

REGIONAL MUNICIPALITY OF OTTAWA-CARLETON  
 MUNICIPALITÉ RÉGIONALE D'OTTAWA-CARLETON

MEMORANDUM  
 NOTE DE SERVICE

Our File/N/Réf. RC  
 Your File/V/Réf.

<p><u>Information Previously Distributed</u>          To be listed on the Community Services          Committee Agenda 4 June 1998</p>
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DATE 12 May 1998

TO/DEST. The Chair and Members of Regional Council

FROM/EXP. Medical Officer of Health

SUBJECT/OBJET **COLLABORATIVE PROJECT WITH THE CHILDREN'S  
 AID SOCIETY (CAS)**

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BACKGROUND

In January 1997, the CAS agreed to fund one Public Health Nurse (PHN) to provide early intervention for identified high risk families on their caseload to augment the care currently offered by the CAS social worker and family support worker. This was set up as a pilot project with an evaluation component. Twenty families, over the course of a one year period, received home visits by a PHN once every two weeks or more frequently if needed, in addition to the usual services provided by the CAS. Families in the control group received usual services.

The PHN's examined maternal personal resources, social support, stresses in the home, and family and community that facilitated or interfered with optimal health related behaviours. Intervention had three main components:

1. Educating women about health-related behaviours such as smoking, alcohol consumption, illicit drug use, birth control, as well as infant and child care and personal issues identified by the mother.
2. Enhancing social support for the mother by involving other family members and friends in the program.
3. Helping families identify and access resources in the community.

RESULTS

Mothers who participated in the pilot project reported many benefits to themselves and their children as a result of their participation in the project. They reported increased confidence in parenting, improved nutrition, better understanding of their child's behaviour including the importance of stimulation, and better capacity to manage stress. Clients admitted to being able to

form a positive relationship with the PHN and, as a result of the PHN visits, they felt that they were more accepting of other services such as psychological counselling.

### CONCLUSION

The Children's Aid Society and the Health Department have found this collaborative project to have very good results. Because of this, the CAS confirmed in April 1998 that it will provide funding for one PHN for a further one year period to provide intensive home visiting to families and to act as a health resource to staff at the CAS.

### PUBLIC CONSULTATION

The service has been well received by the CAS and by clients. The service complements well the public health mandate. No broader consultation has been done.

### FINANCIAL IMPLICATIONS

The Children's Aid Society has contracted to pay the salary of a Public Health Nurse for one year.

*Approved by  
Robert Cushman, MD, MBA, FRCPC*