



NutriSTEP® Licensee Progress Check

Case Study Four

Oxford County, Ontario

Fall 2009



Launch of Implementation

April 2008

Geographic Location

Oxford County, Ontario

Focal Audience

Parents of three- to five-year-olds in the community, who attend the annual Preschool Health Fair.

Delivery methods

#	Method	Reach	Implementation Notes
1.	Preschool Health Fair	850	<p>These are held at local churches, where we rent out the space. Parents come from across the county. The parents are a mix of rural and urban, and SES. All children who participate are screened on hearing, vision, speech, dental, weight (BMI), and now nutrition, using NutriSTEP®. It occurs over 35 days, April – June. There is always either a Public Health Nurse or Dietetic Intern assigned to assist parents in completing the tool.</p> <p>At this event, we use a generic child health display that is not specific to NutriSTEP®.</p>

Follow-up methods

Low Risk - No follow-up required. A nutritional information package that includes Eat Right, Be Active and Canada's Food Guide is provided. Parents also have the option of taking a copy of the pamphlet, What to Do if Your Child is Overweight.

Moderate Risk – The same printed nutritional information is provided as for the low risk individuals. If a parent would like more information, they are provided with a County of Oxford Public Health Dietitian's business card, as well as a magnet with the contact information for Eat Right Ontario.

High Risk – These parents get the same information as the moderate risk individuals, plus a referral form is completed for the parent to take to their family physician. Parents are encouraged to make an appointment with their family physician to discuss their child's nutrition. A letter went out to all family physicians and surrounding pediatricians before

screening began so they would be aware of the process. The Public Health Dietitian follows up with all high risk families to determine if they discussed nutrition with their family physician or if they required any further information. However, it is difficult to reach many of the parents as calls are made during office hours.

Implementation team

Job title	Roles	Time Investment
Public Health Nutritionist	All planning and resource development for the NutriSTEP® program. This includes training of PHNs and dietetic interns in the implementation of NutriSTEP®, specifically the referral process and common messages for parents. Planning took very little time because we relied heavily on the information already provided to us in the NutriSTEP® Implementation Toolkit.	April – June (3 months): 1 day per week.
Public Health Nurse (8)	One PHN is responsible for coordinating Preschool Health Fairs. The implementation role for the Health Fairs is shared between 8 PHNs and one dietetic intern (if available).	6 hours per day for 3 days a week for 12 weeks to attend the health fairs and do screening. A fraction of that time is specifically for the NutriSTEP® screening. No nurses were added to do the NutriSTEP® screening in addition to other screenings.
Administration Support	Photocopying forms.	1 hour per week for 12 weeks.

Community partners

There are no official community partners for this event. All media coverage and costs of venue rental are covered by the Health Unit.

Annual Costs (excluding staff)

Expense	Approximate funds required	Source of funds
Printing costs for NutriSTEP® questionnaires (we later discovered we could get them for free from Service Ontario Publications).	\$200	Program funds from Chronic Disease Prevention (school health)

Program challenges, proposed solutions

Challenge encountered	Possible solution, or way to avoid
<p>The addition of NutriSTEP® to the preschool health fairs happened without adding PHN resources to the event. It was thus difficult for the PHNs involved to adequately address NutriSTEP® during their limited time with clients. Many parents prefer to have nutritional feedback and advice on the spot. The PHNs were not always able to do this.</p>	<p>It would be nice to have one or two people dedicated to implementing the NutriSTEP® screening tool exclusively. However, we do not currently have the resources to do this.</p>

Additional support required

The Implementation Toolkit was very helpful. Staffing resources are our main challenge.

Outcomes expected

We will meet the following Ontario Public Health Standards:

Goal: To enable all children to attain and sustain optimal health and developmental potential. Surveillance and Assessment

Outcomes:

- The Board of Health is aware and uses epidemiology to influence the development of healthy public policy and its programs and services for the promotion of healthy child development.
- The Board of Health achieves timely and effective detection and identification of children who are at risk of poor oral health outcomes, their associated risk factors, and emerging trends.

Requirements

1. The Board of Health shall conduct surveillance, including the ongoing collection, collation, analysis, and periodic reporting of population health indicators, as required by the Health Protection and Promotion Act and in accordance with the Population Health Assessment and Surveillance Protocol.

Using NutriSTEP®, we will also:

- Guide our program planning and identify priorities, and
- Look for trends – correlating weight status with NutriSTEP® risk level

Evaluation data

Indicator	Source of data	Collection method	Findings
# attending Fair # completing tool	Information collected by PHNs and dietetic intern attending health fair	Staff participating in health fair submit stats to data analyst	835 children attended Preschool Health Fair in 2009. 821 people were invited to do the NutriSTEP® questionnaire. 3 people refused, 12 people mistakenly took their completed questionnaires home, so they were not available for analysis. 806 completed questionnaires were collected.
# of High, Moderate and Low Risk			682 (84.6%) low risk 96 (11.9%) moderate risk 28 (3.5%) high risk Data correlating BMI and NutriSTEP® score is pending.
Postal codes and community school			The data was inconclusive because we only collected the first part of the postal code to indicate neighbourhood. Using that part of the postal code did not result in a clear relationship between the neighbourhood and results. In the future, more specific geographic data may provide more clear relationships.

"We have received positive feedback from parents at the Preschool Health Fair as they were appreciative for feedback and the resources."

Expansion plans

Desired expansion or enhancement	Barriers to proceeding in this direction?
Use at all future health fairs	So far, no barriers. There is support for this in our organization.
Implementation of NutriSTEP® screening tool at Healthy Babies, Healthy Children Home Visits	Public Health Nurse time