

SENATE LEGAL AND CONSTITUTIONAL AFFAIRS COMMITTEE 2007

Northern Territory National Emergency Response Bill 2007 &  
Related Bills

**HEARING DATE:** 10 August 2007

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**QUESTION NO 13:**

In addition, what is the expected number of doctors, specialist health professionals and specifically what are the:

- Types
- Where will they be located temporarily/permanently
- How long will they stay
- Costs of any of the measures designed to continue past 30/06/2008 and how will that be dealt with

**ANSWER:**

On average, since the first deployment on 10 July 2007, four Child Health Check teams have been deployed each week. Child Health Check teams include a doctor and up to three nurses and Aboriginal health workers (where available) who work in conjunction with local health services. The Child Health Check teams are located within the community and are deployed for a period of two to three weeks, depending upon the size of the community.

Specialists/professionals required for follow-up will be dependent on referral data that is collected from the health checks.

Funding and implementation processes for those measures designed to continue past 30 June 2008, is under consideration by Government.

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**QUESTION NO 14:**

How many children have had health checks? What has been found and what are the provisions for follow-up health services?

**ANSWER:**

As at 9 August 2007, 705 Child Health Checks have been completed. The top three specific conditions found are: dental, ear/nose/throat, and skin. The Australian Government is committed to working with the Northern Territory Government and Indigenous communities to implement this package of reforms to ensure the needs of Indigenous people in these communities are met. Follow-up services will require and augmentation of the existing health system and will be supplemented where necessary.

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**QUESTION NO 15:**

\$83 million has been appropriated for improving child and family health, \$72.7 million is administered appropriations, \$10 million is departmental:

- Is this funding just for the children's health checks?
- How much is for the initial health check ups? How much for follow-up health services?
- When is it expected that the initial health checks will be completed?
- Follow up services: will extra money be for primary health care? Or specialist follow-up services? Or both? (and what is the approximate breakdown)?
- How will the primary health services be delivered - through AMSs/ACCHOs or other?

**ANSWER:**

- i) The funding is for the Child Health Checks and initial follow up, this includes drug and alcohol response teams, specialist teams to treat child abuse and trauma, and follow up medical teams.
- ii) The cost of delivering this measure is an estimate, taking into account factors of remoteness, timeframes and costs of travel and alike.

<b>Component</b>	<b>(\$m)</b>
Child Health Check Teams	\$23.1
Drug and Alcohol Response Teams	\$11.4
Specialists Teams to treat Child Abuse	\$ 3.0
Follow-up Medical Teams	\$35.2
<b>Total</b>	<b>\$72.7</b>

- iii) It is anticipated that Child Health Checks will be completed by 30 June 2008.
- iv) See table in response to ii).
- v) The Australian Government is committed to working with the Northern Territory Government and indigenous communities to implement this package of reforms to ensure the needs of indigenous people in these communities are met. All follow-up will be additional service delivery provided through complementing existing primary health care services.

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**QUESTION NO 16:**

How many children have been checked? How many are expecting to receive a health check in total? When will this be completed?

**ANSWER:**

As at 9 August 2007, 705 Child Health Checks have been completed. An estimated 17,000 children under the age of 16 in the Northern Territory will receive a Child Health Check. It is anticipated that Child Health Checks will be completed by 30 June 2008.

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**QUESTION NO 17:**

What sort of things have these checks revealed? So far as you can say considering the privacy implications? Can you provide the data by location if possible?

**ANSWER:**

The top three specific conditions found are: dental, ear/nose/throat, and skin. The Child Health Checks have, so far, all been conducted within the Alice Springs region.

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**QUESTION NO 18:**

For those children who have been checked and matters that require attention been identified, what happens now? What is the process for providing follow-up medical services, surgeries, medication, etc?

**ANSWER:**

Referrals for other services will be made in the usual way. For example, if a referral needs to be made to services based in Alice Springs, the Child Health Check teams will follow the normal process. The Australian Government is also looking at how more specialist services can be made available, for a short time, to follow up on referrals made by the Child Health Check teams.

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**QUESTION NO 19:**

Particularly in respect of dental issues as well? How do you intend to address these matters and can you provide details of the matters?

**ANSWER:**

Referrals for other services, including dental services, will be made in the usual way. For example, if a referral needs to be made to services based in Alice Springs, the Child Health Check teams will follow the normal process. The Australian Government is also looking at how more specialist services can be made available, for a short time, to follow up on referrals made by the Child Health Check teams.