

PROVINCIAL COUNCIL FOR MATERNAL AND CHILD HEALTH

ANNUAL REPORT 2022/23



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ABOUT US

Our Vision

Healthy pregnancies, babies, children and families for lifelong health in Ontario.

Our Mandate

To provide evidence-based and strategic leadership for perinatal, newborn, child and youth health services in Ontario

Our Values

Individual and Family-centred
Collaborative
Inclusive
Equitable
Evidence-informed
Innovative
Systems and Results-focused
Transparent

We achieve our mandate through collaboration with provincial government agencies and organizations, regional perinatal and child health networks, care providers, and patients and families.

PCMCH is funded by the Government of Ontario.

ACKNOWLEDGEMENT OF THE LAND AND FIRST PEOPLES

PCMCH acknowledges the territory of the Haudenosaunee, Wendat and Anishnaabe people on which it operates. This land is governed by the Dish with One Spoon Treaty, which is a nation-to-nation agreement committing these nations to share the territory in peace, friendship and respect. All newcomers are symbolically included in this treaty and in the spirit of these obligations. Today, Toronto is home to Indigenous Peoples from across Turtle Island.

PCMCH recognizes that Indigenous practices of health and well-being have been in place in this territory since time began and are maintained to this day. PCMCH's members, and the many organizations we partner with in our work, are located on traditional Indigenous territories across Ontario. PCMCH is grateful for the opportunity to work and live on this land. We encourage all to reflect on, and acknowledge, the harms and mistakes of the past and to consider how we can each, in our own way, move forward in a spirit of reconciliation and collaboration.

PCMCH remains committed to, and acknowledges responsibility for, building and improving relationships with First Nations, Inuit, and Métis peoples.

LETTER FROM THE CHAIR AND EXECUTIVE DIRECTOR

On behalf of PCMCH, we are proud to share our 2022/23 annual report with you. In this report, you'll read about our most significant achievements of the past year. You will come to realize how wide-ranging PCMCH's work is, from the design of system planning tools such as levels of care criteria and the emergency department paediatric readiness checklist to the generation of resources and webinars to support healthcare providers in offering evidence-based care of the highest quality.

As an organization that focuses on the health and wellbeing of pregnant people, newborns, children, youth and families, PCMCH is dedicated to developing a healthcare system that is not just effective but also one that supports equitable access and health outcomes throughout the province. Ontario is home to diverse populations with wide-ranging healthcare needs. We recognize the imperative to consider issues of equity and diversity, how healthcare inequities have shaped healthcare in the past, and how our work can contribute to a more inclusive system going forward, one in which individuals feel heard, safe and accepted. This year, we made progress in

our journey towards becoming a more inclusive organization and one that supports the provision of equitable healthcare by engaging advisors with lived experience who brought invaluable insights to our work, conducting health equity impact assessments, and releasing resources catered to address the unique needs of equity-deserving communities.

PCMCH could not succeed in its work without the dedication of our team and partners. We thank the PCMCH Secretariat staff for their assured leadership of PCMCH's initiatives throughout the past year. Over 300 people from across the province shared their expertise and passion generously with us on PCMCH's Governing Council, committees and working groups. Their engagement during a very busy time in our healthcare system ensures that the initiatives, resources and information we produce are responsive to the needs of the system and advance PCMCH's vision of healthy pregnancies, babies, children and families for lifelong health in *Ontario.* We look forward to furthering this vision in the year to come.



Bruce Squires Chair



Sanober Diaz Executive Director



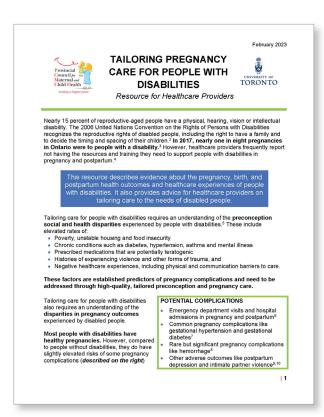
INCLUSIVE AND AFFIRMING CARE FOR DIVERSE POPULATIONS

Promoting diversity and inclusion to advance a safer and more equitable perinatal, newborn, child and youth health system in Ontario is an important aspect of the work we do at PCMCH. Throughout 2022/23, we sought out diverse perspectives when developing new resources for perinatal, child and youth healthcare providers, individuals and families. Each Ontarian has unique needs, experiences and perceptions of the healthcare system that require tailored and person-centred approaches to care. These diverse experiences are influenced by several factors, such as race, health condition, past trauma, sexual orientation, gender identity, as well as the intersecting of these factors.

