

## CONFERENCE ABSTRACT

### Can digital clinical resources support value-based integrated care for children and young people in out-of-home care?

2nd Asia Pacific Conference on Integrated Care, Melbourne, 11-13 November 2019

Helen-Louise Usher, Ryan Mills

Children's Health Queensland, South Brisbane, QLD, Australia

---

**Introduction:** Most children and young people (CYP) have unmet health and developmental needs on entering out-of-home care (OOHC). Queensland's Child Protection Reform specifies that CYP receive health and developmental assessments on entering care. This General Practitioner(GP) engagement project to support high quality clinical assessment represented Queensland's first investment in integrated care for this cohort, supported by the government's Integrated Care Innovation Fund.

**Practice change implemented:** A Health Assessment Toolkit project produced GP-friendly, digitised templates for preliminary and comprehensive health assessments (consistent with the National Clinical Assessment Framework for CYP in OOHC) ready for integration into GP software. Proactive GP liaison supported Toolkit dissemination.

**Aim and theory of change:** The project aimed to use Health IT to increase GP efficiency and adherence to clinical guidelines in their clinical assessments of CYP in OOHC at the point of care. The approach to engaging GPs was pragmatic, collaborative, and multi-agency.

**Targeted population and stakeholders:** The target population was GPs serving CYP aged 0-17 years entering care within the Brisbane North and Brisbane South Primary Health Networks (PHNs). Stakeholders included Children's Health Queensland, primary practices, an Aboriginal and Torres Strait Islander Community Health Service, and the Queensland Department of Child Safety, Youth and Women.

**Timeline:** The project commenced in January 2017, with the toolkit implemented from January 2018.

**Highlights:** The assessment templates were well received by GPs although telephone or face-to-face support was often required. The impact of the toolkit was enhanced by its use within two associated integrated care pilot projects; a case co-ordination model, and a community of practice model across several Queensland sites.

**Sustainability:** GP engagement requires ongoing investment in maintenance of the templates and a clinical advisory function to support continued statewide rollout. PHNs have increasingly taken a major role thereby supporting long-term sustainability.

**Transferability:** This project is highly replicable in other sites around Australia and may also have relevance to other vulnerable populations of young people such as those in the youth justice system.

Usher; Can digital clinical resources support value-based integrated care for children and young people in out-of-home care?

**Conclusions:** GPs can be effectively engaged in health and developmental assessments of CYP in OOHC. Additional support is needed for the flow of information between primary practice, child safety services, and the public health system. Support options (not mutually exclusive) include:

- health professional case co-ordination;
- communities of practice;
- further digital integration.

**Discussion:** Key questions arising from this research include what further system changes could have a positive impact on GP engagement in the health of CYP in OOHC and could further GP upskilling enhance other aspects of CYP health care?

**Lessons learned:** Many lessons have been learned through this project, such as:

- The effectiveness of various methods of engaging GPs.
- The significant investment required in personnel and digital development to support integrated care.
- The need for local flexibility in models of integrated care when working across agencies.