



**FIRST  
2000  
DAYS**

**IMPLEMENTATION  
STRATEGY**

**2020-2025**



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# Message from the Secretary

**I am delighted to introduce our first NSW Health Implementation Strategy for the First 2000 Days (conception to age 5) Framework. Evidence shows us that we can make important changes in the first 2000 days of life, starting with conception, that will improve the health of individuals and the broader population now and into the future.**

Some of our actions will trigger changes that can be measured within the five years of this Implementation Strategy. Many of the outcomes we are working towards in this and subsequent implementation plans will not become visible or measurable until today's babies are having their own children, and then grandchildren. The power for change offered by the evidence is that significant.

Since its release, we have seen an incredibly positive response to the key messages and objectives within the Framework. The policy has resonated with the NSW health community and with our partner agencies as a call to action. It makes it clear that we have a tremendous opportunity to make a real and measurable impact on the health and wellbeing of our future generations. The Framework has given us a set of clear objectives and priorities to guide us as we work to help every child have the best start in life, and set a strong foundation for their health now and for decades to come.

The implementation of the First 2000 Days Framework is built on the principles of value-based health care and those set out in the Integrated Care Framework. Our response to the evidence underpinning the First 2000 Days Framework includes a strong push to improve the consumer experience of the health care, services and support we deliver. By making sure we provide those services and supports in the right place and at the right time, we can help to ensure that children and their families have what they need to thrive. We also need to improve the experience of those who need to access early intervention and care for more serious or complex issues, so that those who are more vulnerable to poor child health, development and wellbeing outcomes have the greatest possible opportunity to live long, healthy and fulfilling lives.



**The implementation of the First 2000 Days Framework is built on the principles of value-based health care and those set out in the Integrated Care Framework.**

The First 2000 Days Framework and this Implementation Strategy aims to deliver value for money. This is not limited to using the evidence to guide service delivery to use resources efficiently in the short term. The greatest contribution to value is likely to be achieved by the improvements the actions can make to long term health outcomes for the NSW community. If we can use the evidence successfully to inform NSW Health's service delivery, and the way service delivery across government and non-government providers supports families with children in their first 2000 days of life, this body of work has greater potential than we have seen in the past to reduce service demand.

As the children of today age, we would look to see changes in the proportion of children with significant developmental vulnerability at school entry in 5-10 years' time, changes to the rates of behavioural issues and a rise in academic performance in 10-20 years' time, and improvements in demand for services for a range of chronic illnesses in 20-40 years and beyond. Health services are an important support for families expecting and caring for young children, but the full potential benefit of this work will not be realised if we work alone. Investing time and resources into partnerships with parents and community members, other service providers in government, and not-for-profit and private service providers is vitally important. Working together, we can do more than make major reductions in the incidence of chronic disease, and create a more sustainable health system which is better for everyone. We can actually improve every child's chances of developing well, entering school ready to face the challenges of formal education, achieving more through their education, and having a long life characterised by good health, healthy relationships, successful employment and a greater capacity to participate in life.

In my discussions with you as I have visited our facilities across the state, I have heard your excitement and passion to build on decades of good work, using this evidence to improve the way that children and families experience our services. I hope this document will help you not only to improve current services, but also to inspire future opportunities for innovation and collaboration in partnership with our consumers and other service providers. The science behind the First 2000 Days is health science. NSW Health is therefore well placed to lead and inspire others to join us as partners to work to our common goal of better outcomes for all children. Because we want everyone in NSW to have the best possible start to a healthy and fulfilling life.

**Elizabeth Koff**  
Secretary, NSW Health



# Glossary

ACE	Adverse Childhood Experiences
AHHV	Additional Health Home Visiting
AMIHS	Aboriginal Maternal and Infant Health Service
BSF	Building Strong Foundations
CYF	Child, Youth and Family
ECAV	NSW Health Education Centre Against Violence
ECEI	Early Childhood Early Intervention
ECOH	Early Childhood Oral Health Program
ED	Emergency Department
FASD	Fetal Alcohol Spectrum Disorder
HETI	NSW Health Education and Training Institute
IPARVAN	Integrated Prevention and Response to Violence, Abuse and Neglect
LHD	Local Health District
NDIS	National Disability Insurance Scheme
PARVAN	Prevention and Response to Violence, Abuse and Neglect
PHR	Personal Health Record (Blue Book)
SFE	Supporting Families Early
SHHV	Sustained Health Home Visiting
SHN	Special Health Networks
SUPPS	Substance Use in Pregnancy and Parenting Service
UHHV	Universal Health Home Visiting
VAN	Violence, Abuse and Neglect

# Introduction

## The First 2000 Days (conception to age 5) Framework

The First 2000 Days (conception to age 5) Framework was released as a NSW Health Policy Directive (PD2019\_008) in February 2019. The Framework presents the evidence for why the NSW health system and its partners need to prioritise working with children and their families in the first 2000 days of life. It describes how we can improve the health of the NSW population by using evidence to build on the system of care already in place for children and their families.

*The Framework has three strategic objectives that offer an 'umbrella' for policies and guidelines that will play a role in promoting the importance of the first 2000 days.*

The Framework objectives are central to the goals and strategies presented in this document. They are:



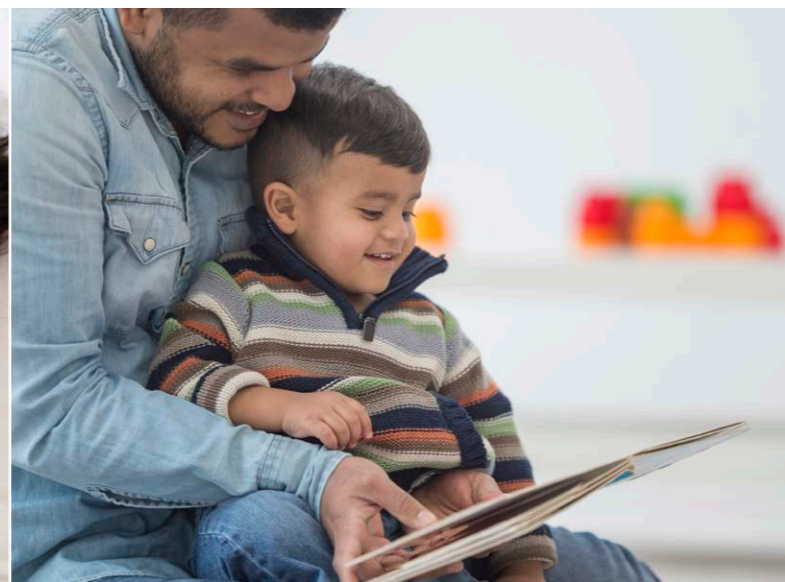
1. All staff in the NSW health system understand and promote the importance of the first 2000 days and the best opportunities for action



2. The NSW health system provides care to all and works in partnership to promote health, wellbeing, capacity and resilience during the first 2000 days



3. The NSW health system provides additional services for those who need specialised help, when they need it





## The purpose of this document

This Implementation Strategy for the NSW health system aims to deliver change at a state and local level over the next five years. It will be a resource for local health districts, specialty networks, and other policy, program and service delivery areas within the health system as they develop their own first 2000 days plans and strategies.

Successful implementation of the First 2000 Days will improve health and development outcomes for all children giving them the start that they need to thrive now and in the future. Over time, evidence indicates that the right actions will lead to a significant and positive impact on the health and wellbeing of children, families and our whole community.

*In implementing the First 2000 Days Framework, we will eventually see that the actions we take with children in their first 2000 days of life now will result in a population with lower risk of early death, chronic disease and the illnesses that are currently driving up demand for acute health services.*

The First 2000 Days Framework and Implementation Strategy are consistent with the principles of value-based health care in NSW. Implementation will prioritise:



### Health outcomes that matter to patients

The Framework and Implementation Strategy are based on evidence about what matters to children and their families, and what really affects the outcomes that will give each child the best chance of a long, healthy and fulfilled life.



### Experience of receiving care

Children and their families must be at the centre of care. When providing services to families, we will be working in partnership with parents and often meeting their needs, but always with the baby or child in mind and at the centre.



### Experience of providing care

The First 2000 Days has a strong focus on health equity, and on improving the experience of receiving health care and social services. Children and parents want and need a system that is easy to use, engages them early, and provides what they need when they need it. The First 2000 Days is part of a holistic life course approach.



### Effectiveness and efficiency of care

Using the evidence and consultation with consumers to guide action will help to improve access and engagement in health services and programs, providing the best possible care from conception to school. Integrating with service partners across government and in primary health care will be essential.

## Background to this document

The Implementation Strategy draws on extensive consultation with health care providers, local health districts and other agencies. Consultations after the release of the First 2000 Days Framework culminated in a statewide workshop at Luna Park, in Sydney in June 2019 which defined the priorities for the first five years of implementation, and scoped the vision, goals and strategies you see in the following pages. We thank all those who contributed their advice, and especially those who represented their local health district, pillar or health organisation at the statewide workshop (see Appendix A for list of organisations that attended).

It also draws on evidence about what parents and families want and what matters to them. Two important sources of information are Australian research on child development messaging by the Frameworks Institute, and the submissions and evidence presented to the 2018 NSW Parliamentary inquiry into support for new parents and babies.

The Implementation Strategy provides additional context and support for local health districts, pillars and specialty networks as they develop annual plans to contribute to the objectives of the First 2000 Days (conception to age 5) Framework. The goals and strategies will help to focus efforts across the state to improve consistency and help to accelerate achievement of better outcomes for NSW children and their families.

