



Kids Come First Health Team
2024 Annual Meeting
17 June 2024
2:00 – 4:00 PM

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We're so glad you're here!

The Kids Come First Health Team is a provincial leader in mobilizing partners to develop and implement innovative services and programs to meet the needs of children and youth in Eastern Ontario.

Kids Come First includes over 70 organizations; youth, family and caregiver partners; nearly 1,100 physicians; and many other individuals.



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Land Acknowledgement

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Setting the Stage



	Time	Agenda Item	Spokesperson(s)
1.	2:00 – 2:10 pm	Welcome from the Co-Chairs of the Kids Come First Health Team Steering Committee	Alex Munter <ul style="list-style-type: none"> CHEO President & CEO, Co-Chair of Kids Come First Steering Committee Claire Dawe-McCord <ul style="list-style-type: none"> Youth Partner & Co-Chair of Kids Come First Steering Committee
2.	2:10 – 2:15 pm	Land Acknowledgment	Alex Munter <ul style="list-style-type: none"> CHEO President & CEO, Co-Chair of Kids Come First Steering Committee
3.	2:15 – 2:20 pm	Setting the Stage	Christine Richer <ul style="list-style-type: none"> Youth, Family & Caregiver (YFC) Partner Coordinator
4.	2:20 – 2:25 pm	Celebrating Our Steering Committee	Josée Blackburn <ul style="list-style-type: none"> Director Kids Come First Health Team
5.	2:25 – 2:30 pm	Financial Matters	Josée Blackburn <ul style="list-style-type: none"> Director Kids Come First Health Team
6.	2:30 – 3:10 pm	Our Work Together: Transition from Pediatric to Adult Care	Natasha Baechler <ul style="list-style-type: none"> Kids Come First Youth Partner Josée Blackburn <ul style="list-style-type: none"> Director Kids Come First Health Team
7.	3:10-3:20 pm	Vaccinate and Up to Date	Kerry Kennedy <ul style="list-style-type: none"> Ottawa Public Health & Population & Public Health Working Group co-chair
8.	3:20 – 3:40 pm	Showcase	
9.	3:40 – 3:50 pm	Launch of Regional Surgical Pediatric Program	Sabine Mersmann <ul style="list-style-type: none"> Pembroke Regional Hospital President & CEO & Co-Chair of the Regional Surgical Pediatric Program Working Group
10.	3:50-3:55 pm	Medical History Tools & Guides Video: The Value of Youth, Family & Caregiver Partnerships	Christopher Vallee <ul style="list-style-type: none"> Kids Come First Youth Partner
11.	3:55 – 4:00 pm	Closing Remarks	Alex Munter <ul style="list-style-type: none"> CHEO President & CEO, Co-Chair of Kids Come First Steering Committee

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Celebrating Our Steering Committee Members

2022-2024 Steering Committee

- **Alex Munter**, CHEO, Co-Chair of Steering Committee
- **Claire Dawe-McCord**, Youth Partner & Co-Chair of Steering Committee
- **Michele Hynes**, Pinecrest-Queensway Community Health Centre, Community Health Centre sector
- **Marc Bisson**, Centre de santé communautaire de l'Estrie, Community Health Centre sector
- **Sabine Mersmann**, Pembroke Regional Hospital, Community Hospitals sector
- **Dr. Jane Liddle**, Pediatrician
- **Dr. Kelley Zwicker**, Pediatrician
- **Hilary Allen**, Family Partner
- **Angie Hamson**, Family Partner
- **Michelle Crogie**, PLEO, Family Partner sector
- **Dr. Lee Donohue**, Family Physician
- **Dr. Alison Eyre**, Family Physician
- **Darlene Rose**, Champlain Maternal Newborn Regional Program
- **Rachel Gouin**, Centre Le Cap, Francophone Health Services sector
- **Dr. Julie Nault**, Montfort Hospital, Francophone Health Services sector
- **Megan Wright**, Roger Neilson Children's Hospice, Integrated Home & Community Care sector
- **Gina St. Amour**, Ottawa Rotary Home, Integrated Home & Community Care sector
- **Mike Beauchesne**, Dave Smith Centre, Mental Health, Addictions, and Substance Use Health sector
- **Michael Hone**, Crossroads Children's Mental Health Centre, Mental Health, Addictions, and Substance Use Health sector
- **Joanne Bezzubetz**, Youth Services Bureau, Mental Health, Addictions, and Substance Use Health sector
- **Johanne Levesque**, Rideauwood Addiction and Family Services, Ottawa Child and Youth Initiative
- **Kerry Kennedy**, Ottawa Public Health, Population & Public Health sector

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Financial Matters

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Our Work Together:
Transitioning from Pediatric to Adult Care



Remain access driven to develop, streamline, and promote pathways to care for children, youth, and their families. **With a spotlight on transitions to adult services** and a regional surgical program. As well as an increase in overall access to preventative care focusing on primary care engagement and unattached children, youth, and their families.

priority populations across all services, including Indigenous children and families, as well as supporting Francophone families with the implementation of the Linguistic Protocol.