This past year, PCMCH's work to advance health equity resulted in evidence-based resources that aim to improve perinatal care for people with disabilities and members of the 2SLGBTQIA+ community.

Supporting Accessibility for People with Disabilities

Developed in collaboration with Dr. Hilary Brown, Dr. Yona Lunsky, Dr. Leslie Tarasoff and their team from the University of Toronto, and an Advisory Committee that included people with lived experience of disability and pregnancy, three Disability and Pregnancy resources were released. Aimed at healthcare administrators, healthcare providers and people with disabilities who are planning a pregnancy, pregnant or recently postpartum, each resource addresses potential challenges to pregnancy care that people with disabilities may face, including ableism or physically inaccessible healthcare spaces. They also provide recommendations and a list of other resources to help address such challenges and increase access to care. This information is supported by direct statements from parents with disabilities and healthcare practitioners who have shared their personal experiences of, and aspirations for, perinatal healthcare for people with disabilities.



Involving people with disabilities in the collection of data, interpretation of findings and creation of these [Disability and Pregnancy] resources is critical as it is in keeping with the disability community's call for "nothing about us without us".

Dr. Hilary Brown, study co-author;
 Assistant Professor and Tier 2 Canada
 Research Chair in Disability and
 Reproductive Health, University of Toronto

Improving 2SLGBTQIA+ Care Experiences

The perinatal period can uniquely impact the mental health and wellbeing of 2SLGBTQIA+ people. Previous or anticipated experiences of discrimination and invisibility, as well as system-level inequities, can also impact the quality and safety of perinatal care received by 2SLGBTQIA+ people, potentially undermining their trust in healthcare providers and the health system.

Developed in collaboration with people with lived perinatal care experience, as well as individuals and organizations with clinical and research expertise, PCMCH's Providing Inclusive, Affirming and Safer Perinatal Care to 2SLGBTQIA+ Individuals tip sheet provides evidence-based information, practical examples and a list of continuing education opportunities to promote ongoing learning and training by healthcare providers. PCMCH is developing complementary video resources that will be released later this year that aim to provide insight on the perinatal healthcare experiences of 2SLGBTQIA+ care recipients and providers who have lived experience accessing or working in perinatal healthcare spaces.



Complex Care for Kids Ontario

In 2022/23, over 1,100 children with medical complexity (CMC) were enrolled in Complex Care for Kids Ontario (CCKO) programs at four paediatric hospital lead sites and 16 affiliated community-based clinics across the province. PCMCH launched CCKO, a provincial program, in 2015 with the goal of providing integrated and coordinated care across health and social support services and strengthening community services, which improves access and enables care closer to home. The model of care involves a nurse practitioner-paediatrician dyad partnering with families to provide intensive care coordination and comprehensive plans of care.

The CCKO Leadership Table initiated a number of process improvement and collaboration initiatives in 2022/23, such as standardizing transfer protocols between sites and optimizing the relationship with home and community care coordinators. In addition, a clinical trial published in the *Journal of the American Medical Association* – Pediatrics, in March 2023 compared the effectiveness of CCKO with usual care for children with medical complexity who have chronic conditions and high healthcare needs. Drawing on patient data from 12 clinics across Ontario, CMC engaged with the intervention experienced better care planning and, in the second year, lower total health service costs.

ADVANCING QUALITY AND PATIENT SAFETY

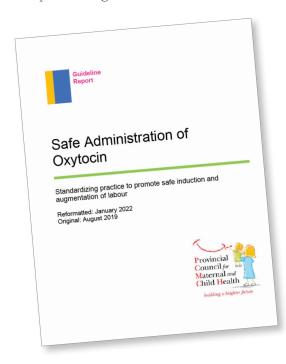
Developing evidence-based recommendations that enhance the quality and safety of care is a key focus for PCMCH. With the engagement of diverse individuals with content expertise and by partnering with other organizations, PCMCH develops and disseminates recommendations, standards, and guidelines to improve outcomes of care in the perinatal, newborn, child and youth health system. Evaluation of our initiatives occurs in a multitude of ways, including through engagement with regional networks and researchers, surveying clinical and administrative leaders and via utilization of a range of health system databases. In 2022-2023, PCMCH continued to pursue areas for quality improvement and monitor how we move the needle on health outcomes.