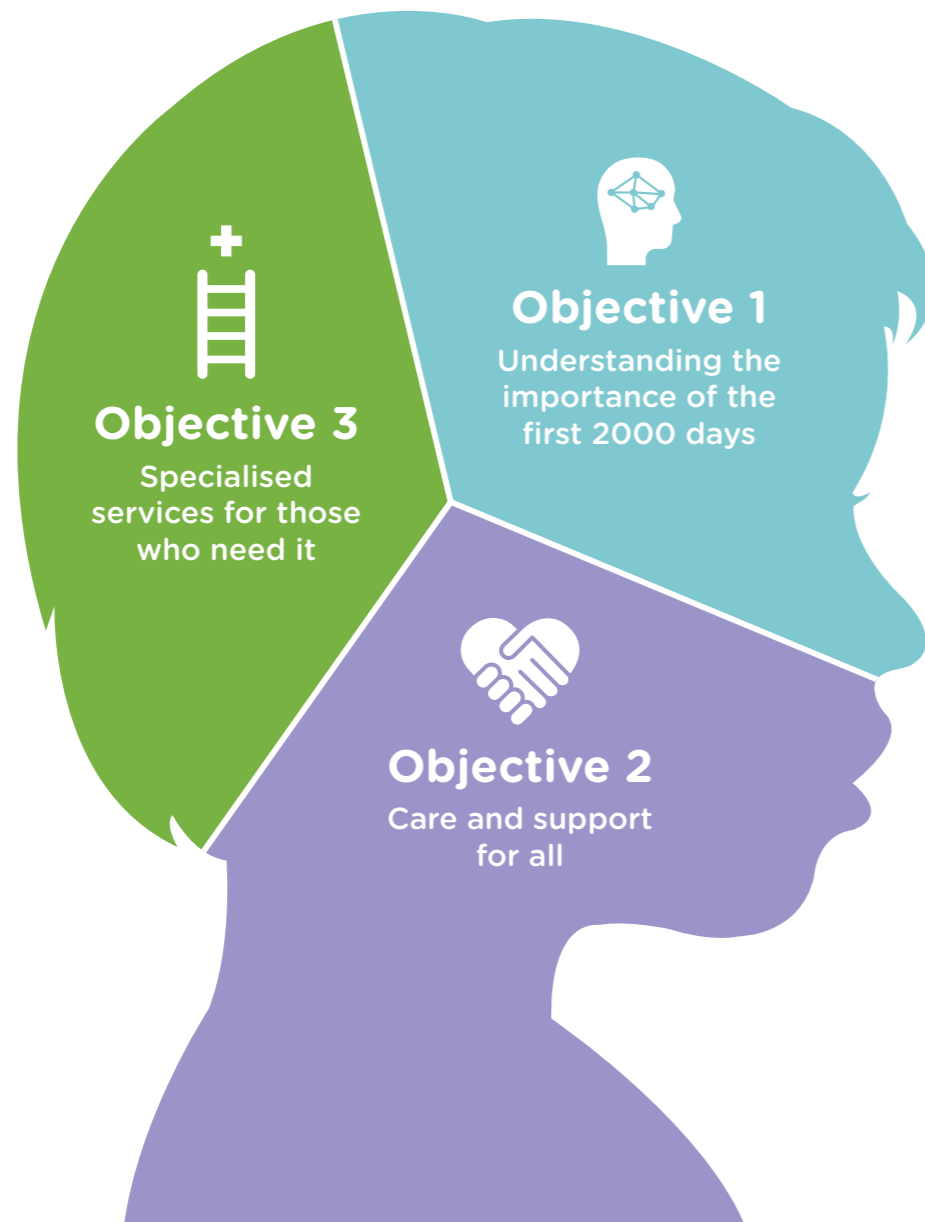


# Strategy on a page

## Vision:

Engage service providers and the community to understand the importance of the first 2000 days of life and take action so that it underpins everything we do in NSW.

The First 2000 Days Framework objectives will be implemented through three goals



1. All staff in the NSW health system understand and promote the importance of the first 2000 days and the best opportunities for action

### GOAL 1: Informed decisions for building brains

- 1.1 Ensure access to consistent, accurate information (including tools and resources) on the First 2000 Days.
- 1.2 Understanding how to use the First 2000 Days information to improve lives.



2. The NSW health system provides care to all and works in partnership to promote health, wellbeing, capacity and resilience during the first 2000 days

### GOAL 2: Child and family-centred support and services for all

- 2.1 Provide high quality, comprehensive antenatal care so that everyone can make informed decisions about their children's health and wellbeing.
- 2.2 Ensure antenatal care includes evidence-based screening and assessment.
- 2.3 Ensure a seamless transition from maternity to child and family health services in partnership with general practice.
- 2.4 Encourage attendance at the recommended schedule of health checks and screenings to support optimal development of children.
- 2.5 Work collaboratively across government to promote supportive environments to enable everyone to make healthy choices and have healthy lifestyles.



3. The NSW health system provides additional services for those who need specialised help, when they need it

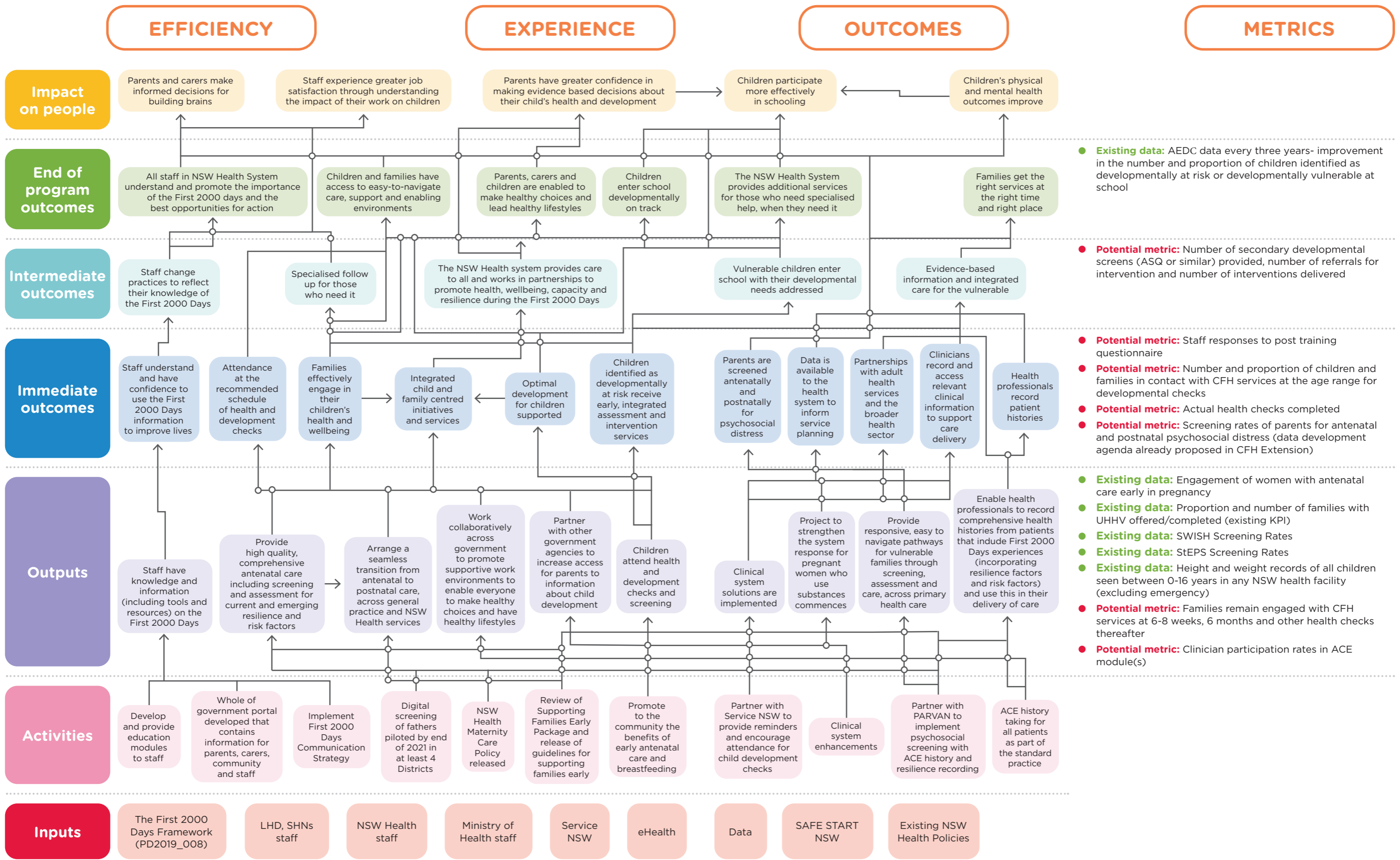
### GOAL 3: Evidence-based, informed and integrated care for the vulnerable

- 3.1 Ensure that children identified as developmentally at risk receive early, integrated assessment and intervention services.
- 3.2 Provide responsive, easy-to-navigate pathways for vulnerable families through screening, assessment and care, across primary health care in partnership with adult health services and the broader health sector.
- 3.3 Enable health professionals to record comprehensive health histories from patients that include First 2000 Days experiences (incorporating resilience factors and risk factors) and use this in their delivery of care.

## Enablers

- 1. Foster a workforce that is driven to apply the knowledge of the First 2000 Days
- 2. Develop the supporting systems for the First 2000 Days

# First 2000 Days Framework Logic Model





## GOAL 1: Informed decisions for building brains

### GOAL 1:

Parents, carers and professionals have the information they need to make informed decisions about the first 2000 days of a child's life.

### STRATEGY 1.1

Ensure access to consistent, accurate information (including tools and resources) on the First 2000 Days for:

- all NSW Health staff working with children and their families
- professionals internal and external to NSW Health working with children, their families and carers
- non-government organisations working with children, their families and carers
- parents, carers and the community.

#### Rationale

##### If we:

- Communicate the First 2000 Days evidence in a consistent, easily understood form to those working with children and their families
- Provide professionals both internal and external to NSW Health and non-government organisations, working with children and their families with the same key messages and core education on the First 2000 Days as those within NSW Health
- Provide parents and carers with information that will foster their understanding of the First 2000 Days messages and implications for their decision making

##### Then:

- Those working with children and their families will understand why the first 2000 days is a clear priority
- Everyone who works with children and their families will be well positioned to clearly communicate key information consistently to parents, carers and the community
- Those working with children and their families will be better equipped to 'speak the same language' about early child development and better equipped to work together
- The messages that parents and carers receive about child development will be more consistent, accessible and delivered in ways that make sense and that they can use to make informed decisions about their children

##### Because:

- There may be varying levels of understanding about the evidence underpinning the First 2000 Days
- In order to promote the First 2000 Days, professionals first need to understand why this period is important and what works to promote resilience and enrich the environment in which children grow and develop
- As health professionals promote information about the first 2000 days with partner agencies and the community, everyone will be able to make informed decisions about what we prioritise in the first 2000 days.

#### Statewide projects: ● current and ● emerging

- Implementation of the First 2000 Days Framework
- Policies and resources to support weight management for children and their families within clinical services (*Healthy Kids for Professionals*)
- Education initiatives with HETI, ECAV, General Practice, Medical and Nursing and Midwifery Colleges, and Allied Health
- Research into evidence-based approaches to increase resilience for children

#### Milestones by year

- Year 1:** First phase of Implementation Strategy completed and local health district plans rolled out  
Development of first phase of education initiatives
- Year 3:** First 2000 Days training and education programs fully embedded as part of regular General Practice, Medical and Nursing and Midwifery College, and Allied Health training  
Regular forums established for collaboration and sharing of learning within NSW Health and government/  
non-government organisations and private health
- Year 5:** First 2000 Days body of knowledge embedded in clinical practice and delivery of child and family-centred services

### GOAL 1:

### STRATEGY 1.2

Parents, carers and professionals have the information they need to make informed decisions about the first 2000 days of a child's life.

