ANNUAL REPORT

2022-23

File Hills Qu'Appelle
Tribal Council
Health Services

FHQ
Tribal Council
Health Services

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FHQ Health Services

An integrated approach to health care delivery.

FILE HILLS QU'APPELLE TRIBAL COUNCIL HEALTH SERVICES

File Hills Qu'Appelle (FHQ) Health Services is a department of the FHQ Tribal Council in Fort Qu'Appelle, offering health programs and services to the nations of our Tribal Council:

FILE HILLS AGENCY

- Carry the Kettle Nakoda Nation
- Little Black Bear's Band of Cree and Assiniboine
- Okanese First Nation
- Peepeekisis Cree Nation
- Star Blanket Cree Nation

QU'APPELLE AGENCY

- Muscowpetung Saulteux Nation
- Nekaneet First Nation
- Pasqua First Nation
- Piapot First Nation
- Standing Buffalo Dakota Nation
- Wood Mountain Lakota First Nation

MISSION STATEMENT

FHQ Health Services is a program of the FHQTC dedicated to the delivery of safe, client centred wholistic care and supportive services for and with our member First Nations that are consistent with our values and meet the needs of our communities. Our services include:

- Health Promotion and EducationChronic Disease and Injury Prevention
- Healthy Children and Youth
- Environmental Health
- Communicable Diseases
- Home and Community Care

FHQ Health Services embraces the values of Respect, Accountability, Cooperation and Integrity in respect to all aspects of health care.

FHQ HEALTH SERVICES PROGRAMS AT A GLANCE

- Aboriginal Diabetes Initiative
- Canada Prenatal Nutrition Program
- Community Health Nursing
- Environmental Health
- Home & Community Care
- Jordan's Principle
- Lactation Consultant
- Maternal Child Health
- Miko-Mahikan Red Wolf
- Therapy Rehabilitation

COMPLEMENTARY PROGRAMS AT A GLANCE

- All Nations' Healing Hospital
- Pasikow-Muskwa Rising Bear Healing Centre
- Women's Health Centre & Midwifery Services

FHQ Health Services Strategy

Vision

FHQ health services is respected globally for exceeding quality in the delivery of safe health care services that embrace First Nations cultures and our traditions of wholistic physical, mental, emotional and spiritual wellbeing contributing to healthy individuals, families and communities.

Mission

FHQ Health services is a program of the FHQTC dedicated to the delivery of safe client-centred wholistic care and supportive services for and with our member First Nations that are consistent with our values and meet the needs of our communities. Our services include:

Health Promotion and Education	Healthy Children and Youth	Communicable Diseases	Chronic Disease and Injury Prevention	Environmental Health	Home and Community Care

Values

Health Services lives the values of the FHQTC: Respect, Accountability, Cooperation & Integrity. Specific to our health care environment, we emphasize:

- Cultural Practices
- Collaboration & Relationships
- Self Directed Health Care
- Community Involvement
- Innovation

Measures of Success

Our highest measures of success are aligned with our goals and are determined through:

- Client satisfaction ratings
- Responsiveness to best practices and emerging trends
- Unqualified annual audit
- Expenses do not exceed available resources
- Staff retention rates
- Staff satisfaction ratings
- Annual gathering feedback

Goals (G)

G1: Our clients - To provide safe and effective services that place the needs of individual, family and/or community first	G2: Our financial resources - To maintain an efficient and sustainable organization focused on continuous improvement	G3: Our Human Resources – To support career growth and support a desirable working environment	G4: Our Community - To contribute to the growth and development of our member First Nations

Strategic Priorities (SP)

We have selected six strategic priorities to emphasize over the next four years. All operational plans will work toward gaining progress in these strategic priority areas:

SP1: Wholistic care	SP2: Career development in health professions	SP3: Chronic disease treatment and prevention	SP4: Communication and Community Engagement	SP5: Improving health by working together	SP6: Preparing for the future and honouring our past

Accreditation Canada

Accreditation Canada is a not-for-profit organization that is dedicated to working with patients, policy makers and the public to improve the quality of health and social services for all.

Accreditation is an ongoing process of assessing health organizations against standards of excellence to identify what is being done well and what needs to be improved. It involves all members of our organization, from the board of directors to frontline staff as well as members of the community including patients and families and our community partners. It provides the organization an opportunity to understand how to make better use of our resources, increase efficiency, enhance quality and safety, and reduce risk.

