

3.6 Child health checks

Why this measure is included

There is a strong relationship between a child's early health and their wellbeing in later life.⁸⁹ Development prior to birth through early childhood is the most intense period of brain development in a person's life and is fundamental in laying foundations for learning, physical and mental health, behaviour and wellbeing through childhood, adolescence and into adulthood.

As children get older, the developmental pathways initiated in early childhood become more difficult to change; hence, early childhood is the most effective time to make a difference to children's health and wellbeing. Medical or developmental issues can be addressed at an early stage, potentially reducing the impact on the child's learning and development.⁹⁰

A Parliamentary report into child health in WA noted that 'early identification and management of developmental and behavioural problems is associated with better health outcomes and improved school performance'.⁹¹

Children in Western Australia can access six child health checks between birth and three years, plus a school entry assessment in the first year of school attendance, which can be at Kindergarten, Pre-primary or Year one. These child health checks are free and delivered by child and school health nurses.⁹²

This measure contains data of a different nature than most other data in this report.

Most data of this report meets the following list of stringent criteria:

- Capable, as far as possible, of disaggregation by gender, by Aboriginal status and by region of WA.
- Meaningful for researchers and users and, where possible, young people.
- Based on consistent and repeatable data collections.
- Capable of being influenced by action.

The data in this measure may not meet each of these criteria but has been included in order to provide the best available information regarding this aspect of children and young people's wellbeing. The data should be used with caution, including considering the qualifications outlined within the content of this measure.

Table 3.11: Metropolitan children receiving a health and development check: in per cent and number, by age specific contact, Western Australia, 1 April to 30 June 2013

Service description	Number	Percentage of eligible children seen
Metropolitan births (estimates)	6,673	
Universal postnatal 0 to 10 days	2,520	38
Universal postnatal 11 to 21 days	3,025	45
Universal postnatal 22+ days	422	6
<i>Total universal postnatal contacts</i>	6,013	90
6 to 8 weeks	5,778	87
3 to 4 months	4,838	71
8 months	3,538	53
18 months	2,112	34*
3 years	1,147	19*

Source: Data supplied by Child and Adolescent Community Health, WA from Child Development Information System (CDIS) (unpublished)

* An additional 18.5 child health nurses were directly recruited by the Child and Adolescent Health Service as a result of the Government's additional funding for child health services from 2012–13. They have focussed on the 18-month and 3 year-old child health checks. This has resulted in an increased number of child health checks for these client groups.

Table 3.12: Metropolitan children receiving a school entry screening: number, Western Australia, 2011 and 2012

	2011	2012
School entry screening*	28,910	37,148

Source: Data supplied by Child and Adolescent Community Health, WA, 2011 data from Health Care and Related Information system (HCARe), 2012 data from CDIS system (unpublished)

* This screening could have been provided in Kindergarten, Pre-primary or Year 1. Note that these figures may include follow-ups or rechecks associated with the initial assessment.

Table 3.13: Country child health and development checks: number and percentage of eligible children, Western Australia, 1 April 2013 to 30 June 2013

Service description	2013 (Q4)	
	Number	Percentage of eligible children seen
Country births*	1,677	–
Universal postnatal 0 to 10 days	741	44
Universal postnatal 11 to 21 days	729	43
Universal postnatal 22+ days	–	–
<i>Total universal postnatal contacts</i>	1,470	88
6 to 8 weeks	1,365	81
3 to 4 months	1,290	78
8 months	1,044	66
18 months	804	42
3 years	650	35

Source: Data supplied by Child and Adolescent Community Health WA, data extracted from HCARe (unpublished)

* Figures do not include the Great Southern region.

Table 3.14: Country school entry health screenings: number, Western Australia, Terms 1 to 3, 2013

	Number completed	Number of Year 1 enrolments	Percentage completed
Number of school entry health screenings completed*	7,189	6,843	97

Source: Data supplied by Child and Adolescent Community Health WA, data extracted from HCARe (unpublished)

* Figures do not include Great Southern Region.

What is this measure?

Measures available for child health checks are limited. The Child Development Information System (CDIS) is able to provide more accurate data than the previous system, but comparison with the previous data collection is not valid.

The CDIS roll-out was completed in 2013, and at this time only metropolitan data estimates for 1 April to 30 June 2013 are available. The data used shows the number of children who receive any of the seven health checks provided in WA, at the various ages prescribed. The data is based on a comparison of reported births in the relevant quarter measured against occasions of service in the 1 April to 30 June 2013 quarter.