Understanding how to use the First 2000 Days information to improve lives.

#### Rationale

##### If we:

- Equip those working with children, their families and carers to overcome known barriers to communicating the First 2000 Days information
- Promote the importance of working in partnership to use the evidence to provide children and their families with better health outcomes
- Ensure parents can readily use the information to improve the lives of children in their care

##### Then:

- Service providers can make informed decisions about how integrated care is provided to families
- Families will make decisions with a clear understanding of the implications for their child
- Families and children will experience less fragmented and more holistic advice from service providers

##### Because:

- Partnerships with professionals internal and external to the NSW Health system, including non-government organisations, the private sector, families and communities are fundamental to achieving the First 2000 Days Framework's key objectives
- By working together we can provide integrated services and supports so that families can have consistent and streamlined care
- Through effective and collaborative support and intervention during the first 2000 days, there is an opportunity to give children the best possible start in life physically, developmentally, socially and emotionally.

#### Statewide projects: ● current and ● emerging

- Communication and socialisation process developed to support implementation of the First 2000 Days Framework
- Organisation of education and communication tools and resources for parents and the community
- Education initiatives with HETI, ECAV, General Practice, Medical and Nursing and Midwifery Colleges, and Allied Health
- Research into evidence-based approaches to increase resilience for children

#### Milestones by year

- Year 1:** Partnerships established to develop education initiatives  
Partnerships established to rollout plans (local health district reports include active partnerships and partnership projects)  
Partnerships established to strengthen links with Primary Health Care
- Year 3:** First 2000 Days training and education programs fully embedded as part of regular General Practice, Medical and Nursing and Midwifery College, and Allied Health training  
Provide consumer resources that include key messages from First 2000 Days evidence  
Regular forums established for collaboration and sharing of learning across NSW Health and government/  
non-government organisations and private health
- Year 5:** First 2000 Days body of knowledge embedded in clinical practice and delivery of child and family-centred services





## GOAL 2: Child and family-centred support and services for all

### GOAL 2:

There are integrated family and child-centred initiatives and services available, so that every pregnant woman, her family and her child have access to seamless, easy-to-navigate care, support and enabling environments from conception through to the time a child is five.

### STRATEGY 2.1

Provide high quality, comprehensive antenatal care so that everyone can make informed decisions about their children's health and wellbeing.

#### Rationale

##### If we:

- Engage each pregnant woman in antenatal care as early as possible
- Provide pregnant women and their partners, and women and their partners planning a pregnancy, with clear information about what influences their child's development from conception, what harms babies during pregnancy, and the likely lifelong impacts
- Provide evidence-based, woman-centred care that includes physical, mental and social/emotional health elements consistent with the Commonwealth Department of Health Pregnancy Care Guidelines
- Work in partnership with other care providers such as General Practitioners and Practice Nurses

##### Then:

- Health professionals can identify vulnerabilities early, and provide early support, intervention and pathways into other services to minimise stressors and other risks
- We can help every woman have as healthy a pregnancy as possible
- Women and their partners will be in the best possible position to give their baby the best start in life

##### Because:

- Evidence shows a strong link between the quality of antenatal care and a child's life and educational outcomes. What happens in pregnancy can predict how that child will develop, how they will perform at school, and how well placed they are to achieve in life
- We know that drugs, alcohol, smoking, and major stressors in the life of the mother all impact upon the health and development of the baby, and the long-term health and wellbeing of the mother
- We know that a mother who is well supported and as healthy as possible is more likely to be able to care for herself, develop a strong bond with her baby, and that a healthy relationship with her baby will give him or her the best chance of becoming a well developed and resilient child.

##### Statewide projects: ● current and ● emerging

- New NSW Health Maternity Care Policy
- Focus on New Fathers pilot program
- Review and revision of the Supporting Families Early (SFE) Policy Package
- Early engagement with pregnant women, their partners and families
- Substance Use in Pregnancy and Parenting Service (SUPPS)
- Get Healthy in Pregnancy program (including weight loss after first baby module and alcohol module)
- Initiatives to address Fetal Alcohol Spectrum Disorder (FASD)
- Quitline
- Review and revise the NSW Health consumer resources for the NSW Government Portal for Parents and Carers
- NSW Health Breastfeeding
- Implementation of the recommendations from the Aboriginal Maternal and Infant Health Service (AMIHS) Evaluation
- Oral health in pregnancy programs

##### Milestones by year

- Year 1:** New NSW Health Maternity Care Policy released  
Focus on New Fathers pilot program commenced  
Review of SAFE START commenced (as part of SFE Policy Review)
- Year 3:** NSW Health Portal includes specific collateral for pregnant women and their families that clinicians providing antenatal care can use with patients  
Provide consumer resources that include key messages from First 2000 Days evidence  
Project to strengthen the system response for pregnant women who use substances is expanded  
Communication to the community on the benefits of early antenatal care and breastfeeding  
Revised consumer resources which include key messages from First 2000 Days evidence  
SFE Policy revisions implemented
- Year 5:** Rate of 1 in 5 children not developmentally ready for school reduced

### GOAL 2:

### STRATEGY 2.2

There are integrated family and child-centred initiatives and services available, so that every pregnant woman, her family and her child have access to seamless, easy-to-navigate care, support and enabling environments from conception through to the time the child is five.

Ensure antenatal care includes evidence-based screening and assessment.

#### Rationale

##### If we:

- Undertake comprehensive antenatal screening and assessment to understand the physical, psychological, social, cultural, emotional and environmental factors that are impacting on the pregnant woman, her baby, and the family
- Use the information from this assessment to develop, with the woman and her family, a plan for their antenatal, birthing and postnatal care
- Improve access to screening and services for new fathers so they are able to support their partner
- Work with our service partners to ensure that for families who need the support of other service providers, is available, easy to access, and coordinated as part of their care plan

##### Then:

- We can be confident that new parents have the support they need to achieve improved parental relationships, parenting capacity, parenting engagement and parent-infant attachment

##### Because:

- Screening for physical, mental and socio-emotional health, domestic violence and other concerns early in the antenatal and postnatal period forms part of evidence-based best practice during this period
- Establishing referral pathways into appropriate support and care early and as needed is essential to mitigating against future vulnerability and risk
- The mental health of fathers and partners has a significant impact on the health and wellbeing of women and children.

##### Statewide projects: ● current and ● emerging

- Focus on New Fathers pilot program
- Early engagement with pregnant women, their partners and families
- Get Healthy in Pregnancy program (including weight loss after first baby module and alcohol module)
- New NSW Health Maternity Care Policy
- Review and revision of the Supporting Families Early (SFE) Policy Package
- IPARVAN Framework
- NSW Health Breastfeeding
- Implementation of recommendations from the AMIHS Evaluation

##### Milestones by year

- Year 1:** New NSW Health Maternity Care Policy released  
Partnership with PARVAN teams on incorporating identification of ACEs in psychosocial screening and assessment, and medical assessment  
Focus on New Fathers pilot program commenced  
Review of SAFE START commenced (as part of SFE Policy Review)  
Partnerships with General Practice, government agencies to establish clear pathways for vulnerable groups
- Year 3:** NSW Health Portal includes specific collateral for pregnant women and their families that clinicians providing antenatal care can use with patients  
Project to strengthen the system response for pregnant women who use substances is expanded  
Communication to the community on the benefits of early antenatal care and breastfeeding  
Revised consumer resources which include key messages from First 2000 Days evidence  
SFE Policy revisions implemented  
Implementation of recommendations from the AMIHS Evaluation
- Year 5:** Identified ACEs inform history taking for all patients as part of standard practice

## GOAL 2:

There are integrated family and child-centred initiatives and services available, so that every pregnant woman, her family and her child have access to seamless, easy-to-navigate care, support and enabling environments from conception through to the time a child is five.

## STRATEGY 2.3

Ensure a seamless transition from maternity to child and family health services in partnership with general practice.

### Rationale

#### If we:

- Focus on the consumer experience of care
- Ensure timely, accessible and consistent health messages across settings
- Provide each family with a smooth transition from maternity care to child and family health services
- Ensure that the messaging to families from antenatal and postnatal care consistently communicates the important role of child health checks in monitoring and promoting healthy child development, including brain development
- Encourage every family to have a consistent relationship with a general practice that works closely with maternity and child and family health services
- Ensure that referrals, introductions and transitions from one service provider to another is easy for families and carers
- Provide services in such a way that they are welcoming and attractive to families, and prove their value quickly

#### Then:

- Families will have confidence in our services and advice
- Participation in well child health care will rise because people will understand why it is important and accessing the service will be seen as valuable rather than unnecessary
- Families will experience health care as an integrated, seamless, holistic service that provides what they need, when they need it, without unreasonable effort on their part

#### Because:

- Families should feel supported and receive guidance during their transition from maternity to child and family health services
- General practice plays a significant role in providing ongoing care to women, children and their families during pregnancy and the early childhood years
- General practice plays a critical role in providing information to women and families during this period, as well as referring them on to services and supports during this period
- Partnering with general practice and other service providers during this period gives us the best chance possible to provide women and their families with the skills, resources and information that they need to thrive.

#### Statewide projects: ● current and ● emerging

- Focus on New Fathers pilot program
- New NSW Health Maternity Care Policy
- NSW Health Breastfeeding
- Review and revision of the Supporting Families Early (SFE) Policy Package

#### Milestones by year

- Year 1:** New NSW Health Maternity Care Policy released and implementation commenced  
Focus on New Fathers pilot program commenced  
Review of SAFE START commenced (as part of SFE Policy Review)  
Partnership with Primary Health Care established
- Year 3:** Design of services to include continuity of care within and across NSW Health services  
NSW Health Portal includes specific collateral for pregnant women and their families that clinicians providing antenatal care can use with patients  
Project to strengthen the system response for pregnant women who use substances is expanded  
Communication to the community on the benefits of early antenatal care and breastfeeding  
Revised consumer resources which include key messages from First 2000 Days evidence  
SFE Policy revisions implemented
- Year 5:** A seamless integrated, trauma-informed service experience for the child and their family  
Identified ACEs inform history taking for all patients as part of standard practice

## GOAL 2:

There are integrated family and child-centred initiatives and services available, so that every pregnant woman, her family and her child have access to seamless, easy-to-navigate care, support and enabling environments from conception through to the time a child is five.

