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HEALTH UNIT

Public Health Summit 2008

**Making Healthy Communities
Count “Public Health Conference”**

October 26th to 29th 2008

**Sheraton on the Falls,
Niagara Falls, Ontario**





Community Capacity & Accountability/Governance/ Performance Management

Outreach Strategy to Family Physicians and Obstetricians

Presented by

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October 28th , 2008



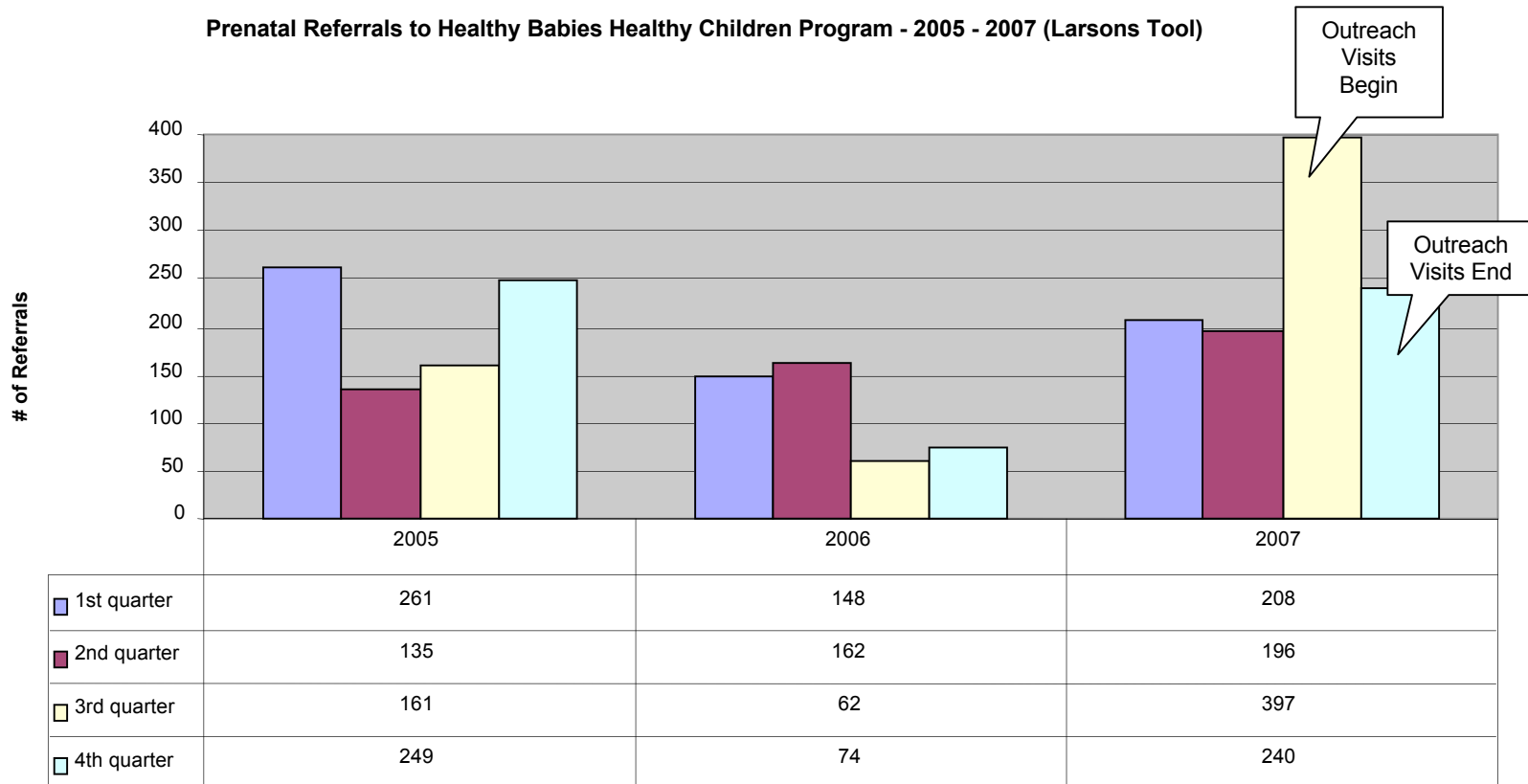
Staff Participating

- 1 Manager (the manager participated in the visits)**
- 1 Dietitian who provided guidance, support, & resources**
- 12 Public Health Nurses (8 who participated in the visits and 4 who were liaisons/supports)**
- 1 Program Administrative Assistant**
- 8 Teen Volunteers who assembled the binders**

