



INFORMATION REPORT

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| TO: | Mayor and Members Board of Health |
| COMMITTEE DATE: | September 18, 2014 |
| SUBJECT/REPORT NO: | Healthy Babies Healthy Children Protocol - BOH13010(a) (City Wide) |
| WARD(S) AFFECTED: | City Wide |
| PREPARED BY: | Dorothy Barr (905) 546-2424, Ext. 4888 |
| SUBMITTED BY: | Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department |
| SIGNATURE: | |

Council Direction:

Not Applicable

Information:

The Healthy Babies Healthy Children (HBHC) Program, primarily funded by the Ministry of Children and Youth Services (MCYS), provides “support to vulnerable families with risk for challenges to healthy child development, in order to help children reach their full potential”. As reported in March 2013 in report BOH13010, the HBHC protocol has been revised by MCYS.

The purpose of this report is to provide an update on the implementation of the revised protocol in Ontario and Hamilton.

Summary

The revised HBHC protocol has been implemented in Hamilton for postpartum families through effective collaboration with hospital partners. Postpartum families in Hamilton are more likely to have needs requiring HBHC home visiting than are families across Ontario.

Work to fully implement the protocol for prenatal and early years families is ongoing, and involves collaboration with a large number of community partners.

Public Health Services (PHS) staff continues to look for ways to increase productivity in order to accommodate the additional workload associated with the revised HBHC protocol. Implementation status for the revised HBHC protocol in Hamilton is comparable to that in other health departments across Ontario.

Protocol Revision and Evaluation

The goal of the HBHC protocol revision, as stated by MCYS, was to strengthen and streamline the HBHC Program and ensure that it is effective and efficient. The HBHC protocol revision included three key elements:

- New screening tool,
- Additional Screening Liaison PHN positions (1.0 FTE for Hamilton), and
- Training to use evidence-informed interventions during home visiting (in place in Hamilton prior to protocol revision).

Public Health Ontario was commissioned by MCYS to conduct an evaluation of the implementation of the revised HBHC Program. This evaluation reviewed data from the first six months of implementation in 2013, and found that screening levels across Ontario fell below MCYS targets; particularly for prenatal and early years clients. It also found that prenatal and early years clients, once screened were more likely to be identified with risk than were postpartum clients.

MCYS has indicated that they will meet with individual health departments this fall to review their specific results from the Public Health Ontario evaluation. This will allow a better understanding of HBHC service delivery in Hamilton.

Postpartum Services

The initial focus of HBHC protocol implementation in Hamilton, as across Ontario, was postpartum families. Families often require support in the days immediately following birth, and delays could result in adverse outcomes. Through effective collaboration with partners from St. Joseph's Healthcare Hamilton, and Hamilton Health Sciences; screening and referral procedures were changed to comply with the revised protocol. The 1.0 FTE HBHC Screening Liaison Public Health Nurse (PHN) provided by MCYS was assigned to augment existing PHS hospital liaison staff because of the increased time required to complete the longer new HBHC screening tool.

Hospital staff completes the first half of the screening tool. PHS Screening Liaison PHNs then meet with families in hospital to complete the remainder of the screening tool, and to facilitate services based on need. For example, if a visit immediately upon discharge is necessary, the PHS Screening Liaison PHN will book the appointment at the bedside. Clients with needs that are less pressing will be contacted by telephone once they return

home, and have in-depth assessment visits booked then. PHS Screening Liaison PHNs spend part of their work week doing hospital liaison work, and part of their work week providing HBHC home visits. This ensures they remain familiar with available services. In some cases, families receive both hospital screening and home visiting from the same PHN, supporting continuity of care.

Although work to ensure a high quality of service is ongoing, as in all areas of service provision across PHS, both hospital partners and PHS staff feel the current postpartum HBHC process is working well.

A comparison of HBHC postpartum services in Hamilton during the first half of 2014 and in Ontario during the first six months of implementation in 2013, as reported through Public Health Ontario's "HBHC Process Implementation Evaluation" shows:

| HBHC Postpartum Screening | | | |
|---|-------------|---------|----------|
| | MCYS Target | Ontario | Hamilton |
| % of birth families screened | 100% | 81%* | 81% |
| % of families screened identified with risk (two or more risk factors) | n/a | 46% | 52% |
| % of families screened confirmed at high risk through in-depth assessment | n/a | 31% | 33% |
| % of families confirmed with risk referred for home visiting | n/a | 75% | 95% |

*based on an estimate of 2,500 births; statistics for 2014 are not yet available

Prior to the HBHC protocol revision, an average of 276 in-depth assessment visits were completed each year with postpartum families identified to be with risk. In-depth assessments each require an average of 3.5 hours of PHN time. In only the first half of 2014, 192 in-depth assessment visits have been completed with postpartum families. Since screening and the completion of in-depth assessments are now more time consuming, staff within the program have had to become more efficient in order to avoid delays in service for families. For example, the HBHC Program in Hamilton has utilized the hotelling office model very effectively, ensuring that staff has tools to work productively in the community and reducing the need for travel to the office.

Prenatal and Early Years Services

Reaching postpartum clients is straightforward since most births take place in hospital. Reaching prenatal and early years clients requires different approaches and extensive community collaboration. With the initial focus on postpartum services, screening levels in Hamilton and across Ontario currently fall well below MCYS targets.

Incremental implementation is planned in Hamilton, in recognition of both the limited resources to conduct or promote screening, and the potential for identifying needs for

service that PHS and the community are unable to address.

Further work is required to engage community partners in the full implementation of the HBHC protocol for prenatal and early years families. Approaches currently planned include:

- Screening by PHS staff at prenatal classes, Canadian Prenatal Nutrition Program groups and Check It Out Clinics,
- Communication campaign supporting universal screening, and
- Collaboration with health care providers such as family physicians, midwives and hospital based prenatal clinics to facilitate completion of the HBHC screening tool for their clients.

Service Agreement

MCYS requires each health department to sign a service agreement regarding the provision of the HBHC program. In 2013, no service level targets were included in the service agreement because it was a transitional year. The 2014 agreement includes service level targets that are not achievable in 2014:

| Entry Stage | HBHC Screening Target |
|--------------------|--|
| Postpartum | 100% of births |
| Prenatal | 25% of births |
| Early Childhood | 20-25% of children aged six weeks to 70 months |

In response to concerns expressed by PHS staff regarding the achievement of the targets, MCYS provided written communication stating that “the service targets described are aspirational” (Appendix A).

The HBHC service agreement has been signed by Hamilton Public Health Services’ Medical Officer of Health.

Appendices

Appendix A to Report BOH13010(a) – Ministry of Children and Youth Services, Ontario, correspondence.