

SAFE-ED OUTCOME REPORT

NSW Health Translational Research
Grant Scheme: Round 2

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Background

The SAFE-ED project addressed public sector hospitals and the highly skilled clinicians who work within them. These clinicians play a critical role in prevention and early intervention for child maltreatment. It drew on international evidence that systems to support ED clinicians to recognise and respond to child maltreatment have a profound impact. Few have been implemented and evaluated in Australia.

Objectives

1. Design and implement an evidence-based child injury E-Checklist for child maltreatment risk in the ED
2. Determine the clinical utility and uptake of the E-Checklist in the ED
3. Evaluate the E-Checklist impact on documentation, consultation and referral of suspected child maltreatment cases

The Project



Four hospital EDs (two paediatric and two general)



Doctors and senior nurses completed an E-Checklist for children aged five and under who presented to the ED with an injury



Audit of **16,575** electronic medical records

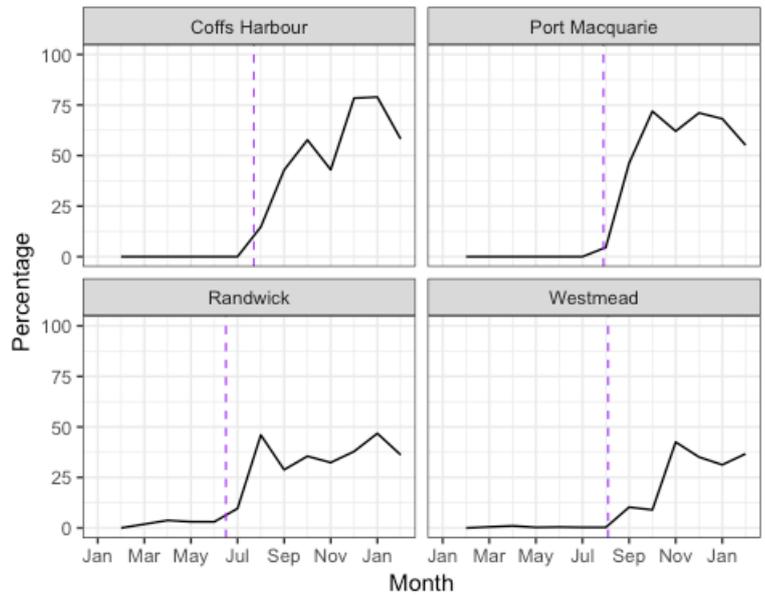
THE LARGEST STUDY OF ITS KIND IN AUSTRALIA

Translating research into
practice

IMPRESSIVE CLINICAL UTILITY

E-Checklist monitoring took place over a 6-month period. Completion varied across hospitals from **37%-75%** of eligible children. Higher rates of completion were associated with i) Multidisciplinary input; ii) A reminder pop-up; and iii) An icon in the FirstNet 'To Do' column

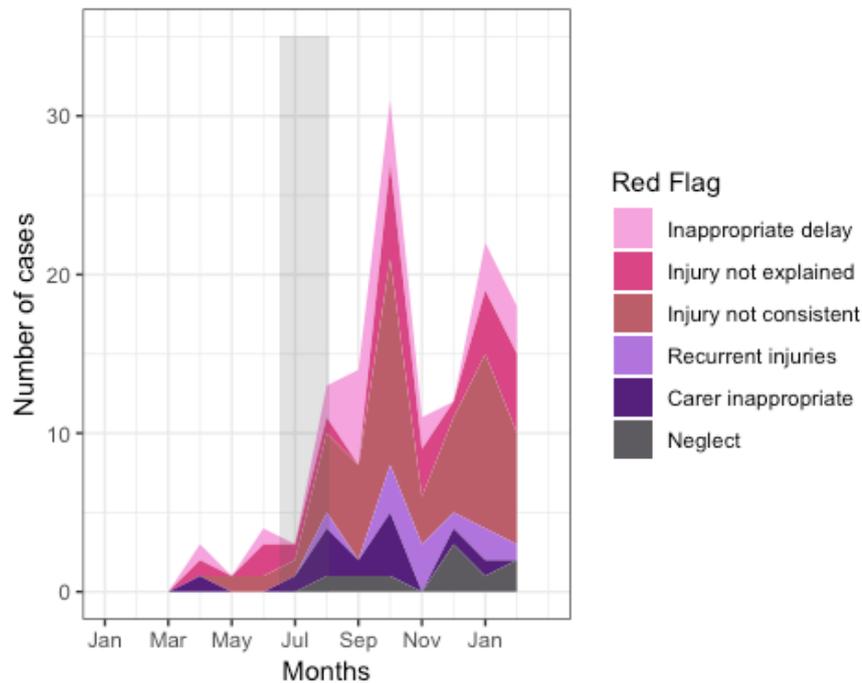
E-Checklist completion over the course of the study, by hospital



INCREASED REFERRAL TO THE RIGHT SERVICES

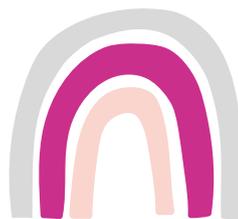
Children who had an E-Checklist completed were **twice as likely** to have a child protection referral made and **three times as likely** to be referred to the NSW Health Child Wellbeing Unit. This reduced the burden on already overwhelmed crisis services.

Documentation of child maltreatment red flags: all hospitals



GREATER DETECTION OF RED FLAGS

Detection of red flags **significantly increased**. 'Injury not consistent with child's development' increased the most, from two cases pre-intervention to 52 cases post-intervention. Clinicians initiated child protection referrals on over 50% of children with red flags.



The SAFE-ED team celebrates the strengths and resilience of Aboriginal families, culture, and community. Aboriginal children were not over-represented in child protection referrals in this cohort. Respectfully, further analyses will be presented separately.