

## CONFERENCE ABSTRACT

### **ARE YOU BEING HEARD? Getting families the care they need when they need it**

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Teresa Anderson<sup>1</sup>, Miranda Jane Shaw<sup>1</sup>, Paula Caffrey<sup>1</sup>, Paola Gordon<sup>1</sup>, Elizabeth Harris<sup>1,2</sup>, Freya Raffan<sup>1</sup>

1: Sydney Local Health District, New South Wales, Australia;

2: Centre for Primary Health Care and Equity, University of New South Wales, Australia

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Health systems across the world are afloat with new ideas and words – integration, patient-centred care, wraparound services, investing in the early years, soft entry points and making sure no child is left behind. These ideas present practical challenges to service providers developing contemporary child and family services in a rapidly changing environment.

This paper describes the experience of managers in an Inner Sydney Local Health District redesigning their service system to meet the care and support needs of all families, including those most vulnerable, within limited resources.

Based on literature, current thinking on child and family health and extensive consultation with community partners and stakeholders, Healthy Families Healthy Children (HFHC) is a program that supports the best development of children and enables families to lead healthy and fulfilling lives. The program is underpinned by an ecological model of child health and equity considerations of universal and proportional universalism. HFHC provides universal, tailored and flexible packages of care to ensure the right interventions are provided at the right time to the right families.

Although our broad target population is families with children 0-5 years, families experiencing a number of risk factors and requiring additional support are specifically targeted. This is being done in collaboration with a range of government and non-government agencies and community.

Since implementation in 2016 we have:

- Formally reviewed universal home visiting services to newborns across three organisations and used the report to advocate for policy change and the 'green light' to pilot a new model.
- Strengthened our universal service by introducing a centralised intake, referral and advice line to assist clients to navigate the care system and a new website to provide a localised online source of information on child health and development.

- Designed a new service model where initial screening/risk assessment in antenatal and maternity services is supplemented with a clinical phone call to all families with newborns to review their risk level and determine the appropriate service level response or 'package of care'.
- Attracted new investment and redirected existing resources to an expanded sustained home visiting program with capacity to meet the needs of all families requiring additional support. 131 families are currently enrolled.
- Revised eligibility criteria to ensure all vulnerable families and those with low English proficiency were able to receive an evidence-based, structured home visiting program.

Program sustainability is a key consideration and we have developed a research and evaluation consortium including academics from three Sydney universities, workforce representatives and consumers. The preliminary framework will be discussed.

Program principles are transferable to, and can be localised in other health districts.

'What would a child and family health service look like if we took a proportionate universalism approach?' 'How do you redesign services to continue to provide universal services and enhance sustained services for vulnerable families?' We will answer these questions in the context of a service design in Sydney Local Health District.

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**Keywords:** child; health; families; equity; redesign

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