## STRATEGY 2.4

Encourage attendance at the recommended schedule of health checks and screenings to support optimal development of children.

### Rationale

#### If we:

- Effectively communicate to families and communities, other health and human services and the early education sector the importance and benefits of the recommended schedule of well child health and development checks
- Focus on identifying the key concerns of parents and carers and the outcomes they want for their child in the delivery of child and family health services
- Provide welcoming, accessible and culturally appropriate services that children, parents and carers feel comfortable using
- Work in partnership with other care providers such as General Practitioners and Practice Nurses
- Make sure that the role of each service in the system, and each health and development check or screening in the schedule is well understood by professionals, parents and carers

#### Then:

- The engagement of families with well child health services will increase in terms of number of families seen and length of time for which families use these services
- The proportion of children receiving all scheduled services will increase
- Families will have improved access to reliable, evidence-based information and support at crucial points in their child's first 2000 days that will help them to breastfeed longer if they choose, resolve parenting difficulties early, parent with confidence, reduce stress, improve the quality of parent-child attachment and improve their child's development
- Where children are experiencing developmental or health issues, the regular attendance at checks and screenings will ensure problems are identified early, intervention is recommended and monitored to optimise the child's developmental outcomes

#### Because:

- 90% of a child's brain development happens before age five. Early detection, screening and surveillance during the sensitive window periods of brain development leads to better outcomes with significant consequences if not detected early
- Early access to essential health services and early intervention gives children a better chance at achieving normal ranges of development
- Early support for parents and carers makes a significant difference to the physical, mental and socio-emotional health and wellbeing of the child, as well as the parents and carers themselves, and that of the wider family unit
- Supporting parents and carers early facilitates strong relationships and attachment between themselves and their child which is pivotal to the child's long-term health and wellbeing.

#### Statewide projects: ● current and ● emerging

- Focus on New Fathers pilot program
- Review and revision of the Supporting Families Early (SFE) Policy Package
- NSW Health Breastfeeding
- Get Healthy Service
- My Personal Health Record (PHR) Blue Book scheduled checks
- Save the Date to Vaccinate
- Early Childhood Oral Health Program (ECO)H
- Little Smiles
- Early Childhood Oral Health eLearning
- Building Strong Foundations (BSF) for Aboriginal Children, Families and Communities Evaluation
- NSW Aboriginal Ear Health Framework (0-5 years)

#### Milestones by year

- Year 1:** Partnerships established to strengthen links with Primary Health Care  
Partner with Service NSW to provide reminders for child development check appointments  
Focus on New Fathers pilot program commenced  
Increase in numbers of children having development checks at age 2 years
- Year 3:** Increase in numbers of children having regular child health and development checks  
Design of services to include continuity of care within and across NSW Health services  
Provide consumer resources that include key messages from First 2000 Days evidence  
Clear pathways and models of integrated care for early assessment and interventions  
Communication to families on the importance and benefits of i) the recommended schedule of well child health and development checks; ii) immunisations as per the National Immunisation Program Schedule; iii) the importance of breastfeeding  
Revised consumer resources which include key messages from First 2000 Days evidence  
SFE Policy revisions implemented  
Implementation of recommendations from the AMIHS Evaluation
- Year 5:** Increase in numbers of children having development checks at age 2, 3 and 4 years  
Current rate of 1 in 5 Children not developmental ready for school reduced  
Implement outcomes from the BSF for Aboriginal Children, Families and Communities Evaluation

## GOAL 2:

## STRATEGY 2.5

There are integrated family and child-centred initiatives and services available, so that every pregnant woman, her family and her child have access to seamless, easy-to-navigate care, support and enabling environments from conception through to the time a child is five.

Work collaboratively across government to promote supportive environments to enable everyone to make healthy choices and have healthy lifestyles

### Rationale

#### If we:

- Partner across government agencies and with community organisations to create enabling environments for healthy behaviours within the community including breastfeeding, safe active play, active travel, and access to healthy foods
- Improve availability, understanding, and prominence of healthy food choices
- Partner with early childhood education and care services, as well as peak bodies
- Promote smoke-free environments at services and homes
- Support household and family members to stop smoking or using other substances

#### Then:

- Parents and children will establish healthy behaviours and habits early, creating both protective factors and reducing risk. This will support healthy development and prevent poor health and development outcomes
- Parents will be able to buy, select, and provide healthy foods to their children more readily
- Across settings children will have opportunities to establish protective health behaviours
- Through partnerships health information and support will be reinforced for families, and this will also provide further opportunity to identify and provide support to those with additional needs

#### Because:

- Healthy behaviours developed in childhood are likely to track into later years, influencing health outcomes in adulthood
- Current evidence indicates that individual, social and environmental factors in the early years all contribute to the establishment of healthy behaviours
- The education, support and working environments of parents and carers are enabling factors in becoming healthy role models and shaping the health-promoting environments and behaviours of their children
- A well-designed built environment can help reduce health risks and improve health outcomes. In contrast, poorly designed built environments can have negative direct and indirect effects on the physiological, psychological and social wellbeing of communities.

#### Statewide projects: ● current and ● emerging

- Healthy eating and active living programs in early childhood centres (Munch & Move) and schools (e.g. Crunch&Sip® and the NSW Healthy School Canteen Strategy)
- Digital and phone-based lifestyle and smoking cessation supports such as the Get Healthy services, iCanQuit website and the Quitline. Get Healthy in Pregnancy offers tailored support to pregnant women
- Policies and resources to support weight management for children and their families within clinical services (Healthy Kids for Professionals)
- Social marketing activity and information to promote healthy eating and active living at the Make Healthy Normal website <https://www.makehealthynormal.nsw.gov.au/>
- Cross-government planning and transport initiatives to create well-connected communities with local environments that improve livability and encourage active travel
- Creation of healthy food environments to support families to make healthy food and drink choices. These include the Health Star Rating front-of-pack labelling system in the supermarket, the quick-service restaurant menu labelling and 8700 app and the healthy food and drink policy in health facilities
- Development of new opportunities to take an integrated, evidence-based approach to prevention in schools, in agreement with the NSW Department of Education
- Development of an integrated, evidence-based approach to prevention in maternity services

#### Milestones by year

**Year 1:** Increased referrals to the Get Healthy in Pregnancy Program, as part of NSW Get Healthy Information and Coaching Service

**Year 3:** Increase the proportion of women who quit smoking by the second half of pregnancy

**Year 5:** Integrated and embedded prevention policies, programs and services to support mothers, children and their families



## GOAL 3:

## Evidence-based, informed and integrated care for the vulnerable

## GOAL 3:

## STRATEGY 3.1

The health system, and all Human Services work together to improve the life chances, health and wellbeing of vulnerable and at risk children, their families and carers who have a poor start, informed by First 2000 Days evidence.

Ensure that children identified as developmentally at risk receive early, integrated assessment and intervention services.

### Rationale

#### If we:

- Develop clear pathways and appropriate interventions from child health checks to specialised health and developmental screening and assessments
- Have a range of parent-led strategies available to support early health and development
- Provide a selection of evidence-informed home-based early interventions for children experiencing early developmental delays
- Ensure there are processes in place to streamline children's transfer to multidisciplinary Allied Health diagnostic development assessments and intervention where home-based strategies are not sufficient for children to reach their developmental milestones

#### Then:

- Children will have the best chance of having their health and development stay on track
- Many developmental delays will be picked up early and addressed effectively in order to improve children's outcomes and reduce financial pressures on families and the system
- More children will have the chance to start school with their development on track

#### Because:

- Sensitive window periods exist for early brain development. Experience and if required, intervention, helps to create neural pathways and connections. If you don't use these pathways they are gone forever resulting in permanent health or developmental disability
- Often children with developmental needs or other vulnerabilities require a range of services and it is essential these services coordinate the care that is provided
- Gains children make from completing 600 hours of preschool education are shown to improve health and wellbeing outcomes significantly.

#### Statewide projects: ● current and ● emerging

- Consolidate early access for all new families to child and family health services.
- Implementation of the Violence, Abuse and Neglect (VAN) Redesign Program (including the IPARVAN Framework)
- Out of Home Care Health Pathway Assessments
- Expansion of Sustained Health Home Visiting
- Additional Health Home Visiting
- Community Mentoring and Deadly Dads programs (breastfeeding)
- ECEI services and the NDIS
- Aboriginal Family Wellbeing and Violence Prevention Strategy
- BSF for Aboriginal Children, Families and Communities Evaluation
- NSW Aboriginal Ear Health Framework (0-5 years)
- Implementation of recommendations from the AMIHS Evaluation
- Mother/Baby units (psychiatric inpatient unit)

#### Milestones by year

**Year 1:** Partnerships with General Practice and government agencies to establish clear pathways for vulnerable groups  
Communication to families on the importance and benefits of i) the recommended schedule of well child health and development checks; ii) immunisations as per the National Immunisation Program Schedule; iii) the importance of breastfeeding

Commence implementation of the VAN Redesign Program (including the IPARVAN framework)  
Partnership with PARVAN teams on incorporating identification of ACEs in psychosocial screening and assessment, and medical assessment.

**Year 3:** Clear pathways and models of integrated care for early assessment and Interventions  
Provide consumer resources that include key messages from First 2000 Days evidence  
Communication to parents, carers, community and staff about First 2000 days, tools and a portal that provides quality and consistent information  
Increase in proportion of children attending regular child health and development checks  
Implementation of recommendations from the AMIHS Evaluation

**Year 5:** Trauma-informed care is an integral component of integrated care training programs, education  
Initiatives and learning forums  
Expansion of Sustained Health Home Visiting  
Implement outcomes from BSF Evaluation  
Identified ACEs inform history taking for all patients as part of standard practice

### GOAL 3:

### STRATEGY 3.2

The health system, and all Human Services work together to improve the life chances, health and wellbeing of vulnerable and at risk children, their families and carers who have a poor start, informed by First 2000 Days evidence.

Provide responsive, easy-to-navigate pathways for vulnerable families through screening, assessment and care, across primary health care in partnership with adult health services and the broader health sector.

#### Rationale

##### If we:

- Work with key partners such as general practice, paediatrics, early childhood health, Allied Health, early childhood education and care, VAN services, adult health services and other services that support children and their families to develop consistent, integrated and well understood pathways to care
- Ensure that all services wrap around families and that the right mix of services is available in each community

##### Then:

- The system will feel simple to use and parents and carers will feel supported
- Children will be more likely to get the services they need as early as possible
- Children's developmental issues will be addressed early, placing them in the best position to have a healthy, fulfilled life

##### Because:

- Some children and families face higher risks and require more intensive support or specialist help from a range of services during the first 2000 days whether this be for a temporary period or in the longer term
- The support that is required is often complex and multifaceted, and requires strong coordination between parts of the health system as well as other government and non-government partner organisations
- Culturally appropriate services are essential to providing the tailored care and support that is required by some communities such as Aboriginal and culturally and linguistically diverse communities, migrants and refugees.

