Northern Territory Government

DEPARTMENT OF HEALTH

REMOTE HEALTH ATLAS
HEALTHY UNDER 5 KIDS PROGRAM

1. General Information

Healthy Under Five Kids (HU5K) Program is core business for Department of Health Primary Health Care (PHC) remote health centres. Evidence supports a focus on physical health, cognitive, psychosocial and behavioural development to improve the health of Aboriginal children. At all ages Aboriginal children have higher rates of illness, hospitalisation and death and are more likely to be exposed to stressful life events than non-Indigenous children.

The HU5K incorporates a series of age specific child health checks, which include growth assessment and the childhood vaccination schedule of the NT Immunisation Program. This document provides guidelines to implement the schedule of these standardised child health assessments in PHC remote health centres.

This program aims to enhance the interaction of the primary health care team with parents / carers. It is recognised that the majority of the routine schedule child health assessments are conducted by the nursing and Aboriginal and Torres Strait Islander Health Practitioner (ATSIHP) staff and a number of those require additional contribution by Medical Practitioners. HU5K's checks where Medical Practitioner involvement is required are able to be claimed as Medicare items (see 4.2 Medicare Claims)

Child health checks are a key element of this program. They facilitate the prevention, early detection intervention and treatment of common conditions that cause morbidity and early mortality as well as prompting early referral for the management of more serious or chronic conditions. Regular and timely child health checks enable:

- assessment of growth and development, as well as physical, psychological and social well-being
- provision of advice and education and the opportunity to discuss any concerns the parent / carer may have
- identification of children and/or families who may need support
- adherence to the childhood vaccination schedule
- early detection and treatment of health or developmental problems, and referral of the child as required

2. Definitions

Growth faltering: is when the child is:

- not gaining weight
- not putting on enough weight (ie not attaining the average weight gain for age).
- losing weight
- the line on the growth chart is beginning to flatten or is flat.

Overweight: is more than one (>1) standard deviation above the mean weight-for-height or mean Body Mass Index, or above the 85th percentile weight-for-height.

Obese: is more than two (>2) standard deviation above the mean weight-for-height or mean Body Mass Index, or above the 97th percentile weight-for-height.

Scheduled Substance Treatment Protocol (SSTP): is a protocol for possessing, supplying or administering a scheduled substance as approved by the Chief Health Officer under Section 254 of the Northern Territory Medicines, Poisons and Therapeutic Goods Act.

3. Responsibilities

3.1 Health Centre Clinical Staff

- Ensure children under five years are on the Electronic Health Record (EHR) system
- Ensure children under five years are on the EHR recall system for each scheduled child health check
- Ensure scheduled child health checks are completed at indicated age intervals
- Contribute to components of the child health check
- Manage outcomes arising from the child health check according to approved clinical protocols and relevant referral pathways
- Provide education about growth and good nutrition and health promotion to families and the community, including feedback of the annual HU5K data collection information
- Be aware of, support and liaise with community programs and activities that support child health, eg Strong Women's Strong Babies Strong Culture (SWSBSC), Families as First Teachers (FaFT), Early Childhood Centre, breakfast or lunch programs
- Be aware of and abide by legislative and regulatory requirements in relation to Mandatory Reporting - Children
- Optimise Medicare claiming opportunities for applicable child health services
- Be aware of and complete the endorsed training package. See 4.7 Education Package.

3.2 Medical Practitioner

- Ensure familiarity with the HU5K Program
- Support and participate in providing child health checks where specified
- Complete the *Doctor Examination* fields for each child health check
- Collaborate with health centre clinical staff and parents/carers to develop and monitor children on care plans as required
- Assist with management follow up and referral as necessary according to CARPA STM
- Optimise Medicare benefit claiming where appropriate
- Provide feedback to relevant Child Health Nurses on children seen as part of the program