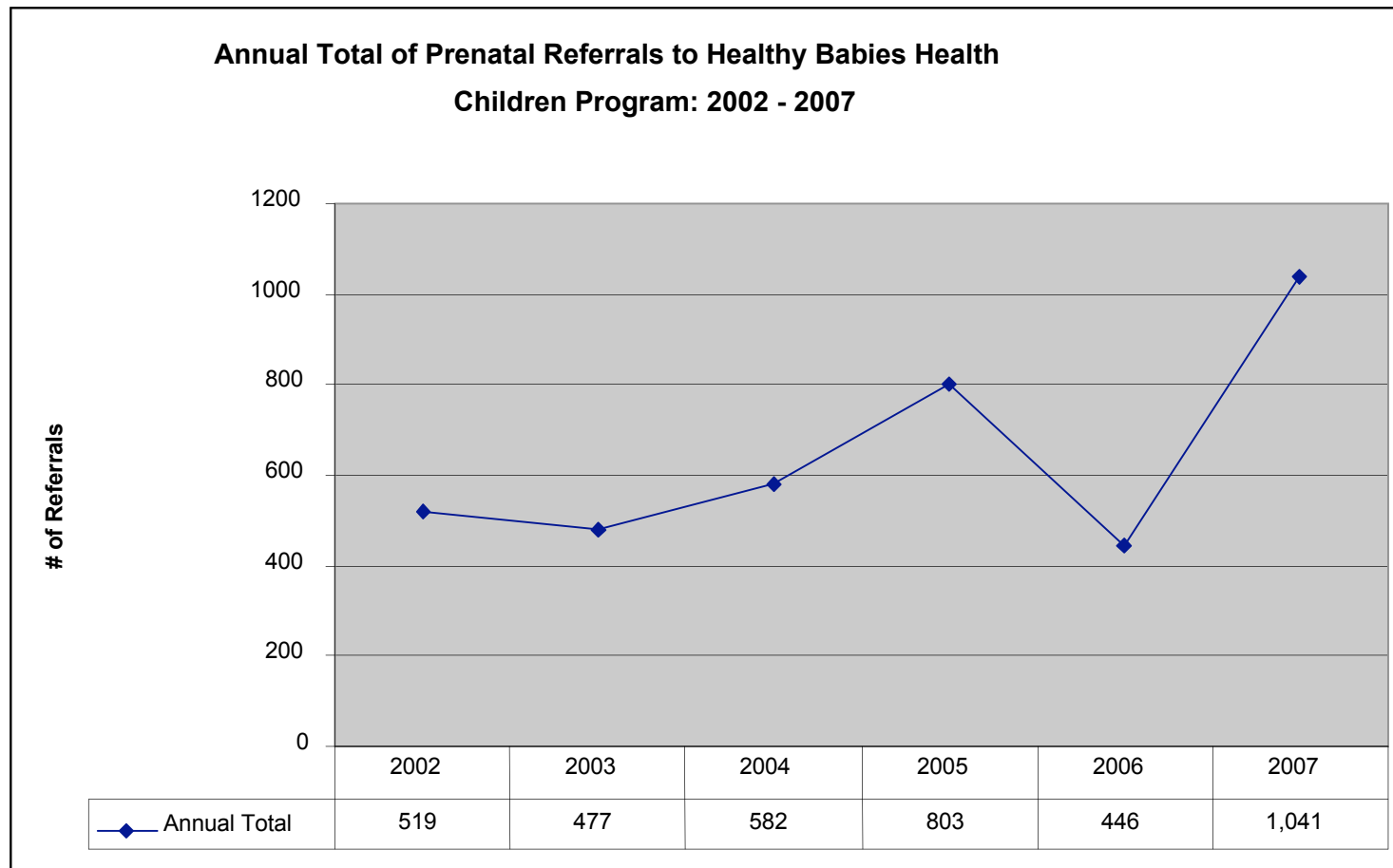
Background

- **In the Spring of 2002, MLHU targeted family physicians and obstetricians and implemented a strategy to increase knowledge, awareness and referrals to the HBHC program. The strategy included a one-to-one office visit with physicians by a PHN, and distribution of program information. The results were highly successful.**
- **Since 2002 our physician prenatal HBHC referrals have shown gradual decrease in numbers by 50 % and because of this it was decided to repeat the strategy.**

Outreach to Physician Strategy



Outreach to Physician Strategy



Outreach to Physician Strategy

Number of Referrals to public health programs 2006-2007

	2006	2007
Prenatal Fairs	235	271
Prenatal Education Classes by Family Physician	359	329
Prenatal Education Classes by Obstetrician	77	85

Objectives

- **To increase knowledge/awareness of family physicians & obstetricians offices regarding MLHU, FHS programs**
- **To determine family physician & obstetrician's familiarity with prenatal screening utilizing the Larson screening tool.**
- **To increase the number of referrals to the program.**
- **To determine family physician's awareness of developmental screening tools for children and determine their current practice with respect to developmental screening at 18 months & 3 years.**
- **To ascertain a meaningful way to communicate with physicians & obstetricians**

Methodology

There were 3 phases to the strategy;

- i) **Phase I** - Collection of baseline data from 2006 on the number of referrals to the reproductive health programs, recruitment of Public Health Nurses to conduct the visits, preparation, coordination & assembly of materials/physician resource binder.