##### Statewide projects: ● current and ● emerging

- Implementation of the VAN Redesign Program (including the IPARVAN Framework)
- Review of SAFE START policy
- Focus on New Fathers pilot
- Strengthen the system response for pregnant women who use substances
- Pilot reforms from 'Their Futures Matter' including Out of Home Care Health Pathways
- Implement Integrated Trauma Informed Care Framework for Vulnerable Children, Young People and Their Families
- Sustained Health Home Visiting (expand to more vulnerable families)
- Additional Health Home Visiting
- Promote continuity of carer models antenatally for vulnerable women
- Commence the BSF for Aboriginal Children, Families and Communities Evaluation
- Implement the recommendations from the AMIHS Evaluation
- Release the NSW Aboriginal Ear Health Framework (0-5 years)

##### Milestones by year

- Year 1:** Partnerships with General Practice, government agencies to establish clear pathways for vulnerable groups  
Commence implementation of the VAN Redesign Program (including the IPARVAN Framework)  
Partnership with PARVAN teams on incorporating identification of ACEs in psychosocial screening and assessment, and medical assessment.  
Review of SAFE START commenced (as part of SFE Policy Review)  
Focus on New Fathers pilot program commenced
- Year 3:** Multidisciplinary or integrated models of care pilots across NSW  
Provide consumer resources that include key messages from First 2000 Days evidence  
Project to strengthen the system response for pregnant women who use substances is expanded  
Communication to the community on the benefits of early antenatal care and breastfeeding  
Revised consumer resources which include key messages from First 2000 Days evidence  
Implementation of recommendations from the AMIHS Evaluation  
SFE Policy revisions implemented
- Year 5:** A seamless integrated, trauma informed service experience for the child and their family  
Trauma-informed care is an integral component of integrated care training programs, education initiatives and learning forums  
Expansion of Sustained Health Home Visiting  
Implement outcomes from the BSF Evaluation

### GOAL 3:

### STRATEGY 3.3

The health system, and all Human Services work together to improve the life chances, health and wellbeing of vulnerable and at risk children, their families and carers who have a poor start, informed by First 2000 Days evidence.

Enable health professionals to record comprehensive health histories from patients that include First 2000 Days experiences (incorporating resilience factors and risk factors) and use this in their delivery of care.

#### Rationale

##### If we:

- Ensure health professionals across settings understand how recording comprehensive First 2000 Days health histories including resilience and risk factors can be used to optimise treatment plans and developmental outcomes
- Develop simple processes that help health professionals record antenatal and early childhood health histories that include risks and resilience factors in the first 2000 days of life

##### Then:

- Health professionals will be able to record more comprehensive health histories including adverse childhood experiences
- Health professionals will understand how the information should impact on the type of intervention and the intensity of the intervention indicated for each patient
- Patients should receive better tailored care, and have better results, for a range of health issues that have their origins in early life

##### Because:

- Early childhood experiences shape the development of underlying systems within our bodies and define key aspects of our physical and mental health and wellbeing throughout life
- The number of adverse childhood events or stressors is directly related to health risk behaviours such as smoking, early sexual behavior, illicit drug use, teen pregnancy and attempted suicide
- Child maltreatment and poverty is linked with heightened immune responses in adulthood that are linked to cardiovascular disease, diabetes, asthma and chronic lung disease. More than 7 or 8 ACE's are also linked to a range of chronic diseases, including a 1 in 3 chance of adult heart disease
- Certain interventions, if implemented early, can create protective factors that buffer against adverse childhood experiences
- By delivering care in a trauma informed manner which considers an adult's childhood experience when conceptualising health issues, we have a better chance of finding an effective treatment for that health issue.

##### Statewide projects: ● current and ● emerging

- Implementation of the VAN Redesign Program, including the IPARVAN Framework
- Education initiatives with HETI
- Ensuring health professionals have access to the latest evidence to support their practice
- Continued promotion of integrated models of care to provide seamless services to children and their families

##### Milestones by year

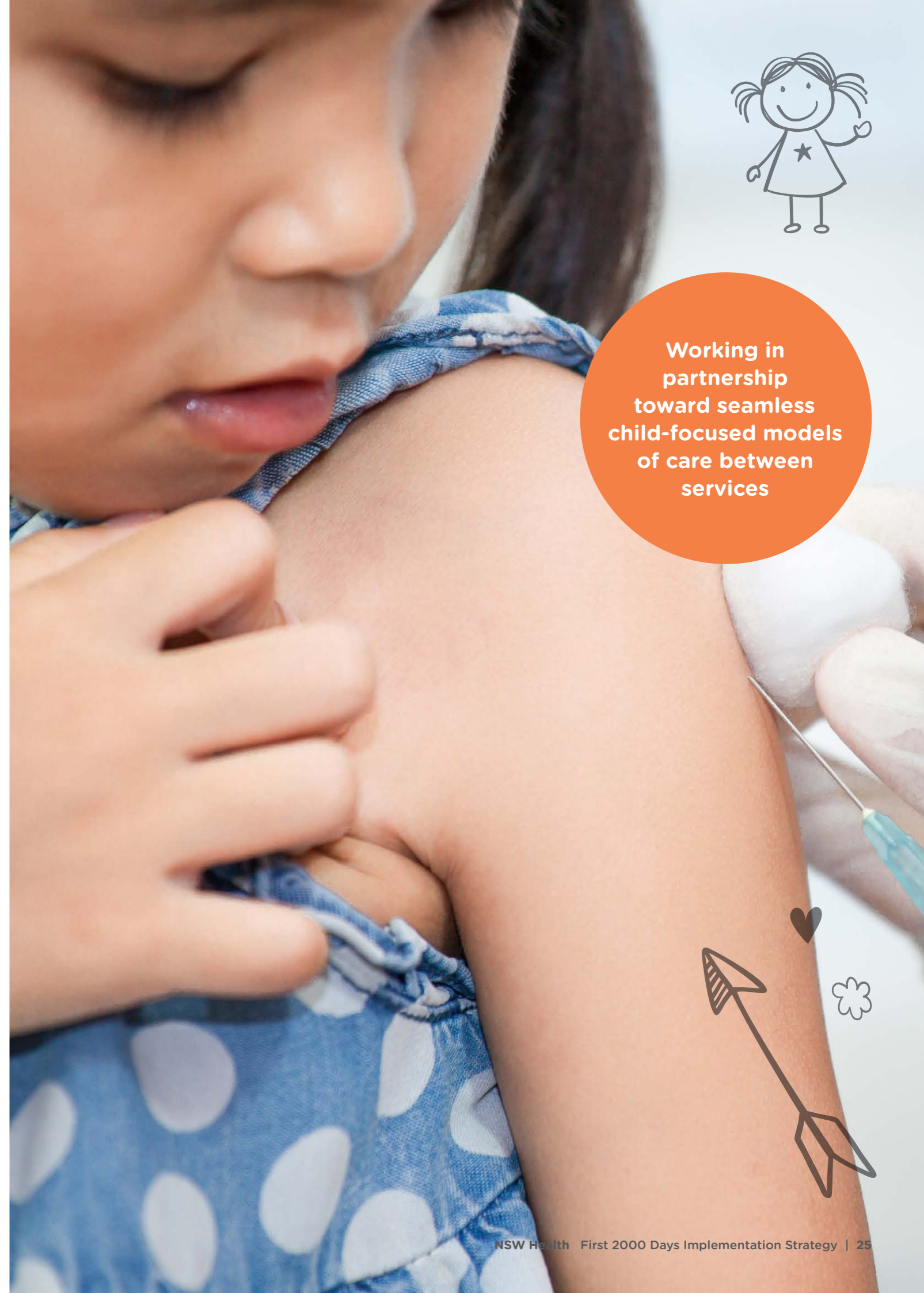
- Year 1:** Partnership with Primary Health established  
Commence implementation of the VAN Redesign Program (including the IPARVAN Framework)  
Partnership with PARVAN teams on incorporating identification of ACEs in psychosocial screening and assessment, and medical assessment.
- Year 3:** Training programs, education initiatives, learning forums advocate the use of ACE history taking  
Multidisciplinary or integrated models of care pilots across NSW  
Delivery of information portal with specific collateral for antenatal clinicians to use with pregnant women and their families
- Year 5:** ACE history taking for all patients is part of standard practice  
A seamless, integrated, trauma-informed service experience for the child and their family

# Enablers



Enablers	Rationale	Projects
<p><b>Enabler 1:</b> Foster a workforce that is driven to apply the knowledge of the First 2000 Days</p>	<p><b>If we:</b> Foster a culture that is enthusiastic about the First 2000 Days evidence and the action that needs to be taken, such as:</p> <ul style="list-style-type: none"> <li>Listening to consumers and working with them to deliver services that provide them with the best possible outcomes</li> <li>Strengthening the use of evidence in practice</li> <li>Participating in evaluation and research to ensure that health interventions are delivering results for children and their families</li> <li>Working in partnership toward seamless child-focused models of care between services (public/private health care, NSW Health/cross-government)</li> <li>Documenting, sharing and embedding learning and service improvement initiatives in policy and practice to improve the quality and consistency of the service experience of NSW children and their families</li> </ul> <hr/> <p><b>Then:</b></p> <ul style="list-style-type: none"> <li>The quality and consistency of care will be improved as good models with a strong evidence base are spread across the state</li> <li>The design and delivery of services will be child and family-centred</li> <li>A culture of continuous quality improvement will be promoted and learning shared</li> <li>Consumer experience of service delivery and outcomes will become the key measures of success</li> <li>We will be able to deliver the best quality outcome for children and their families.</li> </ul>	<p><b>Statewide projects (current and emerging):</b> Drive local health districts and services to implement at least one of the successful partnership integration strategies across:</p> <ul style="list-style-type: none"> <li>ED to Community</li> <li>Vulnerable Families</li> <li>Specialist Outreach to Primary Care</li> <li>Residential Aged Care</li> <li>Paediatrics Network</li> <li>HETI - fostering a learning culture, learning capabilities</li> <li>First 2000 Days change management project including annual summit and regular forums to promote learning and a partnering cultural shift</li> <li>Partnering with government and other external agencies for service integration</li> <li>Collaborating with other NSW Ministry of Health programs aligned with the First 2000 Days</li> </ul>
<p><b>Enabler 2:</b> Develop the supporting systems for First 2000 Days</p>	<p><b>If we:</b> Partner with eHealth NSW and others to collaborate on development of technology that</p> <ul style="list-style-type: none"> <li>Underpins service delivery to children, carers and their families</li> <li>Provides the data that enables the reporting on the usage of those services</li> </ul> <hr/> <p><b>Then:</b></p> <ul style="list-style-type: none"> <li>We will make it easier for parents and carers to access, manage and contribute to their children's health information</li> <li>We will make it easier for those in Human Services working with children, carers and their families to access and manage their children's Health records and information</li> <li>We will simplify reporting and enable improved research and case management</li> </ul>	<p><b>Statewide projects (current and emerging):</b></p> <ul style="list-style-type: none"> <li>Lead national collaboration for Child Digital Health Record (0-4 years) ('Digital Blue Book') and Child Digital Health Record (5-14 years).</li> <li>CYF Data Set Extension and data extract</li> </ul>

