Well Baby Care Clinic Program Evaluation Report

May 2024











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EXECUTIVE SUMMARY

Extensive research and the Developmental Origins of Health and Disease (DOHAD) studies reveal how critical the prenatal and early infancy periods are for long-term health. Despite significant evidence advocating for enhanced care during this time, Kingston's primary care crisis has left many infants in our region without primary care access, forcing them to seek care in urgent care or walk-in settings. This trend was observed at Kingston Health Sciences Centre (KHSC), where it was discovered that a number of newborns born at the hospital were unattached to primary care providers, rising to 22% by late 2023.

In response to this issue, Kingston Community Health Centres (KCHC), in collaboration with Queen's University and KFL&A Public Health, established the Well Baby Care Clinic (WBC) in April 2023 to provide comprehensive and preventative care to unattached babies 18 months and under, diverting them from acute care facilities. The clinic operates two mornings per week and is staffed by nurse practitioners, public health nurses and other health-care professionals, with support from Queen's School of Nursing and KCHC.

The clinic aims to serve as a temporary solution for unattached infants, facilitating referrals to necessary clinical and support services and providing valuable educational opportunities for health-care students. Between April 1, 2023 and March 31, 2024, the clinic served 151 unique clients, providing 355 care encounters. The majority of patients were aged 7-12 months, with a diverse range of socio-economic and ethnic backgrounds.

151 UNIQUE CLIENTS



In order to gain insights into the clinic's performance, impact, and possible opportunities for service improvement, a performance evaluation was conducted using both quantitative data from electronic health records and qualitative feedback from patient and student-learner surveys.

Key findings include high levels of patient satisfaction with regards to access, quality of care and communication. Areas for improvement were also identified, such as increasing clinic availability and enhancing educational resources for parents. Similarly, student-learners reported being satisfied with their learning opportunity and exposure to well-baby appointments.

Findings also show that the clinic has been successful in connecting infants to primary care providers, administering vaccines and referring patients to specialized services. The program has received significant support from partners, including financial contributions for start-up costs. Moving forward, the WBC aims to integrate into a new Health Home in Kingston, anticipated to be operational by Fall 2024.

Overall, the Well Baby Care Clinic addresses a critical gap in primary care for infants in Kingston, demonstrating a model of interprofessional collaboration and preventive care that holds promise for improving long-term health outcomes. The report's key recommendation is not only to keep this option available for unattached patients, but also to expand its offerings by aligning this service to a Maternal and Child Health Strategy.



INTRODUCTION

The prenatal and early infancy periods represent critical windows for health intervention and care, with a wealth of evidence highlighting their profound impact on long-term health outcomes. The significance of quality care during these formative stages is underscored by extensive research, particularly through Developmental Origins of Health and Disease (DOHaD) studies. DOHaD research provides robust evidence supporting the maximization of care and resources during the prenatal and early infancy periods, acknowledging their pivotal role in shaping future health trajectories.

Additionally, the <u>Heckmann equation</u> strengthens the case for prioritizing early childhood interventions from an economic perspective. With a return on investment (ROI) of 13:1, it highlights the potential for substantial long-term savings. In other words, for every dollar invested in the early infancy period, there is a return of thirteen dollars, emphasizing the significant cost-effectiveness of interventions during this critical phase.

However, despite significant evidence supporting enhanced care during prenatal and early infancy stages, an ongoing crisis in our local health-care landscape has left an increasing number of newborns and infants without regular access to primary care providers. This situation is worsened by the stress that parents face in connecting with health-care providers. Due to limited capacity to attach new patients to primary care practices in the area, parents are often obligated to seek routine care and vaccinations for their infants at walk-in clinics and emergency departments with lengthy waiting times.

In 2022 and 2023, approximately 160 newborns per month were delivered at Kingston Health Sciences Centre (KHSC), with an average of 30 (19%) unattached to a primary care provider, increasing to approximately 22% in the last six months of 2023.

22%

of infants born at KHSC were not attached to primary care in 2023

This is an alarming trend, as the first years of a child's life are paramount in establishing the foundation for ongoing health and wellbeing into adulthood. Critical aspects of health and wellness, such as screening, anticipatory guidance for development, healthy active living, injury prevention and immunization, are of paramount importance during the first two years of life. The escalating number of unattached infants in our region not only threatens their ability to access these essential interventions, but also jeopardizes our long-term aim of providing holistic, trauma-informed health care that minimizes or prevents Adverse Childhood Experiences (ACEs), which can profoundly impact future health outcomes. Helping parents minimize ACEs in their home will improve attachment and long-term health outcomes.

In addition to the need for increased accessed to primary care for this population, it is also crucial to create clinical spaces that cater to their diverse needs. These spaces should not only provide opportunities for health-care professionals to hone their clinical competencies, but also actively highlight the importance of preventive care. The experiences of health-care professionals in these clinical settings are crucial for shifting towards a health-care model that prioritizes preventative care. This approach is vital for building a healthier and more resilient community and underscores the importance of creating clinical opportunities focused on developing skills to provide care to patients 18 months and under. As health-care professionals enhance their skills in these clinical spaces, they become agents of transformative change.

The gaps in available primary care services for newborns and babies in Kingston prompted KCHC to intervene and start offering access to unattached families. As a result, KCHC established The Well Baby Care Clinic in September 2022, under the leadership and guidance of Dr. Rupa Patel, Dr. Mary Rowland and Meghan O'Leary, Clinical Director. Initially, KCHC provided care to unattached newborns until April 2023, when the clinic realized the strain and clinical pressures of accommodating these families alongside its already full panel.