- ii) **Phase II** -Implementation of the outreach visits to the physicians and obstetricians which included one-to-one office visits and one city wide meeting with obstetricians.

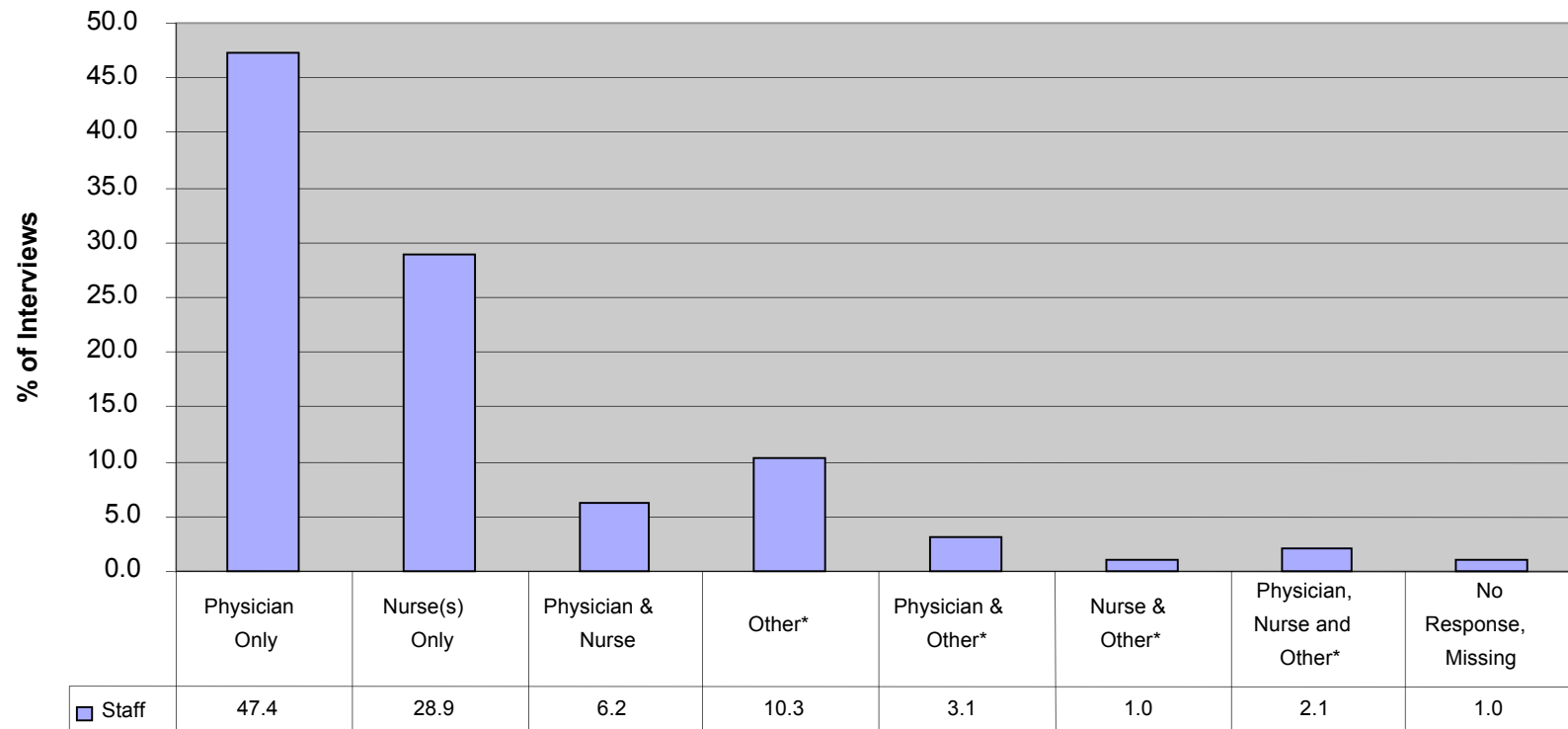
- iii) **Phase III** - Collation, summary & outcome recommendations

Results/Findings

- **215 physicians were targeted in the city and county**
- **145 family physician offices were successfully contacted**
- **13 obstetricians were presented with updated info related to HBHC program including the Larson screening tool using a group based strategy**
- **81 interviews were conducted with Family Physicians, nurses, & other health care workers**
- **37 offices refused the interview but received a binder**
- **7 were incomplete attempts (unlisted numbers, left family practice and no response after multiple tries)**

