

Paediatrics Pre-referral Guidelines – Child Development Program



Child Development Program

The Child Development Program provides services to:

- Children aged 0 – 3 years 11 months who have a moderate delay in ONE OR MORE DEVELOPMENTAL AREAS
- Children aged 4- 8 years 11 months with a functional impairment in THREE OR MORE DEVELOPMENTAL AREAS
- Health professionals – consultation/liaison service for children aged 9-13

Provision of named referrals is desirable.

Developmental problems

Initial work-up

- Obtain history from parents/carers regarding onset and course of symptoms, developmental progression, family history of developmental problems, and collateral information from school/child care if available. See [Milestones \(Qhealth\)](#)
- Refer to [Red Flags Early Intervention Guide for Children 0-5 Years](#).
- Hearing and vision assessment essential *Basic audiometry and visual acuity / eye health only- NOT behavioural optometry or auditory processing assessment*. Ensure correction of any problems prior to appointment.
- Consider [Parents Evaluation of Developmental Status](#) questionnaire (PEDS) as a way of eliciting parental concern.
- Any supporting information or previous reports from medical specialists or agencies including Child and Youth Mental Health Service (CYMHS), allied health professionals or school.

Refer when

Aged less than 4 years:

- If ONE or more developmental areas are affected and causing functional difficulty

OR

- Red flags present

Aged 4 to 9 years:

- If THREE or more developmental areas are affected and causing functional difficulty

Developmental areas

Speech and language
Cognition / learning /attention
Fine and gross motor
Social emotional /play /behaviour
Self care (feeding /sleeping /dressing)

Note:

If primary emotional disorder (e.g. severe anxiety/depression) refer to CYMHS.

If likely to have ADHD without other developmental concerns, refer to General Paediatric Outpatient Department.

Data needed in referral

- **Primary Reason for Referral**
Indicate which developmental areas are affected and give details.
- **Relevant Medical / Surgical History**
Standard history plus include any antenatal or perinatal factors such as drug/alcohol exposure, pre-term delivery or low birth weight.
- **Recent Investigations**
Please summarise basic audiometry and vision test reports. Organise these to be completed if not already.
- **Relevant Social History**
Indicate parental relationship issues, mental illness, substance abuse or disability; family in crisis; Child Protection/DOCS involvement; literacy/language considerations for parent/carer or other relevant information.

Clinical Advice: Please phone INTAKE OFFICER for advice or further information for eligible or ineligible patients on 0403 190 708

Referral Form Download: http://www.health.qld.gov.au/rch/professionals/gp_referrals.asp

Send Referrals to: Medical Objects Address – (TBA)
HealthLink Address - [qldrchld](#)

Fax: (07) 3335 8713 Mail: Child Development Program
49 Corrigan St, Keperra, 4054

See final page for references, copyright, disclaimer and further contact details.

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Contact us

Child Development Program Intake Officer	(07) 3335 8812
Child Development Program general enquiries (via North West Community Health)	(07) 3335 8888
CYMHS (Child and Youth Mental Health Service) general enquiries	(07) 3310 9444
General Paediatrics outpatient department general enquiries	(07) 3636 7818
Community Child Health Service general enquiries (via Primary Care Program Central Intake)	1300 366 039

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These guidelines were reviewed by specialists at the Royal Children's Hospital and by a working group of metropolitan general practitioners in Queensland.

Feedback or suggestions welcomed. Contact the **Patient Safety and Quality Unit**: CHSD-PSQU@health.qld.gov.au

Last reviewed: March 2010

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