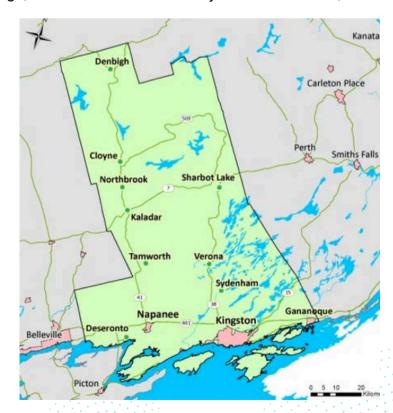
Recognizing the need and benefits of a community-based approach, Queen's University School of Nursing and Department of Pediatrics and KFL&A Public Health aligned with KCHC to explore sustainable options for the Well Baby Care Clinic. The partnership for the Well Baby Care Clinic was officially launched at the KFL&A Public Health location in April 2023 (see Appendix I). In November 2023, Dr. Rupa Patel, in cooperation with FLA OHT Family Physicians, launched an 'OB Wheel' to roster unattached pregnant women to primary care, aiming to reduce the number of unattached newborns in Kingston.

PROGRAM DESCRIPTION

The Well Baby Care Clinic employs an innovative program delivery model developed by KCHC, KFL&A Public Health and Queen's University School of Nursing and Department of Pediatrics (see the Partnership for Well Baby Care Clinic video via the QR code available in Appendix II). This interprofessional clinic, situated at KFL&A Public Health, focuses on delivering comprehensive well-baby visits to unattached babies 18 months and under in a community setting. The clinic is staffed by primary care nurse practitioners employed by Queen's University School of Nursing, with additional support from KFL&A Public Health nurses, as well as physicians and program administration from KCHC. Additionally, the clinic offers clinical exposure opportunities to undergraduate nursing and Primary Health Care Nurse Practitioner students and practicing medical professionals. Operations management and support for the clinic is provided by KCHC and Queen's University School of Nursing.

The aim of the Well Baby Care Clinic is to establish an interdisciplinary clinic that is dedicated to providing comprehensive care for unattached infants within the Frontenac Lennox & Addington Ontario Health Team (FLA OHT) attributable population. This is a population of approximately 220,000 in the region spanning Deseronto, Napanee, Kingston and Gananoque in the south; Denbigh, Sharbot Lake and Cloyne in the north; and

surrounding communities in between. This collaborative initiative aims to superior alternative for accessing well-baby care, effectively diverting unattached infants from acute care settings. such Children's Outpatient Clinic (COPC), clinics walk-in and hospital emergency departments. This clinic, rooted in radical collaboration, not only meets the identified community need for superior well-baby care but offers valuable also clinical opportunities for learners across disciplines. various fostering inclusive and collaborative approach to health-care education and delivery.



Key components of the program model

- 1. Interprofessional Model of Care: The clinic is led by Nurse Practitioners (NPs), with collaborative support from nursing and medical professionals, fostering an interprofessional approach to well-baby care.
- 2. **Preventive Care and Diversion from Acute Care:** A primary goal is to provide preventive care services, diverting newborns from seeking wellness care at acute care facilities.
- 3. Temporary Alternative to Rostered Care: The clinic serves as a temporary alternative for unattached newborns to access care, preventing delays in necessary health care for infants.
- 4. Referral and Connection to Clinical and Support Services: Families and children identified as needing more intensive support are connected to KCHC and other community agencies through the Well Baby Care Clinic, ensuring a holistic approach to health care.
- 5. Educational Opportunities: The clinic serves as a valuable educational experience for health sciences students, including those in the MD program, nursing/nurse practitioner programs, and postgraduate medical trainees. This ensures the provision of high-quality experience in well-baby care, preventive care and anticipatory guidance.

Services provided

The Well Baby Care Clinic is committed to providing inclusive and culturally safe services to the diverse FLA OHT attributable population. This commitment extends to ensuring that our comprehensive well-baby care services are available in multiple languages, embracing the rich linguistic diversity of our community.

The clinic operates two mornings per week (Wednesday and Thursday) between 9 a.m. and 12 noon. There is no need for a referral. Appointments can be booked by phone or online. Each baby is provided with a 30-minute appointment.

The Well Baby Care Clinic provides the following services:

- Wellness care (guided by Rourke Baby Record checklist)
- · Growth and development monitoring
- Milestone screening
- Immunizations and vaccines
- Referral(s) to developmental-based services, pediatrician or other specialist(s) as needed
- Prescriptions as needed
- · Connection to child/parenting resources at KFL&A Public Health and in the community

Resources

The establishment of this collaborative clinic was made possible through generous in-kind and/or financial support from key partners, namely Kingston Community Health Centres, Queen's University and KFL&A Public Health.

We are especially grateful to Queen's University Department of Pediatrics and the Chair in Pediatric Education and Research for their generous contribution of \$50,000 in start-up funding for a one-year period to facilitate the initial setup and development of the clinic. Additionally, Queen's University School of Nursing has been instrumental in providing ongoing administration and staffing of clinical roles to enable professional, compassionate and holistic delivery of services. This collaborative funding and service delivery approach underscores the commitment of multiple stakeholders in ensuring the program's success and sustainability.

The longer-term goal for the Well Baby Care Clinic is for it to seamlessly integrate into a new Health Home that was recently funded in Kingston once it begins operation. Health Homes are central hubs where a team of health-care professionals provides holistic, comprehensive and coordinated care to support an individual's health and wellness throughout their life. We anticipate the new Health Home, Midtown Kingston Health Home, a site of KCHC, will be operational in the Fall of 2024.

Please refer to Appendix III for an overview of Well Baby Care Clinic's Year 1 operating costs.



EVALUATION

An evaluation of the Well Baby Care Clinic, covering services provided from April 1, 2023 to March 31, 2024, was conducted to gain insights into the clinic's performance, impact and opportunities for improvement. The evaluation employed both quantitative data and qualitative feedback to provide a comprehensive overview of key aspects of the project, as well as overall performance. The insights gained will inform the current evaluation and guide future stages and improvements, ensuring the clinic adapts to evolving needs.

The quantitative evaluation uses data derived from the KCHC Electronic Medical Records (EMR) system and KFL&A Public Health registers and takes into consideration services provided, vaccines administered, total number of patients served, and associated demographic characteristics. Special attention was given to identifying and understanding the needs of vulnerable groups within the population served, ensuring a nuanced understanding of the project's impact on diverse communities.