After twice being postponed by Accreditation Canada due to the pandemic, the FHQTC survey took place in two parts in April and June of 2022. Each time, one surveyor was on-site for 3 days, meeting will staff, volunteers and community partners, reviewing policies and procedures, providing feedback and evaluating the organization compared to Accreditation Canada standards.

The result of the survey was Accredited, but with a few unmet criteria relating to Homecare Services. After review of the final report, the FHQTC leadership team, accreditation coordinators and our lead from Accreditation Canada felt strongly that the organization was meeting the standard and had documentation to prove this. As such, an accreditation decision appeal was submitted.

In December 2022, FHQTC received a successful appeal decision and has been awarded Accreditation with Exemplary Standing.

In past surveys from both FHQTC Health Services and All Nations Healing Hospital, there's been a recommendation that we explore the benefits as well as drawbacks of having the surveys done at the same time. After weighing this option and in light of the delayed FHQTC survey due to multiple postponements, the decision has been made to align FHQTC and ANHH next surveys.

This aligned survey will take place in Fall 2024. Leadership and the accreditation coordinators are currently working with Accreditation Canada to determine the logistics of this alignment and to work out the details to ensure both organizations receive a comprehensive and meaningful survey.

Health Planning & Management

FHQTC Health Services is a partner in the delivery of health programs within Southern Saskatchewan and Treaty 4. Together with the communities of the File Hills Qu'Appelle Tribal Council (FHQTC), we serve a regional population of more than 5,500 citizens who live on reserve across the 11 nations.

FHQTC Health Services is guided by a comprehensive health services model which balances both the traditional and contemporary approaches to wellness. Mainstream health services tend to be specialized, fragmented, and challenging to access, particularly in our rural areas. FHQTC health planning and delivery is guided by the communities of FHQTC focussing on the importance of treating the whole person or the whole community. Within this context we are guided by the following principles:

- Holistic Health People in healthy communities
- Community based needs
- Client outcome focused (individual and community)
- Ensuring a Continuum of Services
- Coordinated Primary Care Approach
- Multi-disciplinary/Cross Disciplinary Teams
- Partnerships and collaboration among communities, health providers and health jurisdictions.

We note the past number of years have been an extremely unusual for FHQTC Health Services and the Nations of FHQTC.

Throughout the global pandemic we experienced and responded to considerable increases in services and programming as it relates to ensuring the public health needs are responded to safely.

It was our goal to always remain available and accessible offering wellness clinics either onsite or virtually as directed by the leadership and community; ensuring availability of staff to respond to pandemic emergencies; advocating for increased resources and services to the Nations of FHQTC. Adjusting to a new business model which respects the patient/client and community needs as we move forward together in a world where the pandemic has dominated our lives has been the focus of 2022/23.

This past year however has been exceptional with the confirmation of Accreditation with Exemplary Standing from Accreditation

Canada, we continue to demonstrate our commitment to safety and excellence in health care. Our next Accreditation survey will be held in conjunction with the All Nations Healing Hospital survey in the fall of 2024. This alignment will provide for economies of scale and creates greater efficiencies for staff, clients and partners.

In summary it has been an extraordinary and unprecedented times in the health care industry. The guidance and direction provided by the communities during these times has ensured community health programming was maintained and evolved to meet the needs of the community and its citizens. In an era of global economic challenges, sustainable responsive health care matters now more than ever.

I'd like to thank the FHQTC Nations for your guidance and commitment to collaboration and partnership and look forward to the exciting year ahead.

MANAGEMENT

Gail Boehme, Executive Director
Lorna Breitkreuz, Director of Programs & Community Services
Kristal Dickie, Director of Health and Safety

ADMINISTRATIVE TEAM

Cheryle Brazeau, Finance/Human Resources
Chaylah Carter, Administrative Assistant
Larissa Yuzicappi, Administrative Assistant
Lisa Heath, Administrative Assistant

ABOUT

The IT Department provides technical support for daily IT operations including hardware, software, configuration, installation, maintenance and inventory of computer equipment and the administration of all email accounts and the network for File Hills Qu'Appelle Tribal Council Health Services.

