

Children in Out of Home Care: Collaboration for Improved Outcomes

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Acknowledgement of Country

On behalf of Brimbank City Council, we respectfully acknowledge and recognise the Wurundjeri and Bunurong Peoples as the Traditional Custodians of this land and pay respect to their Elders, past, present and future



Brimbank's Outreach MCH Team-Access & Engagement

- Statutory Out of Home Care (OOHC) refers to children that live away from their parents in a range of court ordered care arrangements.
- Many children in OOHC face multiple challenges and are likely to have increased behavioural, social, emotional, medical and physical needs.
- There can be a transient nature to OOHC placements, making access and engagement with services challenging for families.
- This can result in children missing out vital Maternal and Child Health appointments and other support services.
- With the main objective of Brimbank's Outreach MCH program being access and engagement, a decision was made that the OOHC portfolio would be well placed within the outreach team.
- This allows for ongoing clinical oversight of infants and children in OOHC within Brimbank.

Collaboration – First Steps

- An OOHC email inbox was created to hold all correspondence in a centralised place.
- Establishing contacts with the local Pathways to Good Health program was one of our initial priorities.
- After making a connection with the nurse navigator, monthly meetings were held to ensure that both organisations were abreast of children in OOHC who required paediatric assessment.
- Once the partnership was established, communication moved to emails when required. This has allowed for two-way communication and proactive information sharing.
- Internally, we refer children in OOHC to our Early Years Engagement Officer who then supports kindergarten engagement.
- Collaboration with Child Protection has also been an essential component of this work.
- As a team, we consistently invest in maintaining open lines of communication to support information sharing schemes.

Case Study: A collaborative approach to Child and Family Health & Wellbeing in Brimbank

Case study:

16 month-old toddler, Jack (not the child's real name) in OOHC with a recent change in the primary caregiver to maternal grandmother. (MGM) Jack's mother was allowed to visit during the day, participate in appointments with professionals and activities with supervision of MGM. She was not allowed to stay in the home overnight.

- Proactive contact from Melton City Council and allocated Child Protection worker, notifying Brimbank and requesting linkage with MCH service.
- Multiple attempts made to book consult at MCH centre, however, DNA's due to transport issues.
- Jack was then referred to MCH Outreach program as per our DNA policy.
- Unsuccessful attempts to contact resulted in cold call home visit by 2x outreach nurses.
- Subsequently, an 18-month KAS was booked as a home visit for the following week.

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- Following the 18m KAS where concerns around development and nutrition were identified, an additional consult (Brigance) was booked.
- Referrals offered and made included: Early Start Kinder (ESK), EMCH parent coach, supported playgroup, audiology at local health centre, GP, and ECIS.
- Outreach MCHN proactively shared information to allocated CP worker, particularly regarding environment, attachment between child and caregivers, developmental and growth concerns, immunisation status and MCHN recommendations.
- Jack's mother was included in the assessment and referral process.
- Jack was also previously referred to Pathways to Good Health at Western Health. A clinical update was provided via email outlining progress, concerns, and plans/referrals.

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- MCHN attended a care team meeting with the allocated Child Protection worker and Family Preservation and Reunification worker.
- The meeting discussed barriers to the family accessing services for child (i.e. transport and financial barriers), promoting parental confidence to support reunification, and promoting early intervention for the child.
- Child Protection were involved on a voluntary basis and closed shortly after this.
- An additional consult was booked as the family had not responded to parent coach's phone calls, and a joint visit was conducted with the parent coach and Outreach MCHN.
- Outreach MCHN followed up with referrals previously made, ensuring contact details were correct, and then closed program, with intention for family to work with the parent coach and support services.

Case Study: A collaborative approach to Child and Family Health & Wellbeing in Brimbank

- Outreach MCHN reached out to family via SMS to remind them to call the central booking line to book 2-year KAS.
- The family did call the admin team and Jack's 2-year KAS was completed within the universal program in the MCH centre.

Family and Child Health and Wellbeing

- Identify developmental concerns and complete secondary screen.
- Identify issues with nutrition and provide anticipatory guidance.
- Able to "meet the family where they were at" and tailor the service to their needs, including providing visits at the family home.
- Complete referrals for Jack with a focus on early intervention.
- Link Jack in with early years services (including ESK).
- Working in a strengths-based way and very much in partnership with the family.

Service

Improved collaboration with:

- Pathways to Good Health
- Internal Early Years Team – kindergarten and playgroups
- DFFH / Child Protection
- Family Preservation and Response
- ECEI / NDIS

What did we learn

- The importance of working with the family on their goals and priorities.
- Sharing the social determinants with other organisations to enable wrap around supports (ultimately led to engagement with the universal MCH service following closure of outreach program).
- The benefits that come from effective collaboration in terms of improving outcomes.
- The importance of proactive information sharing to ensure that children "don't fall through the cracks."
- Establishing contacts and investing in professional relationships has helped build awareness of various service capabilities and how we can work together to promote optimal outcomes for children in OOHC.

Recent collaboration with Child Protection

- Outreach staff presented at the local DFFH office to a large group of Child Protection workers.
- The discussion highlighted the benefits of two-way communication and proactive sharing.
- Brimbank MCH received positive feedback after this presentation which has resulted in establishing a key contact who provides regular updates of all children under 5 years of age residing in Brimbank to the OOHC email inbox.
- There has also been an increase in allocated Child Protection workers proactively sharing with the MCH service.

Questions

For any questions or enquiries, please reach out to the OOHC inbox:

oohc@brimbank.vic.gov.au