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EARLY CHILD DEVELOPMENT – ADDITIONAL FUNDING

The Health and Emergency Medical Services Committee recommends the adoption of the recommendations contained in the following report, April 1, 2004, from the Commissioner of Health Services:

1. RECOMMENDATIONS

It is recommended that:

1. Health and Emergency Medical Services Committee and Regional Council authorize an expenditure increase to the 2004 Public Health budget in the amount of \$341,415 for the Early Child Development Program which will be funded 100% by the Ministry of Health and Long-Term Care (MOHLTC).
2. The Health Services Department, Public Health Branch, hire 4.5 additional regular full-time staff in order to implement the initiatives outlined in this report.

2. PURPOSE

The purpose of this report is to seek approval of the Health and Emergency Medical Services Committee and Regional Council to receive and expend 100% provincial funding in order to implement initiatives that support ECD. These initiatives are Injury and Family Abuse Prevention and Promotion of Healthy Pregnancy and Child Development.

3. BACKGROUND

In December 2001, The Regional Municipality of York, Health Services Department, Public Health Branch, was directed by the MOHLTC to develop comprehensive four-year plans in order to implement two initiatives that support Early Child Development – Injury and Family Abuse Prevention, and Promotion of Healthy Pregnancy and Child Development.

In November 2002, Health and Emergency Medical Services Committee and Regional Council received a report from the Commissioner of Health Services outlining the four-year plan (January 2003 to December 2006) for the Injury and Family Abuse Prevention and the Promotion of Healthy Pregnancy and Child Development initiatives.

York Region has been involved with the ECD initiatives since their inception in January 2002. When creating the original 5 year budget for the MOHLTC, the expectation was for funding to remain constant at \$334,600 per year for both initiatives. This is the amount included in the 2004 Business Plan and Budget for Public Health. The MOHLTC confirmed in its correspondence dated February 6, 2004, that the allocation for

2004 would be increased to \$676,015 (an increase of \$341,415) and will continue to be at this level for the duration of the ECD projects (expected to be December 2006).

This increase in funding for 2004 is in response to the increased need for programs in injury prevention and to respond to the increase in demand for services for families at risk for family violence and postpartum mood disorder. In addition, the MOHLTC acknowledged the increase in York Region's population of pregnant families and families with children aged 0–6. According to the 2001 Census, children aged 0–6 increased by 10.6% in York Region since 1996.

4. ANALYSIS AND OPTIONS

4.1 Program Descriptions

During the initial phase of the ECD project, Health Services staff consulted with individuals and with community partners who provide a range of services to children and young families in York Region. During this consultation process, it was determined that one of the greatest challenges to healthy pregnancy and child development for families in York Region was the impact of family abuse and mental illness. Although mental illness does not always result in abuse and family abuse is not always caused by mental illness, the strategies to protect and support these families have much in common. Therefore, the planning for both the Prevention of Family Abuse and the Promotion of Healthy Pregnancy and Child Development has been combined.

4.1.1 Prevention of Family Abuse, and Promotion of Healthy Pregnancy and Child Development

The early identification and increased support to families at risk of violence and those experiencing mental illness will result in improved developmental outcomes for children in those families.

There have been numerous successes in the Prevention of Family Abuse and the Promotion of Healthy Pregnancy and Child Development since the program began in 2002. These include:

- Improved interactions with clients as a result of staff in brief solution-focused interventions
- Completion of a community needs assessment and a skill building workshop for staff and community partners on issues related to Postpartum Mood Disorder (PPMD)
- Establishment of ongoing support groups for women with PPMD in both the south and north areas of the Region
- Completion of a report of the retrospective review of Healthy Babies, Healthy Children home visiting documentation. The rate of disclosure of woman abuse identified will be used as baseline data in determining the benefits of implementing the use of a universal screening tool in all client contacts
- Collaborated in the provision of workshops and resource materials to staff and the community on domestic violence and child abuse

- Staff and management have increased knowledge and skill related to prevention of secondary trauma and are committed to developing and implementing a model for the Family and Child Health Division of the Health Services Department

A portion of the funding (\$25,000) will enable The Regional Municipality of York to host a workshop in the fall of 2004. This event will engage appropriate groups and organizations from across the province representing health, justice, shelters, police, and treatment services, in developing a comprehensive plan to achieve the goal of preventing violence against women and providing safety and support to women who are subjected to violence.

