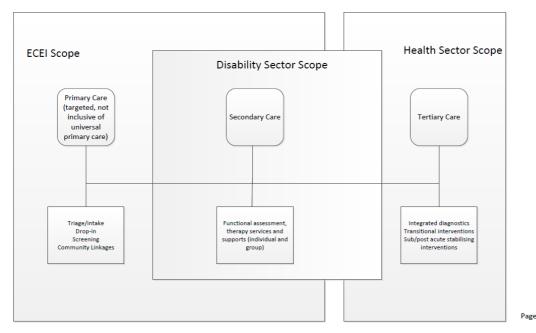
Specialist child development services within public health provide the following to children with complex developmental presentations and their families:-

- 1. **Integrated team approach to diagnostic services for** children and families where there are complex concerns related to a combination of
  - a) Psychosocial, biological and/or medical factors;
  - **b)** Developmental and/or behavioural factors;
  - c) Cultural and/or demographic factors.
- 2. **Stabilising interventions\*** Brief interventions provided by the CDS to clarify the developmental presentation or immediately support function following an acute event (NB: 'acute' relates to an unexpected, recent event such as an <u>unexpected diagnosis</u> or deterioration in function post illness.)
- 3. **Transitional interventions\*** to assist children and families to clarify their short and long term goals in order to access the right services and supports from the disability, education and other community sectors.

Differentiating the Business of Specialist Child Development Services

September 21 2016

A visual representation of the Applied Principles differentiating health and disability scope of service

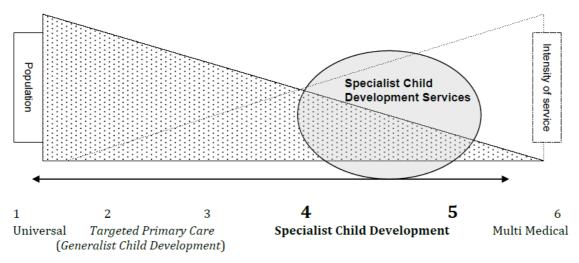


<sup>\*</sup>Intervention is defined broadly. It can occur at various points along the care pathway, may be delivered directly or indirectly to the child and family and include consultation and liaison with other service providers.

## **Background information**

Below is a summary of the core background information from the 'Act Now for a better tomorrow 2013-2020' handbook\*

Child development services exist along the continuum of care. **Specialist child development Service** are dedicated multidisciplinary teams of allied health, nursing and /or medical professionals.



**Universal** services are important in providing foundational advice for children and families that promotes developmental enrichment for all children.

**Specialist Child Development Services** provide an integrated understanding of the developmental, medical, biological, psychosocial, behavioural and cultural contributors to a child's functional impairment to ensure that appropriate goals can be set and access to evidence-informed interventions can be planned.

Interventions to support ongoing function and participation for children with a disability and their families will be accessed through the NDIS.

Specialist child development services will provide the vital interface between health and NDIS for these children and families to help them understand a child's current and future needs and identify appropriate supports.

Interventions to support ongoing function and participation for eligible children with developmental disability will be accessed through the NDIS pathways (NDIS funded plan or ECEI services)

Specialist child development services are based on the following principles of practice:-

- Understanding of the Early Childhood period as part of the Life Course.
- Early intervention
- A Bioecological Model of Development (Bronfenbrenner, 1994)
- Equity Based Service Planning and Provision
- Evidence informed practice
- Family centred strengths based approach to care.
- Transdisciplinary care
- Chronic disease approach to neurodevelopmental disabilities

Vulnerable populations who have a known high incidence of developmental need have been identified as a priority. These include:

- Children with developmental concerns and medical co-morbidities
- Adverse event neonates
- Children in out of home care due to child protection issues
- Aboriginal and Torres Strait Islander children with additional developmental risk factors including socio-demographic adversity, and/or a family history of trauma
- Children from culturally and linguistically diverse backgrounds with additional developmental risk factors including socio-demographic adversity, and/or a family history of trauma

#### References - relevant documents:

\*Child Development in Qld hospital and Health Services -Act Now for a Better Tomorrow 2013-2020 <a href="http://www.childrens.health.qld.qov.au/wp-content/uploads/2016/02/scycn-child-development.pdf">http://www.childrens.health.qld.qov.au/wp-content/uploads/2016/02/scycn-child-development.pdf</a>

#### NDIA applied principles

https://www.coag.gov.au/sites/default/files/communique/NDIS-Principles-to-Determine-Responsibilities-NDIS-and-Other-Service.pdf

National Framework for Child and Family Health Services-secondary and tertiary services <a href="http://www.coaghealthcouncil.gov.au/Portals/0/National%20Framework%20for%20Child%20and%20Family%20Health%20Services%20-%20updated.pdf">http://www.coaghealthcouncil.gov.au/Portals/0/National%20Framework%20for%20Child%20and%20Family%20Health%20Services%20-%20updated.pdf</a>

#### Making tracks

https://www.health.gld.gov.au/ data/assets/pdf file/0030/159852/making tracks pol.pdf

#### Priority population's documents:

- Childhood maltreatment (PDF, 517KB)
- <u>Understanding the Development and Participation of Children with Significant Health Needs</u> (PDF, 1MB)

### **RACP Early Intervention paper**

 $\underline{\text{https://www.racp.edu.au/docs/default-source/advocacy-library/early-intervention-for-children-with-developmental-disabilities.pdf}$ 

Endorsed by Child Development Subnetwork and Qld Child and Youth Clinical Network

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