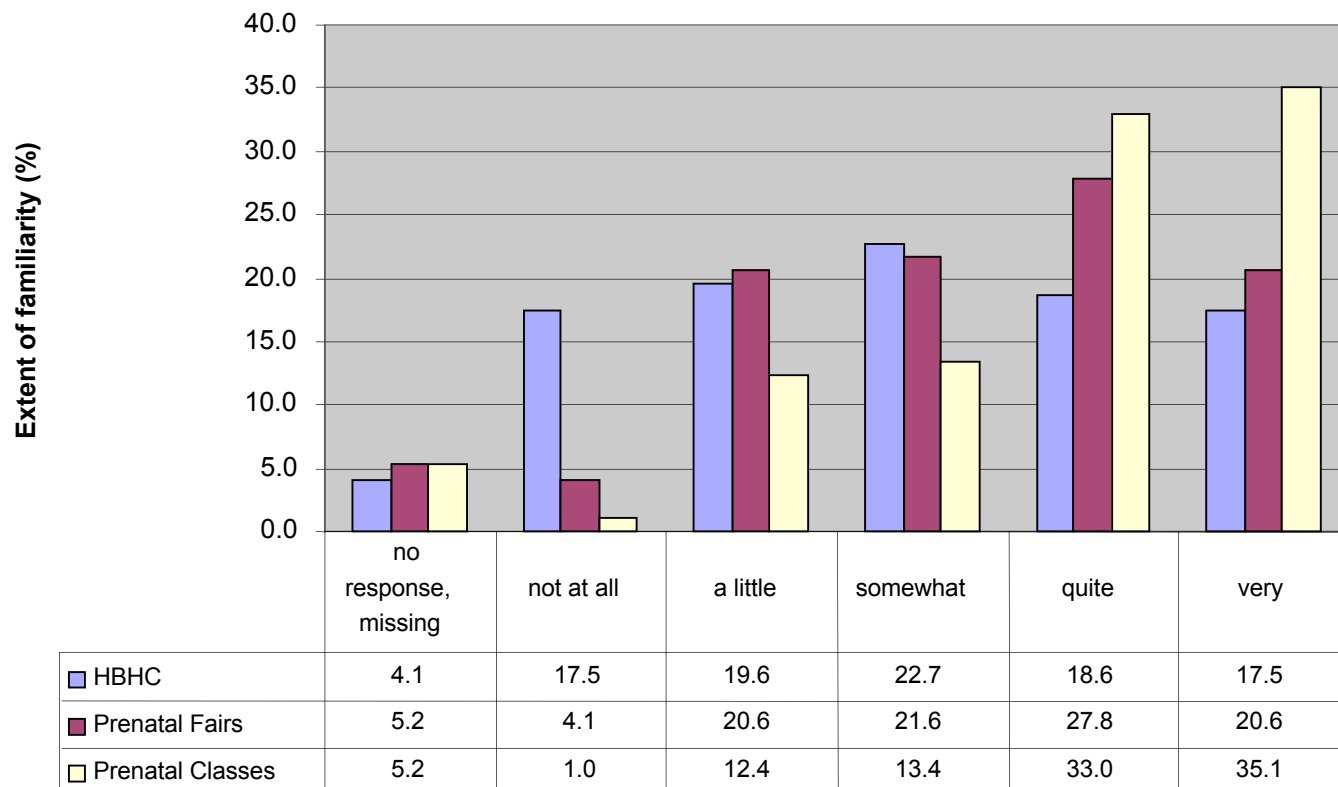
Outreach to Physician Strategy

Staff involved in interviews (n=97)



