

CHIPPEWAS OF NAWASH HEALTH CENTRE HEALTH CENTRE PROGRAMS AND SERVICES COUNCIL ORIENTATION PACKAGE 2017-18

Purpose: The provide information on Health Centre Programs and Services to the incoming Chief and Council

Background: The Chippewas of Nawash Unceded First Nation Health Centre delivers various health programs and services on behalf of the Federal and Provincial governments. We receive core funding to deliver health promotion and disease prevention programs from Health Canada... We also deliver the Supplementary Health Benefits program – commonly referred to as the Non Insured Health Benefits/Medical transportation Program.

In addition to the core funding from Health Canada we also pursue one time funding opportunities to deliver the various projects. For example, National Aboriginal Youth Suicide Prevention Strategy, HIV/AIDS awareness prevention programming, Independent First Nation Health Coordination office for Gambling and Diabetes education, the Aboriginal Healing and Wellness Strategy to deliver a youth mental health demonstration project.

DESCRIPTION OF HEALTH CANADA PROGRAMS AND SERVICES:

HEALTHY CHILD DEVELOPMENT:

The goal is to improve health outcomes associated with maternal, infant, child and family. The areas of focus include: prenatal health, nutrition, early literacy and learning and physical, emotional and mental health and culturally appropriate programming. The Aboriginal Headstart On-reserve Program and CPNP program and Maternal and Child health programs are delivered under this initiative

- **Aboriginal Headstart On-Reserve program:** The Aboriginal Headstart On-Reserve (AHOR) provides early childhood/preschool intervention that supports the development of the physical, intellectual, social, spiritual, and emotional well being of First Nations children. Program clients: children from birth to 6 years of age and their families living on-reserve. The AHOR program is delivered at the Daycare.
- **Canada Prenatal Nutrition Program:** The goal of the Canada Prenatal Nutrition Program is to improve maternal and infant nutritional health. Program clients are pregnant First Nations women, mothers of infants, and infants up to 12 months of age who live on reserve particularly those identified as high risk. The Community Health Nurse oversees delivery of the CPNP program.
- **Maternal and Child Health:** The goal of the maternal and child health program is to support pregnant First Nations women and families with infants and young children, who live on reserve to reach their fullest developmental potential. Implementing prevention

programs on FASD, coordinate access to FASD diagnosis and help women and families connect with multidisciplinary diagnostic teams and other supports and services. The daycare delivers a majority of the maternal and child health program components listed above.

HEALTH PROMOTION AND DISEASE PREVENTION – MENTAL WELLNESS

- **Mental Wellness – Brighter Futures:** The goal of the Brighter Futures program is to improve the knowledge and skills of front line health workers and community members in mental health, child development, healthy babies, injury prevention and parenting skills. The program delivers culturally appropriate and holistic community based projects which address the serious mental health problems affecting children and families. An integrated approach is utilized to support and promote better integration of health services in order to effectively contribute to the improved health and development of children. The Youth Mental Health Worker and Language Nest program are funded under Brighter Futures.
- **Mental Wellness – Building Health Communities –Mental Health Crisis Management:** The objectives of this program are to establish a community based mental health crisis management program, enhance community management and control by providing the necessary tools to aid in the intervention in problems of depression and suicide, address critical gaps in mental health services by providing crisis intervention, aftercare and training for on care givers and on reserve members and provide support for interventions in crisis situations in order to reduce the number of suicide attempts and other violent crisis situations. The employee assistance program - Homewood, and 2 additional professional service providers under fee for service are funded under Crisis Management
- **National Native Alcohol and Drug Abuse Program (NNADAP)** The goal of the NNADAP program to reduce the high levels of alcohol, drug and other substance abuse by increasing awareness and understanding among community members about alcohol, drug and substance abuse issues and promotion of alternative healthier lifestyles. The worker develops and implements prevention, intervention and aftercare programs and provides referrals to residential treatment.

