# Optimising clinical intake for children with developmental delay

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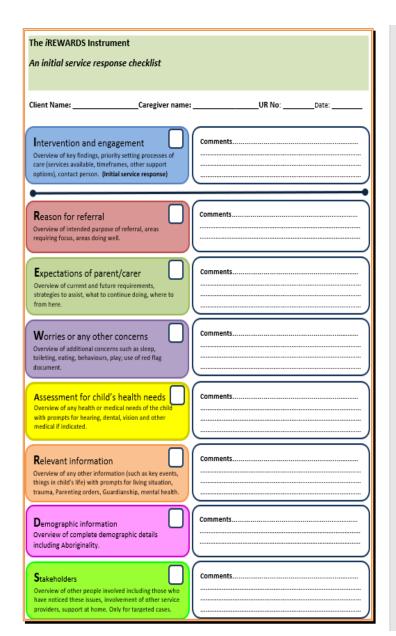
### Abstract

- Developmental delay in children
  - When young children are slower to develop physical, emotional, social and communication skills than expected, it's called developmental delay
  - Developmental delay can show up in the way children move, communicate, think and learn, or behave with others. When two or more of these areas is affected, it might be called global developmental delay
- The foundation for achieving outcomes for children with developmental delay begins with identifying needs early, establishing clinical partnerships with the child and parent/caregiver and delivering clinical services as early as possible following receipt of a referral



#### Outcomes

- Timely identification and commencement of clinical services for children with developmental delay
  - Driven by allied health professionals
  - They identified the need
- Working collaboratively with allied health clinicians, parents and families and researchers
  - Using a partnership approach
  - Bringing expertise together



|         | ame:Caregiver name:   |          | UR No:     | Date: |
|---------|---|----------|------------|-------|
| /       |   |          |            |       |
| / P     | artnership Process  |          |            |       |
| In      | itial intervention provided / recommended                             |          |            |       |
|         |   |          |            |       |
|         |   |          |            |       |
|         |   |          |            |       |
|         |   |          |            |       |
|         |   |          |            |       |
|         |   |          |            |       |
|         | ollow up required   |          |            |       |
|         |   |          |            |       |
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|         |   |          |            |       |
|         |   |          |            |       |
|         |   |          |            |       |
|         |   |          |            |       |
| Α       | dditional supports identified?  | Yes      | No         | N/A   |
| G       | uardian consents to sharing of information?                           | Yes      | No         | N/A   |
| Se      | ervice request submitted?   | Yes      | No         | N/A   |
| K       | ey stakeholders informed of outcome?                                  | Yes      | No         | N/A   |
|         | rial Consent<br>amily informed re trialling of new initial service re | sponse į | process    |       |
| G       | uardian consents to further contact re trial:                         | Yes      | No         | N/A   |
| C       | opy of partnership process provided to family:                        | Yes      | No         |       |
|         |   |          |            |       |
| \       |   |          |            |       |
|         |   |          |            |       |
| iniciar | n Name: Profession:   |          | Signature: |       |
|         |   |          |            |       |
| riner e | enquiries please phone:   |          |            |       |
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|         |   |          |            |       |

#### Outcomes

- Improved timeliness of access to allied health services across regional Local Health Network in SA Health as demonstrated by:
  - Reduced first clinical response times from a mean of 68 to 29 days (57% improvement)
  - Maximum waiting times of 551 days reduced to 201 days, (64% improvement)
  - Pre implementation identification of parental/caregiver concerns was 56%, and post implementation the client centred practice was 88%, an improvement of 27%.



## Addressing Health Inequities

- Australians in rural and regional Australia have poor access to health care
  - This research addressed this issue by improving timely access to children with developmental delay and their families and communities
- Lack of timely identification and early intervention can have ongoing impact
  - This research by enabling early intervention and reducing waiting times contributed to positive outcomes, improvement in client centred care and minimised health care burden



## Implementation / Translation to Practice

- Complex healthcare challenges require innovative thinking
  - Allied health can be at the forefront of innovation
- Importance of a partnership approach
  - Clinicians, parents and researchers
  - Research evidence and clinical practice
  - Developers and users
  - Etcetera
- Achieving change in health care requires
  - Vision and funding (looking at the long term, no fear of failure)
  - Communication and support (resistance and fear)
  - Leadership support (value of project)
  - Local change champions (local point of contact)
  - Knowledge tool (helps the "how to")
  - Embedding in systems (data collection and reporting)
  - Ongoing evaluation and improvement (ability to refine and review)