TELEHEALTH CLINICS

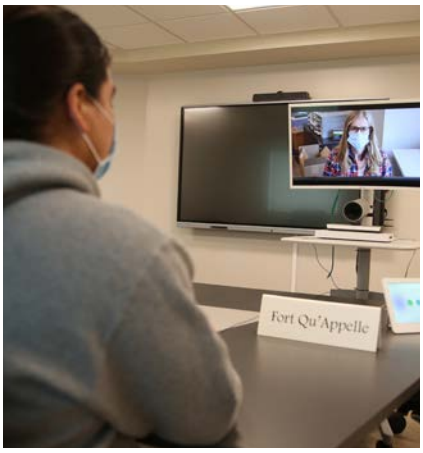
- Nephrology (74)
- Oncology (2)
- Psychiatry (1)
- Gastroenterology (3)
- Neurosurgery (1)

SERVICE CALLS

- 1,925 total service calls were completed by the IT Department for trouble shooting computer and peripheral devices.
  (665 from Telehealth/eHealth Coordinator, 674 from the Computer Technician, and 586 from the IT Support position).

IT UPGRADES

- The team completed upgrades to servers for both FHQ Health Services and ANHH Finance



IT TEAM

Earlene Keewatin, Telehealth/eHealth Coordinator
Ken Kinequon, Computer Technician
Randall Lavallee, IT Support

OBJECTIVES

1. To assist families in accessingneeded services throughJordan's Principle throughapplication and casemanagement with regionalfocal points.

2. To case plan and coordinateservices for children approvedfor services or supports through Jordan's Principle and/or otherprovincial or federal services.

3. To manage fund provided through Jordan's Principle forservices and supports approvedfor families.

4. To build relationships withservice providers and federal orprovincial programs andservices.

PURPOSE

- To assist First Nation familieswith children with special needsby connecting them to servicesand resources that childrenrequire both on and off reserve.

- To ensure First Nation childrenreceive quality appropriatehealth, social and educationalservices.

SERVICES

FHQTC community members are able to access many supports and services through Jordan's Principle. Some services include:

- Cognitive Disability Strategy
- Medical Appointments
- Autism Support
- Community Living Service Delivery
- Occupational Therapy
- Non-Insured Health Benefits
- Counselling/Mental Health Therapy
- Ministry of Social Services
- Equine Therapy
- Status Card Registration
- Elder/Traditional Services
- Disability / Child Tax Credits
- Early Childhood Intervention Program
- Sask. Wheelchair Sports

REVIEW

The need for Jordan's Principle Services has grown significantly over the past year as client caseload rose by 300%, resulting in the team growing from 3 active staff to a team of 5. The services has needed to grow at a rapid rate to address gaps in health services to children within our communities.

The spring and summer of 2022 saw a substantial increase in Jordan's Principle requests, especially social/necessities of life requests (such as emergency groceries, clothing, utility arrears, etc.). As a result of the sudden and continuous strain on Indigenous Services Canada's (ISC) Jordan's Principle has resulted in an ongoing backlog of application reviews and consequently long wait times for our clients.

In October 2022, ISC announced the option for funding to be distributed to existing Jordan's Principle service coordination programs to be able to approve and process their own social/necessities of life requests. The following January, our Jordan's Principle team took on the internal approvals for social necessities requests from ISC, as a result we have seen more efficiency in getting approvals and meeting the requests in a much timelier fashion. The FHQ Jordan's Principle team internally reviewed over $80,000 in emergency social/necessities of life requests for children and families from the beginning of January through the end of the 2022-23 fiscal year.

Jordan's Principle Health Navigators continue to connect with families directly and support them through the application process, provide cash management of Jordan's Principles approvals, case plan with other support workers, provide referrals to service providers as well as community programs and services, inform and educate families and service providers on Jordan's Principle services, and advocate for children and families to service providers and governmental entities such as Indigenous Services Canada.

While the Covid-19 pandemic had limited in-person interaction and navigator presence within the community until early 2022, navigators were still able to provide effective services to families via phone, email and limited in-person communication. As restrictions lessened, this allowed our team to return to attendance of community events and client meetings.

As communities look to establish their own Jordan's Principle coordinatation, our team is available to support the communities in any way we can.

The total dollars applied for and approved through Jordan's Principle for products and services for FHQ children and families in the 2022-23 fiscal year is an estimated $832,005.