Qualitative feedback was gathered through experiential surveys designed to capture the perspectives of both the patients and the students engaged in learning opportunities at the clinic. These surveys explored various aspects of the project, including the overall experience of patients, the quality of services rendered by providers and learners, and the effectiveness of the educational component related to clinical placements for health-care students.

The evaluation assessed the following two key areas:

- **1. Patient Experience:** The patient experience was assessed through feedback on their overall satisfaction and comfort levels with the clinic, as well as evaluating the effectiveness of communication between health-care providers and patients (Appendix VIII).
- **2. Educational Component for Clinical Placements:** The educational component assessed the experiences of health-care students during clinical placements, including the quality and effectiveness of educational activities, capturing valuable insights to enhance the educational experience for future health-care professionals (Appendix VII).

KEY FINDINGS

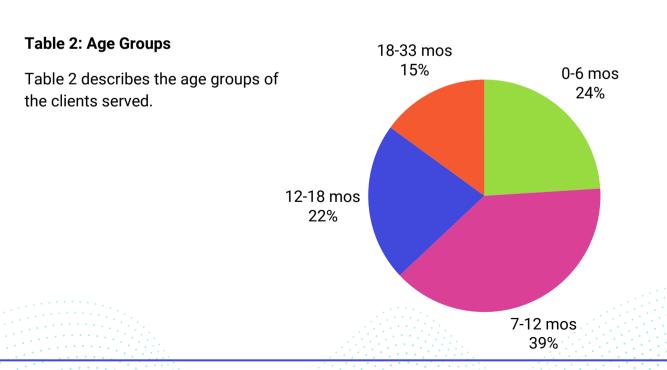
The Well Baby Care Clinic welcomed a total of 151 unique clients from April 1, 2023 to March 31, 2024, resulting in a total of 355 visits during this period. Table 1 shows the number of visits by patients.

50
40
30
20
10
0
1 2 3 4 5

Number of visits per patient

Table 1: Number of Visits Per Patient

The average number of visits was 2.4, which varied based on the age of the patient at the time they entered the program.



During this timeframe, the clinic served 10 patients who identify as Indigenous, First Nations, Metis or mixed heritage according to electronic medical record data.

Table 3: Cultural Backgrounds

Data pulled from electronic medical records.

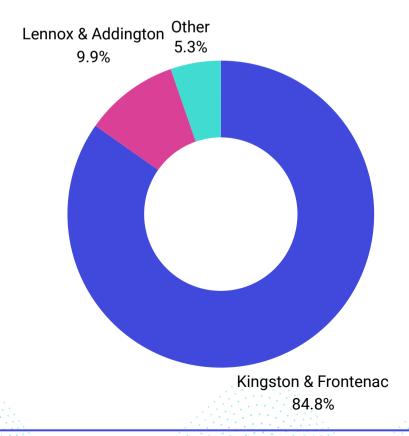
Race / Ethnicity	Number of Unique Clients	Percentage of Clients
White - North American	55	36%
White - European	15	10%
White - North American and Spanish	1	1%
White - North American and North African	1	1%
Black - African	10	7%
Black - Caribbean	1	1%
Asian - South East	8	5%
Asian - East	7	5%
Asian - South	6	4%
Mixed Heritage	6	4%
Latin American	3	2%
Latin American/Caucasian	1	1%
Middle Eastern	2	1%
First Nations	2	1%
Indigenous/Aboriginal	1	1%
Métis	1	1%
Do not know	4	3%
Prefer not to answer	27	18%
	151	100%

Geographically, 134 clients (89%), representing a vast majority, reported residing in Kingston and the surrounding areas, including Odessa and Amherstview, whereas 16 clients (11%) reported residing in areas outside of Kingston, such as Shannonville, Napanee, Belleville, Gananoque, Petawawa, Eganville and Lanark. Based on electronic medical record information, 136 unique clients (90%) are from FSAs within the FLA OHT and 15 (10%) are from FSAs outside the FLA OHT area.

Table 4: Postal Codes

Postal Codes	Number of Unique Clients	Percentage of Clients
K7M	45	30%
K7K	40	26%
K7P	21	14%
K7L	13	9%
K0H	9	6%
K7N	6	4%
K0K	6	4%
K7R	3	2%
K8N	2	1%
K7G	2	1%
K8H	1	1%
K0J	1	1%
K0G	1	1%
Blank	1	1%
	151	100%

Table 5: Geographic Location

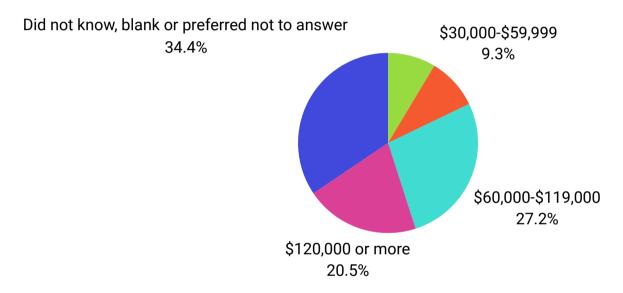


With regards to socioeconomic status, 98 clients (65%) resided in Forward Sortation Areas (FSAs), identified as having high material resources marginalization according to the Ontario Marginalization Index Map. Furthermore, 119 clients (79%) lived in FSAs with high marginalization in the domain of racialized and newcomer populations.

The electronic medical record system data captured household income for 99 unique clients. Of this data, 27 respondents (27%) reported a household income lower than the median for the Kingston Census Metropolitan Area (CMA), which was \$73,500 in 2020.

Table 6: Household Income Distribution

The household income distribution of clients, based on the electronic medical record information, varied as follows:



Services

Vaccination

Vaccination has been proven to be one of the most cost-effective measures for preventing diseases and promoting wellness throughout the lifespan. In the KFLA region, public health plays a crucial role in offering vaccine services, with a focus on individuals without access to primary care. From April 1, 2023 to April 30, 2024, the KFL&A Public Health routine immunization clinic provided services to 670 children aged 0-4, resulting in 850 unique visits and a total of 1725 routine childhood vaccinations administered. Individuals presenting to these routine vaccine clinics still often experience barriers to accessing important primary well-baby care.