Outreach to Physician Strategy

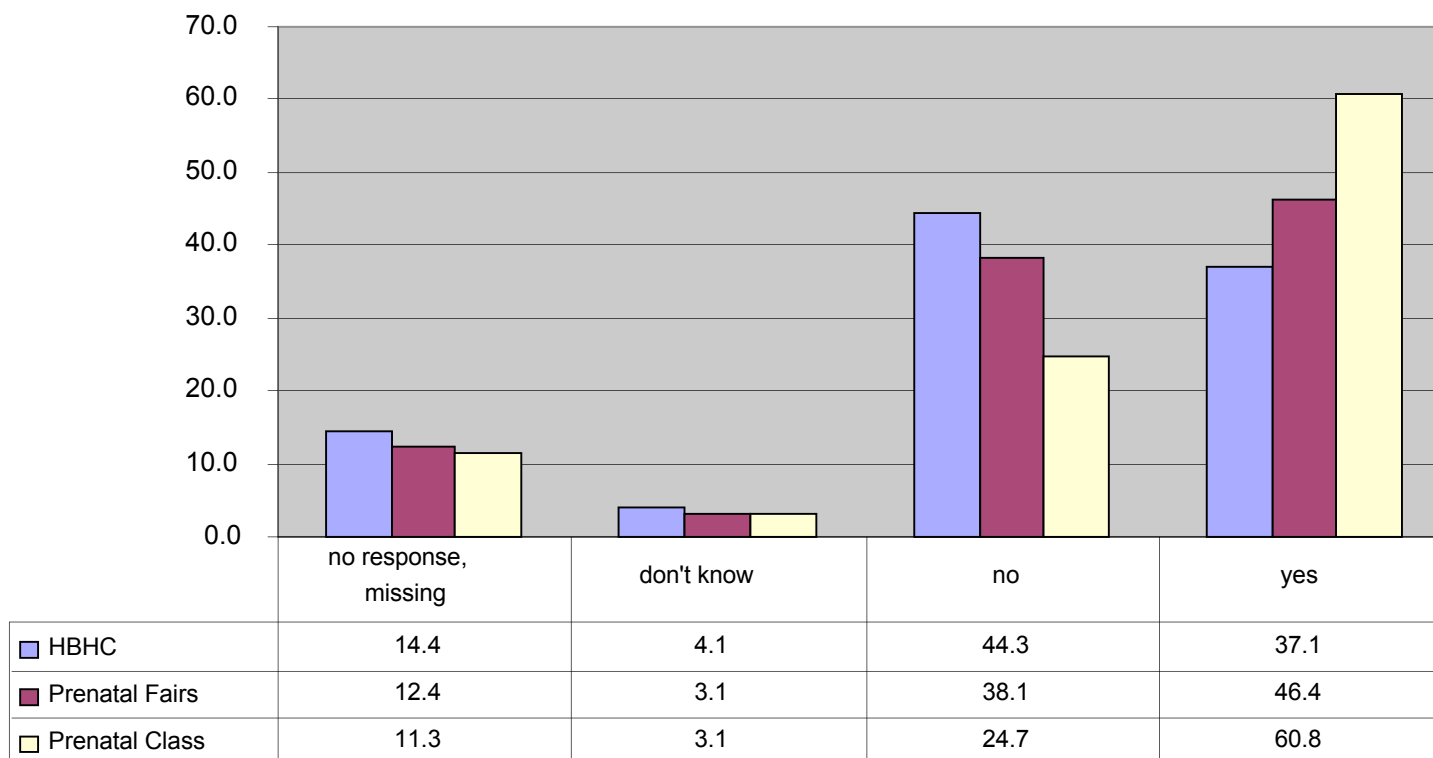
Participants' awareness about public health programs (n=97)



Outreach to Physician Strategy

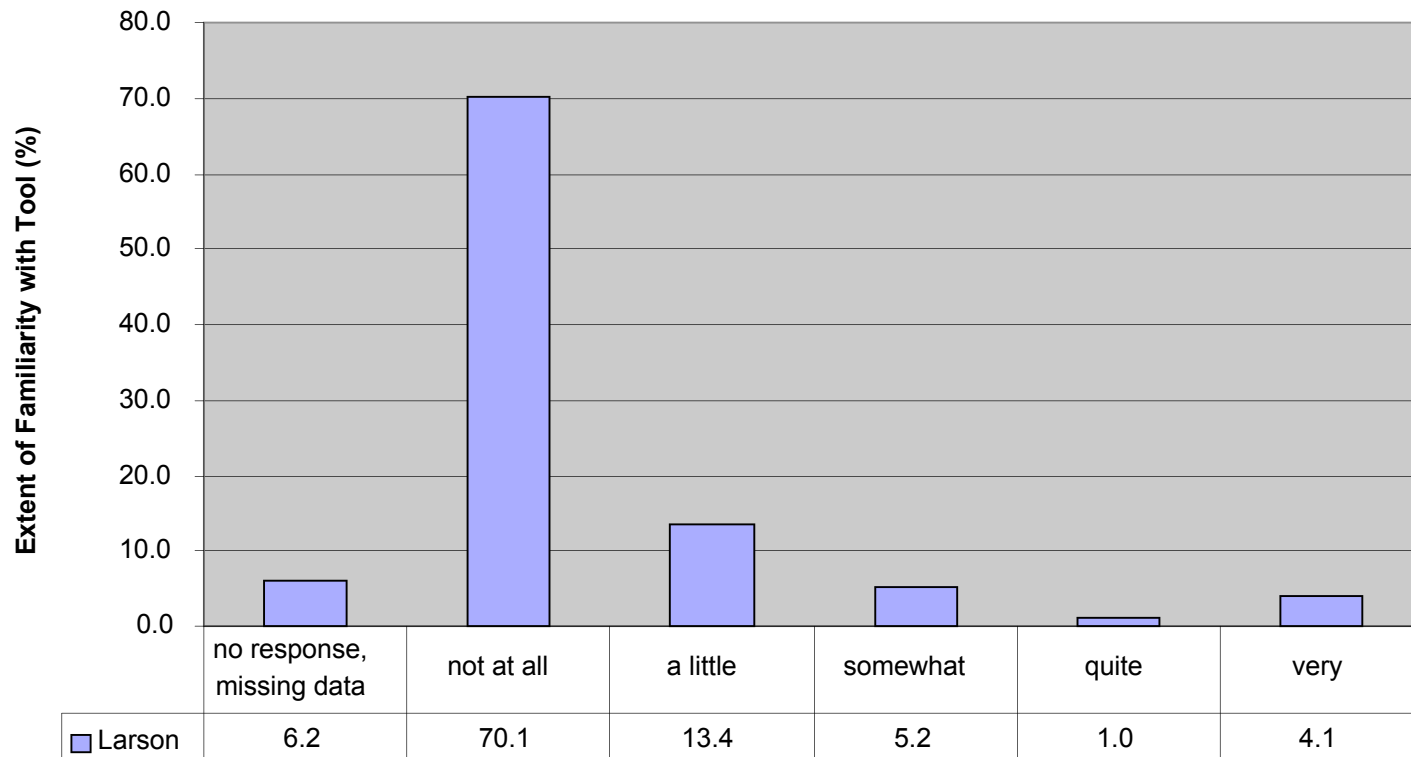
Referral to public health programs (n=97)

