

**The Australian College of Children and Young People's
Nurses
(Previously ACPCHN)
response to**

**A Discussion paper for a developing a national
framework for universal health and development
services to children and families**

October 2008

Principles for a National Framework

The College would endorse the principles outlined in the document, but believe a further point should be added to include

A focus of reducing the health differential in Aboriginal and Torres Strait Islanders. (This population has the poorest child health status and yet does not appear in the document.).

2.1 Elements of a National framework

The points outlined in the document are supported except for the articulation of the role of the child health nurse and competencies.

An addition would be a statement that supports primary prevention and a universal approach

Nationally consistent age range should be 0-12 years.

The principles would be enhanced by a definition of children. Across the jurisdictions child health services vary considerable in relation to the age they provide services for. The College would support the age range of 0-12 years. The key transition times of entering primary school and transition to adolescence offer unique opportunities to influence lifestyle behaviors of children.

The following information came from the jurisdiction websites and demonstrates the variation in age range of services called children services:

- Western Australia Child Health 0-4 years
- South Australia - Child and Youth Health
- Tasmania – Child and Youth health
- NSW 0-15 years
- Queensland – children 0-12 years
- Victoria – children 0-6 years

2.2 Vision, Principles and objectives

The principles and goals are not necessarily resourced in each jurisdiction and therefore can become motherhood statements.

2.3 Role of Child and Family Health Nurses

We see the role of the child health nurse as a specialist role which requires post-graduate education and in-dept clinical experience to function effectively in that role. The Child Health Nurse needs to be able to work in a health promoting and prevention and early intervention framework to enhance the health and wellbeing of the child across settings and in an interdisciplinary and multi-agency framework

The specialist education needs to include:

- Primary Health Care
- Impact of social determinates of child and family health
- Settings approach eg health schools and health childcare centres
- Contemporary health problems faced by the Australian child and family and nursing interventions that enhance adaptation and health.
- Child growth and development (
- Family assessment
- Immunisation
- Primary prevention and early intervention
- Advocacy in a community setting
- Community assessment

- Optimal nutrition(includes breastfeeding)
- Positive parenting practices (eg including Circle of Security)

Child Health Role articulated in National Framework

- This is a professional issue that should be addressed at a professional level. ACPCHN (now known as the Australian College of Children and Young People's Nurses) has developed competencies for Paediatric and Child Health Nurses. Within Queensland these competencies are used in the practice setting for clinical assessment, within the university in curriculum development and for clinical assessment. They are also used in the universities in South and Western Australia in curriculum development.
- With the move to a national organisation (The Australian College of Children and Young People's Nurses) this will allow issues such as use of competencies to be driven from a national level.
- The competencies are currently under review.

The College supports an evidence based approach to practice.

The college does not support the replacement of child health nurses with other workers but supports child health nurses working with other disciplines and roles to improve health and well being of children. The College also sees Aboriginal and Torres Straite Islander Health Workers as key partners in working with Aboriginal and Torres Strait Islander Communities.

The move to the social model in some countries has seen a reduction of child health nurse roles.

2,4 Performance Monitoring

Child health is impacted upon by multiple factors in the community, home and as an individual. There needs to be recognition that child health services is but one of the factors that impact upon child wellbeing.

Local services need to be able to measure national and local indicators eg ATSI ear health, and rural injuries

2.5 Service Delivery Elements

Best Practice Models

- Working from a universal base and using Family Risk assessment to determine pathway of care
- Home immunization for at risk clients
- Using a combination of individual and group work for universal clients