Referrals

Through the Well Baby Care Clinic, 28 referrals were made to various services to address needs identified during comprehensive physical assessments at the clinic. Refer to Table 7 for a breakdown of these referrals.

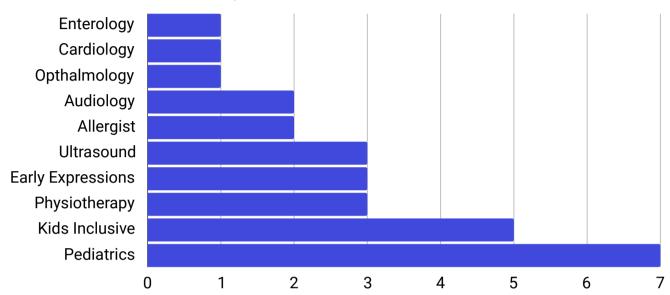


Table 7: Number of Referrals by Service

Follow-Up Care

While the Well Baby Care Clinic was intended for well-baby visits, clinicians offered follow-up care as appropriate and necessary. In terms of service and follow-up care required:

- · 2 were sent for Ultrasound
- 1 was sent for an Echography
- 19 babies were connected to an NP or MD through the Well Baby Care Clinic directly for rostering to ongoing primary care in recognition of complex medical needs



Patient Experience

The patient satisfaction survey was designed to collect feedback on various aspects of the Well Baby Care Clinic. Through the analysis of 49 individual survey responses (see Appendix VIII) over six weeks, we gained insights into perceived access, quality of care and communication. The survey link was included in appointment reminder emails, however most respondents completed it using a tablet at the clinic after their appointment. The survey consisted of Likert scale questions, open-ended questions, and an option for additional comments.

Key Findings

1. Access

- 98% of respondents reported being able to schedule an appointment when needed and found the booking process to be 'easy'
- 100% of respondents found the location easy to get to
- Most respondents (75%) learned about the clinic through KGH, Hotel Dieu or Midwives
- The survey results also indicated that if the Well Baby Care Clinic were not available, more than half of its intended users would be accessing walk-in and/or children's outpatient clinics. Another 49% reported they would be accessing the KHSC Emergency Department at Kingston General Hospital, the Urgent Care Centre at Hotel Dieu, or KFL&A Public Health for immunizations specifically.

100%

of respondents found the location easy to get to

980/0

of respondents reported being able to schedule an appointment when needed

"We are a military family, and this provides an invaluable service to us, having a newborn and no family doctor."

2. Quality of Care

- When asked if they felt their health-care provider addressed their health-care needs, 86% responded 'very well'
- 75% of the respondents agree that their overall experience of the appointment was 'excellent'
- 28 respondents were connected to other services through the Well Baby Care Clinic, including breastfeeding support, audiology, EarlyON playgroups, Kids Inclusive, physiotherapy, allergist, Parenting in KFL&A, and out of town pediatricians

3. Communication

 96% of respondents reported being aware that the Well Baby Care Clinic does not provide ongoing or urgent care, while all but one respondent knew where to access care for other health care needs, such as urgent care.

100%

of respondents agree that the Well Baby Care Clinic is currently meeting their needs **92**%

of respondents would 'definitely' recommend the service to others

Areas for Improvement

While the overall feedback is overwhelmingly positive, a couple of areas were identified where we can strive for enhancement, specifically more clinic time availability and more education (developmental expectations, post-partum, vaccine schedule, etc.).

The results of the patient satisfaction survey indicate a high level of satisfaction with our services. We are encouraged by the positive feedback and are committed to continually improving our services to meet the evolving needs of our patients.

"Everyone is so kind and knowledgeable, all questions are answered in an easy-to-understand way."

Learner Experience

Since its inception, the Well Baby Care Clinic has provided clinical placements for undergraduate nursing students and graduate primary health care nurse practitioner students (PHCNP) from Queen's University School of Nursing. Five undergraduate and two graduate NP students completed a placement at the clinic. Additionally, 17 undergraduate nursing students and one medical administrative student completed a one-day observership.

Throughout their placement, the NP students saw patients and completed the well-baby visit in consultation with the attending NP, which helped them build clinical confidence.

Overall, students reported that the placement provided them with positive learning opportunities, and they would recommend the clinic as a great placement that facilitated their learning needs (see Appendix VII).

"The preceptors and staff in the clinic promoted a healthy work environment. I was able to work with NPs and Family Physicians."

"Long appointments left time to learn, one-on-one time with the NPs was good, lots of opportunities for observing and being observed during care."

RECOMMENDATIONS

Based on the comprehensive evaluation of the Well Baby Care Clinic and an in-depth analysis of patient needs and the community resources available, a series of 10 recommendations have been formulated (listed in no particular order of priority):

- Expand Clinic Hours and Availability: To accommodate the increasing number of unattached infants and meet community demand, the Well Baby Care Clinic should consider extending its hours and increasing the number of days it operates each week. This expansion would reduce wait times and enhance access for more families.
- Enhance Parent Education: Develop and provide comprehensive educational resources
 for parents on topics such as developmental milestones, postpartum care, and
 vaccination schedules. These resources could include workshops, printed materials,
 and online content to better equip parents with the knowledge needed to support their
 children's health.
- Strengthen Community Outreach: Increase efforts to raise awareness about the Well Baby Care Clinic and its services among local health-care providers, midwives and community organizations. This could involve targeted marketing campaigns, partnerships and informational sessions to ensure that families in need in our community are aware of and can access the clinic.
- Increase Interprofessional Training Opportunities: Expand the educational component
 of the clinic by offering more clinical placements and training opportunities for students
 across various health-care disciplines. This will not only enhance the learning
 experience for students but also ensure a steady influx of trained professionals who are
 well-versed in infant care.
- Connection to Primary Care: Seamlessly integrate the Well Baby Care Clinic into the new health home in Kingston once it becomes operational. This integration should focus on maintaining the clinic's core services while leveraging the additional resources and support provided by the health home to enhance overall care quality.
- Develop Follow-Up Care Protocols: Establish clear protocols for follow-up care and ongoing support for infants once they are initially seen at the clinic. This includes setting up regular check-ins, monitoring growth and development and ensuring timely referrals to specialists if needed.

