



**Family &  
Community Services**  
Community Services



**Health**

## **MEMORANDUM OF UNDERSTANDING**

**between**

**Department of Family and Community Services,  
Community Services division**

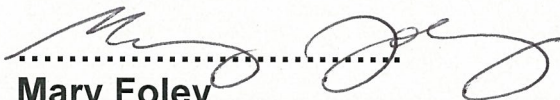
**and**

**NSW Health**

**on**

**Health Screening, Assessment, Intervention and  
Review for children and young people in statutory  
Out-of-Home Care**

### **Signatures**



**Mary Foley  
Director General  
NSW Health**

**Date:**



**Annette Gallard  
Chief Executive  
Department of Family and Community Services, Community  
Services division**

**Date: 17.6.11**

## 1. Introduction

- 1.1 There is overwhelming evidence that children and young people in out-of-home care are more disadvantaged and vulnerable than children in general. Children and young people in out of home care often have high and unmet health needs. They tend to have poor physical health, developmental delays and compromised mental health; they also have a lower rate of immunisation uptake compared to their peers.
- 1.2 Timely provision of government health services, including medical, dental, mental health and other health and therapeutic services is key to avoiding or ameliorating poor health outcomes.
- 1.3 *Keep Them Safe: A shared approach to child wellbeing* confirms the commitment of the NSW Government, through NSW Health and the Department of Family and Community Services (FACS), Community Services division to addressing the health needs of children and young people in statutory out-of-home care.
- 1.4 It is acknowledged that, at the time of signing this Memorandum of Understanding (MoU) significant policy and service system changes are expected as a result of *Keep Them Safe: A shared approach to child wellbeing*. FACS, Community Services division and NSW Health agree that the MoU will be revisited and amended as required by those changes.
- 1.5 This MoU sets out the principles for FACS, Community Services division and NSW Health employees to work together to facilitate access to health services for children and young people in statutory out-of-home care including health screening, assessment, intervention and review.

## 2. Signatories to the MoU

- 2.1 The understanding is between NSW Health and FACS, Community Services division who are both signatories and parties to the MoU.

## 3. Purpose of the MoU

The purpose of the MoU is to:

- 3.1 Set out the understanding between NSW Health and FACS, Community Services as to the role of each agency in arranging and delivering comprehensive health and developmental screening, assessment, intervention and review for children and young people in statutory out-of-home care.
- 3.2 Assist in ensuring that the physical, developmental and psychosocial health needs of children and young people in out-of-home care are



recognised and addressed in a timely manner and that service delivery is coordinated.

- 3.3 Assist in ensuring that the *Model Pathway for the Comprehensive Health and Developmental Assessments for All Children and Young People Entering Out-of-Home Care* is implemented at FACS, Community Services division Regional and Local Health District levels to deliver health screening, assessment, intervention and review to children and young people in statutory out-of-home care. The Pathway will be implemented in a staged approach with target groups identified jointly by NSW Health and FACS.
- 3.4 Assist in supporting the health needs of children and young people in out-of-home care through the development and implementation of health management plans to improve their overall health needs.
- 3.5 Establish more effective and efficient communication channels between NSW Health and FACS, and modes of working to improve the health outcomes of children and young people in out-of-home care.

#### **4. Guiding Principles**

The MoU is guided by the following key principles:

- 4.1 Child protection is a shared responsibility.
  - 4.1.1 Parents and carers have the primary responsibility for raising, protecting and fostering the development of their children.
  - 4.1.2 The safety, welfare and wellbeing of children and young people is the collective responsibility of the whole of government and the community and is delivered through a mix of Government and non-Government agencies, with FACS having specific responsibilities where a child or young person is at risk of significant harm.
  - 4.1.3 Early intervention is important for achieving better outcomes for children and young people, in particular, intervening early to identify and respond to health needs provides the best opportunity to improve the health outcomes of children and young people in statutory care.
- 4.2 The joint work of FACS, Community Services division and NSW Health will be child focussed and based on the needs of the child or young person.
  - 4.2.1 FACS, Community Services division and NSW Health will work together, making all reasonable efforts to facilitate access to health care in order to promote best health outcomes for children and young people in out-of-home care. Access to health

services for children and young people in statutory out-of-home care will be facilitated based on clinical need, in accordance with NSW Health practice standards.

- 4.2.2 Children and young people will be encouraged to participate, consistent with their age and development, in decision making relating to their health care needs.
  - 4.2.3 The safety, welfare, and wellbeing of children and young people will be given paramount consideration in the joint work of FACS, Community Services division and NSW Health.
  - 4.2.4 Signatories to the MoU recognise non-Government organisation (NGO) stakeholders as having responsibilities for case management of children and young people in out-of-home care.
  - 4.2.5 The MoU recognises the increased role of relevant NGOs funded by FACS, Community Services division to provide statutory out-of-home care and with case management responsibility.
  - 4.2.6 The MOU recognises that public health services may sometimes not be available at all or within a suitable timeframe to meet the best interests of the child or young person. In these instances the Department of Family and Community Services may be able to contribute to fund private health care providers however there are very limited resources for this purpose and this would only be available in rare circumstances.
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- 4.3 The important role of authorised carers is recognised and they will be provided with necessary information and resources that will assist them in supporting the health and developmental needs of their children and young people in their care.
  - 4.4 FACS, Community Services division and NSW Health will work together to ensure Aboriginal children, young people and their families participate with as much self-determination as is possible and commit to providing culturally appropriate services.
  - 4.5 FACS, Community Services division and NSW Health will be sensitive to the needs and requirements of children and young people from culturally and linguistically diverse backgrounds and their authorised carers, and commit to providing culturally appropriate services.
  - 4.6 FACS and NSW Health recognise existing arrangements in place for providing health services to children and young people already in statutory out-of-home care and that these children and young people will not be disadvantaged by the staged roll-out of the *Model Pathway for the Comprehensive Health and Developmental Assessments*.



