

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

DATE: 2015 March 19

---

## SUMMARY INFORMATION REPORT FOR MARCH 2015

### **Recommendation**

*It is recommended that Report No. 024-15 re Information Summary Report for March and the attached appendices be received for information.*

### **Key Points**

- The Ministry of Children and Youth Services has introduced a Continuous Quality Improvement (CQI) reporting requirement for Health Units related to Healthy Babies Healthy Children programs starting in 2015.
- Smart Start for Babies (SSFB) Teen Program provides intensive support program for over 100 pregnant adolescents. Two new components of the program include nicotine replacement therapy and fatherhood education and support.
- Over 1,000 couples participate each year in a variety of prenatal education and support programs. In 2015, a pilot program will be initiated which combines e-learning sessions with skill-based groups.

### **Background**

This report provides a summary of information from a number of Health Unit programs. Appendices and links will provide further details, and additional information is available on request.

### **Ministry of Children and Youth Services (MCYS) Requirements**

The HBHC Program, provided by the Best Beginnings Teams in Family Health Services (FHS), is a mandated program for vulnerable pregnant women and families with children from birth to school entry. Home visiting services are provided, through a combined public health nurse and lay visitor model to support healthy child development and effective parenting.

As a strategy to improve the quality and consistency of how the Healthy Babies Healthy Children (HBHC) Program is implemented by Health Units in Ontario, MCYS has introduced a Continuous Quality Improvement (CQI) Requirement commencing in 2015. Health Units have been provided with a process and template ([Appendix A](#)) for developing a CQI Plan with the following program components being considered as priorities for improvement:

- Accurate screening and screening practices
- Standardized Service Implementation
- Training and Education

The CQI plan will be submitted to MCYS along with the financial reporting for the 100% HBHC funding that is provided to MCYC in April of 2015.

**Smart Start for Babies (SSFB) Teen Program**

The SSFB program provides prenatal education and support to pregnant women who have multiple risk factors which make them and their babies vulnerable for poor outcomes ([Appendix B](#)). In addition to offering this program at 5 locations in London and Strathroy, SSFB offers a teen-only session for pregnant teens and their support persons. In 2014, 110 pregnant teens attended the program, representing 46% of the total SSFB participants at all sites. Through the 2015 PBMA process, resources have been re-directed within the SSFB budget in order to focus on smoking cessation. One recent change in the program includes making referrals to the Healthy Babies Healthy Children home visiting Nicotine Replacement Therapy (NRT) program for all SSFB participants who want to reduce or quit smoking. Whenever appropriate during SSFB sessions, Public Health Nurses (PHN) emphasize the importance of creating smoke-free environments for infants and families. A second adjustment to the program will be focused on providing support to male partners who attend the SSFB program. A male PHN is now involved with the teen sessions and plans are underway to provide periodic “men-only” sessions where men can learn about supporting their pregnant partner and discuss their being involved as positive fathers.

**Combined E-Learning and Skill Based Prenatal Program**

The Prenatal Education Programs offered by the MLHU provide prenatal health information and support to approximately 1000 families in London-Middlesex each year. Clients are able to choose from 6-week in-class sessions, weekend workshops, e-learning options as well as individual class sessions for breastfeeding and preparing for parenthood. Through the collaborative efforts of multiple teams at MLHU, changes to the current format of 6-week sessions have been proposed which will streamline the series into a 4 week combined e-learning and skill based program to provide a more client centered approach. Enhanced emphasis on adult learning and skill-building activities will allow clients an opportunity to network with other childbearing families and building confidence in their knowledge and ability to navigate labour and birth, the first 6 weeks postpartum, feeding their baby and caring for their newborn. The combined e-learning and in-class sessions will be piloted and evaluated at five sites during the months of April and May, 2015. If successful, full implementation of the combined e-learning and four in-class sessions will begin in January of 2016.



Christopher Mackie, MD, MHSc, CCFP, FRCPC  
Medical Officer of Health