- Expand Multilingual Services: Ensure that all services and educational materials are available in multiple languages to cater to Kingston's diverse population. Providing culturally sensitive care and communication is essential for effectively reaching and serving all community members.
- Conduct Regular Evaluations and Feedback Loops: Implement a robust system for continuous evaluation of the clinic's services through regular patient and provider feedback. This will help identify areas for improvement, track progress and ensure that the clinic adapts to evolving community needs.
- Secure Sustainable Funding: Seek additional funding sources to expand upon the Well Baby Care Clinic and implement a Maternal and Child Centre. This may involve expanding the partnership to collaborate more widely with organizations involved in supporting women before they become pregnant, as well as nurturing the parent-child attachment.
- **Promote Preventive Health Programs:** Emphasize preventive health measures through community education and outreach programs. By promoting the importance of early and regular well-baby visits, the clinic can help prevent adverse childhood events and foster healthier long-term outcomes for our community's children.

These recommendations aim to enhance quality of care, improve accessibility and optimize the use of existing resources to better serve the community. By addressing identified gaps and leveraging available support systems, these recommendations seek to ensure that the clinic continues to meet evolving community needs and strengthens its role within the broader health-care landscape in our region.

CONCLUSIONS

Research consistency shows the critical importance of care during the prenatal and early infancy periods, with long-term health outcomes significantly impacted by the quality of care received in these periods. DOHaD studies highlight the need to maximize care and resources during these crucial stages. Parenting support in the early years may mitigate development of ACEs and high stress homes. The Heckmann equation further emphasizes this by demonstrating a return on investment (ROI) of 13:1 for early childhood interventions, indicating that every dollar spent in early infancy saves 13 dollars later on. The Well Baby Care Clinic plays a critical role in improving family health outcomes by filling the growing gap in primary care services for unattached pregnant women and babies 18 months and under in Kingston. Furthermore, the clinic alleviates pressure on acute care settings and ensures essential health needs are met during this formative period. The collaboration between KCHC, Queen's University and KFL&A Public Health underscores the significance of community-based solutions and interprofessional collaboration in health care.

The Well Baby Care Clinic's success is evidenced by high levels of patient satisfaction, the number of infants who benefited from primary care services, and the extensive range of services provided. Both quantitative and qualitative evaluations highlight the clinic's impact and also identify areas for further enhancement, ensuring continuous improvement and adaptation to community needs. To enhance the Well Baby Care Clinic's impact, recommendations include expanding clinic hours, increasing parent education and strengthening community outreach. Additionally, integrating the clinic within Kingston's new health home, securing sustainable funding and emphasizing preventive health programs will ensure long-term success. Regular evaluations and the expansion of multilingual services and interprofessional training opportunities are also essential to meet the evolving needs of the community.

As the Well Baby Care Clinic prepares to integrate into Midtown Kingston Health Home, a site of KCHC and a new health home in Kingston, it sets a precedent for future initiatives aimed at improving early childhood health interventions. The commitment from multiple stakeholders and the clinic's innovative model of care are crucial for fostering a healthier community. The Well Baby Care Clinic not only addresses immediate health care needs but also contributes to long-term health trajectories, demonstrating the profound importance of investing in early childhood care through a primary care lens.

"It is such a rewarding experience to work as part of the partnership for the Well Baby Care Clinic. We have some challenges staying up with the demand of these services and being able to provide appointments for the overwhelming number of babies without primary care providers. We knew there was a need for well-baby checks for unattached infants, but were surprised by the number of babies requiring these services. We have had such a positive response from the parents who appreciate our services and are happy they have a clinic to book appointments for the necessary wellness checks and immunizations."

- Leyna Ramsahoye
Program Administrator, Partnership for Well Baby Care Clinic

APPENDICES

Appendix I: Partnership for Well Baby Care Clinic Promotional Poster

No primary care provider (doctor or nurse practitioner) for your baby?

Well Baby Care Clinic

KFL&A Public Health, 221 Portsmouth Ave., Kingston

The Partnership for Well Baby Care is a collaboration of these Frontenac, Lennox & Addington Ontario Health Team partners: Kingston Community Health Centres, KFL&A Public Health, Queen's University School of Nursing and Department of Pediatrics.



What to expect

You will see a nurse practitioner (NP) or physician at your visit for well baby care and immunizations.

You will not be assigned a doctor or NP at this clinic for ongoing care.

This clinic is not for urgent issues.

Between visits

Care



Call Health811 by dialing 811



Visit RightPlaceRightCare.ca for health issues between visits or call your local pharmacy for common ailment follow-up



Questions



Speak with a nurse with Parenting in KFL&A by phone 613-549-1154 or email parenting@kflaph.ca



Scan QR code to book your appointment

If unable to scan visit: bit.ly/NewbornClinic

For cancellations, or to reschedule call 613-484-7732











Appendix II: Partnership for Well Baby Care Clinic Video



Appendix III: Well Baby Program Start-up and Operating Budget

Year 1 start-up budget that supported start-up costs and operations and served 151 clients for 355 encounters at the Well Baby Care Clinic at a cost of approximately \$261 per visit.