For the 18-month and three-year checks, the number of eligible children is estimated through the Department of Health's rate calculator then divided by four to average out the population for the quarter. The percentages of children seen are calculated by dividing the occasions of service in the quarter by the estimated population.

Information on the metropolitan school entry checks is taken from the CDIS and Health Care and Related Information (HCARe) systems. Population estimates are not available for this data; hence the percentages of children seen cannot be calculated. Data on all health checks for country students is taken from the HCARE database. The Department of Health has advised that data derived from the HCARE database has substantial limitations and should be used with caution.

Commentary

Most newborns in metropolitan Perth (90% in April to June 2013) received their first health check from a child health nurse. However, fewer than half of newborns (38%) were visited within the optimal 10-day period (Table 3.11).

Attendance at the second health check at six to eight weeks was high; 87 per cent of infants in the metropolitan area received this check. The third health check at three to four months maintained a high attendance at 71 per cent; however, after this check, attendance declined (Table 3.11).

Only 34 per cent of children attended the 18-months check in April to June 2013, and for the three years check, 19 per cent attended (Table 3.11).

Data collection for non-metropolitan areas is based on a different system and so is not necessarily comparable to metropolitan data. In non-metropolitan areas, 88 per cent of newborns received their first health check, with 44 per cent of babies receiving that check in the optimal 0 to 10 day timeframe. Four out of five (81%) infants in regional areas received the six to eight-weeks health check and 78 per cent the three to four-month check.

In 2011 the Department of Health reported that 28,910 children had received a School Entry Health Screening.⁹³ In 2012 this increased to 37,148. Data for 2011 was taken from the HCARE reporting system, while the 2012 data was taken from the HCARE and CDIS systems. The data provided in 2012 is a mixture of CDIS and HCARE data and may contain errors associated with the older, HCARE, system (Table 3.12). For children in country areas, around 97 per cent received school entry screening checks in 2013 (Table 3.14).



Strategies

Investing in the Early Years – A National Early Childhood Development Strategy, Council of Australian Governments (released 2009)

The first outcome of the National Early Childhood Development Strategy is to ensure that children are born and remain healthy. The strategy includes actions to strengthen maternal and child health services and to improve the capacity to assess child health and development between 18 months and three years. Further information is available at www.coag.gov.au/sites/default/files/national_ECD_strategy.pdf

Healthy Kids Check, Commonwealth Government (released 2008)

A Healthy Kids Check rebate can be claimed under Medicare when undertaken by a medical practitioner or on behalf of a medical practitioner by a practice nurse or registered Aboriginal health worker.

The aim of Healthy Kids Check is to improve the health and wellbeing of Australian children by promoting early detection of lifestyle risk factors, delayed development and illness and by providing the opportunity to introduce guidance for healthy lifestyles and early intervention strategies. The Healthy Kids Check is to be delivered in conjunction with the four year-old immunisation.

Further information is available at www.health.gov.au/internet/main/publishing.nsf/Content/Health_Kids_Check_Factsheet

Healthy Start for School Initiative, Commonwealth Government (released 2011)

Commencing in July 2011, if a parent or carer receives an income support payment at any time during the financial year in which their child turns four, the child is required to undergo a health check to ensure they are healthy, fit and ready to start school. The health check includes an assessment of the child's physical health and general wellbeing.

Further information is available at www.familyassist.gov.au/payments/healthy-start-school.php

Want to know more?

Research, reports and articles

Universal Child Health Checks, a report of the WA Auditor General, examined the matter of child health checks in WA and made a number of recommendations to improve the take-up of child health checks, particularly in later years. Further information is available at http://audit.wa.gov.au/2010/?post_type=report

Other information

Details of the services provided by Child and Adolescent Community Health are available at <http://pmh.health.wa.gov.au/general/CACH/>

Three WA Parliamentary Inquiries have reported on the delivery of community child health and development services within the State. These are:

- Education and Health Standing Committee 2009: *Healthy Child-Healthy State: Improving Western Australia's Child Health Screening Programs.*
- Education and Health Standing Committee 2010: *Invest Now or Pay Later: Securing the Future of Western Australia's Children.*
- Community Development and Justice Standing Committee 2009: *Inquiry into the adequacy of services to meet the developmental needs of Western Australia's children.*

These reports are available at www.parliament.wa.gov.au/parliament/commit.nsf/WebReportsByName