## 5. Target Group

- 5.1 This MoU covers children and young people in statutory out-of-home care and for whom the Minister for Family and Community Services has parental responsibility.
- 5.2 This includes children and young people in statutory out-of-home care who are case managed by NGOs.

## 6. Collaboration

FACS, Community Services division and NSW Health will:

- 6.1 Implement the MoU at a State, Regional and Local Health District level using agreed protocols, communication, monitoring and review processes.
  - 6.1.1 Implementation at the Regional and Local Health District levels will vary and be subject to the Local Health District's service capacity and available existing resources.
- 6.2 Establish an agreed process in relation to the role of FACS, Community Services division and NSW Health in undertaking comprehensive health and developmental screening and assessment for children and young people in statutory out-of-home care.
- 6.3 Establish an agreed process in relation to the role of FACS, Community Services division and NSW Health in planning and coordinating intervention to meet the identified physical, developmental and psychosocial health needs of children and young people in statutory out-of-home care.
- 6.4 Implement the *Model Pathway for the Comprehensive Health and Developmental Assessments for All Children and Young People Entering Out-of-Home Care* across FACS, Community Services division Regions and Local Health Districts. The Pathway will be implemented in a staged approach with target groups identified jointly by NSW Health and FACS, Community Services division.
- 6.5 Establish an agreed approach to the development, implementation and review of Health Management Plans for children and young people in statutory out-of-home care, with NSW Health as lead.
- 6.6 Coordinate processes to ensure the timely notification and transfer of information and health records from FACS, Community Services division to NSW Health and between Local Health Districts when a child or young person is accessing the Pathway and when there are changes to their placement or legal status.

- 6.7 Ensure that key contact officers are nominated at the Regional and Local Health District level. These officers provide a first point of contact for information, collaboration and assistance, if required, for the other department or organisation.
- 6.8 Participate in the development of leaving and after care plans for children and young people transitioning from statutory out-of-home care.
- 6.9 Where possible FACS, Community Services division and NSW Health will provide support to a request from either department/agency for joint collaboration on national or state-based research projects regarding children and young people in care, provided the proposed research satisfies the research guidelines of both FACS, Community Services division and NSW Health and any relevant Australian Law.

## **7. Governance**

- 7.1 This understanding will be activated once it is signed by the Director General, NSW Health and the Chief Executive, FACS, Community Services division.
- 7.2 A FACS, Community Services division - NSW Health Senior Officers Group will be responsible for the implementation, monitoring and review of the MoU.
- 7.3 Either party may seek variation of this MoU by notifying the other. Variations must be agreed to by the Director General NSW Health and the Chief Executive, FACS, Community Services division.
- 7.4 The MoU will be formally evaluated four years from the operationalising of the Regional Protocols. The evaluation will be undertaken using baseline data. The evaluation will be reported to the Director General NSW Health and the Chief Executive, FACS, Community Services division.

## **8. Dispute Resolution**

- 8.1 No child or young person should be left without adequate support while interagency issues are being resolved.
- 8.2 Issues relating to service delivery requirements should be resolved at the most local level possible within an agency, in the earliest possible time. If these efforts are not successful, regional/area protocols are to be used to resolve issues.
- 8.3 When attempts to resolve the issues at the local level have been unsuccessful, there should be evidence that reasonable efforts have been made to resolve the dispute.
- 8.4 Where any issues under the terms of this MoU cannot be resolved at a Regional Director/ Local Health District Chief Executive Officer level,

these cases are to be referred to the FACS, Community Services  
division – NSW Health Senior Officers Group.



## Glossary

Out of home care (OOHC)	Care and control of a child or young person at a place other than their usual home by a person that is not their parent. It includes care and control under an order of the Children's Court or when they are a protected person for more than 14 days or for a total of more than 28 days in any 12-month period.
Statutory OOHC	This is where the Minister for Community Services has parental responsibility for a child or young person by virtue of an interim or final order of the Children's Court. Most children and young people in statutory OOHC live with authorised foster carers, relative carers, or kinship carers. In some cases they live in residential care units such as group homes.
Parental responsibility	The duties, powers, responsibilities and authority which, by law, parents have in relation to their children. It is a legal responsibility that entails decision making for the health, welfare and well being of a child or young person.
Case Management	The process of assessment, planning, implementation and monitoring that aims to strengthen families and decrease risks to children and young people through integrated and coordinated service delivery. When case management has been transferred to an NGO, the NGO has responsibility for assessment, case planning, implementation, monitoring, review, placement transition and case closure.
Health Management Plan	A plan that outlines the health needs of a child or young and any required intervention. The plan is developed by NSW Health in consultation with carers, Community Services, NGOs and children and young people where appropriate. The purpose of which is to support the optimal health and development of the child or young person and should be incorporated into their case plan.
Carer	Refers to a person who is authorised as a foster or relative/kinship carer by a designated agency.
Child	A person who is under the age of 16 years.
Young person	A person who is aged 16 years or above but is under the age of 18 years.
Leaving care plan	A plan that a designated agency prepares together with a child or young person, before they leave care. It includes steps to help the child or young person (and the parents, carers and significant others) to get ready for leaving out-of-home care.
After care	Support provided to young people who are 15–24 years of age after they leave out-of-home care.
Non-Government Organisations (NGO)	Refers to agencies that are accredited by the Children's Guardian and funded by Community Services to arrange and supervise the provision of OOHC services.
Key Contact officer	Refers to Health OOHC Coordinator, Interagency Pathway Coordinator, Caseworker

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