

2012

Year in Review

Are we doing enough to shape healthy public policy?

Public policy plays a critical role in the health and well-being of children and youth. Through its biennial status report, *Are We Doing Enough?*, the CPS monitors the progress of provincial, territorial and federal governments on legislation and programs that promote child and youth health. Each new edition of the report, published most recently in January 2012, reveals some successes and some shortfalls. Among the areas we continue to work on:

- The health and development of every child in Canada should be assessed at an **enhanced 18-month well-child visit** and monitored at key points through grade school and adolescence. This visit is a prime opportunity to connect parents with community resources and to speak with them about their child's development.
- Hearing loss affects 3 to 5 of every 1000 babies born each year in Canada. **Universal hearing screening** in the first month of life and early diagnosis mean more effective, less costly interventions. The CPS is calling on all provinces and territories that have not already done so to implement hearing screening programs.
- Alongside thousands of health professionals and local advocates, the CPS criticized recent cuts to the **Interim Federal Health Program** that reduce access to health services and medications for refugee families. Restricting coverage for this vulnerable population negatively impacts the health and well-being of newcomer families, and increases both acute and chronic care costs system-wide.
- **Mandatory helmet use** while bicycling, and making sure no child younger than 16 years old operates an all-terrain vehicle (ATV), remain key targets for safety policy. Also, helmet use for all skiers and snowboarders—regardless of age—was the leading recommendation in a recent CPS statement.
- Around 25% of Canadian youth between 13 and 19 years of age have used a tanning salon. **Banning children and youth from tanning facilities**, tighter industry regulations, and discouraging young patients—especially teenage girls—from tanning would help to curb rising malignant melanoma rates. The CPS is raising awareness about the dangers of artificial tanning and actively advocating for a national ban.



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Promoting quality care at all ages

The CPS has many new guidelines and resources for health professionals caring for children and youth.

Babies

- The CPS is helping health care providers, policy makers and families to focus on the critical early years. A new Early Years Task Force produced two position statements—one on an enhanced 18-month visit and another on monitoring in early childhood—and hosted a dynamic symposium at the 2012 annual conference. The task force is also developing an educational strategy for paediatricians and information for parents.
- New practice points highlight advances in neonatal care, such as hypothermia, inhaled nitric oxide, “kangaroo care” and neonatal surfactant therapy. A statement on SSRI use in pregnancy weighs the effects of maternal depression alongside possible side effects.
- The CPS, Health Canada and the Dietitians of Canada have reiterated support for exclusive breastfeeding until 6 months of age, recognizing that some babies may be ready for complementary foods a bit earlier or a bit later. The revised statement, *Nutrition for Healthy Term Infants*, explores key feeding issues from birth to 6 months.

Toddlers and preschoolers

- Children 1 to 4 years old need *at least* 180 minutes of activity per day at any intensity, including both structured and unstructured (free play) activities. A new statement on physical activity supports the first Canadian recommendations for babies and preschoolers, describes the optimal amount, intensity and type of physical activity, and establishes baseline measures for sedentary activity and screen time.
- Local playgrounds encourage activity but can be places where young children get hurt, most often by falling from play equipment. A revised statement on preventing playground injuries explains how better equipment design and surfacing, along with active supervision, can minimize injury risk while providing ample scope for play.
- A new CPS statement describes how anticipatory guidance, education and industry regulation can protect preschoolers from choking and suffocation, debilitating or even fatal injuries that usually occur at home.



Position statements published by the CPS are available in full text at www.cps.ca.

With expanded search functions and more ways to access related content, the site is a critical stop for anyone providing care to children and youth.

School-aged children

- The 2nd edition of *Children with School Problems: A Physician's Manual* was published in October 2012. Written and edited by developmental paediatricians, this book provides guidance on screening, diagnosing, treating and supporting students with learning difficulties. Download forms and questionnaires, and link to local resources at www.cps.ca/en/issues-questions/children-with-school-problems.
- Children who are overweight may also be coping with bullying at school, insufficient sleep or problems at home. A new statement from the Healthy Active Living and Sports Medicine Committee helps health care providers to explore the psychosocial aspects of obesity and direct families to counselling or other supports.

Adolescents

- Doctors need to discourage young people from playing sports that reward deliberate blows to the head, such as boxing, and from pursuing a sport after having multiple concussions. Young athletes who get a concussion, especially if injured repeatedly, have a harder time recovering than adults and can experience serious lasting effects. Concussions must be managed conservatively and individually, using a stepwise, return-to-play protocol. Three new CPS statements—on boxing, bodychecking in hockey, and concussion—explore the risks, prevention and management of sport-related injuries.
- Gambling is surprisingly common among Canadian youth and can take a heavy toll on family and school life. A new CPS statement describes how talking to adolescents about gambling behaviours may help to avoid harm later on.
- Years of advocacy could not stop amendments to the Youth Criminal Justice Act or the demise of the long-gun registry. The CPS is watching for fallout from policies that may compromise the development and emotional health of young people, or that make firearms easier to access.

New information for parents and caregivers at www.caringforkids.cps.ca

Babies

- Attachment: A connection for life
- Playtime with your baby: Learning and growing in the first year
- Your baby's brain: How parents can support development

Young children

- Your preschooler and safety: How to prevent injuries at home
- Your busy toddler: Games, toys and play in the second year of life
- Healthy snacks

School-aged children

- How to foster your child's self-esteem
- Tips for limiting screen time at home
- Physical activity for children and youth

Teens

- How to talk with your teen
- Social media: What parents should know
- Sport-related concussion

The CPS continues to offer outstanding educational events to members. The annual conference remains the largest gathering of paediatricians in Canada, while two regional Lifelong Learning in Paediatrics courses provide a smaller group atmosphere and focus on four to five topic areas.

Professional education

Teaching together, learning together

Neonatal Resuscitation Program. Completely revised and updated, and developed by experts on five continents, the new 6th edition emphasizes simulation-based group learning and associated “soft skills” like teamwork and leadership. The NRP hosted five regional launches to showcase resources, where nearly 500 participating instructors learned about changes to educational and clinical practice, the latest Canadian modifications and new simulation and debriefing techniques.

- The *NRP Instructor Manual* is now available in French for the first time.
- Instructors and providers are now required to complete an exam online before their face-to-face training. The new test format means they can ask questions, re-read chapters and retake or rewrite a lesson at any time over a two-week period. It shifts the later course focus to skills building and debriefing.
- Besides paediatricians, NRP course-takers are nurses, family physicians, midwives, obstetricians, anaesthetists, paramedics and respiratory therapists.

Aboriginal child and youth health curriculum. Funded by the National Collaborating Centre for Aboriginal Health and developed collaboratively by the CPS First Nations, Inuit and Métis Health Committee and the Many Hands, One Dream coalition, this training program is being delivered to paediatric residents across Canada. CPS members in every academic program are helping future paediatricians to learn about the unique cultural and clinical aspects of caring for Aboriginal children and families.

Global child health curriculum. Physicians see many children who travel abroad, newcomers to Canada, or international

adoptees, but are often underequipped to meet their diverse needs. Four interactive modules, downloadable at no cost from the CPS website, can be taught in series or as stand-alone sessions. Thanks to on-site champions, this new curriculum has been introduced in most Canadian training programs over the last year. It has also been adopted as a whole or in part by a number of U.S. centres.

Caring for Kids New to Canada: A Canadian Paediatric Society guide for health professionals working with immigrant and refugee children, youth and families. The CPS is developing a new web-based resource for health professionals who work with newcomer families. Funded by Citizenship and Immigration Canada, and led by experts in immigrant and refugee health from many disciplines, this website will help paediatricians, family physicians, nurses and others provide evidence-based and culturally appropriate care. The first phase of the site will be launched in the spring of 2013.

Immunization Competencies Education Program (ICEP).

This popular course continues to be offered both live and online. The online course has drawn 1528 learners since December 2011, most of whom are allied health professionals, with 99 participants taking the latest live course last December. ICEP online is accredited by the Royal College as well as by the Canadian Council on Continuing Education in Pharmacy. Now that pharmacists in Ontario and Manitoba can administer vaccines, regulatory bodies and faculties of pharmacy in both provinces have adopted the program as part of their required training. As more provinces make this move, the CPS will work with them to ensure new immunization providers receive the necessary training.



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