BUDGET ITEM	COST	NOTES
Program Materials	\$250	Client resources
Clinical Equipment	\$2,662	Setup equipment in-kind from KCHC: otoscope and ophthalmoscope, baby scale, etc.
Medical Supplies	\$500	In-kind public health; includes supplies for Public Health immunization clinics
Community Travel	\$100	Not covering client travel for this model, except in exceptional cases, by KCHC bus ticket or taxi chits
Supplies, Printing, Stationery & Office	\$150	In-kind from KCHC
IT Equipment	\$8,150	In-kind from KCHC; Year 1: 3 laptops (1 admin, 2 NP); multi- function printer, label maker, etc.
Telephone/Alarm	\$1,000	In-kind from KCHC: cell phone for program
IT Support	In-kind	Overhead cost; \$5,000 in-kind from KCHC: EMR costs, onboarding/training, EMR support, data support, reporting, etc.
Rent	In-kind	Overhead cost; \$38,019 in-kind from KFL&A Public Health
Total Operating Costs	\$12,812	
NP Salaries, Wages & Benefits	\$30,000	NP working 8 hours/week @\$67.13/hour + 4% in lieu of benefits
Public Health Nurse and RPN for immunization	In-kind	\$18,500 in-kind from KFL&A Public Health at \$49.04/hour + 25% benefits and \$41.03/hour + 25% benefits
Program Admin Salaries & Benefits	\$50,000	Funds from Queen's University Department of Pediatrics. 1 FTE program administrative \$58,258 + 23% benefits
Total Salaries	\$80,000	
Total Budget	\$92,812	Total Operating Costs + Total Salaries

Appendix IV: Annual Regional Program Operating Budget

This budget represents true costs to run programming annually for the Well Baby Care Clinic, along with the KFL&A Public Health childhood immunizations, and the regional OB wheel offering prenatal intake and attachment to primary care for unattached pregnant women. With an annual budget of \$189,647, the approximate cost would be \$210 per visit if we provide 900 visits, which is what we anticipate for 2024/25 fiscal year.

BUDGET ITEM	COST	NOTES
Program Materials	\$100	Client resources
Clinical Equipment	\$1,500	Examples like otoscope and ophthalmoscope, baby scale, etc.
Medical Supplies	\$500	Supplies for Public Health immunization clinics
Community Travel	\$100	Not covering client travel for this model, except in exceptional cases, by KCHC bus ticket or taxi chits
Supplies, Printing, Stationery & Office	\$100	
IT Equipment	\$3,000	Replacement and maintenance
Telephone/Alarm	\$1,000	Cell phone for program
IT Support	In-kind	Overhead cost; \$5,000 In kind from KCHC: EMR costs, on- boarding/training, EMR support, data support, reporting etc
Rent	In-kind	Overhead cost; \$38,019 in-kind from KFL&A Public Health calculated as \$20/sq. ft. Daily rate of \$104.16
Total Operating Costs	\$6,300	
NP Salaries, Wages & Benefits	\$76,240	Based on NPs working 21 hours/week @\$67.13/hour + 4% in lieu of benefits
MD Program Lead	\$16,950	Lead OB wheel admin triage and intake appointments for unattached pregnant women
Public Health Nurse and RPN for immunization	\$18,500	Public Health staff at \$49.04/hour + 25% benefits and \$41.03/hour + 25% benefits
Program Admin Salaries & Benefits	\$71,657	1 FTE program administrative \$58,258 + 23% benefits
Total Salaries	\$183,347	
Total Budget	\$189,647	Total Operating Costs + Total Salaries

Appendix V: Well Baby Care Clinic Logic Model

Population Activities Inputs Outputs # of unattached newborns directed Vaccination Services **Human resources** to this clinic Provide routine immunizations for Management team (Program patients between 2 - 18 months. administrator [KCHC], project lead [Oueen's]) # of unique babies with care Clinical Team (Nurse practitioners, **Patient Education** public health nurses, physicians) Providence patient education Queen's Health Sciences Student focusing on: # of clinic visits Learners (NP, BNSc, medicine) **Developmental milestones** Feeding **Financial Resources Immunization KCHC** # of patients with complete Queens vaccination scheme for their age KFLA PH In-Kind Linking and Referring to Other Services **Partnerships & Communication** # and type of communication with Linking patients to other wellness Resources programs services available in the region **KCHC** KFL&A PH Refer patients that need more complex care to the service they **Oueens** # of patients linked to other need. OHT wellness services **KHSC** Unattached **Community Midwives** patients 18 Clinical Assessments # of patients with complementary months and **Technical Support** Provide comprehensive well-baby studies (labs, usg, x-ray) under KCHC IT department exams and developmental assessments. **Space and Supplies** Request complemental studies # of referrals to other services KFL&A PH - Clinic (in-kind) (labs, usg, X-ray) if needed (specialist, nutrition, etc.) KCHC - Clinic supplies & IT equipment **Clinical Placement** # of students that do their Data Provide clinical placement placement in the project KCHC EMR opportunities for Queen's KFL&A Data University Health Sciences Queen's University % of services provided by students students in the provision of high-**KHSC Data** quality experience in the provision **Experience Survey** of well infant care, preventative # of competencies developed by OHT care and anticipatory guidance. students

Positive experience of people and their families with programs and support in the community

· Reported access to programs, involvement in decision making, perception of how care is organized and ability to have someone to count on if a need arises. Data: Patient experience survey

Positive experience of providers with integrated care

• Reported care coordination experience; burnout and overall satisfaction; experience of integration of care. Data: Provider experience survey; interviews

Enhanced health and wellness

• Indicators: Health-related quality of life. ED-5 from Patient Survey

Increased use of and access to required health home and health neighbourhood programs

- Enhanced access to and use of home and community care. Indicators: # of PSWs, # nursing, # allied health, time to access home care
- Enhanced access to and use of community supports (# of community programs accessed)
- Enhanced access to and use of primary care physicians and team members (# of physician visits, # and type of IHP visits)

Reduced use of institutional care (hospitalization, emergency department visits and LTC)

• Indicators: # family doctor visits; # LTC referrals; # LTC admission; # ED visits; unplanned hospitalizations; Ambulatory Sensitive Hospitalizations (TPA); ALC Days (cQUIP)

Appendix VI: Well Baby Care Clinic Model

The Well Baby Care Clinic









How it all started...



