

DEPARTMENT OF HEALTH

2013/14 Annual Report Element 3 National Partnership Agreement Indigenous Early Childhood Development

The National Partnership Agreement on Indigenous Early Childhood Development (NPA IECD) was signed by the Council of Australian Governments (COAG) in October 2008 as a first step to close the gap in life expectancy for Aboriginal and Torres Strait Islander children. Under the National Partnership, clause 49 requires that the Commonwealth provide an annual report to the Parties for the preceding financial year by 31 August of each year, with regard to annual expenditure under Element 3.

This 2013/14 Annual Report describes progress on achievements against outputs for Element Three of the National Partnership from 1 July 2013 to 30 June 2014. The Report should be considered in conjunction with the Implementation Plan and includes reporting against the milestones, financials and timelines detailed in the Implementation Plans.

Achievements against Outputs:

Element 3:

- Increase access to, and use of, maternal and child health services by Indigenous families

BACKGROUND

- From 1 July 2009, New Directions: Mothers and Babies Services represented the Commonwealth's Own Purpose Expenditure contribution to Element 3 of NPA IECD and is now an ongoing programme with an allocation of \$34.082 million in 2013-14. Of this \$32.998 million was expended at 30 June 2014. New Directions: Mothers and Babies Services is managed by the Department of Health through the Indigenous and Rural Health Division. The programme provides Aboriginal and Torres Strait Islander children and their mothers with increased access to:
 - antenatal and postnatal care;
 - standard information about baby care;
 - practical advice and assistance with breastfeeding, nutrition and parenting;
 - monitoring of developmental milestones, immunisation status and infections; and
 - health checks and referrals to treatment for Indigenous children before starting school.
- Between 2008 and 2012, the Department of Health undertook five targeted, merit based selection rounds to select and fund primary health care organisations to deliver services that meet the aims of the programme. As part of these the Department considered regional

demographics, levels of funding and health care provision with particular emphasis on the `29 priority communities identified in COAG's *National Partnership Agreement on Remote Service Delivery* (RSD NP). Consultations were held with the Aboriginal Health Forums (or their equivalent) in each state/territory to assist in the identification of priority locations in order to target areas in high need of child and maternal health services. Organisations, both large and small, within the identified priority regions were invited to apply for New Directions: Mothers and Babies Services funding. Applications were assessed against agreed assessment criteria.

- The service delivery model in each location is determined by the primary health care provider to ensure that services are provided in the most appropriate way for their clients and communities.

IMPLEMENTATION PLAN

- The Commonwealth's Implementation Plan is at **Attachment A**.
- The strategies and measures detailed in the Implementation Plan to meet the aim of increasing access to, and use of, child and maternal health services in priority regions across Australia through the New Directions: Mothers and Babies programme have been successfully achieved.

Activities undertaken, services developed and/or Implemented in the reporting period to achieve the objectives under Element 3

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| | <p>the third quarter of 2014. The Report highlights the following achievements:</p> <ul style="list-style-type: none">○ Transition of the New Directions programme to an ongoing programme and funding of 85 organisations nationally.○ Flexibility in the funding guidelines which has supported local innovation and targeted service planning that directly addresses priority needs of local communities.○ Consistent anecdotal evidence of improvements in outcomes on a number of markers that are attributable to New Directions funded services. These include improvements to birthweights, immunisation rates and antenatal contact, and decreased rates of smoking, hypertension and diabetes in pregnant women.○ A substantial increase in the range and volume of antenatal, postnatal, and general maternal and child health services being provided through funded organisations.○ As 75 per cent of funded organisations are community controlled and a third of the front line roles funded by New Directions are culturally designated roles, the programme has directly supported longer term development of increased capacity of Indigenous communities. |
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Linkages and coordination with other services provided and community Involvement

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| | <ul style="list-style-type: none">▪ The Department maintains links with the Department of Prime Minister and Cabinet, the Department of Social Services, and State and Territory Governments through formal and informal communication channels and forums, such as the Standing Committee on Child and Youth Health. |
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Key issues and constraints in implementing proposed activities and services

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| | <ul style="list-style-type: none">▪ All activities and milestones outlined in the Implementation Plan have been achieved.▪ The most common barriers faced by funded organisations are: recruitment and retention of qualified staff; lack of transport for clients; capacity issues; difficulties associated with remote service delivery; and with engaging and maintaining contact with clients. |
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Service Location: Urban; Regional; or Remote

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| | <ul style="list-style-type: none">▪ 15 organisations funded are in urban locations;▪ 38 organisations funded are in regional locations; and▪ 32 organisations funded are in remote locations. <p>Further information is provided at Attachment B.</p> |
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- Attachment A: Implementation Plan
- Attachment B: New Directions: Mothers and Babies Services sites
- Attachment C: NPA IECD Performance Indicators