% of physicians, nurses and/or receptionists making referrals



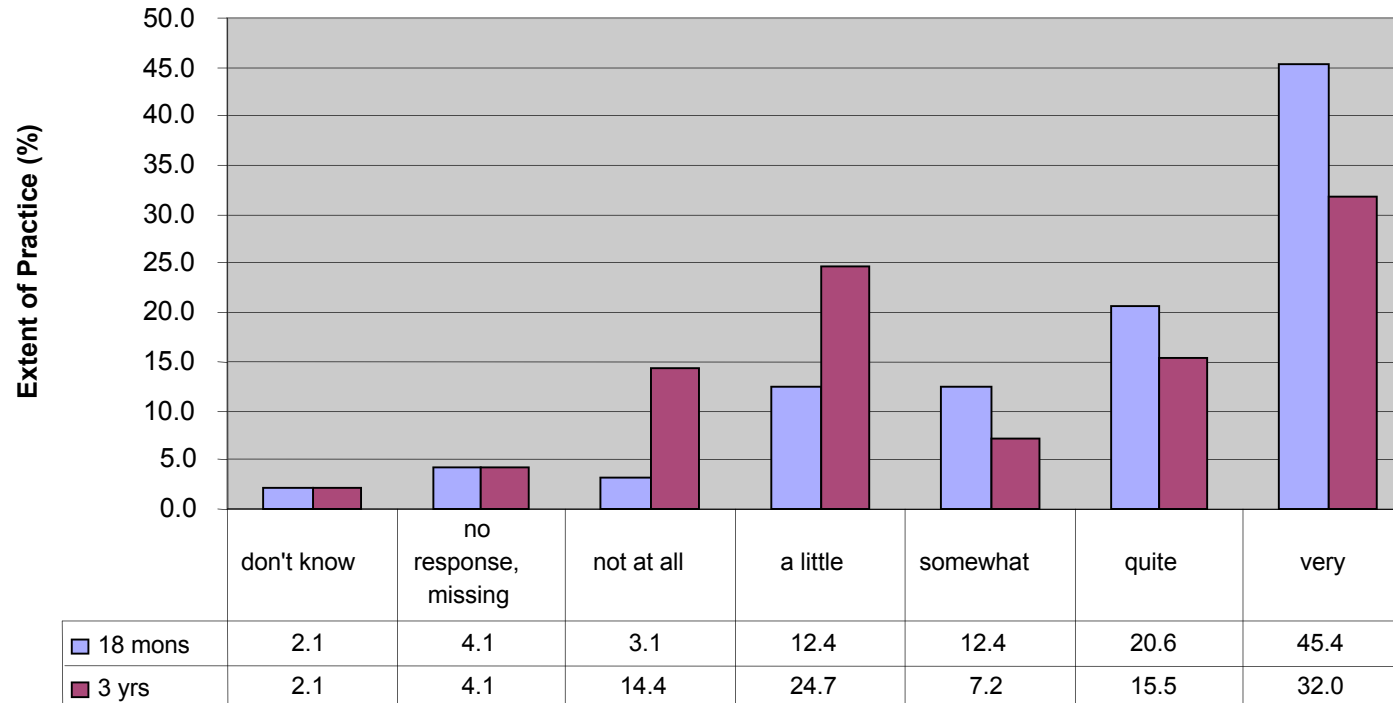
Outreach to Physician Strategy

Participants' familiarity with the Larson Tool (n=97)