LEAD CONCERN

Kingston's primary care crisis:

- 19% of newborns unattached to primary care providers in 2022 Increased to 22% in the last 6 months of
- 2023
- Pushed newborns to acute care settings.



GOAL

To address a critical gap in primary care for unattached infants in Kingston, demonstrating a model of interprofessional collaboration and preventive care that holds promise for improving long-term health outcomes.



INTERVENTION

In April 2023, Kingston Community Health Centres (KCHC), in collaboration with Queen's University and KFLA Public Health, established the Well Baby Care (WBC) clinic for infants under 18 months.

IMPACT

Without the WBC clinic:

. Over half of its intended users would be accessing walk-in and/or children's outpatient clinics. 49% would be accessing KGH Emergency department, Hotel Dieu ER, and Public Health for immunizations



From April 2023 to April 2024 the WBC clinic:

- . Welcomed 151 unique clients and provided 355 encounters, with the most frequently served age group being 7-12 months (39%)
- Made 28 referrals were to different services and
- Administered 641 total vaccines

92% of patients who responded to our survey said they would 'definitely' recommend the service to others

How we are filling the gaps...



Care

4

Model of Care Alternative



Referrals to



Screening, anticipatory guidance for development, healthy active living, injury prevention, and immunizations can improve long-term health autcomes and reduce Adverse Childhood Events (ACEs) in children under the age of 2.

Provides patients with a more personal, higher quality of primary care while reducing the burden on hospitals, walk-in clinics, urgent care facilities, and the healthcare system as a whole.

Prevents delays in necessary healthcare for infants until a longterm solution is found.

The clinic is led by **Nurse Practitioners** collaborative support from nursing and medical professionals. fostering a team approach to well-

Families and children who are identified as needing more intensive support are connected to KCHC and other community agencies, ensuring a holistic approach to healthcare.

Valuable learning opportunities for medical, nursing, nurse practitioner, and other students in training. This ensures the provision of highquality experience in well-infant care, preventive care, and anticipatory guidance.

The services we are providing...

- Wellness care (guided by Rourke Baby Record checklist)
- Milestone screening
 Growth and development monitoring
 Immunizations and vaccines
 Prescriptions as needed,

- rrescriptions as needed, Referral to developmental based services, pediatrician, other specialists if a baby needs specialized care Connection to child/parenting resources at KFL&A Public Health and in the community

Hours: Wednesday-Thursday, 9AM-Noon Location: KFL&A Public Health, 221 Portsmouth Ave, Kingston Phone: 613.484.7732 Website: https://kchc.ca/weller-avenue/well-baby-care-clinic/

Appendix VII: Student Placement Evaluation

Since opening the Well Baby Care Clinic, we have had the opportunity to provide clinical placements for both undergraduate nursing students (NURS 371) and graduate primary health care nurse practitioner students (PHCNP) (NURS 856 & NURS 857) from Queen's University. A total of 5 undergraduate and 2 graduate NP students completed a placement at the clinic.

We administered the following survey to each of the students that completed a placement and received the following responses from 6 of the students:

Q1. Was adequate space provided?

Answered: 6 / Skipped: 0

ANSWER CHOICES	RESPONSES
Yes	100.00% 6
No	0.00% 0

Q2. Was adequate time scheduled to see clients?

Answered: 6 / Skipped: 0

ANSWER CHOICES	RESPONSES		
Yes	100.00%	6	
No	0.00%	0	

Q3. Did you see a sufficient number of clients to meet your learning needs?

Answered: 6 / Skipped: 0

ANSWER CHOICES	RESPONSES
Yes	100.00% 6
No	0.00% 0

Q4. Did you have the opportunity to follow-up with clients and/or health concerns to meet your learning needs?

Answered: 6 / Skipped: 0

ANSWER CHOICES	RESPONSES	
Yes	83.33	5
No	16.67%	1

Q5. Did you receive timely feedback that helped you to improve your knowledge and skills?

Answered: 6 / Skipped: 0

ANSWER CHOICES	RESPONSES		
Yes	100.00%	6	
No	0.00%	0	

Q6. Are reports from consultants, laboratory tests, x-rays accessible?

Answered: 0 / Skipped: 6

ANSWER CHOICES	RESPONSES	
N/A	N/A	N/A

Q7. Were support staff helpful?

Answered: 6 / Skipped: 0

ANSWER CHOICES	RESPONSES		
Yes	100.00%	6	
No	0.00%	0	

Q8. Are community agencies and professional disciplines accessible and involved in clients' health care? Answered: 6 / Skipped: 0

	RESPONSES	
Yes 66.66%	4	
No 16.67%	1	
N/A 16.67	1	

Q9. What characteristics of this setting contributed to a good learning experience?

"The preceptors and staff in the clinic promoted a healthy work environment. I was able to work with NPs and Family Physicians."

"Long appointments left time to learn, one-on-one time with the NPs was good, lots of opportunities for observing and being observed during care."

"I enjoyed having that one-on-one opportunity with the nurse/midwife. They were very welcoming and open to teaching me as well as guiding me."

Q10. What improvements would you recommend for this setting in order to provide an optimal learning experience?

"More opportunities to be placed on the postpartum unit to gain knowledge of newborn care and adult care in the immediate postpartum period."

"I do not know of any improvements that could be made to made the setting more optimal for learning as I had a beneficial learning experience personally."

Q11. Do you recommend this setting for other students in the PHCNP program?

