

Our reference: CHSFOI21-22.14



#### **DECISION ON YOUR ACCESS APPLICATION**

I refer to your application under section 30 of the *Freedom of Information Act 2016* (FOI Act), received originally by Community Services Directorate (CSD) and transferred under Section 57 of the FOI Act to the Canberra Health Services (CHS) on **Wednesday 15 December 2021**.

This application requested access to:

"Under the provisions of the ACT Freedom of Information Act 2016, asking for copies of all information relating to current "thin markets" for skills associated with autism diagnosis that is either a) held by the Child and Community Services Directorate, or b) provided to the ACT Minister for Disability, the ACT Minister for Health or the ACT Minister for Mental Health, over the past two years (30 November 2019 – 30 November 2021). Note: the Minister for Disability spoke about alleged "thin markets" in her speech, see <a href="https://aod.parliament.act.gov.au/A95768">https://aod.parliament.act.gov.au/A95768</a> (soon after 3:44:58 pm). "

As the Principal Officer of Canberra Health Services, I am authorised to make a decision on access or amendment to government information in the possession or control of Canberra Health Services. CHS was required to provide a decision on your access application by **Monday 17 January 2022**.

I have identified two documents holding the information within scope of your access application. These are outlined in the schedule of documents included at <u>Attachment A</u> to this decision letter.

#### **Decisions**

I have decided to:

- grant full access to one document; and
- grant partial access to one document.

My access decisions are detailed further in the following statement of reasons and the documents released to you are provided as <u>Attachment B</u> to this letter.

In reaching my access decision, I have taken the following into account:

- The FOI Act;
- The contents of the documents that fall within the scope of your request;
- The views of relevant third parties; and
- The Human Rights Act 2004.

#### **Full Access**

I have decided to grant full access to one document at reference 2.

#### **Partial Access**

I have decided to grant partial access to one document. Documents at references 1 contain information that I consider, on balance, to be contrary to the public interest to disclose under the test set out in Section 17 of the Act as the information contained in these folios is partially comprised of personal information.

I have identified that there are no relevant factors favouring disclosure of this information under Schedule 2.1.

This information has not been disclosed as this could reasonably be expected to prejudice the protection of the individual's right to privacy under *Schedule 2.2 (a) (ii) prejudice the protection of an individual's right to privacy or any other right under the Human Rights Act 2004*. The disclosure of this detail would not provide any government information pertinent to your request therefore, I have decided this factor outweighs the public interest factors in the disclosure of this information.

#### Charges

Processing charges are not applicable to this request.

#### **Disclosure Log**

Under section 28 of the FOI Act, CHS maintains an online record of access applications called a disclosure log. The scope of your access application, my decision and documents released to you will be published in the disclosure log not less than three days but not more than 10 days after the date of this decision. Your personal contact details will not be published.

https://www.health.act.gov.au/about-our-health-system/freedom-information/disclosure-log.

#### Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the FOI Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health's disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman GPO Box 442 CANBERRA ACT 2601

Via email: <u>ACTFOI@ombudsman.gov.au</u>

Website: ombudsman.act.gov.au

#### ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision. Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal Level 4, 1 Moore St GPO Box 370 Canberra City ACT 2601

Telephone: (02) 6207 1740 http://www.acat.act.gov.au/

## **Further assistance**

Should you have any queries in relation to your request, please do not hesitate to contact the FOI Coordinator on (02) 5124 9831 or email <a href="mailto:HealthFOI@act.gov.au">HealthFOI@act.gov.au</a>.

Yours sincerely

Dave Peffer Chief Executive Officer

Canberra Health Services

13 January 2022



# Canberra Health Services

# FREEDOM OF INFORMATION SCHEDULE OF DOCUMENTS

Please be aware that under the Freedom of Information Act 2016, some of the information provided to you will be released to the public through the ACT Government's Open Access Scheme. The Open Access release status column of the table below indicates what documents are intended for release online through open access.

Personal information or business affairs information will not be made available under this policy. If you think the content of your request would contain such information, please inform the contact officer immediately.

Information about what is published on open access is available online at: <a href="http://www.health.act.gov.au/public-information/consumers/freedom-information">http://www.health.act.gov.au/public-information/consumers/freedom-information</a>

A	PPLICANT	NAME	WHAT ARE THE PARAMETERS OF THE REQUEST			FILE NUMBER			
			"Under the provisions of the ACT Freedom of Information Act 2016, asking for copies of all information relating to current "thin markets" for skills associated with autism diagnosis that is either a) held by the Child and Community Services Directorate, or b) provided to the ACT Minister for Disability, the ACT Minister for Health or the ACT Minister for Mental Health, over the past two years (30 November 2019 – 30 November 2021). Note: the Minister for Disability spoke about alleged "thin markets" in her speech, see <a href="https://aod.parliament.act.gov.au/A95768">https://aod.parliament.act.gov.au/A95768</a> (soon after 3:44:58 pm). "			CHSFOI21-22.14			
Ref	Page	[	Description	Date	Status	Factor	Open Access		
Number	Number				Decision		release status		
1.	1-3	50%	ng - Minister for Health - in Canberra - 23 March 2021	12 March 2021	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES		
2.	4	MCHS21/1002 Minister for Health - Private Members Bill Autism Spectrum Disorder - Dot Points		24 November 2021	Full Release		YES		
	Total Number of Documents								
2									



#### **Canberra Health Services**

To:

Minister for Health

Tracking No.: MCHS21/133

Date:

12/03/2021

From:

Bernadette McDonald, Chief Executive Officer

Subject:

To provide information for a meeting with

Adolescent

Services in Canberra

**Critical Date:** 

23/03/2021

Critical Reason:

Meeting is scheduled for this date

CEO

.../.../...

