MSSU PRESENTS

Learning Health Systems in Action

WEBINAR RECAP

Building a Maritime Pediatric Learning Health System with Youth, Families, Clinicians and Community Partners

Focus: Community and Engagement

Speakers: Dr. Christine Cassidy — Registered Nurse; Associate Professor, School of Nursing, Dalhousie University; Scientific Lead, Maritime Child Health

Grace McIntyre — Research Assistant, Maritime Child Health

Katie McDonald — Pediatric Nurse; Manager, Maritime Child Health

Watch the full webinar

THE PROBLEM

- Across the Maritimes, children and families access care through multiple pathways, resulting in variation in levels of service delivery and unequal access to evidence-based care.
- Evidence can take years to reach practice, limiting timely improvements for children and families.
- Learning health systems are often data-driven but don't always meaningfully include patient and community engagement.

THE LHS APPROACH

- Maritime Child Health centred patient and community engagement from the start, using qualitative research with clinicians, caregivers and youth to identify barriers and enablers to LHS implementation.
- They held an interprovincial summit (NS, PEI, NB) with clinicians, caregivers, youth and community organizations to set shared priorities going forward.

WHAT CHANGED

- Patient and caregiver feedback on how to best engage them in a pediatric LHS improved engagement frameworks.
- Site visits built clinician confidence and informed tailored resources.
- Summit priorities shaped the strategic plan and enhanced interprovincial collaboration.

EVIDENCE IN ACTION

- A systematic review of LHS implementation, combined with clinician needs assessments, site visits across NS and PEI, family engagement in pediatric resource development and youth/caregiver interviews were used to understand how best to build a pediatric LHS centered on meaningful engagement.
- Summit discussions identified regional priorities to guide planning.

KEY LESSONS

1. Understand how people already experience health system engagement to ensure equity in access to care.
2. Combine evidence, including research, health system data, clinical experience and lived experience to guide improvement.
3. Use ongoing feedback, evaluation and local collaboration to continuously adapt and strengthen care practices.

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