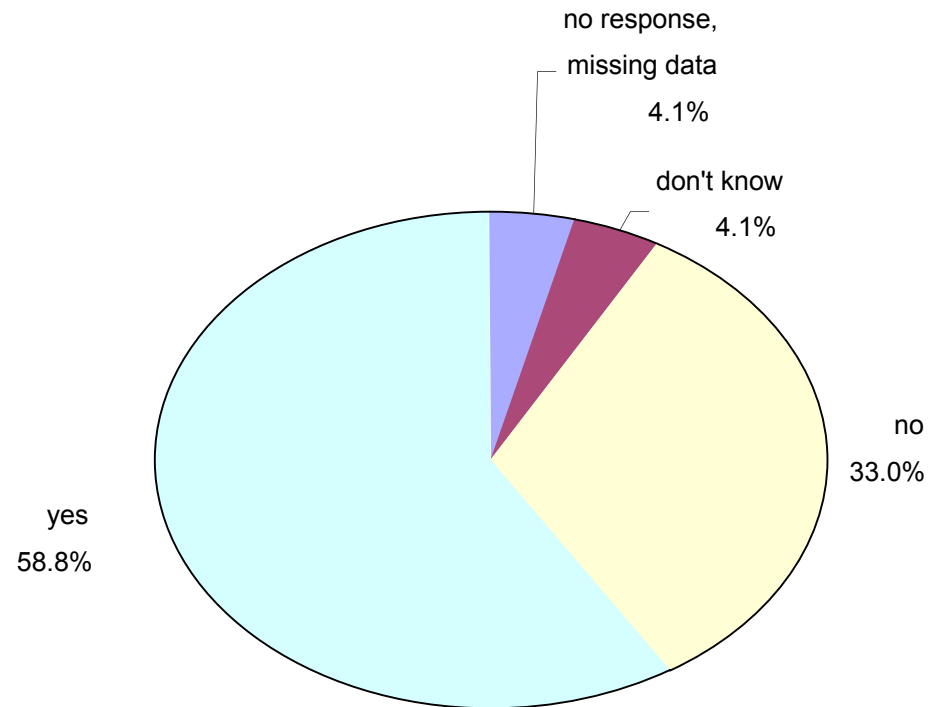
Outreach to Physician Strategy

Participants' screening practices for child development at 18 months and 3 years (n=97)



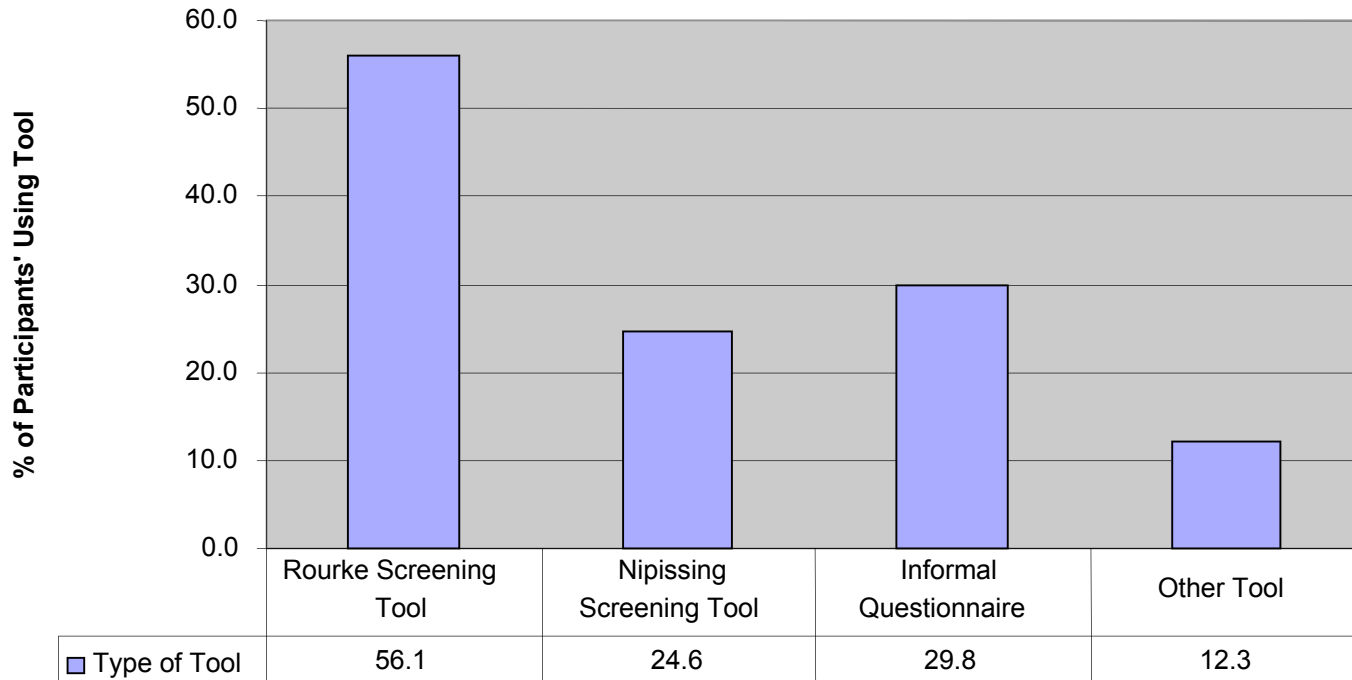
Outreach to Physician Strategy

Participants' use of developmental screening tools (n=97)