3.3 Primary Health Care Outreach Team – Child Health Nurses

- Provide practical support and guidance regarding the HU5K Program within their health Service Delivery Area (HSDA)
- Provide assistance with maintenance of child health related recall
- Review and update children's health records as required
- Evaluate and audit health centre HU5K Program activities
- Provide education and health promotion about growth and nutrition, within their HSDA
- Provide training and support for community based Child Health Workers
- Encourage clinical staff undertaking the endorsed training package Healthy Under 5 Kids Education Package (See 4.7 Education Package) and the module: Practical Paediatrics
- Collate data and report on program coverage

3.4 Primary Health Care Outreach Team – Public Health Nutritionist / Dietician

- Provide training for clinical staff in all aspects of nutrition for children, including:
  - use of the NT Infant Feeding Guidelines
  - food for children requiring growth catch up
  - participation in the relevant training sessions.
- Provide training and support for community based Child Health Workers and SWSBSC Workers
- Promote a healthy lifestyle and provide training and support to health centre staff to manage nutrition related conditions

3.5 Paediatrician

- Ensure familiarity with the HU5K program
- Provide Specialist child health advice to the primary health care team, consistent with approved clinical protocols

3.6 Medicare Trainer

- Provide support and assistance regarding Medicare claims
- Review eligibility of Medicare claims
- Report on data regarding Medicare claims made for child health checks, as required

4. Procedure

4.1 Healthy Under 5 Kids Program - Child Health Checks

Clinical staff should offer a child health check to all children aged less than five years according to the HU5K schedule. Once the HU5K Care Plan is initiated, the child health checks will be incorporated in the EHR recall system.

A child health check should always be provided in the presence of the parent / carer with their consent and participation.

The child health checks are a standardised, age specific assessments. A HU5K Child (birth) History and Risk Assessment should be completed at the initial presentation of each child into the Program. This will usually be when the newborn first attends the health centre, but may be performed at any age up to five years if not previously attended to. A poster has been developed that summarises the requirements for each check. Further details are also provided on an Information Sheet - HU5K Child Health Checks.

Detailed information regarding the scheduled checks is also available via the EHR User Reference Guide.

Personal Handheld Records (Health and Immunisation - *yellow book*) should be updated at each visit.

Staff may wish to utilise various health educational documents for further information and as handouts regarding anticipatory guidance. Helpful documents are listed at the Remote Health Atlas HU5K webpage.

4.2 Medicare Claims

In recognising the importance of child health checks the Australian Government provides Medicare rebates for a range of health assessments / checks. Medicare items listed below are also eligible for Medicare incentive (10991) as these services will be bulk billed and children will be under 16 years of age. See related Atlas Item – Medicare Benefit Claiming.

4.2.1 MBS Item No 715 - Health Assessment for Aboriginal and Torres Strait Islander (ATSI) (all ages)

The Health Assessment for ATSI children under 15 years of age can be claimed through Medicare when completed by a Medical Practitioner. Suitably qualified health professionals, such as nurses or ATSIHPs, employed and/or otherwise engaged by the health service, may assist Medical practitioners in performing this health assessment. There must be a minimum of 9 months between claims.

Where immunisation is provided by an ATSIHP (10988) on the same day as an ATSI health Assessment (715), both the check and the immunisation items may be claimed.

See Medicare Explanatory Note A34 for Health Assessment for ATSI people details and A33 for Health Assessment for an ATSI Child (< 15 years).

4.2.2 MBS Item No 10987 – Health Check Follow up

A nurse or ATSIHP can claim for item 10987 when they provide follow up health assessment services for any ATSI clients. 10987 will be rebated by Medicare once a Medical Practitioner has completed the health assessment for ATSI and claimed item 715.

A Medicare rebate for item 10987 can be claimed up to a maximum of 10 services in a calendar year. See Medicare Explanatory Note M12.4

4.2.3 MBS Items 701, 703, 705 and 707 - Healthy Kids Check (at least 3 – 5 years)

Time based items as listed above may be used to provide a Healthy Kids Check for children aged at least three years and less than five years of age, who have received or who are receiving their four year old immunisations. The Healthy Kids Check items can only be claimed by a Medical Practitioner and can only be claimed once per client.