Remain access driven to develop, streamline, and promote pathways to care for children, youth, and their families. With a spotlight on transitions to adult services and a regional surgical program. As well as an increase in overall access to preventative care focusing on primary care engagement and unattached children, youth, and their families.

Establish innovative health strategies essential to better serve children, youth, and their families. Kids Come First is committed to collaborating with our partners to explore a digital health strategy and health human resource strategies to positively transform the way healthcare is delivered.

A commitment to partner with our regional Ontario Health Teams and provincial tables to share Kids Come First pediatric knowledge and experiences, support them in delivering pediatric care, and tackle the unmet or emerging health needs of children, youth, and their families.



There has been good work across Canada to improve the transition from pediatric to adult care.

- Best practices, standards, and guidelines
- Collaboration with children, youth, families, caregivers
- Collaboration with service providers, organizations, government

Ontario Health's Provincial Council for Maternal & Child Health (PCMCH)

- [Transition to Adult Healthcare Services](#)

Canadian Association of Paediatric Health Centres

- National Community of Practice
- Guideline for [Transition from Paediatric to Adult Health Care for Youth with Special Needs](#)
 - 19 recommendations to enhance and guide the care of youth with special health care needs into adulthood.

Children's Healthcare Canada

- [Health Hub in Transition](#)

Health Quality Ontario

- [Transitions from Youth to Adult Health Care Services](#)

CHEO

- [Two toolkits](#), including one for youth with complex special needs

- Turning 18 at CHEO
- Continuity of care
- Preparation
- Transition
- Knowledge gaps
- Differences and similarities

Let's collaborate

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INFORMATION GATHERING:

**How can Kids Come First Health Team
work with other OHTs and patients to
ensure successful transitions from
pediatric to adult care?**

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INFORMATION GATHERING:

How can Kids Come First Health Team work with other OHTs and patients to ensure successful transitions from pediatric to adult care?

QUESTIONS TO CONSIDER:

In an ideal world, what are key aspects of a successful transition from pediatric to adult care? Are there any pathways or patient/client populations that you think should be prioritized in improving transitions?

Are you doing work within your organization or OHT on the transition to adult care (models, pathways, initiatives)?

Transition to Adult Care Partner Feedback

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Ontario Health and the Provincial Council for Maternal and Child Health (PCMCH) partnered together to assemble an advisory committee comprised of young people and caregivers, as well as clinical leaders from a broad range of sectors to develop the [Transitions from Youth to Adult Health Care Services](#) quality standard.



Drawing on evidence from clinical guidelines and expert consensus, this quality standard includes six quality statements that address areas with high potential to improve transitions to adult care for young people in Ontario, including: early identification and transition readiness, information-sharing and support, the transition plan, coordinated transitions, introduction to adult services, and transfer completion.

The group/partner feedback received aligned well with these quality standards, as you'll note in the following slides.

Transition to Adult Care Partner Feedback

Quality Statement	Partner Feedback
<p>Quality Statement 1: Early Identification and Transition Readiness</p> <p>Young people who will transition out of child and youth-oriented services are identified as early as possible and have regular collaborative reviews of transition readiness to support their ongoing preparation needs for transition (and the needs of their parents and/or caregivers).</p>	<ul style="list-style-type: none">• Ensure adequate time is built into the transition plan and system navigation.• Understand what supports/pathways already exist and how to access them.• Start the conversation as early as 12/13 years of age.• Coach youth on self-advocacy.• Encourage youth to celebrate the change/transition.

Transition to Adult Care Partner Feedback

Quality Statement	Partner Feedback
<p>Quality Statement 2: Information Sharing and Support</p> <p>Young people (and their parents and caregivers, where appropriate) are offered developmentally appropriate information and support to meet their needs throughout the transition process.</p> <p>Information-sharing is collaborative, and health care providers actively seek the experience and expertise of the young person (and their parents and caregivers, where appropriate) and incorporate it into the transition planning and shared goal-setting.</p>	<ul style="list-style-type: none">• Improve communication between child/youth health care providers and adult health care providers.• Involve school boards in the transition as a means of sharing information and resources and engaging with youth.• Leverage/create digital platforms.