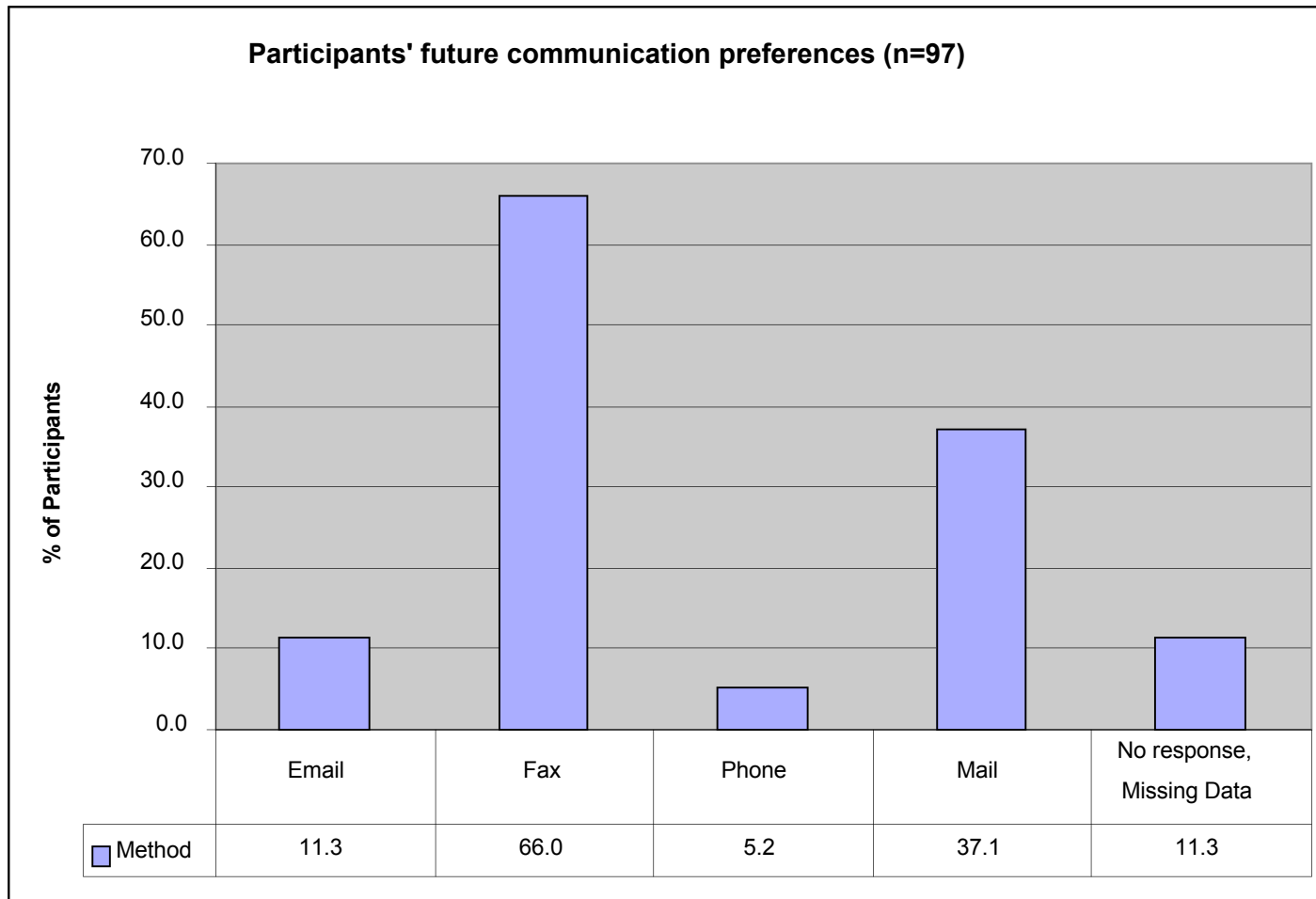


Outreach to Physician Strategy

Participants' use of specific developmental screening tools
(n=57)



Outreach to Physician Strategy



Recommendations

- **Establish monthly tracking of Physician/Obstetrician referrals**
- **Utilize a similar group-based strategy for reaching obstetricians in the future.**
- **Continue to reach out, actively communicating what the HU has to offer to physicians, and building relationships.**

Lessons Learned

- **It was clear that many physicians and their office staff were not well informed about health unit services and resources (such as the Larson tool), and were very receptive and interested in learning what is available.**
- **There was unanimous & enthusiastic agreement that the campaign was effective and worthwhile,**
- **Team members thought the campaign should be repeated every two to three years.**
- **Participants emphasized the importance of the health unit reaching out, actively communicating what the HU has to offer to physicians, and building relationships with them to further common goals.**

WHERE WE ARE TODAY- OCTOBER 2008
