

Children in Out of Home Care with unmet health needs (issues encountered by Upper Murray Family Care)

Cross border issues and the public dentist

- Two children (residing with a foster carer in NSW, but on Vic Child Protection Orders) who require dental intervention. The children were on a dental waiting list in NSW for about ten months. When UMFC called the clinic to explain that the boys were in foster care and should not be on a waiting list the worker was told that the list they were on was for children in out of home care. Worker then tried to get the children into the Victorian public dentist but was told they wouldn't see children from NSW even though they were clients of DHS Victoria. The boys have since been to the dentist but they should have been seen much sooner.

Geographical distance

The distance that has to be travelled by some children if they need specialist appointments such as paediatricians or forensic examinations, such as a 3yrs old girl who had to make several trips from her foster carers in Tawonga to Shepparton (transported by workers she does not know) for these appointments. The child was spending hours in the car to be poked and prodded by strangers and then spent hours travelling home again. This could have been alleviated by better communication between services, as we later became aware that there is a forensic doctor available locally.

Financial responsibility issues and waiting lists

- 12 year old boy who has been in need of dental work for around 3 years. There has been a significant delay in this work being carried out due to waiting lists in the public sector, staff turnover and working out who is responsible to pay for the service.

This same child also needs a cognitive assessment. This has not yet occurred as DHS have refused to pay and have stated that a Flexi Pak be submitted to request funding. This child's carer has become frustrated and has offered to pay the \$550 herself for the assessment to occur in a timely manner. However, this assessment should not cause a foster carer to be out of pocket.

- It was identified over 2 years ago that a 5 year old boy was in need of speech therapy. He was on a waiting list at Wodonga hospital for over 12 months. The paediatrician has now stated that this has become an urgent matter and we need to enlist a private speech therapist. Financial approval will need to be sought from DHS for this to occur

in a more timely manner, but will most likely involve the foster carer obtaining a care plan from a GP to receive a certain amount of free sessions, and then conversations will need to occur with DHS again if further intervention is required.

This same child needs a cognitive assessment and issues have occurred regarding who will pay. DHS have stated that a Flexi Pak needs to be applied for.

- 3 year old boy who needs a speech therapist and psychologist, however he is only entitled to five free sessions so we have been asked to decide which service we would like to use the free sessions for, and will need to apply for funding for the other service through flexi pak panel as advised by DHS.
- A 2 year old boy who needs to attend NECAMHS (child mental health service) however there is an extremely long waiting list.

Medicare Cards

- 12 month old child who has been in care for 10 ½ months. She has been on a Guardianship to the Secretary Order for 8 months, however is still not registered with Medicare. DHS state that they have had trouble obtaining the child's birth certificate. This causes significant difficulties for the carer with all medical appointments as she has been paying for most medical appointments out of her own money.

Parental Consent

- A 12 year old girl in care requires a dentist appointment. There are issues with getting the child's mother to sign paperwork for consent. This has delayed the process as parental consent is required for children on Interim Accommodation Orders.