Transition to Adult Care Partner Feedback

Quality Statement	Partner Feedback
<p>Quality Statement 3: Transition Plan</p> <p>Young people have an individualized transition plan that is co-created, documented, and shared within their circle of care.</p>	<ul style="list-style-type: none">• Leverage tools such as KCF's Medical History Tool to avoid repetition of the youth's story.• Ask youth who they want to be involved in their transition to adult care.• Create handover packages designed by youth.• Use youth-friendly terminology.• Ensure access to French language services.

Transition to Adult Care Partner Feedback

Quality Statement	Partner Feedback
<p>Quality Statement 4: Coordinated Transition Young people have a designated most responsible provider for the transition process. This provider works with the young person (and their parents and caregivers, where appropriate) to coordinate their care and provide support throughout the transition process and until the young person (and their parents and caregivers, where appropriate) confirms that the transition is complete.</p>	<ul style="list-style-type: none">• Consider where youth will be during transition – in town, away at school, traveling.• Plan needs to be wholistic and consider social development, medical needs, financial needs, as well as the patient’s family’s needs.• Create a centralized pathway/model for transition similar to 1Call1Click.ca.• Provide coaching for youth and caregivers on what changes to expect.• Plan for transition from child/youth waitlists for services to adult waitlists – will the patient need to start over?• Develop a common understanding of the transition period.• Importance of inter-disciplinary care providers and family supports.

Transition to Adult Care Partner Feedback

Quality Statement	Partner Feedback
<p>Quality Statement 5: Introduction to Adult Services</p> <p>Young people (and their parents and caregivers, where appropriate) have a meeting with key adult services or other providers before the transfer, to facilitate and maintain continuity of care.</p>	<ul style="list-style-type: none">• Ensure child/youth providers work in parallel process to adult providers.• Understand that treatment options may change from youth to adult care.• Understand that adult services may not provide the same opportunities as child/youth services.

Transition to Adult Care Partner Feedback

Quality Statement	Partner Feedback
<p>Quality Statement 6: Transfer Completion Young people remain connected to the designated most responsible provider for their transition and are supported until health care service transitions are complete and confirmed by the young person (and their parents and caregivers, where appropriate).</p>	<ul style="list-style-type: none">• Transition is a stage and involved a range of ages.• Advocate for change to arbitrary ages that exist with respect to transition as well as access to funding to services.• Balance is needed between providers that care only for children/youth and those that provide whole-life care.• Support for children/youth with special needs as they transition to adult care.

Transition to Adult Care Partner Feedback



Looking ahead, Kids Come First, together with the Ontario Health Teams, anticipates positive collaboration to leverage new initiatives that will support the transition from youth to adult care, as well as looking at priority pathways to apply the quality statements outlined in the previous slides to resources and tools they develop.

Feedback received from the OHT's during our Annual Meeting referenced the great work they do with adults while acknowledging the need to continue engaging with children and youth, particularly in the development of pathways related to transitioning to adult care.

In keeping with their strategic plan goal of remaining access driven, Kids Come First looks forward to furthering its commitment to collaborating with and supporting all our partners in the transition from pediatric to adult care.

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**Population & Public Health:
Vaccinate and Up to Date**

Vaccinate and Up to Date

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Vaccinate and Up to Date


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Background

- 
- Declining immunization rates.
 - Difficulty accessing routine immunizations for families.

- 
- 34,000 missed doses in children under the age of 17.
 - Of those, 13,000 were for children aged 0-6.



Launch of catch-up campaign.

Project funding



- Successful funding received from the Ministry of Health/Ontario Health as part of the Make Kids Count initiative.
- Partners:
 - Ottawa Public Health
 - CHEO
 - East Ottawa Kids Clinic
 - Centretown Community Health Centre
 - Somerset West Community Health Centre
 - Ottawa Birth & Wellness Centre
 - CANImmunize
- Funding allocation:
 - Centralized intake/screening
 - Staffing
 - Training & logistics
 - CANImmunize functionality
 - Communications



Increasing access

The screenshot shows the CANImmunize website interface. At the top, there's a logo with a blue bird and the text 'CANImmunize'. Below it, a dark blue banner says 'Selected Services: Grade 7 School Vaccination'. The main section is titled 'Find Appointment'. Under 'Filters', there are two buttons: 'Select Date' (with a calendar icon) and 'Show clinics with no availability' (with a checkbox). Below the filters, a search result is displayed for 'Ottawa Public Health: J. H. Putman Public School'. The address '2051 Bel-Air Dr, Ottawa, K2C 0W9 | 613-580-6744' is shown. A green clock icon indicates 'Earliest Availability: Monday, June 24, 2024'. A 'Select' button is next to the result. At the bottom of the result card, a dark blue button says 'Services: Grade 7 School Vaccination'.

