To: Mayor and Members  
   Board of Health

From: Elizabeth Richardson, MD, MHSc,  
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Re: Healthy Babies/Healthy Children Program Manager BOH08004 (City Wide)

Council Direction:

Information:

The Healthy Babies, Healthy Children Program (HBHC) is a 100% funded provincial program which provides screening, assessment and direct intervention to expectant women and families with children (up to age six) who are at high risk of poor birth and/or developmental outcomes. HBHC is a direct service delivery program with seven components:

1. Telephone Intake, Screening and Assessment  
2. Universal Postpartum Program (Postpartum Telephone Assessments and Home Visits)  
3. In-Depth Assessments for Families with Identified Risk Factors for Growth and Development  
4. Public Health Nurse and Family Home Visitor Home Visits to at-risk Families  
5. Referral and Linkage to Needs Based Supports and Services.  
6. Service Co-ordination for High Risk Families  
7. Early Identification of children at risk for poor development

HBHC has grown significantly since its inception in 1998 and it now has an annual budget of $3,445,206 (including one time funding of $115,000) with an approved complement of:

- 2 program managers  
- 31.5 FTE Public Health Nurses and support staff
• 4.0 newly graduated nurses who are employed from May – August in a summer internship program
• 17.9 FTE Family Home Visitors (FHV)¹ employed by six Community Partner Agencies (CPA)

Currently, two full time Program Managers are funded by HBHC which is insufficient to provide adequate support and supervision to the number of staff and program components funded by HBHC. Although there have been significant increases in front line staff there has not been any increase to the manager complement. Reorganization of the HBHC program will allow for three fulltime program managers with discrete responsibilities focusing on:

1. Postpartum component of HBHC, staff recruitment and retention, labour relations
2. CPA agencies/Family Home Visitors
3. Long term home visiting and Nurse Family Partnership

Public Health Services is piloting the Nurse Family Partnership model of intensive home visiting to pregnant low-income women, and requires a manager to nurse ratio of 1:8 to ensure adequate time for regular case reviews, observation of home visits, and case consultation. In order to carry out the pilot we must increase our manager to staff ratio to this level within that group of staff.

Further, benchmarking data from similar public health units shows that the average HBHC manager to staff ratio, including Family Home Visitors is approximately 1:12. The current HBHC manager to staff ratio here is 1:25, exceeding this benchmark by a significant amount. With the change outlined, the ratio will be 1:17.

The manager position will not impact the levy or complement. All costs for this position have been reallocated within the existing divisional budget. A vacant PHN position will be converted to a program manager.

Elizabeth Richardson, MD, MHSc, FRCPC
Medical Officer of Health
Public Health Services

¹ FHVs are employed by CPAs to provide peer home visiting support to high risk families in partnership with Public Health Nurses.