Oxytocin Administration, Implementation and Evaluation

Oxytocin is a high-alert medication used to induce or augment labour and, as such, it is important to maintain a culture of safety around its use. In 2019, PCMCH developed the *Safe Administration of Oxytocin* guideline report, which outlines 11 best practice recommendations for the management of pregnant patients who have been given oxytocin. Several related tools were included in the report to support hospitals in the implementation of the recommendations.

A survey to evaluate the degree of uptake, effectiveness and utility of the *Safe Administration of Oxytocin* recommendations and tools was sent to all Ontario birthing hospitals in October 2022. The survey also requested information about enablers and barriers experienced by facilities in implementing the recommendations. Data collected by Better Outcomes Registry and Network (BORN) Ontario, which provided comparative information on the implementation of the recommendations at a regional level, was also analyzed.

PCMCH's findings demonstrated that hospitals found value in the recommendations and tools in supporting safe drug administration, providing positive feedback regarding the implementation of the recommendations and tools. Clinical outcome data from BORN Ontario also suggested that the COVID-19 pandemic may have influenced outcome data. PCMCH will continue to monitor this data as the health system recovers from the pandemic. PCMCH also continues to engage with Regional Networks Operational Forum (RNOF) leaders and hospitals in implementing the recommendations.



Fostering Regional Collaboration and Equitable Care

Established by PCMCH in May 2021, the Regional Networks Operational Forum (RNOF) functions as a community of practice with representatives from the six maternal, newborn and child health regional networks across Ontario, Ontario Health, the Ministry of Health, BORN and PCMCH. As project areas and indicators for perinatal and newborn outcomes are identified, regional networks will use BORN data to implement quality improvement across their regions.

Together, the members of RNOF aim to support local planning, coordination among healthcare providers and facilities, and promote the implementation and dissemination of evidence-based guidelines that will enhance the quality of reproductive, newborn and child healthcare in Ontario.

Over the past year, the regional networks progressed in their work to adopt the four provincial priorities set for them by the Ministry of Health: Local Gap Analysis and Planning; Executing Improvements to Care; Connecting/Coordinating Providers; and Informing/Providing Input to Provincial Entities.

As the healthcare system evolves, regional networks continue to adapt and maintain strong working relationships with their partners to address gaps in coordination within their regions and support the provision of equitable care.



STRENGTHENING THE SYSTEM

Many of PCMCH's initiatives aim at strengthening the design and delivery of healthcare across the province by offering planning tools and data. These initiatives aim to better support healthcare providers in their practices and to enhance the quality of care in different settings. Importantly, these initiatives positively impact pregnant people, newborns, children, youth and families in receiving care from the most appropriate care providers, with the appropriate resources, in a coordinated, safe and timely fashion.

Defining Levels of Care Criteria

The Perinatal, Birthing and Newborn levels of care (LOC) definitions and criteria provide guidance on the scope of services, admission criteria and accountabilities of hospitals to ensure that all pregnant people and newborns in Ontario receive high-quality care at the appropriate level. In 2022, PCMCH completed work on updating the Perinatal, Birthing and Newborn LOC

definitions and criteria to reflect current practice and services. With the support of two LOC Task Forces, PCMCH developed a guidance document, which outlines the minimum standard criteria for each LOC for planned births and newborn care, and foundational criteria including informed consent and shared decision-making, Indigenous health and cultural safety, and considerations for transfer and care for those in rural and remote areas. PCMCH also surveyed all hospitals in Ontario that provide perinatal, birthing and newborn care to assess the level(s) of care they can provide with existing resources.

Perinatal, birthing and newborn levels of care designations were assigned to hospitals based on the assessment of existing criteria as declared within hospital survey responses and follow-up discussions between PCMCH and hospitals.

The Perinatal, Birthing and Newborn Levels of Care Guidance Document and Ontario hospitals' Level of Care Designations are available on our website.