Working in partnership toward seamless child-focused models of care between services



# Summary of milestones

## YEAR 1

Partnerships established to develop education initiatives



Partnerships established to roll out plans (local health district reports include active partnerships and partnership projects)

Partnerships on the design and delivery of portal and tools for staff, parents, carers and community to access quality and consistent information

Portal established for local health districts and other NSW Health organisations to document First 2000 Days activities and reporting

New NSW Health Maternity Care Policy released

Partnerships established to strengthen links with Primary Health Care



Partnership with PARVAN teams on incorporating identification of ACEs in psychosocial screening and assessment, and medical assessment

Increase in numbers of children having development checks at age 2 years

Partnerships with General Practice, government agencies to establish clear pathways for vulnerable groups

Focus on New Fathers pilot program commenced

Review of SAFE START commenced (as part of SFE Policy Review)

Commence implementation of the VAN Redesign Program

Redesign Program (including the IPARVAN Framework)



Continue implementation of evidence-based healthy eating and active living programs

Increased referrals to the Get Healthy in Pregnancy Program, as part of NSW Get Healthy Information and Coaching Service

## YEAR 3

First 2000 Days training and education programs fully embedded as part of regular General Practice, Medical and Nursing and Midwifery College, and Allied Health Training

Regular forums established for collaboration and sharing of learning across NSW Health and government/non-government organisations and private health

Communication to parents, carers, community and staff about First 2000 days, tools and a portal that provides quality and consistent information



NSW Health Portal includes specific collateral for pregnant women and their families that clinicians providing antenatal care can use with patients

Project to strengthen the system response for pregnant women who use substances is expanded

Communication strategy implementation (see appendix) including:

- the benefits and importance of early antenatal care and breastfeeding
- revised consumer resources with key messaging around the First 2000 Days including recommended schedule of well child health and development checks and immunisations as per the National Immunisation Program Schedule



SFE Policy revisions implemented

Design of services to include continuity of care within and across NSW health services

Increase in numbers of children having development checks at age 2

Clear pathways and models of integrated care for early assessment and interventions

Multidisciplinary or integrated models of care pilots across NSW

Training programs, education initiatives, learning forums advocate the use of ACE history taking

Implementation of recommendations from the AMIHS Evaluation



Provide consumer resources that include key messages from First 2000 Days evidence

Increase in proportion of children attending regular child health and development checks

Increase the proportion of women who quit smoking by the second half of pregnancy

## YEAR 5

First 2000 Days body of knowledge embedded in clinical practice and delivery of child and family-centred services

Identified ACEs inform history taking for all patients as part of standard practice

Increase in numbers of children having development checks at age 2, 3 and 4 years

Rate of 1 in 5 children not developmentally ready for school reduced



A seamless integrated trauma-informed service experience for the child and their family

Trauma-informed care is an integral component of integrated care training programs, education initiatives, and learning forums



Implement outcomes from the BSF for Aboriginal Children, Families and Communities Evaluation

Expansion of Sustained Health Home Visiting

Integrated and embedded prevention policies, programs and services to support mothers, children and their families





## Appendix A - Consultation

The following were consulted in the development of this document.

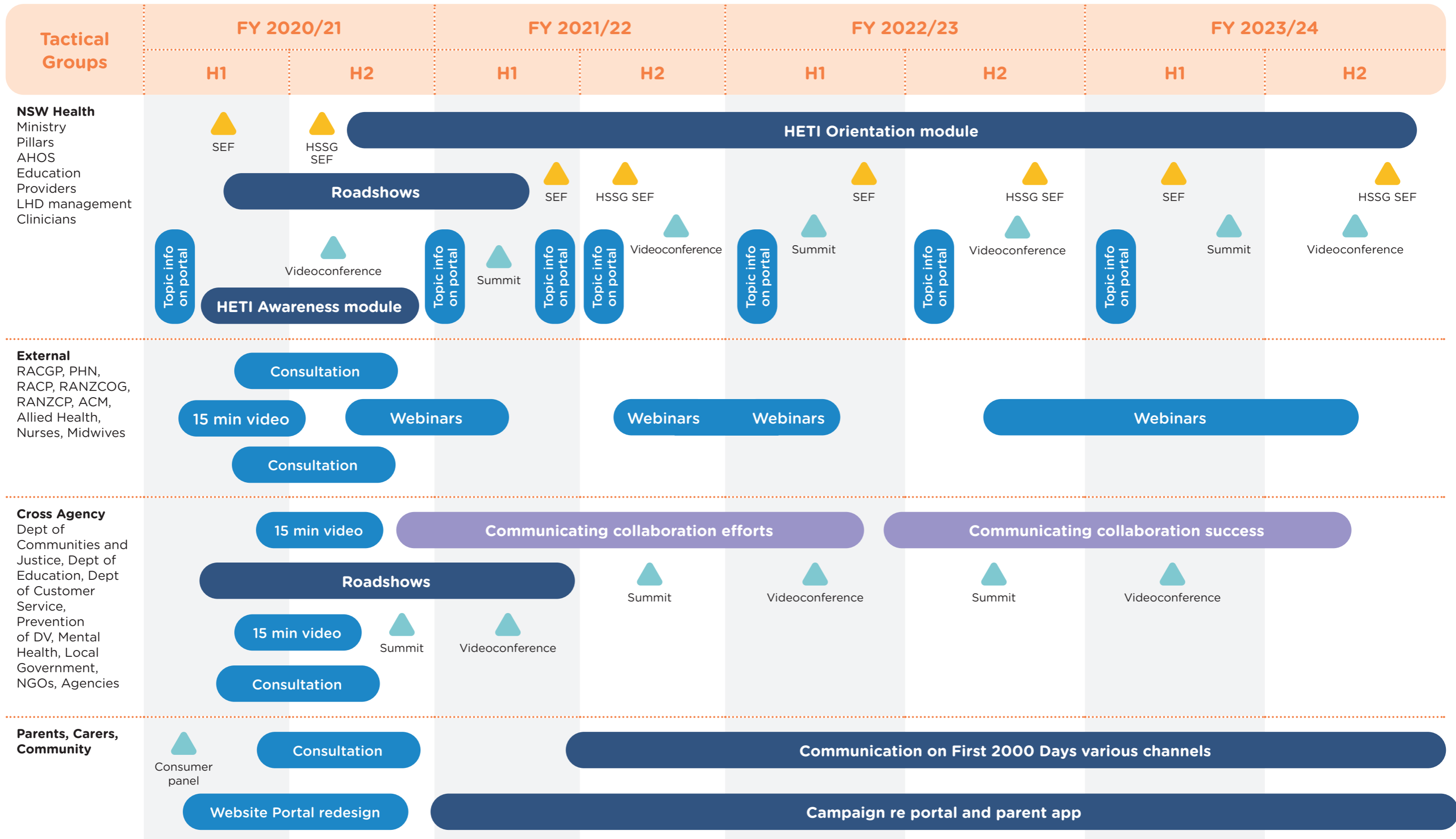
### Child and Family Health Advisory Group 3 June 2019

Central Coast Local Health District  
Hunter New England Local Health District  
Illawarra Shoalhaven Local Health District  
Karitane  
Mid North Coast Local Health District  
Murrumbidgee Local Health District  
Nepean Blue Mountains Local Health District  
Northern NSW Local Health District  
Northern Sydney Local Health District  
NSW Ministry of Health  
South Eastern Sydney Local Health District  
South Western Sydney Local Health District  
Southern NSW Local Health District  
Sydney Children's Hospital Network  
Sydney Local Health District  
Tresillian  
Western NSW Local Health District  
Western Sydney Local Health District  
Royal Far West

### Statewide Forum 20 June 2019

Agency for Clinical Innovation  
Allied Health Representatives  
Central Coast Local Health District  
Clinical Excellence Commission  
ECAV  
eHealth NSW  
Far West Local Health District  
Health and Education Training Institute  
Hunter New England Local Health District  
Illawarra Shoalhaven Local Health District  
Karitane  
Mid North Coast Local Health District  
Murrumbidgee Local Health District  
Nepean Blue Mountains Local Health District  
Northern NSW LHD  
Northern Sydney Local Health District  
NSW Ministry of Health, Centre for Aboriginal health  
NSW Ministry of Health, Health and Social Policy Branch  
NSW Ministry of Health, Office of Preventative Health  
NSW Ministry of Health, Strategic Communications and Engagement  
NSW Ministry of Health, System Performance Support  
South Eastern Sydney Local Health District  
South Western Sydney Local Health District  
Southern NSW Local Health District  
Sydney Children's Hospitals Network  
Sydney Local Health District  
Tresillian  
Western NSW Local Health District  
Western Sydney Local Health District

# Appendix B - Communications and engagement plan





# Appendix C - Program and activity summaries

The following programs and activities are recorded in the order they are first mentioned in the document.



