

TO: Chair and Members of the Board of Health

FROM: Alexander Summers, Medical Officer of Health; Emily Williams, CEO

DATE: 2022 March 17

IMPLEMENTATION OF THE INTERVENTION FOR HEALTH ENHANCEMENT AND LIVING (iHEAL)

Recommendation

It is recommended that the Board of Health receive Report No. 12-22 re: “Implementation of the Intervention for Health Enhancement and Living (iHEAL)” for information.

Key Points

- iHEAL is a promising intervention for women who are in the transition of separating from an abusive partner with the goal of promoting safety, health, and wellbeing.
- Implementation of the iHEAL intervention is underway at the Middlesex-London Health Unit with 13 women currently enrolled and participating.
- A second cohort of iHEAL education is planned for March/April of 2022 which will allow expansion of the iHEAL intervention in existing programs.

Background

In 2020, the Board of Health (BOH) endorsed five priority areas of focus identified in MLHU’s recovery planning. One of these was domestic violence (child abuse and intimate partner violence), and implementation of the Intervention for Health Enhancement and Living (iHEAL) program was a recommendation within this priority area of focus. In the 2021 PBMA process, the BOH approved the 1.0 FTE investment of a public health nurse to enable MLHU to offer the iHEAL program. iHEAL is a promising intervention for women who are in the transition of separating from an abusive partner with the goal of promoting safety, health, and wellbeing. During their involvement in the program, women work with a public health nurse over 10 to 18 visits that take place in a community-based location over a 6-month period. The nurse provides personalized support to assist the woman in addressing concerns that she identifies as most important for her health and well-being.

Following positive outcomes of a randomized control trial, researchers are exploring broader integration of iHEAL into services. A dual implementation approach is being taken at MLHU, with one public health nurse delivering iHEAL as a standalone intervention and public health nurses from the Healthy Babies Healthy Children (HBHC) and Nurse-Family Partnership (NFP) Programs delivering iHEAL to qualifying individuals already participating in these visiting programs.

Implementation Update

A phased implementation began in June of 2021 with the lead iHEAL public health nurse and identified iHEAL practice leads from HBHC and NFP, along with their respective managers. This group has explored how to tailor the intervention for expansion to the rest of the HBHC and NFP home visiting teams.

Community outreach initially focused on meeting with Violence Against Women (VAW) agencies in London and Middlesex County to strengthen existing relationships and explore opportunities to work together to support women in the London and Middlesex County communities. An iHEAL promotional poster and webpage were developed in collaboration with the Communications team, and steps were taken to reach out to primary care providers through MLHU's Health Care Provider Outreach team.

Several referral pathways for iHEAL have been established. Women can self-refer to the iHEAL program by calling the Health Unit or filling out a confidential online request-for-service form found on the MLHU iHEAL webpage. With consent, partner agencies and health care providers can also refer women by calling the Health Unit or faxing an iHEAL referral form.

Since the end of September 2021, 20 women have been referred to the iHEAL program. Of the 20 referrals, MLHU was unable to connect with five individuals due to a lack of response to attempts to follow up on the referral received. This proportion of unrealized referrals is consistent with findings in the randomized control trial. The majority of referrals have come from VAW organizations and MLHU's online request-for-service form. Referrals have also been received from primary care providers, internal MLHU programs (HBHC and NFP), a mental health agency, and Victim Services. Thirteen women were enrolled in the standalone intervention, one woman was enrolled in iHEAL within the HBHC Program, and one woman was enrolled in iHEAL within the NFP Program. There have been two discharges from the iHEAL program, with a total of 13 women currently enrolled and participating. One client was discharged after the iHEAL-educated NFP public health nurse moved to another position and MLHU was no longer able to offer the iHEAL intervention to the client. This client continued with the NFP program without iHEAL services. The second client was discharged from the standalone iHEAL intervention after contact was lost.

Sixty-nine significant client interactions have been completed. On average, visits have lasted 45 minutes. An important component of these visits is supporting women to access resources and services that align with their expectations and needs. Twenty-three referrals have been made, with the highest number of women being referred to a VAW organization and/or mental health services.

Next Steps

A second cohort of iHEAL education will be offered in March/April of 2022 allowing for expanded delivery of the iHEAL intervention within HBHC and NFP. Ongoing community outreach and partnership is planned to develop and strengthen existing relationships. MLHU will continue to work with the iHEAL research team to evaluate implementation of the iHEAL intervention within a public health setting as a standalone intervention and as an intervention embedded within existing services.

This report was submitted by the Healthy Start Division.



Alexander Summers, MD, MPH, CCFP, FRCPC
Medical Officer of Health



Emily Williams, BScN, RN, MBA, CHE
Chief Executive Officer