Deadly Kids | Deadly Futures

2016-2017 Action Plan

Commitment

Deadly Kids, Deadly Futures: Queensland’s Aboriginal and Torres Strait Islander Child Ear and Hearing Health Framework 2016-2026 was released by the Minister for Health and Ambulance Services, the Honorable Cameron Dick MP, in March 2016. The 10 year framework is a collaborative health, early childhood development and education policy aimed to prevent and manage the impacts of middle ear disease and associated hearing loss for current and future generations of Aboriginal and Torres Strait Islander children and young people across Queensland.

Partnerships

The policy framework details 36 actions to be undertaken by government and non-government service providers across the health, early childhood and schooling sectors until 2026. All service providers are committed to working together in partnership to ensure Aboriginal and Torres Strait Islander children and young people in Queensland have healthy ears and can listen, learn and reach their full potential.

Public Health Priority

Middle ear disease is a priority health condition because it can lead to long-term developmental problems for Aboriginal and Torres Strait Islander children. The condition can affect school readiness, communication skills, learning abilities and educational outcomes. The impacts can be lifelong, affecting the trajectory of children’s lives into adolescence and adulthood.

Implementation

Each year an action plan will be released outlining what government and non-government service providers will do to reduce the prevalence, severity and impacts of middle ear disease and associated hearing loss for Aboriginal and Torres Strait Islander children and young people. The 2016-2017 action plan is the first annual plan to be released.

The 2016-2017 Action Plan priorities:

- **Service delivery improvements:** Enhance the services and support provided to children and families to manage the impacts of middle ear disease and associated hearing loss.
- **Workforce development:** Enable healthcare professionals and educators to provide appropriate support and services to children.
- **Health promotion and prevention:** Empower families, communities and local service providers to increase the protective factors and reduce the risk factors associated with middle ear disease.
- **Data collection and research:** Build the evidence base to improve the planning, delivery and effectiveness of services.
**Health**

**Service delivery improvements**
- Deliver coordinated diagnostic and rehabilitative audiology services via telehealth in Doomadgee, Mornington Island and Normanton to increase the fitting and usage of hearing aids for children aged 0 to 4 and minimise the impact on early childhood development.
- Ensure service providers funded by the Department of Health and through CheckUP to deliver child health and ear and hearing health services are required to adhere to the treatment and clinical practice protocols in the national otitis media guidelines.
- Share population-level newborn hearing screening data with primary healthcare providers to improve the planning and delivery of services for children at higher risk of acquiring hearing loss.
- Redesign existing school ear and hearing screening programs to be integrated within comprehensive models of primary healthcare for children.
- Support local healthcare providers to strengthen the primary healthcare management of child ear and hearing health in the Torres Strait, Cape York and North West Queensland.
- Inclusion of ear and hearing health examinations in all age-specific child health checks conducted by Aboriginal and Torres Strait Islander community controlled health services in South East-Queensland.

**Workforce development**
- Inclusion of Aboriginal and Torres Strait Islander child ear and hearing health within health and education disciplines in The University of Queensland to enhance the skills and competency of the future workforce.

**Health promotion and prevention**
- Expand the delivery of the Baby One early intervention program to Lockhart River, Kowanyama and Pormpuraaw to increase parents’ and carers’ knowledge about ear and hearing health and the impacts of the social determinants of health on early childhood development.

**Data collection and research**
- Monitor and report on the delivery of child ear and hearing health services provided by Aboriginal and Torres Strait Islander community controlled health services across Queensland.

**Schooling**

**Service delivery improvements**
- Develop local information sharing protocols between primary schools and healthcare providers about children requiring additional support in the school environment due to middle ear disease and hearing loss.

**Workforce development**
- Provide training and resources to teachers and support staff to identify and manage the impacts of middle ear disease and hearing loss.

**Health promotion and prevention**
- Deliver health promotion and prevention activities about the importance of ear and hearing health in primary schools in Cape York.

**Across sector collaboration**

**Service delivery improvements**
- Develop and trial team-based case management models in targeted locations for children with chronic ear and hearing health problems to improve the level and type of support provided to these children.
- Increase access to faster and more reliable ear and hearing screening using new smartphone based technology (hearScreen™) and newborn hearing testing technology (Otoacoustic Emissions – OAEs) to improve the early detection of middle ear disease and hearing loss.

**Workforce development**
- Promote and support activities to improve the prevention, identification and management of middle ear disease and hearing loss.

**Health promotion and prevention**
- Expand the delivery of the Baby One early intervention program to Lockhart River, Kowanyama and Pormpuraaw to increase parents’ and carers’ knowledge about ear and hearing health and the impacts of the social determinants of health on early childhood development.