Enhancing ED Readiness

It is critical that paediatric patients receive safe and high-quality care regardless of their presenting issue or the geographic location of the Emergency Department (ED). To this end, PCMCH, in partnership with Translating Emergency Knowledge for Kids (TREKK), began work on the Emergency Department Paediatric Readiness (EDPR) initiative in 2017. The EDPR initiative is based on the Emergency Medical Services for Children (EMSC) Program and the National Pediatric Readiness Project (NPRP), which are federal initiatives in the United States. A core component of the NPRP includes the administration of a paediatric readiness checklist to EDs across the United States. PCMCH and TREKK adapted the American checklist and, with the support of an expert panel, incorporated additional questions around mental health and substance use. The EDPR checklist consists of seven domains that cover a broad range of questions, including ED demographics and infrastructure, coordination of patient care, ED staffing and training, quality improvement and patient safety, policies and procedures, paediatric equipment or supplies, and challenges and enablers.

The checklist is not prescriptive, nor does it instruct hospitals about what must be in place to see paediatric patients within their ED. Instead, it is a mechanism for identifying and driving improvements within organizations and the larger healthcare system. After two pilot phases, PCMCH distributed the EDPR checklist to Ontario hospitals in 2022.

The checklist was completed by 66 Ontario hospitals, which in turn provided the facilities with a customized report containing a score based on the information they submitted. This report allows hospital sites to see any areas

for improvement and provided benchmarks against other hospitals with similar volumes that participated in the initiative. In March 2023, PCMCH established an ED Paediatric Readiness Advisory Group to review the findings and identify opportunities for improvement. Following its deliberations, the Advisory Group will offer recommendations for improving ED paediatric readiness in Ontario.

Guiding Urgent and Emergent Transport Decision-Making

In 2022, PCMCH led work in collaboration with provincial system partners, including CritiCall Ontario, Ornge and specialized transport teams, to develop a standard set of definitions and clinical criteria to guide decision-making for the interfacility transport of critically ill newborns and children. The development of an efficient streamlined process was required to ensure that the most qualified and appropriate transport service is dispatched in a timely manner, with the goal to improve neonatal and paediatric patient outcomes. A Provincial Specialized Triage and Dispatch Work Group developed clinical criteria as well as criteria for the selection of the most appropriate transport service. A guidance document was released, which applies to neonatal and paediatric patients with an acute condition where consultation, advice, transfer and/or transport is required because medical, surgical and/or diagnostic care is not available locally.

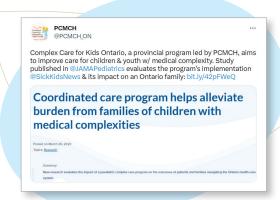
Through PCMCH's Transport Committee, the Work Group's final report was submitted to the Ministry of Health, with the recommendation that the criteria be implemented to facilitate timely access to acute care services to improve patient outcomes.

A YEAR OF ENGAGEMENT

Our most popular social media posts



Transition from Youth to Adult Health Care Services Quality Standard release



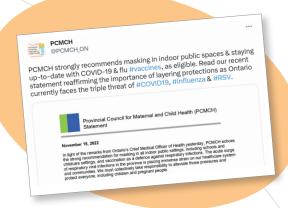
JAMA Pediatrics: Effectiveness of Structured Care Coordination for Children With Medical Complexity: The Complex Care for Kids Ontario (CCKO) Randomized Clinical Trial



Providing Inclusive, Affirming and Safer Perinatal Care to 2SLGBTQIA+ Individuals tip sheet release



Disability and Pregnancy resources release



PCMCH Statement: CMOH's recommendation for masking in indoor public spaces

Our website is accessed from all parts of Ontario and around the world – from as far away as the Philippines, Finland and Argentina.

10

Resources newly released or updated

30%

increase in social media followers





2022/23
BY THE
NUMBERS



300⁺

people who shared their expertise on PCMCH Governing Council, committees and working groups



40,000+

website users



New Publication Launched

Milestones, our quarterly e-newsletter for health-care professionals, policy makers, system planners and anyone interested in building and supporting high-quality perinatal, newborn, child and youth healthcare, was launched in October 2022. The first two issues provided information on new PCMCH resources, interviews with researchers and lived experience advisors who partnered with us, and other developments at PCMCH. Over 2,000 people receive Milestones. Subscribe at: pcmch.on.ca/about-us/newsletter.

