

A Call for Action in Child Health



**The Community Health Nurses'
Initiatives Group of RNAO**



RNAO

Registered Nurses
Association
of Ontario

L'Association des infirm
et infirmiers autorisés de
l'Ontario



Public Health Nursing Management in Ontario

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CHILD HEALTH DISCUSSION PAPER

in collaboration with

OPHA CHILD HEALTH WORKGROUP, ONTARIO HEALTHY SCHOOLS COALITION, RNAO/CHNIG and ANDSOOHA

Executive Summary

This paper is intended to provide a framework for beginning discussions between the Ministry of Children and Youth Services, the Ministry of Health and Long Term Care, Public Health Division and public health professionals that promote child and youth health. The OPHA Child Health Workgroup, in collaboration with Ontario Healthy Schools Coalition, RNAO/CHNIG and ANDSOOHA, urge the Ministry of Health and Long Term Care, Public Health Division and the Ministry of Children and Youth Services to identify child and youth health promotion and protection as a priority. A number of recent developments have demonstrated the increasing realization of the importance of a vibrant public health system and investments in child and youth health to the health of our communities. The creation of the new Ministry of Children and Youth Services signals a commitment to our children and youth and provides an opportunity to develop an infrastructure supportive of comprehensive child and youth services.

A review of the literature indicates that by investing in sustainable child and youth health programming and addressing determinants of health, the health of children and their families will be strengthened. Key areas to focus on to improve child and youth health are poverty, social environments, physical environments and healthy lifestyles.

We propose the following:

- Establish integrating mechanisms for the comprehensive and collaborative planning, implementation and evaluation of child and youth health promotion between the two Ministries
- Maximize the capacity of public health nurses and other public health professionals to offer evidence-based child and youth health promotion programs and services
- Strengthen the role of public health in Family Health programs and services through the release of augmented Mandatory Health Programs and Services Guidelines
- Promote senior nursing and other discipline leadership.

Background

The public health system has recently undergone extensive review resulting in significant public health system changes. At the provincial level, the review and redesign of the Ministry of Health and Long Term Care, Public Health Division has resulted in a transfer of accountability for the Healthy Babies, Healthy Children (HBHC) Program and the Early Child Development projects to the Ministry of Children and Youth Services. The Ministry of Health and Long Term Care, Public Health Division will continue to be accountable for the remainder of the Family

Health mandate under the Mandatory Health Programs and Services Guidelines. This shift in funding and responsibility requires the development of an integrating mechanism to ensure child and youth health services are provided in a comprehensive and coordinated manner that maximizes the potential of the complementary programs and services offered by the two Ministries and reduces fragmentation and duplication. We suggest that collaboration and integration occur at the visioning, planning, design, delivery and evaluation levels.

The SARS emergency resulted in an evaluation of the public health system's capacity to respond to health emergencies and communicable disease threats and a renewed interest in the role of public health in promoting and maintaining the health of our communities. We urge the Ministry of Health and Long Term Care, Public Health Division to demonstrate its commitment to child and youth health by strengthening (ie. inclusion of Best Start Strategy) and releasing the Family Health Mandatory Health Programs and Services Guidelines that contain a broad range of health promotion strategies reflective of best practices. Investments in children and youth in all public health programs and services are critical to improving the health of our community.

The Importance of Child Health

A system of children and youth services which integrates child health will strengthen the health of Ontario's future society. The literature indicates many physical, social and environmental factors that affect the health of children. Investing in child and youth health services have been documented to positively impact on these factors and will help to achieve the goal of enabling children to reach their full potential. There is a need to integrate the programs and services of both the children and youth service systems and the public health system to optimally benefit individuals, families, groups and communities. The Ottawa Charter for Health promotion provides a useful framework for integration:

- developing personal skills (eg. parenting capacity and breastfeeding expertise)
- creating supportive environments (eg. healthy home and school environments)
- building of healthy public policy (eg. family friendly workplaces)
- strengthening community action (eg. child safe environments)
- reorienting health and social services (eg. seamless integration of health promotion, prevention and treatment services for children and youth).

Human Resource Capacity

While child and youth public health services are provided by a variety of public health staff such as dietitians, health promoters, family home visitors, and dentist hygienists, the majority of front line providers are public health nurses. Public health nurses promote the health of young families through a variety of evidence based programs. They provide health education through the prenatal, postnatal and parenting years. Their role in breastfeeding support is critical to the families they serve. They liaise with hospitals and other community agencies to identify families needing support. Public health nurses provide individual assessment and counseling services in a variety of settings, supporting a family's capacity to promote healthy childhood development. The relationship that public health nurses have with their communities make them well suited to link families with the appropriate community services. In some communities where there is a shortage of physicians, nurse practitioners, in affiliation with public health practitioners, provide episodic care to families with young children and to adolescents through

family planning clinics.

Public health nurses also promote the health of children and adolescents in schools and other community settings. They work with individual students and their families and/or school population, using a variety of strategies such as personal counseling, health education, and program development (Laforet-Fliesser, Schofield, Yandreski, 2003). Public health nurses are skilled in evaluating health trends, identifying populations at risk, and participating in the identification of priorities such as the Healthy School Profile (Mitchell & Laforet-Fliesser, 2003).

Professional Leadership

A revitalized public health system must ensure that mechanisms are in place to support safe and enriched practice environments. As public health nursing is the single largest component of the public health workforce, strong, visible nursing leadership is crucial to maintaining current knowledge of professional requirements and ensuring that the highest standards are maintained across health units. Structured quality assurance and clear professional accountability across public health not only supports the fulfillment of the public health mandate but fosters excellence in the quality of public health programs and services to the communities we serve. The Minister's Task Force on Nursing (1999) made it abundantly clear that professional leadership was pivotal in the recruitment and retention of nurses and maximizing the efficient and effective use of nursing resources in a complex and ever-changing health system. Similarly, other public health discipline-specific leadership would serve to strengthen the public health system as a whole.

Recommendations:

OPHA Child Health Workgroup, Ontario Healthy Schools Coalition, ANDSOOHA and RNAO/CHNIG recommend the following action for child and youth health to be a priority.

1. The Ministry of Health and Long Term Care, Public Health Division and the Ministry of Children and Youth Services establish integrating mechanisms for the comprehensive and collaborative planning, implementation and evaluation of child and youth health promotion services.
2. The Ministry of Health and Long Term Care, Public Health Division and the Ministry of Children and Youth Services maximize the capacity and expertise of public health nurses and other public health professionals to deliver child and youth health promotion programs and services.
3. The Ministry of Health and Long Term Care, Public Health Division confirms its commitment to child and youth health through strengthening the role of public health in Family Health programs and services by the release of augmented Mandatory Health Programs and Services Guidelines.

4. The Ministry of Health and Long Term Care, Public Health Division promotes quality public health environments by ensuring the establishment of Senior Nursing and other discipline-specific leader positions in all health units.

Conclusion

The OPHA Child Health Workgroup, Ontario Healthy Schools Coalition, RNAO, CHNIG and ANDSOOHA urge the Ministry of Health and Long Term Care, Public Health Division and the Ministry of Children and Youth Services to make child and youth health a priority.

References

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