Where immunisation (10988) is provided by an ATSIHP on the same day as a Healthy Kids Check, both the check and the immunisation may be claimed.

See Medicare Explanatory notes A25 for Health Assessment 3 – 5 year old details.

4.2.4 MBS Item No 10986 - Healthy Kids 4-Year-Check

The purpose of the Healthy Kids Check is to ensure that a 4-year-old child has a basic health check to see if they are healthy, fit and ready to learn when they start school.

The nurse or ATSIHP is required to note that an immunisation for a four year-old has been given. Where immunisation 10988 is provided by an ATSIHP on the same day as Healthy Kids 4-Year Check (10986), both the check and the immunisation item may be claimed.

The Healthy Kids 4-Year-Check can only be claimed once for an eligible client and only if the client has not already received a Healthy Kids Check service under items 701, 703, 705 or 707. Item 10986 may be claimed when a RAN or ATSIHP undertakes the 4 Year Check on behalf of, and under the supervision of, a Medical Practitioner. See Medicare Explanatory Notes M12.3 for details.

4.3 Follow up Care

Following completion of a check, interpretation of the results and planning ongoing management with the parent / carer is the next phase of the check, where required. All interventions must be documented on the HU5K Care Plan and, if appropriate, within the progress notes.

A child who raises concern or has abnormal assessment findings, may require implementation of an additional care plan, such as a growth action, ear health, etc

4.3.1 Growth Action Plan

Identification of growth faltering in any child requires a timely and appropriate response. A Growth Action Plan should be implemented as soon as growth faltering is recognised. See the EHR User Reference Guide for details.

4.3.2 Nutrition Supplements

Use of nutrition supplements in addition to a healthy diet can be a useful and effective short-term intervention for children with growth faltering in remote communities. See Nutrition Supplements in Children 1 – 5 Years for details.

4.3.3 Oral Health

Oral Health is an important component of overall health and wellbeing. Poor oral health and untreated oral conditions have an adverse effect on quality of life, including the ability to eat nutritious foods, speech difficulties, lowered self-esteem and systemic infections. Early childhood is the time when most lifelong habits are established. It offers the greatest

opportunity for prevention of disease which, in turn, can contribute to better health in adulthood.

Integration of oral health in to general health interventions by Child Health Professionals aims to improve the health and wellbeing of children. The HU5K's program incorporates a number of oral health components including Lift the Lip assessment, anticipatory guidelines, referral to oral health services and application of fluoride varnish from 18 months at 6 monthly intervals.

Health staff who have undertaken the training: Healthy Smiles - Oral Health and Fluoride Varnish Training (Community Services Training Package HLTOHC408B Apply Fluoride Varnish) are qualified to apply fluoride varnish as part of a child health assessment. Support can be provided by Dentists or Dental Therapists. Sodium fluoride varnish is supported by clinical protocols and procedures described in:

- CARPA STM, Dental and Oral Problems – 6 months to 5 years, and Strong Teeth Toolbox
- CRANA*plus* Clinical Procedures Manual for Remote and Rural Practice, Applying Fluoride Varnish to Children's Teeth
- Northern Territory Government Healthy Smiles Oral Health & Fluoride Varnish Information for Health Professionals, Chapter 4, Fluoride Varnish

Information about the Healthy Smiles – Oral Health & Fluoride Varnish Training can be found on the NT DoH Oral Health Services - Oral Health Promotion website.

4.4 Recall

The recall system is a planning tool and reminder system for ongoing care of clients. When a child is commenced on a HU5K Care Plan, the appropriate recall items will display on the child's EHR providing a recall schedule for each child health check. See the EHR User Reference Guide for detailed information.

4.5 Reporting Coverage of Healthy Under 5s Program

Clinical staff need to be aware of the number of children that are due for checks on a monthly basis. This can be printed off as a report from the EHR system. Once checks have been completed this should be recorded and reported on a monthly basis to the Child Health Nurse responsible for the HSDA.

The Child Health Nurse should collate this information and provide a copy to the Primary Health Care Manager (PHCM), District Manager, PHC Outreach Team Manager and the C&YH Strategy Unit.