- Centralized, easy to use booking system
- ClinicFlow enables organizations to run immunization programs from start to finish
- Clients can book online at www.kidscomefirst.ca



- OPH Neighbourhood Health & Wellness Hubs
- OPH Targeted School Clinics

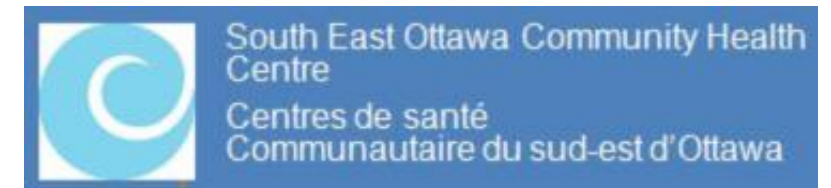
Partners

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During our initial year, eight Kids Come First Health Team partners offered clinics



Ottawa Birth and
Wellness Centre



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Communication and clinic promotion

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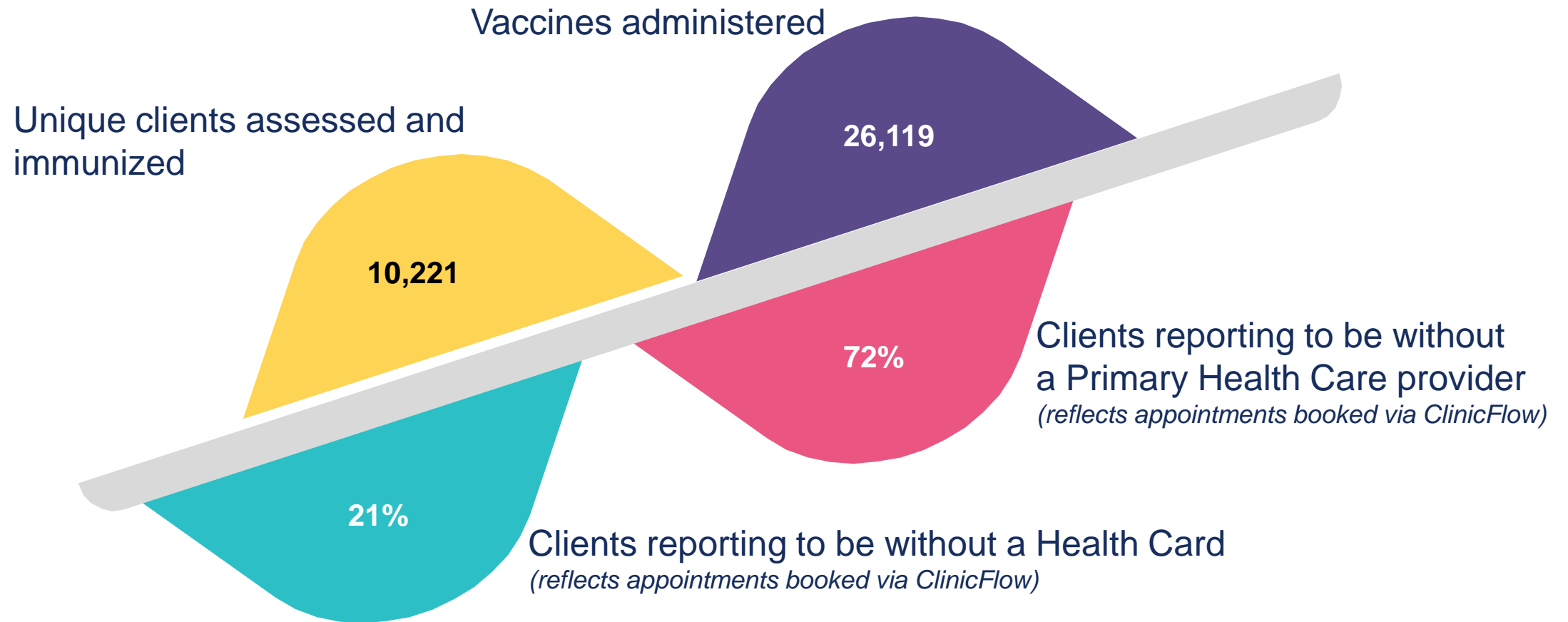


- Promotion through social media, Public Health Unit websites, television, radio and print media.
- Toolkit developed for partners
- CANImmunize app



Vaccination data: April 2023–March 2024

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Current status



The team continues to work on:

- Operational enhancements
- Routine assessment
- Promotion
- Monitoring
- Advocacy
- Removing barriers
- Vaccine hesitancy



