

Most children living in out-of-home care don't access health services

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Most children living in out-of-home care in Victoria don't access health services within nationally required timeframes, with urgent action needed to address the significant gaps in the system, according to a new study.



The research, led by the Murdoch Children's Research Institute (MCRI) and published in the *Children and Youth Services Review*, found only one in 130 had attended all recommended <u>health services</u> within 12 months of entering out of home care.

Murdoch Children's Dr. Karen McLean said the findings showed the system had failed to routinely assess and address the healthcare needs of this vulnerable population.

The study, involving 5,676 children from Victoria aged under 13 years in foster or kinship care, found only 37 per cent had seen a GP, 17 per cent had visited a pediatrician and less than 10 per cent saw a dentist, optometrist or audiologist within the recommended timeframes. It noted 80 per cent of first-time visits to a GP after entering out of home care lasted under 20 minutes, and less than 2 per cent lasted longer than 40 minutes. Children in <u>foster care</u> were more likely to attend appointments than those in kinship care.

In Australia, there are no statutory requirements for health assessments of children in out of home care. The National Standards for Out of Home Care state that health assessments should be routine and the 2011 National Clinical Assessment Framework recommends an initial health check within 30 days of entering out of home care, a comprehensive health assessment within three months and for all children to have a health management plan.

"Despite state and national recommendations there is a significant implementation gap in ensuring routine, timely health assessment for children upon entry to out of home care," Dr. McLean said.

"There is neither accountability nor monitoring of whether the <u>national</u> <u>standards</u> are being implemented. We recommend cross-sector monitoring that includes feedback to practitioners and managers of the



rates of completion and timeliness of health assessments and implementation of recommendations."

Dr. McLean said dedicated, multidisciplinary assessment clinics may be part of the solution if embedded in a more integrated, responsive, and accountable healthcare system.

The research found in areas where the Pathway to Good Health Clinics had been rolled out, greater improvements in health service use were reported. The clinics, which have specialized health care teams for vulnerable children, provide a comprehensive assessment and develop health management plans. Pediatrician visits increased from 31 to 41 per cent and mental health visits rose from 14 to 24 per cent in areas with these clinics, compared to an increase from 32 to 34 per cent and 17 to 20 per cent elsewhere respectively.

Murdoch Children's Professor Sharon Goldfeld said these children have more physical, developmental and mental health needs given their experiences of abuse, neglect and/or trauma and increased likelihood of living in adverse socio-economic circumstances.

"More needs to be done to prioritize children in out of home care within the health system. It's vital that these children have access to regular and timely healthcare," she said.

"But state-wide policy roll-out is hampered in Victoria by a lack of publicly funded pediatric services. Initial health screenings must be delivered by an appropriately trained clinical workforce."

A study, led by the Murdoch Children's and published in Children and Youth Services Review last year, also found long wait lists, out-ofpocket expenses and barriers to navigating consent and authorisation processes were impacting on foster and kinship carers ability to access



health services for children in their care.

Dr. McLean said access to these services for vulnerable children were even more vital now given the reported impact of COVID-19 on physical and mental health.

"The public health system is under more strain than ever before due to this pandemic," she said. Vulnerable children will fall further through the cracks unless changes are made that prioritize those in out-of-home care."

Foster Care Association of Victoria (FCAV) CEO Samantha Hauge said the research confirmed what carers and agencies have been telling the FCAV for many years that the huge administrative and financial barriers in the foster care system were preventing access to essential medical services.

"It is well established that early childhood trauma has detrimental physical and mental consequences and that early medical intervention is essential to begin the process of recovery," she said.

"Children come into our care without Medicare registration and adequate funding to facilitate appropriate mental and physical health assessments and treatments. The current service delivery model where child protection workers are required to do all the administrative and funding approvals to facilitate access to medical services isn't working."

Ms Hauge said carers and agencies needed a simple point of contact to short circuit delays in Medicare registration such as a carer helpdesk, easy access to financial reimbursements when carers were paying for medical services themselves and a national standard to support the health and wellbeing of those in care.



A foster carer for nine years, Rowan Pulford said if health services were more accessible then the children who have been in his care wouldn't be struggling as much.

"When I became a foster carer I naively thought support would be easy to access but nothing could be further from the truth," he said. Without access to health assessments, especially early on, you are just clutching at straws trying to work out the best treatment plan. Foster carers volunteer their time and their homes, and the system can't front up to provide the basics."

Centre for Excellence in Child and Family Welfare CEO Deb Tsorbaris said that "the findings of this important research demonstrate the critical need for greater accountability and monitoring of access to health services for children in out of home care, who are at greater risk of falling through cracks in the system. We need to be thinking about how to address these findings, to level up health outcomes for all children in the post-pandemic years."

More information: Karen McLean et al, Timeliness and extent of health service use by Victorian (Australian) children within first year after entry to out-of-home care: Retrospective data linkage cohort study, *Children and Youth Services Review* (2022). DOI: 10.1016/j.childvouth.2021.106359

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