4.1.2 Injury Prevention

Unintentional injury of children from birth to age six is one of the major causes of hospitalization. According to the MOHLTC Health Planning Database (2004), the hospitalization rate due to unintentional injury of York Region children from birth to age six was 212 hospitalizations/100,000 in 2002. In addition to those children admitted to hospital, there are many more children who are treated in emergency departments, physicians' offices or at home. Injuries include falls, burns and scalds, choking and suffocation, poisoning and drowning. The home is the most frequent site of injury occurrence for this age of child and many of the injuries are related to a lack of appropriate safety measures.

The goals of the Injury Prevention program are to:

- Enhance awareness, education and/or personal skills of parents and caregivers
- Create safe and supportive home, play and learning environments
- Advocate for policy change and/or enforcement
- Strengthen community capacity to address some of the leading causes of unintentional injury

To date, the Injury Prevention program has:

- Surveyed York Region parents regarding their perception of the incidence and prevention of injuries among children aged six and younger
- Provided York Region paediatricians (64) with age-specific resources to distribute to parents during "milestone" visits
- Offered 50 workshops in 2003 around the Region to 450 parents/caregivers, including a pilot project with Ontario Works clients
- Distributed almost 10,000 resource kits at the workshops, prenatal classes and during Healthy Baby, Healthy Children home visits
- Successfully advocated for the reduction in the standard hot water temperature in homes with Safe Kids Canada. In January 2004, the standard temperature was amended to 49° Celsius

5. FINANCIAL IMPLICATIONS

The MOHLTC has provided an additional \$341,415 of 100% provincial funding for Phase III of the ECD initiatives. The allocation of these additional funds is noted in Table 1.

Table 1
Early Child Development Revised 2004 Budget

	2004 Budget	Proposed Increase	Revised 2004 Budget
Salaries & Benefits	\$256,606	\$209,689	\$466,295
Women Abuse Prevention Workshop	0	25,000	25,000
Mileage & Training	20,450	5,750	26,200
Equipment & Program Supplies	57,544	100,976	158,520
Total Expenditures	\$334,600	\$341,415	\$676,015
Less: 100% Provincial Funding	334,600	341,415	676,015

In order to implement the plans outlined in this report, it will be necessary to hire an additional 4.5 FTE (1.0 Health Educator, 2.0 Public Health Nurse and 1.5 Clerical Support). As noted above, the cost of these salaries and benefits is approximately \$209,689. It is anticipated that these projects will be extended beyond the present 4 year timeline. If, however, the Province does not continue to fund the initiatives and associated FTEs, attempts will be made to accommodate staff in other programs areas through attrition. If this is not possible, they will be laid off in accordance with Collective Agreements and other Regional policies.

While these initiatives are to be 100% provincially funded, costs related to administration, accommodation and corporate support for these programs (i.e. human resources, legal, payroll/accounting) are not included in the funding formula.

6. LOCAL MUNICIPAL IMPACT

The ECD initiatives have allowed the Health Services Department to provide a range of services that previously were not available to families and children across all nine area municipalities. The increased funding for 2004 will ensure that the programs piloted and evaluated will be available to families in all municipalities. These programs and services will promote increased awareness of parents and care providers of the circumstances contributing to unintentional injury of young children in order to decrease the incidence.

7. CONCLUSION

Childhood injuries and the presence of untreated mental illness and violence often prevent children from achieving their potential. The additional 100% provincial funding

for ECD programs enables the Health Services Department to continue to provide valuable programs and services to organizations, service providers and families for the benefit of all children in York Region.

The Senior Management Group has reviewed this report.