

CONFERENCE ABSTRACT

Platform 18- Australia's first Transition from Out-of-Home Care Health Services

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Supporting Vulnerable young people.

Children and young people living in OOHC who have separated from birth families due to abuse and or neglect are one of the most vulnerable population groups. This group has been identified as one of the groups who experience persistent poor health outcomes including being under immunised, poor oral health, compromised mental health and general .

Platform 18 has highlighted the unmet health needs of young people in OOHC and the need for dedicated services to provide health service and coordinated care across the sector between health and welfare services. This is consistent with the international and national literature which affirms the need for health services and welfare agencies to better coordinate and institute the delivery of dedicated health services for this vulnerable group.

The sample (n=51) were seen by P18 and received health assessments with the outcome detailed as follows:

18/51 (35%) identified as Aboriginal and or Torres Strait Islander

35/51 (68%) young people not fully immunised, 26/35 (74%) who have comprehensive health assessments completed have commenced their catch up immunisation schedule by P18/CHQ immunisation service.

35/51 (68%) of young people have a general practitioner (GP) and 27/35 identified that they have seen a GP in the last 6 months. Despite this many were assessed to have single or multiple health problems not addressed by a general practitioner i.e. under immunised, poor nutrition, outstanding sexual health needs.

18/51 (35%) of young people had not seen a dentist in the last 12 months as opposed to (66%) of the general population.

13/51 (25%) of young people seen were referred onto local oral health services. Local CHQ oral health services were prompt in supporting referrals from P18.

34/51 (66%) young people seen in the trial period now have a comprehensive health assessment many require referrals to specialist health services such as Psychology, Dietician, Radiology, Ear, Nose and Throat specialists.

Adolescence is a significant period of time for this cohort which is compounded by the duality of leaving OOHC and managing arrange of tasks including transition into independence, completing education and well as managing health needs. Complexity exits during this period which also includes transiency in accommodation, lack of continuity of formal relationships and family all at home at one time, as well as accelerated change in development and life planning. Once having left OOHC, this group becomes for the main, invisible from the OOHC system and young people often have unmet health needs which reach beyond 18 years of age with a formal cessation of OOHC.

Platform 18 involves a nurse led service that promotes both health and welfare departments working together to support the identification, coordination of care and importantly addressing the health needs of this group collaboratively. By working together , the health needs can be addressed by involving young people and their support networks to ensure access to timely and comprehensive care in a single point is undertaken given the unique needs of this group . This program is continuing to demonstrate benefits beyond the trial.

Keywords: out of home care; foster care; child protection