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Working Group & Project
Showcase

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**Launching our Regional Surgical
Pediatric Program**

Regional Surgical Pediatric Program

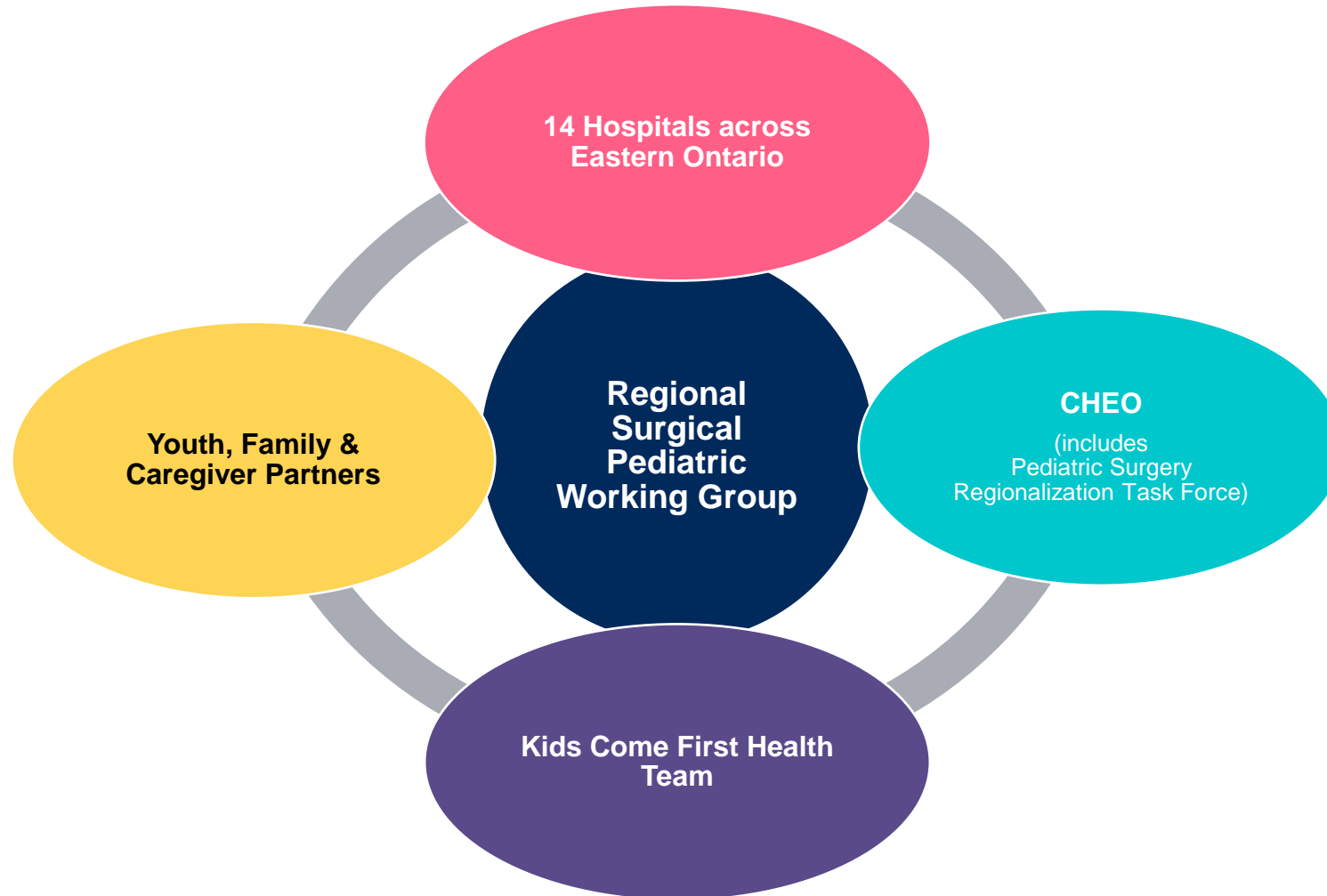
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Working Group Launch 2024