To ensure that the most vulnerable children receive the benefits of this program it is essential that coverage rates are as high as possible.

4.6 Healthy Under Five Kids Program Data Collection

HU5K Program data is collated through the Health Services Data Unit and a report produced for each community annually. This local report is distributed to each health centre and staff should provide this feedback to the community through appropriate mechanisms for the community, eg presentation to the Community Council, Health Council or other appropriate forums. This information may be used to develop or evaluate local child health programs. Child Health Nurses responsible for the HSDA are able to assist in providing this feedback to communities if requested.

The annual Healthy Under Five Kids Data Collection (GAA) Program Report provides an NT wide picture of child growth in remote communities. As data systems are improved, this report will provide a more comprehensive picture of child health in the NT as well as program specific information about the HU5K program.

4.7 Revision of Healthy Under 5 Kids Program

Extensive work and consultation contributed to the development of the schedule of child health checks. The program indicates a standard of care for children. Periodic review of the standards is the responsibility of the NT Child & Youth Health Strategy Unit. Medicare Australia will, from time to time, instigate changes with respect to the mandatory aspects of child health checks.

Comments regarding the forms should be directed to the NT C&YH Strategy Unit on phone: 08 8985 8152.

4.8 Education Package

The Healthy Under 5 Kids Education Package is designed to support health practitioners working in remote areas to deliver the new Healthy Under 5 Kids Program of preventative child health care. This is a stand-alone, self-directed Education Package developed jointly between the Department of Health (DoH) and Charles Darwin University (CDU). For further details regarding the education package see Healthy Under 5 Kids Education Package Contents and Background.

To enrol applicants need to complete the Healthy Under 5 Kids Education Package Enrolment Form and forward to the HU5Ks Project Officers on fax 08 8923 7697.

For students wishing to enrol in the CDU Graduate Diploma in Child & family Health, this module may be used as an elective unit after consultation with the course coordinator about additional assessment requirements.

4.9 Contact Information

For advice or assistance please contact the relevant area to be connected with the appropriate team member.

UNIT / TEAM	PHONE	FAX	E-MAIL
Child & Youth Strategy Unit	08 8985 8152	08 8923 7697	child.health@nt.gov.au
PHC Outreach Team:			
- Top End	08 8922 7712	08 8922 6112	
- Central Australia	08 8955 6100	08 8952 9087	

5. Forms

Healthy Under 5 Kids Education Package Enrolment Form

HU5K Program Forms *(Reference documents only. All consultations must be recorded directly into the relevant EHR):*		
Child History & Risk Assessment	6 Month Check	2 Year Check
First Visit	9 Month Check	3 Year Check
8-Week Check	12 Month Check	4 Year Check
4 Month Check	18 Month Check	Full set
Social, Emotional and Domestic Violence Screen Form, available via PCIS		
Growth Charts		

6. References and Supporting Documents

Related Atlas Items:

About Giving Vaccines	Mandatory Reporting - Overview
Antenatal & Postnatal Care	Mandatory Reporting - Children
Child & Youth Health Program	Medicare Items Provided by RANs & ATSIHPs

Client Recall Systems	Nutritional Supplements for Children 1-5 Years
Domestic & Family Violence	Section 250 NT MPTGA
Health School-Age Kids Program	

Information Sheet - HU5K Child Health Checks

Healthy Under 5 Kids Program Resource Folder Contents Page (contains links to the HU5Ks Program Folder resources

Hearing Health Referral Pathways

Beyond GAA in the Bush to Under 5 Well Child Check *(scroll to pages 24 - 26)*

Healthy Under Five Kids Data Collection (GAA) Program Report

Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual

CRANA*plus* Clinical Procedures Manual for Remote and Rural Practice

Medicare Australia

Australian Government Department of Health and Ageing

MBS Primary Care Items - Healthy Kids Check Resource Kit

NT Medicines, Poisons and Therapeutic Goods Act

Related Electronic Health Record System documents:

PCIS Website	EACS Website
Healthy Under 5 Kids Program	
Growth Action Care Plan	