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**Summary Report**  
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**Canada**

***Perinatal health – information cycle in Prince Edward Island***

## **Prince Edward Island: Perinatal Health – Information Management**

An information management cycle was completed during the summer 1999 on the topic of perinatal health care, a priority area designated by regional health managers in the East Prince Health Region. The goal was to develop an information management plan of the people, process, hardware and software that considers objectives relating to prenatal class delivery, breastfeeding status, referral systems, service delivery, going home and psycho-social needs. The perinatal working group consisted of representatives from East Prince Health staff in Health Informatics, Obstetrics, Pediatrics, Public Health Services and Child and Family Services as well as the Reproductive Care Programme of P.E.I.

**Evidence:** A summary road map has been developed that illustrates existing data flows and referral paths between perinatal related services in East Prince Health. These services include: delivery and family physicians, obstetrics, pediatrics, hospital records and informatics, CIHI, Public Health Nursing, Child and Family Services (nutrition, financial aid), the Evangeline Community Health Center, the Reproductive Care Program of P.E.I., the Child Health Database of the provincial Department of Health and Social Services, community mental health, diabetic education services, specialists, institutional nutritionists, West Prince Health Region (included in East Prince Health catchment area) and vital statistics.

The summary road map is based on an inventory of almost 100 routine chart forms and describes the use and route each form takes, storage format, linkage possibilities, labour and cost of filling the form out, variables addressed and quality of data. The road map has identified redundancies in perinatal information collection as well as service areas that would benefit from simple computerized data capture methods to provide planning information on a more local and convenient basis. This has immediate implications in improving quality and access of data; for example, in reducing the number of times an infant's weight is recorded, in increasing the efficiency of data collection between various services on new mothers and their infants, in coordinating referrals between various services and in accessing data collected by health regions and delivered to province data warehouses.

An analysis of key indicators of perinatal health status in East Prince Health began in July 1999 with the Perinatal Database, Reproductive Care Program, P.E.I. and the Child Health Database, Department of Health and Social Services. Both of these data sources have traditionally collected information from routine chart forms in each health region in P.E.I. The regular integration of existing data into the local health planning process is critical in assessing perinatal health care status and developing programmes at the regional level.

**Planning and action to date:** Perinatal health care delivery in East Prince Health involves the coordination of a wide variety of agencies which regularly

collect data on the objectives developed by the working group for this study. Service delivery can be improved by identifying priority areas with key perinatal indicators, through the re-organization of data and referral flows and by employing simple but novel ways of making local data more efficient and accessible to regional health planners.

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