Sharing Professional Knowledge

PCMCH's four-part webinar series focusing on Paediatric Diabetes and Paediatric Obesity Management featured respected speakers from across Canada and the U.S. The series covered diverse topics related to current practices and approaches for care of children and youth with diabetes and those who are overweight or obese. Topics included "Evaluation of a Province-Wide Type 1 Diabetes Care Plan for Children in the School Setting" and "Traditional Knowledge-based Lifestyle Interventions in the Prevention of Obesity and Type 2 Diabetes in Indigenous Children in Canada". Over 140 people attended the webinars, which are now available on our website.



GOVERNING COUNCIL AND COMMITTEES 2022-23

Governing Council

Bruce Squires (*Chair*) Jennifer Churchill

Jane Cleve Eyal Cohen

Ronald Cohn

Marilyn Crabtree

Shelley Dougan

Crystal Edwards

Remi Ejiwunmi

Kelly Falzon

Anna Greenberg

Astrid Guttmann

Julia Hanigsberg

Jackie Hubbert

Bernard Lawless

Judy Linton

Cynthia Maxwell

Alex Munter

Sean Murray

Stephanie Redpath

Paul Roumeliotis

Prakesh Shah

Jackie Schleifer-Taylor (Chair)

Alicia St. Hill Nash Syed

Ru Taggar

Kristin Taylor

Ziyaad Vahed

Child & Youth Committee

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Crystal Edwards (Co-chair)

Irene Andress

Teresa Bruni

Michael Casas

Sue Chanko

Darcia Curtis

Bonnie Fleming-Carroll

Michelle Gordon

Anna Gunz

Kerri Hannon

Mona Jabbour

Kimberley McClean

Angelo Mikrogianakis

Caryn Nero

Iulia Orkin

Suzanne Powell

Jennifer Proulx

Adam Rapoport

Shannon Reaume

Rhea Taplan

Natalie Sherritt

Brenda Weitzner

Ian Zenlea

Maternal-Newborn

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Ru Taggar (Co-Chair)

Ellen Blais

Tali Bogler

Elizabeth Brandeis

Lynne-Marie Culliton

Shelley Dougan

Marion DeLand

Crystal Edwards

Susan Ellis

Kelly Falzon

Kerri Hannon

JoAnn Harrold

Wendy Katherine

Kate Miller

Christine Moon

Darlene Rose

Alicia St. Hill

Kristin Taylor

Nisha Walibhai

Mark Walker

Transport Committee

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Stephanie Redpath

(Co-Chair)

Teresa Bruni

Cynthia Cupido

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Marion DeLand

Sonny Dhanani

Julie Gordon

Anna Gunz

Linda Lalani

Kyong-Soon Lee

Indrakshi Narula Caryn Nero

Melissa Roney

Michael Sanderson

Bruce Sawadsky

Danielle Trigatti

Nisha Walibhai

Wendy Whittle

Hilary Whyte

Cleft Lip & Palate/

Craniofacial Dental

Program – Centralized

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Cleft Lip & Palate - Dental Directors

Sub-CommitteeRobert Carmichael

Michael Casas

Gabriella Garisto

Stephanie Lauziere

Becky Olacke

Thomas Oper

Peter Pannozzo

Gordon Payne

Olaf Plotzke

Cleft Lip & Palate/

Craniofacial Dental

Program – Operational Advisory Committee

Mazen Almaoui

Rahil Begg Sonia Blanchet

Tonia Bryans

Rob Carmichael

Stephanie Carter

Michael Casas

Lillian Ciona

Donovan Cooper

Enza Dininio

Kerry Fahey

Gabriella Garisto Karen Kinnear

Bala Kumbakonam

Stephanie Lauziere

Karen Margallo

Christina Mellies

Becky Olacke Thomas Oper

Jeannie Panagiotonpoulous

Peter Pannozzo

Gordon Payne

Olaf Plotzke

Sharon Samaan

Kimberly Taylor Trish Wilson

Complex Care for Kids Ontario (CCKO) Leadership Table

Irene Andress Teresa Bruni Jennifer Churchill Eyal Cohen Paula Crotteau Michelle Gordon Lara Keable-John Chantal Krantz Sophia Lawson Audrey Lim Karyn Lumsden Nathalie Major Lynanne Mason Siobhan McEwen Sean Murray Rahul Ojha Julia Orkin Tanja Patry Diane Paradis Shannon Reaume Ioanna Soscia Rajwant Sousa