## Recommendation

That you note the information contained in this brief.

Noted / Please Discuss

Rachel Stephen-Smith MLA .....

P55.

23,3,2

Minister's Office Feedback

provided by my Brownley, but this was now included are an amodule to the brief. Please ensures proper provided are attacked to neetly briefs is firm - That you.

## Background

- You have agreed to meet with at 2pm on Tuesday 23 March 2021 to discuss concerns about a shortage in specialist services and in particular paediatricians, neurodevelopmental behavioural paediatricians and adolescent psychiatrists.
- Dr Boon Lim, Executive Director, Women, Youth and Children and Ms Karen Grace, Executive Director, Mental Health, Justice Health, Alcohol and Drug Services will be available to attend this meeting if required.

#### Issues

- Within Canberra Health Services, neurodevelopmental and behavioural (NDB)
  paediatricians operate within the Community Paediatrics and Child Health Service
  (CPCHS), one arm of the Women, Youth and Children Community Health Programs.
- 4. Referrals to the CPCHS have grown significantly over recent years, in line with Australia wide trends. Data from the Australian Paediatric Research Network show that six in every ten children will be seen by paediatricians in outpatient clinics for neurodevelopmental or behavioural problems. The most common conditions seen are autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), sleep disturbance, learning difficulty and behavioural concerns,
- Reasons for these rising numbers include increased awareness of NDB conditions leading to increased rates of referral; and funding systems that drive the demand for specific diagnoses (particularly ASD) to attract educational and disability support services.
- 6. NDB paediatricians manage the neurological basis of clinical presentations as well as the interaction of social, psychological and behavioural factors which impact both presentation and prognosis. Long wait times to access paediatricians for neuro-developmental and behavioural problems worsen the child's underlying condition, mental health, quality of life, school and family functioning.
- 7. Integrated care with general practitioners as a solution to the rising demand for NDB paediatricians will require significant skill building, as well as legislative changes to prescribing, particularly stimulant medication for ADHD. This is a body of work in which CPCHS and Canberra Health Services could take a proactive role.
- COVID-19 precautions during 2020 saw the restriction of CPCHS services for a threemonth period. Wait-lists currently stand at 15 to 18 months. Anecdotally, similar demand in the private sector is managed by closing books to new referrals.
- Infrastructure difficulties arising as a result of COVID-19 restrictions have compounded
  the service impact on CPCHS. We are still working towards reinstating our rates of
  pre-COVID-19 service delivery. Even so, concomitant rising referral rates mean we are
  falling further behind.

10. It is hoped that current plans to re-configure the service's model of care and strengthen multi-disciplinary supports will go some way to meeting increased demand for NDB paediatric services in the ACT.

Mond!

11. CPCHS has no evidence of twin 15-year-old boys being referred. They may be being managed by a private paediatrician.

# **Financial Implications**

12. Not applicable.

## Consultation

### Internal

13. Not applicable.

## **Cross Directorate**

14. Not applicable.

# **External**

15. Not applicable.

# **Work Health and Safety**

16. Not applicable.

## **Benefits/Sensitivities**

17. Not applicable.

## Communications, media and engagement implications

18. Not applicable.

Signatory Name:	Boon Lim	Phone:	5124 7500
	Karen Grace		5124 1753
Action Officer:	Samantha Lang	Phone:	5124 7431
	Kelly Daly		5124 7950

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## Women Youth and Children input – MCHS21/1002

- Publicly funded Autism Spectrum Disorder (ASD) assessments in the ACT are provided by the ACT Child Development Services (within the Community Services Directorate).
- Within Canberra Health Services, neurodevelopmental and behavioural (NDB) paediatricians operate within the Community Paediatrics and Child Health Service (CPCHS), one arm of the Women, Youth and Children Community Health Programs.
- Referrals to the CPCHS have grown significantly over recent years, in line with Australia wide trends. Data from the Australian Paediatric Research Network show that six in every ten children will be seen by paediatricians in outpatient clinics for neurodevelopmental or behavioural problems. The most common conditions seen are ASD, Attention Deficit Hyperactivity Disorder (ADHD), sleep disturbance, learning difficulty and behavioural concerns.
- NDB paediatricians manage the neurological basis of clinical presentations as well as
  the interaction of social, psychological and behavioural factors which impact both
  presentation and prognosis. Long wait times to access paediatricians for
  neuro-developmental and behavioural problems worsen the child's underlying
  condition, mental health, quality of life, school and family functioning.
- Reasons for these rising numbers include increased awareness of NDB conditions leading to increased rates of referral; and funding systems that drive the demand for specific diagnoses (particularly ASD) to attract educational and disability support services.
- The complex inter-relations between these factors have led to significantly increased demand for ASD assessments and increased rates of diagnosis.
- Extending access for publicly funded ASD assessments to you people up to the age 18 will further increase an already over-burdened system.