<p><b>Aboriginal Family Wellbeing and Violence Prevention Strategy (AFWVP)</b></p>	<p>The Aboriginal Family Wellbeing and Violence Prevention Strategy is currently in development. Once finalised it will replace the NSW Aboriginal Family Health Strategy: Responding to Family Violence in Aboriginal Communities 2011 – 2016.</p> <p>The AFWVP Strategy aims to reduce the incidence and impact of family violence in Aboriginal communities and to nurture the spirit, resilience and cultural identity of Aboriginal families.</p> <p>The Strategy will work to build the capacity of NSW Health to partner with Aboriginal communities and organisations, embed Aboriginal social and cultural concepts, increase integration of Aboriginal models of practice, build a highly skilled and competent workforce to respond to Aboriginal violence, abuse and neglect services and improve NSW Health governance and accountability.</p> <p>The purpose of the Strategy is to set key strategic directions and priority areas for action for NSW Health in promoting Aboriginal family wellbeing, and in preventing and responding to violence, abuse and neglect.</p> <p>The Aboriginal Family Wellbeing and Violence Prevention Strategy will be released in December 2021.</p>
<p><b>Additional Health Home Visiting</b></p>	<p>In 2018-19 as part of a \$157 million new Parents Package, \$4.3 million was allocated to the provision of 35 additional child and family health nurses across the state to deliver additional health home visits in the perinatal period to vulnerable families, in addition to UHHV. Districts will receive proportional funding for the period 2018-19 to 2021-22 to deliver the program.</p>
<p><b>Breastfeeding in NSW: Promotion, Protection and Support Policy</b></p>	<p>NSW Health recognises and supports the importance of creating and providing environments in its services and facilities, where breastfeeding is promoted, protected and supported by all staff.</p> <p>The policy supports and encourages breastfeeding as the optimal way for a woman to feed her infant and recognises that all women and their families have the right to clear, impartial and evidence based information to enable them to make an informed choice as to how they feed and care for their infants. The policy will be updated to align with the Australian National Breastfeeding Strategy 2019 and beyond.</p>
<p><b>Building Strong Foundations (BSF) evaluation</b></p>	<p>An evaluation of the BSF program is being undertaken in collaboration with the Aboriginal Cultural Reference Group (CRG) and an evaluation advisory committee. The evaluation will assess how services are complying with the BSF service standards and achieving expected outcomes as well as identify areas for improvement at both state and local levels. The BSF program evaluation will leverage off lessons learned from the recent evaluation of the Aboriginal Maternal and Infant Health Service which also utilised a co-design approach to ensure that evaluation outcomes were meaningful to Aboriginal stakeholders in NSW.</p>
<p><b>Community Breastfeeding Mentoring</b></p>	<p>The Australian Breastfeeding Association facilitates the Community Breastfeeding Mentoring (CBM) course. The course provides Aboriginal elders, aunties, mothers, Aboriginal health workers and other influential community members with the skills and knowledge to effectively protect, promote and support breastfeeding within their communities.</p>

<p><b>Deadly Dads</b></p>	<p>In 2015 the Australian Breastfeeding Association adapted the Community Breastfeeding Mentoring course for a program suitable for Aboriginal men. The program is called Deadly Dads and is facilitated by an Aboriginal man. The objectives of Deadly Dads are for Aboriginal men to improve their:</p> <ul style="list-style-type: none"> <li>• knowledge and understanding about the importance of breastfeeding</li> <li>• ability to support their partners to breastfeed</li> <li>• understanding of being a father and parenting.</li> </ul>
<p><b>Early Childhood Oral Health eLearning</b></p>	<p>This course is suitable for childcare workers, dental and medical practitioners, nurses, midwives and allied health professionals. Four online learning modules have been developed to increase confidence, knowledge and skills to help deliver better oral health outcomes for children.</p>
<p><b>Early Childhood Oral Health Program (ECOH)</b></p>	<p>The ECOH program is embedded within the NSW Health My Personal Health Record (PHR) Blue Book as the 'Lift the lip' check undertaken during regular Blue Book child health and development checks. ECOH supports child and family health nurses, general practitioners, practice nurses and Aboriginal health workers to effectively perform their critical role in identifying, preventing and managing early childhood oral health concerns.</p>
<p><b>ECEI services and the NDIS</b></p>	<p>Early Childhood Early Intervention (ECEI) is the process of providing specialised support and services for infants and young children who have developmental delays or disabilities and their families, in order to promote skill development, well-being and community participation. This approach acknowledges the importance of supporting children in their early years to achieve the best possible outcomes throughout their life.</p> <p>Under the National Disability Insurance Scheme (NDIS) all children under 7 years with developmental delay or disability and their families can access the ECEI program.</p> <p>The NDIS has engaged Early Childhood Partners across Australia to deliver the ECEI program which assists children and their families to:</p> <ul style="list-style-type: none"> <li>• Connect with the most appropriate local mainstream supports, such as the community health centre, the educational setting and playgroup</li> <li>• Provide short-term early intervention where it has been identified as the most appropriate support. ECEI supports are varied, depending on a child's needs but can include things like a supported playgroup or targeted physiotherapy, speech or occupational therapy.</li> <li>• Access the NDIS for those children who may need longer-term support. If a child becomes an NDIS participant the Early Childhood Partner will work with families to develop an NDIS plan.</li> </ul> <p>Children do not need a diagnosis of disability to access the ECEI program. Children with developmental delay or disability over 7 years are also supported by the NDIS, but the application process is different. To access the ECEI or the NDIS, parents or guardians can speak with their GP or contact the NDIS directly.</p>

<b>Education with GPs, Medical and Nursing and Midwifery Colleges, and Allied Health</b>	The Ministry of Health will work with the Primary Health Networks, Medical and Nursing and Midwifery education providers and Allied Health partners to develop a wide range of education materials and resources to build knowledge and understanding of the First 2000 days. Through this knowledge, clinicians will be better placed to incorporate First 2000 Days objectives and principles into their clinical practice.
<b>Focus on New Fathers pilot program</b>	The Ministry of Health is piloting a digital population-based screening program for perinatal depression and anxiety for new fathers and their families called the Focus on New Fathers project. The project is funded under the Commonwealth Health Innovation Fund for 3 years (2018/19-2020/21). The project offers psychosocial screening to fathers expecting a baby in NSW along with pathways into support and care as appropriate.
<b>Get Healthy Service</b>	Get Healthy in Pregnancy is a free telephone-based coaching service as part of the NSW Get Healthy Service. Pregnant women receive tailored support to meet nutrition and physical activity recommendations, abstain from alcohol, quit smoking and achieve a healthy gestational weight gain. The NSW Get Healthy Service also offers support to women and their families who are planning a pregnancy or post birth to achieve and maintain a healthy weight, increase physical activity levels and healthy eating, and reduce their alcohol consumption. The Get Healthy in Pregnancy and Beyond App will provide evidence based, accessible prevention information to pregnant women and new parents (0-12mths). <a href="http://www.gethealthynsw.com.au">www.gethealthynsw.com.au</a>
<b>Health Education and Training Institute (HETI) education initiatives</b>	In its implementation of the First 2000 Days Framework, the Ministry of Health will work closely with HETI to develop a range of education and training modules and resources for the NSW Health sector around key First 2000 Days messaging and opportunities (both direct and indirect) for incorporating key goals and objectives into clinical practice and policy development. These initiatives will raise awareness for the importance of the First 2000 Days Framework and provide education to those who work in roles that provide a service to families during this period.
<b>Healthy Kids for Professionals web platform</b>	A web platform with resources to support health professionals to manage children above a healthy weight, and their families. Resources include online training, videos, patient resources and referral forms. <a href="https://pro.healthykids.nsw.gov.au/">https://pro.healthykids.nsw.gov.au/</a>
<b>Health Star Rating front-of-pack labelling system</b>	A national labelling scheme that rates the overall nutritional profile of packaged foods in supermarkets and assigns a rating from ½ a star to 5 stars. The Health Star Rating provides a quick, easy, standard way to compare similar packaged foods. The more stars, the healthier the choice. <a href="http://www.healthstarrating.gov.au/">http://www.healthstarrating.gov.au/</a>
<b>Implementation of the First 2000 Days Framework</b>	NSW Health's implementation of the First 2000 Days Framework will include promotional training material that will educate people on the importance of the first 2000 days of a child's life. Education initiatives will be developed for all health staff, further information on this is available below and in Appendix B.  NSW Health will work with other government agencies to ensure that all professionals, parents and carers have the information they need to make good decisions about what they do in the first 2000 days of a child's life. A portal will be developed that will be a 'go to' place for professionals and families to access information and resources related to the first 2000 days of a child's life.
<b>Implementation of recommendations from the Aboriginal Maternal Infant Health Service (AMIHS) Evaluation</b>	An external evaluation of AMIHS has been conducted. Health and Social Policy Branch will communicate the evaluation findings and work with the Aboriginal Cultural Reference Group and other stakeholders to develop, action and monitor an implementation plan to address areas for improvement.

<b>Initiatives to address Fetal Alcohol Spectrum Disorder (FASD)</b>	NSW Health provides information and resources for women, their partners and families on the risks of alcohol consumption during pregnancy, and the availability of professional services.  Information is provided through the Your Room website: <a href="https://yourroom.health.nsw.gov.au/a-z-of-drugs/Pages/alcohol.aspx">https://yourroom.health.nsw.gov.au/a-z-of-drugs/Pages/alcohol.aspx</a>  The Stay strong and healthy: it's worth it! project aims to raise awareness among Aboriginal women, their partners and young people, of the risks of alcohol consumption during pregnancy, and the availability of support services. The campaign includes a Facebook page <a href="https://www.facebook.com/StayStrongAndHealthy">https://www.facebook.com/StayStrongAndHealthy</a> as well as resources such as posters, postcards, a storybook and videos. <a href="https://yourroom.health.nsw.gov.au/resources/Pages/campaigns.aspx">https://yourroom.health.nsw.gov.au/resources/Pages/campaigns.aspx</a>  There are also a number of drug and alcohol programs in operation:  <b>Women with Children Residential Rehabilitation Services</b> Drug and alcohol residential rehabilitation services that admit women with their children are available in Malabar, Leichhardt, Enmore, Arncliffe, Wyong and Orange. These services remove barriers to treatment by providing childcare and parenting support so women with children can access treatment while continuing to care for their children.  <b>Opioid Treatment Program</b> The NSW Opioid Treatment Program is an evidence-based approach for the treatment of opioid dependence. Opioid treatment has been shown to improve the quality of life and wellbeing of opioid dependent individuals and their families. It provides significant reductions in rates of re-offending and provides health, social and economic benefits.  <b>Whole Family Teams</b> Whole Family Teams (WFT) are a tertiary specialist health service for families in their home, where there are: a) mental health and/or alcohol and other drug concerns with adult parents and carers, and b) a substantiated Risk of Significant Harm report made for one or more children. WFT seek to address the needs of the family as a whole and to keep children safe and living in a safe environment with their parents.  <b>The Alcohol and Other Drugs Program</b> NSW Health delivers education, brief intervention, treatment, rehabilitation and continuing care programs to address the risky use of alcohol and other drugs. This is done through public sector and non-government services. Alcohol and other drug services focus on improving health outcomes for vulnerable people, including people in rural and remote NSW, pregnant women, women with dependent children, people with severe substance use issues, people receiving treatment for opioid issues, young people and Aboriginal people.
<b>Little Smiles</b>	NSW Health and TAFE have collaborated and developed an online oral health resource for TAFE teachers to provide oral health information to students enrolled in the Children's Services course.  The resource builds the child care professionals capacity to support and provide oral information to children, parents and carers to maintain good oral health.
<b>Mother/Baby units (psychiatric inpatient unit)</b>	The proposed new purpose built public mental health mother-baby units (MBUs) will provide specialist perinatal care for mothers and their babies who require a hospital admission for the treatment and recovery of perinatal mental ill health. The units will offer state-wide, planned or emergency admissions for women and their infants. The units located at Royal Prince Alfred and Westmead Hospitals will be declared mental health facilities and staffed by multidisciplinary teams with expertise in the treatment and recovery of maternal mental health related to childbirth. They are suitable for adult women primary carers of babies who are either in late pregnancy (last trimester) or within 12 months following pregnancy and who have a primary diagnosis of severe or acute mental health disorder.

