



Hamilton

# INFORMATION REPORT

<b>TO:</b> Mayor and Members Board of Health	<b>WARD(S) AFFECTED:</b> CITY WIDE
<b>COMMITTEE DATE:</b> July 11, 2013	
<b>SUBJECT/REPORT NO:</b> Children's Aid Society/Catholic Children's Aid Society Public Health Nurse Secondments (BOH13028)(City Wide)	
<b>SUBMITTED BY:</b> Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department	<b>PREPARED BY:</b> Dorothy Barr (905) 546-2424 Ext. 4888
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**Council Direction:**

Not Applicable

**Information:**
**Background**

As reported through an Information Update on May 8, 2013, the Children's Aid Society (CAS) has experienced a significant budget reduction, resulting in staff layoffs. Catholic Children's Aid Society (CCAS) has now experienced a similar reduction.

For many years CAS and CCAS have seconded Public Health Nurses (PHNs) from Public Health Services (PHS). Seconded PHNs completed assessments, provided support to the highest needs infants and their families and provided consultation to CAS/CCAS staff. Given the budget reductions, notice of termination of the PHN secondments has been issued from CAS and CCAS, taking effect on July 5 and July 27 respectively. PHS staff have explored other options to continue funding the seconded positions, without success.

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*OUR Mission: WE provide quality public service that contribute to a healthy, safe and prosperous community, in a sustainable manner.*

*OUR Values: Accountability, Cost Consciousness, Equity, Excellence, Honesty, Innovation, Leadership, Respect and Teamwork.*

At the June 17, 2013 Board of Health meeting, a motion was approved that: "The Children's Aid Society be requested to make a presentation to the Board of Health respecting how funding cuts have affected children within Hamilton."

### **Pilot of CAS/CCAS PHN Assignments**

In the secondment model, PHNs completed CAS/CCAS risk assessments. The Healthy Babies Healthy Children (HBHC) screening tool, used to assess developmental risk of children and the needs of families for HBHC services, was completed by HBHC PHNs.

PHS plans to pilot a new model of collaboration, assigning HBHC staff to work with CAS/CCAS. In this new model:

- PHNs will continue to be assigned to CAS (1.0 FTE) and CCAS (0.5 FTE) through October 2013, funded by managing gapping across PHS.
- CAS/CCAS staff will complete the HBHC screening tool, with training and support provided by PHS.
- Rather than completing the CAS/CCAS risk assessments, the PHNs assigned to work with CAS/CCAS will complete the In-Depth Assessment form required by the HBHC protocol, and will facilitate access to blended home visiting and/or other community based services.

It is hoped that the efficiencies realized through this approach will offset the PHN assignment time and allow the continued assignment of PHNs to work collaboratively with CAS/CCAS. The viability of this approach will be assessed over a three month period, and a report submitted to the Board of Health in October, 2013.