Complex Care for Kids (CCKO) Transfer Working Group

Leah Tattum

Katy Eager
Joanna Soscia
Leah Tattum
Sonya Altena
Frances Mahon

Emergency Department Paediatric Readiness Advisory Group

Mona Jabbour (*Co-chair*) Rebecca Liebau (*Co-chair*) Kashif Ahmed Kylie Booth
Andrea Boysen
Amy Burton
Hillary Hewes
Megan Hill
Marion Knutson
Rodrick Lim
Jennifer McTaggart
Julia Orkin
Kristen Raiskums

Amit Shah

Michele Sloss

Maternal Levels of Care (MLOC) Task Force

Nicole Blackman
Katie Forbes
Philip Hough
Lorena Jenks
Kate Miller
Julie Pace
Lauren Rivard
Nisha Walibhai
Monica Weber
Arthur Zaltz

Newborn Levels of Care (NLOC) Task Force

Nicole Blackman
Shâdé Chatrath
Cheryl Clayton
Marion DeLand
Yenge Diambomba
Jackie Girard
Lorena Jenks
Kate Miller
Monica Nicholson
Gillian Yeates

Ontario Paediatric Bariatric Network (OPBN) Performance Measurement and Evaluation Working Group

Katherine Morrison (Co-chair) Ian Zenlea (Co-chair) **Janice Austin** Erin Brown Annick Buchholz Alessandro Gabriele Alice Haasdyk Jill Hamilton Iain Jamieson Audra Jesso Anne MacDiarmid Gina Maloney Bushra Masoom Charmaine Mohipp Haley Nyboer Constance Oates Sinthu Panchadcharadevan Kelly Proulx Andrea Regina Jane Rutherford Michela Savoia

Ontario Paediatric Bariatric Network (OPBN) Advisory

Alene Toulany

Tara West

Jennifer Yu

Committee

Teresa Bruni

Jane Rutherford (*Co-chair*)
Ian Zenlea (*Co-chair*)
Janice Austin
Sarah Barker
Tara Baron

Annick Buchholz Becky Burton Craig Campbell Mary Dyck Alessandro Gabriele Stasia Hadjiyannakis Audra Jesso Allison Lougheed Gina Maloney Gordon McSheffrey Charmaine Mohipp Katherine Morrison Rebecca Noseworthy Haley Nyboer Constance Oates Kyna Patterson Sarah Patterson Kelly Proulx Andrea Regina Michela Savoia Tara West Angelina Wiwczor Marina Ybarra Iennifer Yu

Paediatric Levels of Care Clinical Leads

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Clare Zasowski

Provincial Specialized Transport: Triage and Centralized Dispatch Work Group

Julie Gordon (*Co-chair*) Hilary Whyte (*Co-chair*) Fuad Alnaji Cheryl Aubertin Deborah Barnard Karyn Calwell Cynthia Cupido Jessica Davis Nicole Greaves Anna Gunz Andrew Helmers Tina Janicas Fabiano Medugno Todd Mortimer Kristie Newton Mike Peddle Stephanie Redpath

Shirley Roddick

Lisa Webster

Regional Networks Operational Forum (RNOF)

Natalie Kennedy (*Co-chair*) Darlene Rose (*Co-chair*) Jessie Alsop Tihana Antic Jon Barrett Wendy Carew Rose Cook Angèle Desbiens Kerri Hannon Michelle Healey Lisa Hunter Crystal Lawrence Marnie Lightfoot Kasia Luebke Caryn Nero Julia Orkin Iennifer Proulx Nicole Roberts

Tina Sakr

Transport Operations Group

Cynthia Cupido (*Co-chair*) Kristie Newton (*Co-chair*) Iill Allan Melissa Brett Deborah Barnard Dan Countryman Russell Crocker Jessica Davis Kelly Finlayson Julie Gordon Nicole Greaves Salima Jaffer Lynanne Mason Todd Mortimer Yvonne Morelli Justin Pyke Stephanie Redpath Shirley Roddick Melissa Roney Michael Sanderson Alison Stevenson Danielle Trigatti

Brent Winchcombe
Madeline White

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Lisa Osqui
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