HEALTHY LIVING HEALTH PROMOTION DISEASE AND INJURY/ILLNESS PREVENTION:

Community Health Nurse: The role of the community health nurse is to immunize, vaccinate, educate, develop and deliver health promotion programs and services to all community members on reserve. For example:

- **Communicable Disease Control and Management:** the goal of the Tuberculosis program is to reduce the incidence of the disease in First Nations communities.
- **Vaccine Preventable disease (VPD) – Immunization** The overall expected outcomes of the program are to improve coverage rates for routine immunizations, reduced VPD incidence, outbreaks and deaths.

- **Environmental Public Health:** The Environmental Public Health Program aims to protect and improve First Nations living on reserves through the reduction of health risks injuries or deaths

Community Health Representative: The role of the Community Health Representative is to educate and create awareness campaigns that target all community members. Health promotion, Injury/Illness Prevention is large component as well. The CHR also oversees development of the following programs:

- **Aboriginal Diabetes Initiative:** The overall goal of the ADI initiative is to improve the health status of on reserve individuals through education and workshops aimed at reducing the prevalence and incidence of diabetes and its risk factors.
- **Blood Borne Diseases and Sexually Transmitted Infections – HIV AIDS –HEP C:** The program provides prevention education and awareness to prevent HIV/AIDS, HEPC transmission and support the care of those impacted by HIV and AIDS. The CHN and CHR both deliver education and awareness, harm reduction workshops on this topic.

HOME AND COMMUNITY CARE PROGRAM:

- The HCC Program provides nursing, homemaking and personal support services to community members who are living with chronic or acute illness, the elderly and people with disabilities in order for them to live independently in their home for as long as possible. The Community Support Services Program (funded by SWLHIN) is delivered under HCC.

HEALTH CENTRE FACILITY OPERATIONS AND MAINTENANCE:

- Janitorial/Maintenance services are provided on half time basis. Daily operations, receptionist, phone, fax, heat, fuel, internet etc. office supplies are covered under here.

NON INSURED HEALTH BENEFITS/MEDICAL TRANSPORTATION PROGRAM

- The program is delivered in a manner consistent with the NIHB Directives, Medical Transportation Policy Framework and Ontario regional guidelines. Medical Transportation Policy Framework sets out a clear definition as to the eligibility of clients, the types of benefits to be provides and criteria under which they will be funded

ADDITIONAL PROGRAMMING/PARTNERSHIPS NOT FUNDED BY HEALTH CANADA

SOUTH WEST LOCAL HEALTH INTEGRATION NETWORK

- South West Local Health Integration Network: We receive funding from the SWLHIN to deliver the Community Support Services Program. This program is a component of the HCC program. The CSS program delivers weekly programming activities and meals to clients of the Home and Community Care Program.

Partnership with Southern Ontario Aboriginal Health Access Centre (SOAHAC)

- We have an agreement for a Memorandum of Understanding with the Southwest Ontario Aboriginal Health Access Centre to deliver the following services on reserve: Nurse Practitioner (two day a week) to deliver primary care, Mental Health Case manager to provide mental health care to community members and Aboriginal Patient Navigator under the Supporting Seniors at Home initiative. Blood Lab every Monday 9 a.m – Noon.

Staffing: We currently have 11 full time staff and 2 part time staff.

STAFF	POSITION	PROGRAM
	Health Services Manager	
Spring Dawn Akiwenzie-Cook	Community Health Nurse	CHN, CPNP, CHR, Envir. Assist.
Susan Jones	Full Time Community Health Representative	CHR, HIV/AIDS, Diabetes
	Environmental Assistant (Part time)	Drinking Water, West Nile Virus
Manson King	Janitor(Shared with the Band Office)Part time	Health Facility
Josh King	Health Benefits Clerk	NIHB, Medical Transportation
Rena Nadjiwon	Receptionist/Clerk	Health Centre Support
Polly Keeshig-Tobias	Language Nest	Brighter Futures – The Language Nest
Marleen Vogl	Youth Mental Health Worker	Brighter Futures – Youth Mental Health
Randy Keeshig-McLeod	NNADAP	National Native Alcohol and Drug Abuse Program
Norma Tobey	Home and Community Care Coordinator	Home & Community Care, Community Support Services, Seniors Assistance Program
Cynthia Porter	Home and Community Care Care Nurse	Home and Community Care
Dawn King	Community Support Services	Home and Community Care