CHALLENGES & BARRIERS

- Jurisdictional concerns - causes client discouragement resulting in children not receiving services
- Lack of status registration and/ or documents for status registration of children AND the delay in processing status registration of children
- Lack of access to phone/ computer/ communication device (especially during the pandemic)
- Lack of awareness of Jordan's Principle (by both clients and providers
- Difficulty in navigating the application process or knowledge of how to access NIHB services/support
- Lack of availability of programming both on and off reserve
- Lack of publicly funded services
- Absence of services on reserve
- Jordan's Principle's expectation of pursuing publicly funded services first - lengthy wait times, no assigned worker to rural areas, service coordinators redirected to multiple agencies
- Application processing delays resulting from Jordan's Principle's administrative errors and/or oversights
- Denials from Jordan's Principle with little information given or coaching for appeals
- Inconsistency in reviews of applications by Jordan's Principle review team
- Inconsistency in expectations and requests for supporting documents by Jordan's Principle review team
- Resistance to providing orthodontic coverage
- Resistance to providing direct supports for access to cultural experiences and/or education
- Some service providers that are hesitant orunwilling to work with or accept Jordan'sPrinciple coverage for services
- Significant length of review time for applications
- Significant length of review time for appeals
- Lack of services and/or transition of servicesbeyond the age of majority

JORDAN'S PRINCIPLE TEAM

Tracy Adams, Jordan's Principle Navigator
Kyle Lerat, Social Necessities Worker
Priscilla Bigsky, Administrative Assistant
Kristin Haywahe, Jordan's Principle Navigator
Deanna Hoffort, Jordan's Principle Navigator

GOALS

The overall goal of the Aboriginal Diabetes Initiative (ADI) is to improve the health status of individuals, families and communities through actions aimed at reducing prevalence and incidence of diabetes and its risk factors

OBJECTIVES

- Increase awareness of diabetes, diabetes risk factors andcomplications as well as ways toprevent diabetes and diabetescomplications in communities.
- Support activities targeted athealthy eating and food security.
- Increase physical activity as ahealthy living practice.
- Increase the early detection andscreening for complications ofdiabetes in communities.
- Increase capacity to prevent and manage diabetes.
- Increase knowledge developmentand information-sharing to informcommunity-led evidence-basedactivities.
- Increase supportive environmentsfor healthy living.
- Support the implementation ofhealthy guidelines and policies inkey settings (e.g. schools, earlychildhood development centres,recreation centres, long term carefacilities, workplaces and local foodpremises).
- Develop partnerships and linkagesto maximize community healthplanning and the reach and impactof health promotion and primaryprevention activities.

ADI TEAM

Kristal Dickie, Community Dietition and Team Lead
Emily Gloade, Diabetes Nurse
Taletha Thurmeier, Community Dietitian
Taylor Henry, Community Dietitian
Kim Engel, Community Dietitian

DIABETES EDUCATION

The ADI team develops and delivers health promotion and prevention activities with the aim of reducing Type 2 Diabetes. The team works works to promote healthy lifestyles to reduce obesity, encourage healthy eating and increase physical activity by attending monthly Wellness Clinics in collaboration with the Home Care team. Over the past year, the ADI team participated in numerous community events and provided education and nutrition programs such as:

- Monthly diabetes wellness clinics in community (File Hills, 37, Muscowpetung, 70, Nekaneet, 24, Pasqua, 59, Peepeekisis, 77, Piapot, 78, Standing Buffalo, 48, and Wood Mountain, 78), and provided fresh market program if free and subsidized fruit and vegetables

- Nutritional counseling for hemodialysis patients and provided kidney-friendly meal bags for dialysis patients in Rising Bear Healing Centre

- Monthly diabetes and nutrition walk-in clinics at Miko-Mahikan Red Wolf

- Youth cooking and nutrition programming in at Piapot Youth Centre and Leading Thunderbird Lodge

- Facilitated a Diabetes Health Fair in Peepeekisis and a Diabetes Awareness Fair for FHQ Health Services & ANHH staff

- Participated in several community health fairs, treaty days and school events, providing education on healthy eating, nutrition and hands-on activities. Some of these community events also saw the team provide point of care diabetes and blood pressure testing

- Began monthly Food is Medicine traditional meal program for ANHH inpatients, dialysis patiens and staff

PURPOSE

Home and Community Care services are provided to deliver safe client-centred care and supportive services to FHQTC communities. Services are provided to support clients to 'age in place' providing services to the client in their home as much as possible.

The Home and Community Care team includes Registered Nurses (RN's), Licensed Practical Nurses (LPN'S), and Home Health Aides (HHA). Some of the services delivered to clients include, but not limited to, specialized wound care, treatments bases on physician orders, advanced foot care, palliative care, medicine management, personal care (e.g. bathing), case management and assessment for long-term care, and health education at Wellness Clinics.

Staff participate in continuing educational opportunities such as Medical Device Reprocessing, Care of Patient/Kidney Disease, Inoculist Certification, Wound Care Treatment and Advanced Foot Care Courses.

HCC TEAM

Charlene Horseman, Registered Nurse
Karen McGregor, Registered Nurse
Dawn Halbgewachs, Registered Nurse,
Joy McNabb, Licensed Practical Nurse
Marlene Wolfe, Licensed Practical Nurse
Melissa Lowe, Licensed Practical Nurse
Angie Favel, Licensed Practical Nurse
Joni Fraser, Home Health Aide
Marilyn Wolfe, Home Health Aide

KEY OUTCOMES

The Home & Community Care team over the past year had completed assessments with the client and/or family to determine their care needs and provided referrals as needed to other professionals such as Occupational Therapist/Physical Therapist, Podiatrist, Women's Health, etc.

The is an identified need for more palliative vare services from our Home & Community Care team, as more more families and clients choose to have end of life care in their own home. In addition to formalize policies, we are also supporting an RN to gain specializating in palliative care to allow for ealier assessments and support for clients with longer irreversible conditions such as kindey failure and dementia.

In addition, we have noted that several screening and testing services previously provided through the health authority are no longer available or have significant waiting times. This results in negatively impacting our clients, one example being home oxygen testing.

There is an identified need to move from paper charting to an electronic medical record within the SHA Primary Health Collaborative instance, which can be shared with the patient's providers for continuity and quality of care and will improve patient safety.

GOAL

To improve health outcomes and support community members in all aspects of holistic health through programs and service delivery and partnerships..

PRINCIPLES

- Client Focused Care
- Relationship Building
- Advocacy
- Health Promotion
- Prevention
- Capacity Building

PROGRAMS

1. Immunization Program
2. Communicable Disease Program
3. Maternal Child Health Program
4. School Health Program
5. Chronic Disease Program

SCOPE

The Community Health Nurses scope of practice includes:

1. Health Promotion
2. Prevention and Health Protection
3. Health Maintenance, Restoration and Palliation
4. Professional Relationships
5. Capacity Building
6. Access and Equity
7. Professional Responsibility and Accountability

CHN STAFF

Tanya Huber, Registered Nurse and Team Lead
Lisa Cook, Registered Nurse
Cara Bear, Registered Nurse
Karli Bigknife, Registered Nurse
Aria Saulteaux, Registered Nurse
Nancy Garratt, Registered Nurse
Madisyn Montgrand, Medical Office Assistant
Janet Muirhead, Community Nutritionist

KEY OUTCOMES

The CHN program prioritized the delivery of mandatory CHN programs and management of emerging health trends as we transitioned to a post-pandemic state with the lifting of Covid-19 restrictions.

- In-person programming resumed.
- School-age immunization clinics resumed in the school system.
- Prenatal/postnatal care prioritized to support healthy pregnancies. Timely postpartum follow up to identify concerns and make appropriate referals.
- Child health clinics focus of routine childhood immunizations to decrease the incidence of vaccine prevantable diseases.
- Partnering with community leadership, health directors, and health staff to coordinate community-led events such as sexually transmitted blood-borne infections (STBBI) mass testing events, car seat safety clinics, babysitting courses, health fairs, and focused events to raise awareness for topics such as fetal alcohol spectrum disorder (FASD) and turberculosis (TB).
- Health promotion provided in daycare and school settings with teaching on health topics such as: hygiene, handwashing, sun safety, healthy relationships, puberty, and STTBIs.
- Engagement in community-led events, such as providing first-aid for Elder's gatherings, Treaty 4 Gathering and Treaty days.
- Ongoing Covid-19 support to communities including administration of the vaccine, testing and health teaching according to evolving public health measures. Covid-19 vaccines continue to be blessed and smudged prior to delivery in community.
- Abbott ID NOW PCR analyzers enrolled in proficiency testing provided by the Public Health Agency of Canada (PHAC) to remain operational in communities.