<b>Munch &amp; Move</b>	<p>A program that assists NSW early childhood education and care (ECEC) services to support the healthy development of children aged birth to 5 years in care. It promotes breastfeeding, healthy eating, physical activity and reduced small screen time through ECEC sector framework aligned training and resources for educators.</p> <p><a href="https://www.healthykids.nsw.gov.au/campaigns-programs/about-munch-move.aspx">https://www.healthykids.nsw.gov.au/campaigns-programs/about-munch-move.aspx</a></p>
<b>My Personal Health Record (PHR) Blue Book scheduled checks</b>	<p>Every child born in NSW receives a Personal Health Record (PHR) (Blue Book) when they leave hospital. The PHR provides essential guidance to parents and clinicians around the scheduled development and well-child health checks from birth to age 4. The Blue Book also allows clinicians to record immunisations as per the National Immunisation Register, provides information about feeding to parents as well as other important screening information, growth charts and contact information for essential support services.</p> <p>The PHR is formally reviewed every 5 years, the last of which was completed in 2017.</p>
<b>New NSW Health Maternity Care Policy</b>	<p>NSW Ministry of Health is reviewing the NSW Health Maternity Care Policy to provide an evidence-based, life-course approach for the health and wellbeing of the mother and baby. The updated policy will replace the current NSW Health policy directive Towards Normal Birth in NSW.</p> <p>The new policy will have broader objectives and will be a companion document to the recently released First 2000 Days Framework.</p> <p>The review of the maternity care policy began with a review of the evidence. An extensive consumer online survey was conducted to understand what is important to women and their partners about their maternity care. This was followed by a series of engagement workshops with health professionals, consumers and other stakeholders across NSW.</p> <p>The draft Policy was released in late 2020 for stakeholder consultation.</p>
<b>NSW Aboriginal Ear Health Framework (0-5 years)</b>	<p>Middle ear infection (otitis media) rates are much higher for Aboriginal children than non-Aboriginal children, which has the potential to limit their health and educational achievement. Effective primary prevention strategies are outlined in the NSW Aboriginal Ear Health (AEH) Program Guidelines (2011) to reduce the number of Aboriginal children being affected by otitis media by reducing lifestyle risk factors amongst parents, carers and their extended families. The Guidelines are under review to ensure alignment with the latest evidence and national policy.</p>
<b>NSW Quitline and iCanQuit</b>	<p>A free and confidential telephone service with trained advisors who provide support, information and advice to quit smoking. Tailored support is available for pregnant women and there is a dedicated Aboriginal Quitline.</p> <p>Multilingual Quitlines are also available in Arabic, Vietnamese, Cantonese and Mandarin. To contact the NSW Quitline, simply dial 13 7848 (13 QUIT).</p> <p>The website iCanQuit is a helpful online resource with information and tools to support people to quit smoking. This includes an online community to support people in their quit attempts by sharing their own stories and experiences.</p> <p><a href="https://www.icanquit.com.au/">https://www.icanquit.com.au/</a></p>
<b>Oral Health in Pregnancy Programs</b>	<p>Oral Health in Pregnancy Programs focus on strengthening the capacity of health professionals such as midwives, Aboriginal health professionals, nurses, general practitioners and obstetricians to support and encourage pregnant women to maintain good oral health. This will further enable parents/carers to provide their child with a good start to life. Resources are currently available in the Baby Bundle, and the Keep Smiling when you're pregnant YouTube video provides information about maintaining a healthy mouth, teeth and gums during pregnancy.</p>

<b>Organisation of education and communication tools and resources for parents, carers and the community</b>	<p>The Ministry of Health will develop a web portal with education and communication tools and resources for carers and the community around the First 2000 Days of life. These will include educational pieces about the importance of the first 2000 days, as well as other tools and resources to assist with parenting and family functioning during this period and practical advice to assist parents to make the best decisions and take the best action during the child's first 2000 days of life.</p>
<b>Programs in schools</b>	<p>The NSW Healthy School Canteen Strategy provides a set of criteria for school canteens to increase the availability of healthy food and drink and decrease the availability of less healthy options. NSW public schools are required to participate, and non-government schools are strongly encouraged to participate.</p> <p><a href="https://healthyschoolcanteens.nsw.gov.au/">https://healthyschoolcanteens.nsw.gov.au/</a></p> <p>All primary schools in NSW are offered support to participate in a school-based obesity prevention program which focuses on improving food, physical activity and policy environments to support healthy weight. Crunch and Sip® is a set time during the school day for students to eat vegetables or fruit and drink water in the classroom.</p> <p><a href="https://www.crunchandsip.com.au/">https://www.crunchandsip.com.au/</a></p>
<b>Quick-service restaurant menu labelling and 8700 app</b>	<p>Larger 'fast' food, snack food and supermarket chains are required by law to display the energy (kilojoule) content of foods and drinks on their menu boards. A website and look-up app are available to assist customers to make healthier choices when eating out. <a href="https://www.8700.com.au/">https://www.8700.com.au/</a></p>
<b>Review and revision of NSW Health consumer resources</b>	<p>Revision of resources available to families on the NSW Health website. This includes resources with key messaging around the First 2000 Days including recommended schedule of well child health and development checks and immunisations as per the national immunisation schedule.</p>
<b>Review and revision of Supporting Families Early (SFE) SAFE START Policy Package</b>	<p>The Ministry of Health will undertake a review of the Supporting Families Early (SFE) policy package. This will encompass a review of: i). Universal Health Home Visiting (UHHV), ii). SAFE START mental health and psychosocial screening tool and pathways into care, and iii). Sustained Health Home Visiting (SHHV). A revised policy package will incorporate findings and recommendations from the review, with a focus on promoting effective transition of care for families from pregnancy, birth and postnatal care to child and family health services. Further clarification will also be provided around links to services for moderately vulnerable and highly vulnerable clients with perinatal mental health issues.</p>
<b>Save the Date to Vaccinate</b>	<p>NSW Health's <i>Save the Date to Vaccinate</i> campaign commenced in 2013 and is updated annually to provide parents with key messages about the importance of on-time vaccination at the recommended milestones. The campaign includes a very popular phone application that sends reminders to parents when their child's vaccinations are due. The campaign website is available at <a href="http://www.immunisation.health.nsw.gov.au">www.immunisation.health.nsw.gov.au</a></p>
<b>Social marketing activity and information</b>	<p>A range of activities to provide members of the NSW community with access to information, programs and services that foster healthy eating and active living (HEAL). Work is ongoing to increase the accessibility of our HEAL information and programs to all customers, with a focus on simplifying access to our digital platforms.</p> <p><a href="https://www.makehealthynormal.nsw.gov.au/">https://www.makehealthynormal.nsw.gov.au/</a></p>
<b>Substance Use in Pregnancy and Parenting Service (SUPPS)</b>	<p>SUPPS, delivered by local health districts, provide alcohol and other drug treatment and multidisciplinary support to pregnant women and their families for up to two years after birth. As part of the NSW 2016 Drug Package, funding was allocated to local health districts to expand access to SUPPS to enable broad availability of specialist multidisciplinary clinical care and support during pregnancy and for up to 2 years. As a result of the enhancements, most LHDs have some level of specialised support for pregnant women and their families.</p>

**Sustained Health Home Visiting (SHHV)**

Sustaining NSW Families (NSW Health's Sustained Health Home (SHHV) Visiting model) is an evidence-based, structured nurse health home visiting program that operates at a number of sites in some Districts across NSW. The program targets children and families living in areas of socio-economic disadvantage who are vulnerable to, and at risk of, poor maternal health and wellbeing as well as poorer child health, development and wellbeing outcomes. The program seeks to engage parents initially in a relationship with their unborn child, and then continues to support the transition to parenting in the early newborn period through to toddlerhood.

In the future, if funding becomes available, the Ministry of Health will seek to expand the program to other areas of the state based on demand modelling and social demographic profiling so that more vulnerable families are able to access this service.

**The Integrated Prevention and Response to Violence, Abuse and Neglect (IPARVAN) Framework**

The IPARVAN Framework is a key component of the VAN Redesign Program. The IPARVAN Framework is a NSW Health Policy Directive and provides an overarching, strategic platform for all of NSW Health to respond to violence, abuse and neglect alongside detailed guidance for strengthening the integration of NSW Health's specialist Violence, Abuse and Neglect (VAN) services.

Implementation of the IPARVAN Framework is being undertaken in two overlapping phases:

- Phase 1 will focus on the specific efforts required to strengthen integrated responses within local districts and networks NSW VAN Services. It was the focus of statewide efforts during Jan 2019 to June 2020;
- Phase 2 will focus on broadening integrated response for violence, abuse and neglect across the whole NSW Health system and with partner agencies. Phase 2 is planned from July 2020 to June 2025.

In addition to various local implementation efforts by local health districts and Specialty Health Networks, the IPARVAN Framework is being implemented through a number of statewide initiatives and activities. This includes, for example: a suite of NSW Health strategies, standards, policies and procedures, and information bulletins; a workforce strategy; enhancements to VAN Services; a comprehensive evaluation; information roadshows to districts and networks; and the development of numerous materials and resources, such as evidence, statistics and research, and communications materials, to support implementation.

**The NSW Health Education Centre Against Violence (ECAV)**

ECAV is a state-wide unit responsible for workforce development in the specialist areas of prevention and response to violence, abuse and neglect, including a specific focus on Aboriginal and Culturally and Linguistically Diverse Communities (CALD). ECAV provides state-wide face to face and online worker training, community awareness and development programs, agency and policy consultation, clinical supervision and resource development for NSW Health, other government and non-government organisations.