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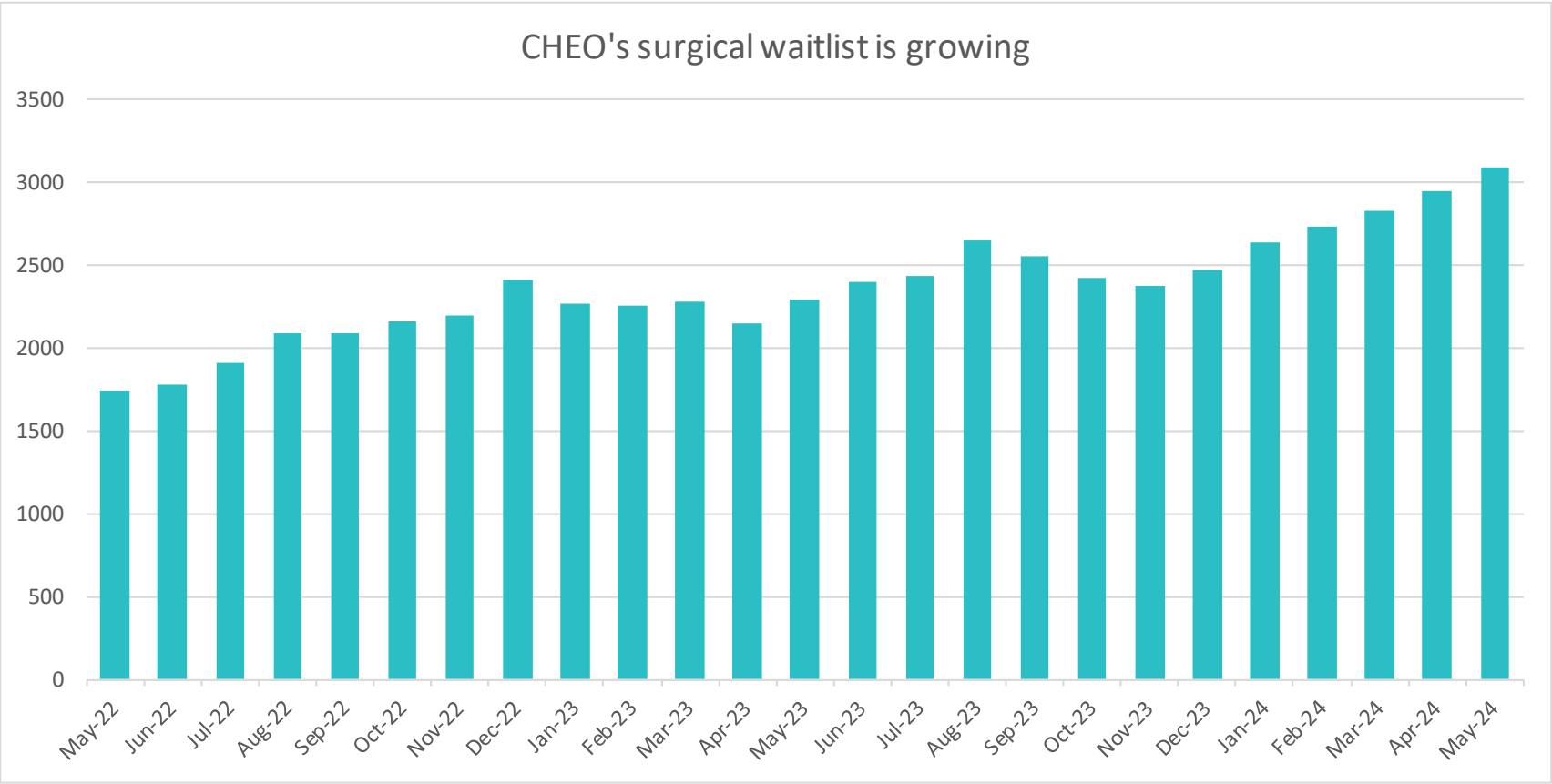