Answered: 6 / Skipped: 0

ANSWER CHOICES	RESPONSES		
Yes	100.00%	6	
No	0.00%	0	

Appendix VIII: Patient Experience Survey with Results

Q1. How did you learn about this clinic?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	
Parenting in KFL&A/Public Health	8.33%	4
Kingston Health Sciences Centre (KGH or HDH)	39.58%	19
Friends/Family	10.42%	5
Midwives	35.42%	17
Other - please explain	6.25%	3

Q2. Could you get an appointment when you needed one?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	
Yes	97.92%	47
No	0.00%	0
If no, why?	2.08%	1
, ,		

Q3. What was it like booking the appointment?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	
Easy	97.92%	47
Difficult	0.00%	0
If difficult, please explain	2.08%	1

Q4. Your healthcare provider addressed your health care needs

Answered: 49 / Skipped: 0

ANSWER CHOICES	RESPONSES	
Not at all	0.00%	0
Somewhat	0.00%	0
Well	14.29%	7
Very well	85.71%	42
Excellent	0.00%	0

Q5. Your overall experience of the appointment?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES		
Poor	0.00%	0	
Fair	0.00%	0	
Good	2.08%	1	
Very Good	22.92%	11	
Excellent	75.00%	36	

Q6. Was this location easy to get to?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES
Yes No	100.00% 48 0.00% 0
If no, why?	0.00% 0

Q7. What are the best days of the week for you to access this clinic? (Select all that apply)

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	
Monday	79.19%	38
Tuesday	89.58%	43
Wednesday	85.42%	41
Thursday	81.25%	39
Friday	75.00%	36

Q8. In general, what is the best time of day for Well Baby Care appointments? (Select all that apply)

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	
Morning (9-12)	95.83%	46
Afternoon (1-4)	16.67%	8

Q9. Is there anything else you would like to tell us about your most recent visit?

Answered: 16 / Skipped: 33

Q10. Did this clinic connect you to any other services? (Select all that apply)

Answered: 28 / Skipped: 21

ANSWER CHOICES	RESPONSES	
Breastfeeding support	35.71%	10
Audiology	0.00%	0
EarlyON playgroups	25.00%	7
Kids Inclusive	14.29%	4
Physiotherapy	0.00%	0
Allergist	7.14%	2
Parenting in KFL&A	53.57%	15
Other - please list	10.71%	3

Q11. Are you aware that the Well Baby Care clinic only provides well baby care and not ongoing or urgent care?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	
Yes	95.83%	46
No	4.17%	2

Q12. Do you know where to access care for other health care needs, such as urgent care?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	
Yes	97.92%	47
No	2.08%	1

Q13. Where else do you receive care for your baby? (Select all that apply)

Answered: 39 / Skipped: 10

ANSWER CHOICES	RESPONSES	
Walk-in	46.15%	18
Children's Outpatient Clinic (COPC) - Urgent Care	61.54%	24
KGH Emergency Department	38.46%	15
Hotel Dieu ER	25.64%	10
Local Pharmacist	7.69%	3
Virtual Care	10.26%	4
Other (including out of town options), please specify	7.69%	3

Q14. If this service was not available, where would you go to receive Well Baby Care services? (Select all that apply)

Answered: 47 / Skipped: 2

ANSWER CHOICES	RESPONSES	
Walk-in	51.06%	24
Children's Outpatient Clinic (COPC) - Urgent Car	57.45%	27
KGH Emergency Department	27.66%	13
Hotel Dieu ER	27.66%	13
Local Pharmacist	8.51%	4
Virtual Care	14.89%	7
Public Health Unit - Immunizations	48.94%	23
Other (including out of town options), please specify	2.13%	1

Q15. Is this clinic currently meeting your well baby care needs?

Answered: 48 / Skipped: 1

ANSWER CHOICES	RESPONSES	s	
Yes	100%	48	
No	0.00%	0	

Q16. Would you recommend our services to others?

Answered: 48 / Skipped: 1

RESPONSES	RESPONSES	
0.00%	0	
0.00%	0	
8.33%	4	
91.67%	44	
	0.00% 0.00% 8.33%	0.00% 0 0.00% 0 8.33% 4

Q17. Thinking of your overall experience with our office/clinic, what are two things done particularly well?

- · Very informative and the staff is very nice
- Easy to book, baby check list
- · Staff are awesome, location is easy to get to with free parking
- · Great staff, quick service
- · Friendly staff and appreciate referrals when needed
- Answering questions
- Provided information, and we're very open/friendly
- · Communication and guidance
- Everyone is so kind and knowledgeable, all questions are answered in an easy to understand way.
- Organization and welcoming environment and people
- Very friendly and experienced providers
- · Efficient and convenient
- Staff are so nice and knowledgeable, good with flexible needs
- · Space to breastfeed and dress babe
- Information passage, bedside manner of staff.
- Making sure baby is looked after well and their approach on people are kind
- · Care and Info
- The physical examination, good client interaction
- Vaccines and check up all in one place
- Thoroughness in explaining any issues, always friendly and accommodating
- Friendly personable care and efficient appointments.
- Timely and easy
- Booking & service
- · Appointments on time.
- · Immunization and consultation
- · Communication and hospitality
- Baby's developmental milestones, vaccinations
- · Kind and patient, listen to concerns
- · Informative, knowledgeable
- Great staff, feels comfortable and welcoming for baby
- Explanation of Vaccine
- Answer questions and explain what the nurses are doing and why
- Easy to access good information
- · Everything good
- · Both shots and exam
- Providing information about immunizations (what's being given, what to expect)

Q18. Thinking of your overall experience with our office/clinic, what are two things that could be improved?

- · Waiting time
- · Very quick apps that feel basic in checking milestones. Still such a need to support parents with more info about baby questions and no questions about mom's coping or post partum mental health. Questions feel surface level and like checking check boxes
- · Online booking is brutal. It would also be nice to have a handout showing the vaccines and schedule for them.
- Open more than two mornings a week.
- ParkingIf possible (I know it's hot really) connections to primary doctors
- Parking seems to be an issue.
- · Longer term access
- · Add more clinic days in the week
- Care for issues in-between appointments
- Booking appointments
- Wait times, I was seen 30 mins after my scheduled appointment time
- Clinic have more days available for appointments. Clinic offering more services
- More education on what's next developmentally

Q19. Is there any additional information or feedback you would like to share with us that could help us improve the way we provide care?

· Education talks to parents

Report prepared by:

