Registered Nurses’ Association of Ontario
Primary Prevention of Childhood Obesity, Second Edition – Best Practice Spotlight Organization Program (BPSO®)

July 31, 2014

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To access the Primary Prevention of Childhood Obesity, Second Edition and the archived webinar please follow this link: http://rnao.ca/bpg/guidelines/primary-prevention-childhood-obesity

Legend:
BPSO® → Best Practice Spotlight Organization®
BPG → Best Practice Guideline
TPH → Toronto Public Health

<table>
<thead>
<tr>
<th>Questions</th>
<th>Answers</th>
<th>Additional Resources</th>
</tr>
</thead>
</table>
| How successful is the BPSO program in supporting the implementation of RNAO’s best practice guidelines? | • TPH is an example of a BPSO that has achieved success in the implementation of several clinical RNAO BPGs
• The structure provided by the BPSO program in the implementation of RNAO’s BPGs has had a positive impact on nursing care and on the care provided by the interprofessional team
• Evaluation data collected from numerous BPSOs has shown that the program instills an evidence-based culture within an organization and influences practice change and the sustainability of these changes | BPSO program: http://rnao.ca/bpg/bpsolog Includes information on becoming a spotlight organization, spotlight benefits, spotlight experiences, impact survey and Long-term Care BPSOs
Toronto Public Health (BPSO): http://rnao.ca/bpg/bpsolog/toronto-public-health
| Can BPG recommendations be implemented piece meal? Some program areas may not have direct client impact (e.g. immunization). We would love to have some research to advocate in my organization. | **Note:** We are assuming in this question that “piece meal” refers to implementation that is not inclusive of all guideline recommendations.  
- In general, organizations should perform a gap analysis, which refers to an assessment of the recommendations that are currently being implemented in an organization and which recommendations are not  
- The selection of recommendations for implementation is influenced by context i.e. the chosen recommendations must align with the needs and capacity of an organization and its target client population(s)  
- It is important to review the evidence linked to the recommendations  
- RNAO’s BPGs link ‘discussions of evidence’ to each of the recommendations in all of our guidelines; reference lists/bibliographies are also available for further review of the evidence  
- The RNAO ‘toolkit’ uses the ‘knowledge to action’ framework to guide the successful implementation of BPGs in an organization | **Toolkit:** Implementation of Best Practice Guidelines, Second Edition:  
Link to last year’s webinar on gap analysis:  
| Working in healthcare at the system level (government) in the field of chronic disease prevention and management, what can I do to support the dissemination of the guidelines or one particular recommendation? | - All of the RNAO BPGs are freely available on the RNAO website and it is important to make individuals and organizations aware of this  
- In terms of credibility, it is also important for individuals to be aware that the evidence is clearly linked to every recommendation in all of RNAO’s BPGs  
- Provide individuals with the linkages to RNAO’s BPG webinars; webinars are archived; they provide additional information on various BPGs  
- Identify a key issue and the related BPG recommendations and identify opportunities for discussion with staff  
- Pilot specific BPG recommendations with key target | **Policy and Political Action at RNAO:**  
http://rnao.ca/policy |
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>We do the Triple P parenting program in Thunder Bay. Do you think that the activities that you added to your program would apply to other parenting programs?</strong></td>
<td>The activities provided in the Nobody’s Perfect parenting program (TPH) can be adapted for use by other public health units. Activities that were implemented can be found in the report &quot;Implementation of a Screen-time Reduction Initiative Designed to Support the Primary Prevention of Childhood Obesity, Toronto Public Health&quot;, (November 13, 2013). To receive a copy of this report, please contact Laura Sykes, Project Coordinator, RNAO, <a href="mailto:lsykes@rnao.ca">lsykes@rnao.ca</a>.</td>
<td>Implementation of a Screen-time Reduction Initiative Design to Support the Primary Prevention of Childhood Obesity (report by Toronto Public Health, November 13, 2013)</td>
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<td><strong>How does the TPH research in schools compliment or add to what we already know about comprehensive school health?</strong></td>
<td>TPH’s evidence-based review to identify effective interventions for preventing obesity in school-aged children led to the establishment of the InTO Kids’ Health pilot project with the two main school boards – Toronto District School Board and the Toronto Catholic District School Board. This pilot aligns with the Healthy Schools approach which is based on the Ontario Ministry of Education’s Foundations for a Healthy School.</td>
<td>Link to TPH report - A Review of the Evidence: School-based Interventions to Address Obesity Prevention in Children 6-12 Years of Age (2012): <a href="http://healthevidence.org/documents/webinars/Final%20Report%20Sept%202012.pdf">http://healthevidence.org/documents/webinars/Final%20Report%20Sept%202012.pdf</a></td>
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<td><strong>How many recommendations of the obesity BPG is TPH working on currently?</strong></td>
<td>TPH’s current services address many of RNAO’s childhood obesity recommendations. Upon review of the 2005 edition of the childhood obesity guideline, screen-time in the ‘early years’ was identified as a gap, both in the research and in their services. One of TPH’s overall goals is to contribute to the prevention of childhood obesity. Now that RNAO has recently released the 2nd Edition of the BPG on the Primary Prevention of Childhood Obesity, TPH is fine-tuning their current InTO Kids’ Health pilot project and other programs, to align with the second Edition guidelines; overall there is consistency between the existing programs and guideline recommendations.</td>
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<td><strong>How were the unintended consequences of the interventions addressed in the pilot related to school-aged children?</strong></td>
<td>The evaluation of the InTO Kids’ Health pilot project is still in progress. The pilot project is now beginning its second year. Addressing harm or unintended consequences is considered through planning, implementing and evaluating program interventions (see report for further details).</td>
<td>Link to TPH report - A Review of the Evidence: School-based Interventions to Address Obesity Prevention in Children 6-12 Years of Age (2012): <a href="http://healthevidence.org/documents/webinars/Final%20Report%20Sept%202012.pdf">http://healthevidence.org/documents/webinars/Final%20Report%20Sept%202012.pdf</a></td>
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