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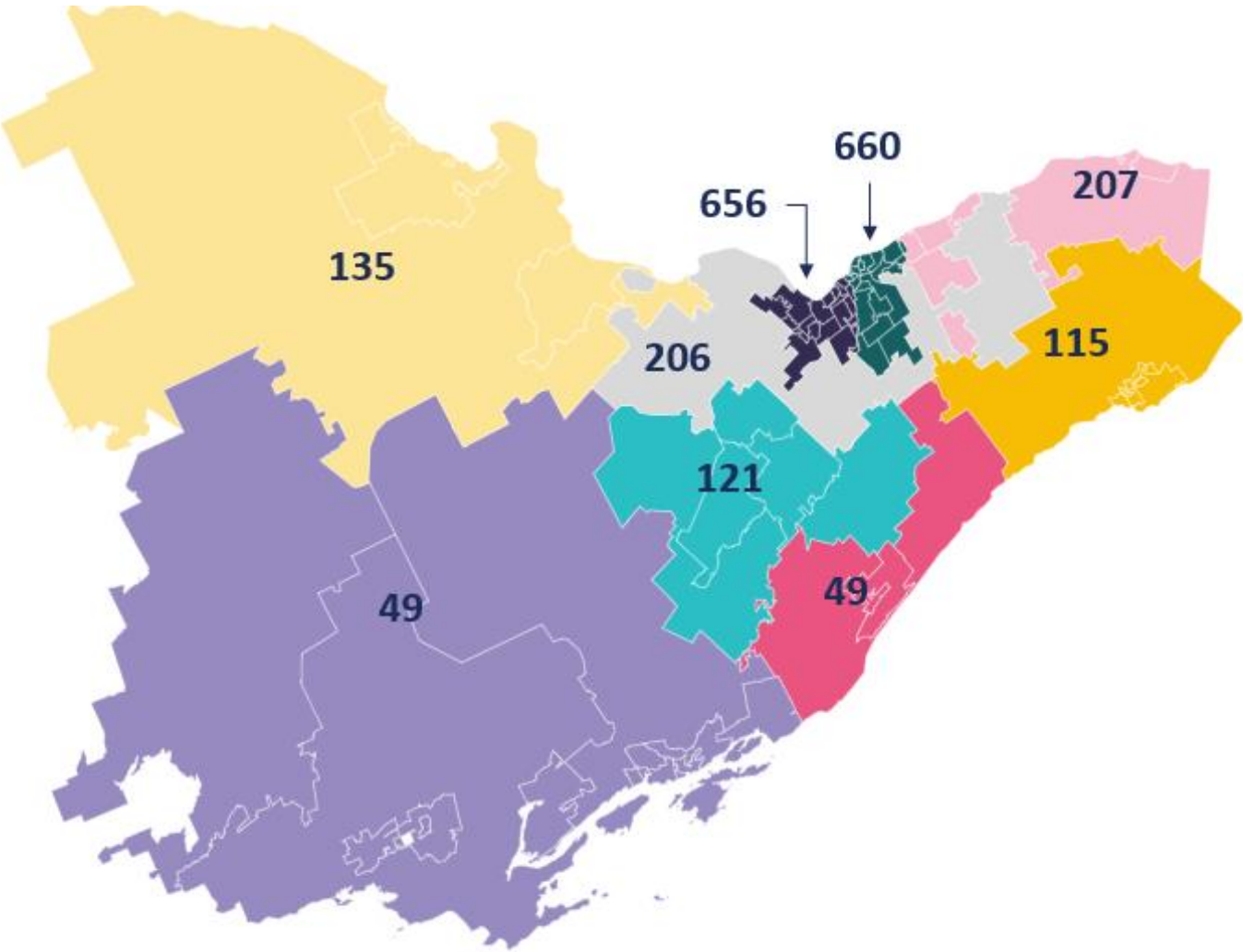
Growing need for pediatric surgery

