

## POSTER ABSTRACT

# Building and maintaining a statewide clinical network: the Queensland Child Development Sub-Network 2009-2017

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**Introduction:** In 2009 the Statewide Child and Youth Clinical Network (SCYCN) recognised Child Development as one of five clinical priority areas and established the Child Development Working group (renamed Child Development Subnetwork (CDSN)) to provide expert clinical leadership and advice pertaining to this clinical service area. Child Development finally had a platform upon which to build a state wide community of like service providers.

**Practice change:** Aided by the clinical services capability framework (CSCF), the CDSN identified and connected specialist Child Development Services from across Queensland. The network established evidence informed practice principles, developed clinical service standards, and provided guidance to clinical services and health service executive through reform agendas including the National Disability Insurance Scheme. This has been achieved by integrating contemporary evidence into key messages and establishing where the clinical service area adds value to the health service as a whole.

**Highlights:** Core to the success of the network has been valuing the diversity of the membership and service contexts, commitment to developing and maintaining partnerships and a persistent determination to facilitate change as a process over time. The CDSN now has unprecedented engagement from clinicians and clinical leaders across the state and has been involved in initiating and supporting a number of child development statewide service redesign projects and activities.

**Conclusion:** With decentralised but integrated health care high on the health reform agenda, the role of the CDSN has come more sharply into focus. High prevalence low acuity services such as Child Development may be particularly vulnerable during periods of uncertainty in healthcare. A state wide clinical network ensures that otherwise isolated local clinical champions are equipped to be inherently adaptable, locally responsive, and innovative according to their context, improving services for children and their families, regardless of their distance from the state capital.

**Future objectives include:-**

developing an evaluation framework

establishing an agreed minimum data set

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embedding CDS core business in view of the NDIS reform  
supporting a sustainable approach to training and clinical capability

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**Keywords:** clinical network; child development

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