Care closer to home

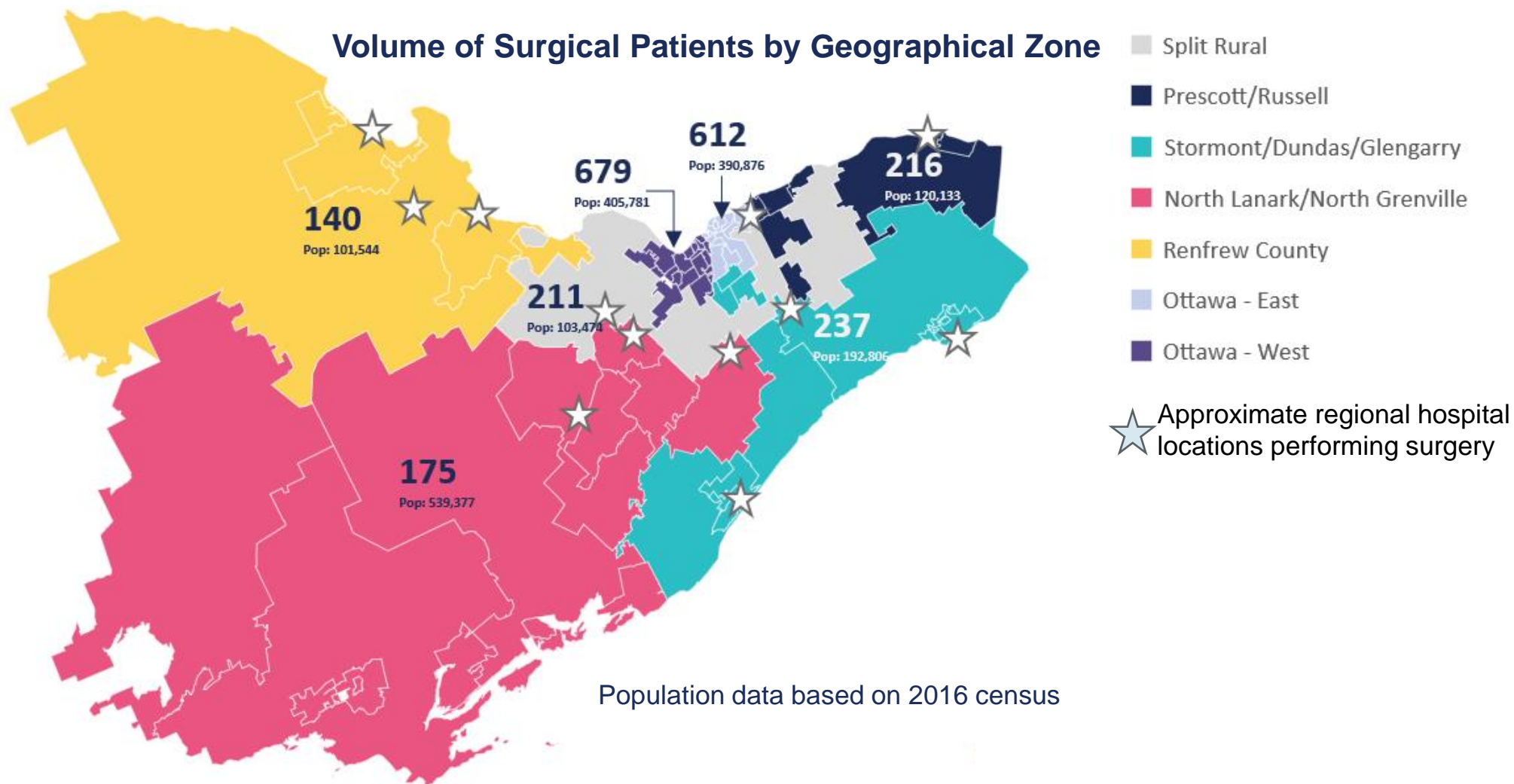
Systemization of pediatric care



Volume of pediatric patients waiting for surgery, by regional zones



Care close to home



2 regional hospitals
(Brockville & Carleton Place)



169 patients



**A message from
Dr. Jean-Philippe Vaccani,
CHEO Surgeon and Co-Chair
of the Regional Surgical
Pediatric Program Working
Group**

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Child, Youth, Family, & Caregiver Partnerships

Medical History Tool



** You can edit the tool to make it look how you want. You can take sections or rows away or add some more! Write whatever you want but try to keep it short. **

Name (first, last):	
The name I (or my child) like to use:	
Gender:	
Pronouns (e.g., he/she/they/xe):	
Do my parents know about my pronouns?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Birthday (YYYY/MM/DD):	
Preferred language(s):	
Allergies (e.g., food, medication)	<input type="checkbox"/> No <input type="checkbox"/> Yes, I am allergic to:
Food or environmental sensitivities (e.g., gluten, sugar, scents)	<input type="checkbox"/> No <input type="checkbox"/> Yes, I am sensitive to:

Health condition(s) / diagnosis

Name of condition/diagnosis and year of diagnosis

1.
2.
3.

By completing this medical history tool, you may be putting down your/your child/youth's personal information and potentially personal health information. Kids Come First is not responsible for any information shared externally outside of this purpose. You are responsible for saving and transmitting this information securely.



Sometimes, it's tough to keep telling doctors and therapists about your health, whether it's your body or your feelings. It can be especially hard when you have to talk about personal stuff that might make you feel uneasy.

This **tool** can make it easier. It was made by youth who have been to the doctor. It helps you talk to new doctors without having to say the same things over and over again.

Here are **2 steps** on how to use the tool and **examples** to help you:

1 Fill out the tool

- Print it out and fill it in with a pen or pencil, or save it on your phone or laptop and fill it out digitally.
- Look at the tips section to know what info to include.
- Customize the tool however you like.
- Add or remove parts and write what you need for your healthcare provider.
- Delete saved copies on public devices and dispose of extra paper copies.

2 Bring the tool to appointments with healthcare providers

- Take your medical history tool—whether it's paper or electronic—to your appointments with doctors and therapists.
- Sometimes, they might still need to ask more questions or have you fill out additional forms, which is normal. Just remember, while the tool makes talking easier, you might still need to provide more details so they can help your child better.



Sometimes, it's tough to keep telling doctors and therapists about your child's health, whether it's their body or their feelings. It can be especially hard when you have to talk about personal stuff in front of your child, things that might make them feel uneasy.

This **tool** can make it easier. It was made by parents and caregivers who have been to the doctor a lot with their kids. It helps you talk to new doctors without having to say the same things over and over again.

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Value of Youth, Family, and Caregiver Partnerships

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Closing Remarks

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