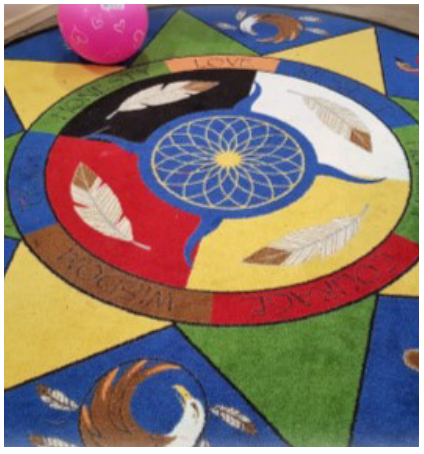
MATERNAL CHILD HEALTH PROGRAM

The Maternal Child Health program aims to improve support for families. FHQTC provides support for parent mentors in communities who are connecting with families. Trainings are arranged for parent mentors as needed. Recently, training topics have included the Ages and Stages Questionnaire, Nobody's Perfect and breastfeeding.

Meetings are hosted bimonthly to provide connection and support for parent mentors. Parent mentors receive information about services for pregnant women and families with children aged 0-6 to assist in connecting families to needed supports. Parent mentors receive support to build skills to provide a system of home visiting, screening, assessment, and case management.

Goals of FASD are primarily met through supportive activities providing education and resources for parent mentors in community. Support for conference attendance and online resources have been provided.

Parent mentors provide FASD information and awareness at health clinics and health fairs. Parent mentors aim to be connected with families in communities to be able to target intervention for women at risk of having a child with FASD.



Goals of FASD are primarily met through supportive activities providing education and resources for parent mentors in community. Support for conference attendance and online resources have been provided. Parent mentors provide FASD information and awareness at health clinics and health fairs. Parent mentors aim to be connected with families in communities to be able to target intervention for women at risk of having a child with FASD.

CANADA PRENATAL NUTRITION PROGRAM

The goal of CPNP is to improve maternal and infant nutrition and health by providing services to pregnant and postpartum mothers. Through collaboration with community health nurses and parent mentors, monthly workshops are hosted where healthy food is provided, new recipe ideas are shared, and skill building is supported.

Families take a meal bag to prepare food at home, further enhancing maternal nourishment. Approximately 110 meal bags are distributed every month. Educational resources are often included in the bags to ensure parents who do not attend a class also receive information.

Gathering together is an opportunity to provide nutrition and breastfeeding education and support. Educational resources are available and group education is provided. A dietitian is available to provide individualized support where required. Community Health Nurses refer clients to dietitian for nutrition education and support as required.

LACTATION CONSULTANT SERVICES

FHQTC also provides breastfeeding support for families. An objective of the CPNP is to increase breastfeeding initiation and duration rates. The dietitian is also an International Board Certified Lactation Consultant.

Group prenatal breastfeeding classes are provided bimonthly at All Nations Healing Hospital and in community as requested. Individual prenatal breastfeeding support is also provided if necessary.

CHNs refer postnatal clients for additional breastfeeding support as necessary, which is provided in clinic or in home.

The CPNP workshops also provide opportunity to increase infant feeding knowledge and the support the objective of increasing the number of infants fed age-appropriate foods in the first 12 month.

Informal discussion while sharing a meal together often addresses this topic. A baby food is frequently prepared along with the cooking class. For example, when squash was included in the roasted sheet pan meal, we also made babyfood with half the squash. CHNs can also refer when necessary for additional support. For parents not attending CPNP workshops, educational resources are included in the meal bags.

ABOUT

The Environmental Health Officers (EHOs) provide advice, guidance, education, public health inspections and recommendations to communities, tribal council entities and their leadership to help them manage public health risks associated with the environment. EHOs visit communities to do inspections, investigations and provide education and training sessions. Program areas include activities in the areas of water quality, sewage disposal, solid waste disposal, food quality, communicable disease control, community facilities, special events, housing, pest control and occupational health and safety. EHOs identify potential public health risks in communities and provide recommendatios on how to correct them

WATER QUALITY PROGRAM

Under the direction of the EHOs the Water Quality Technicians and Community Based Water Monitors conduct sampling of water systems in the communities. This sampling ensures the safety of drinking water by testing for bacteria in the water as well as chlorine residuals which prevents the growth of bacteria

INSPECTIONS

- Prermanent Food Facilities: 26
- Seasonal/Special Event Food Facilities: 50
- Individual/Private Water Systems: 83
- Community/Public Water Systems: 2658 samples collected
- On-site sewage systems: 26
- Housing Units: 76
- Community Wastewater Systems: 2
- Community Care Facilities: 22
- Solid Waste Disposal Sites:: 3
- Health Facilities: 11
- General Facilities: 10

TEAM

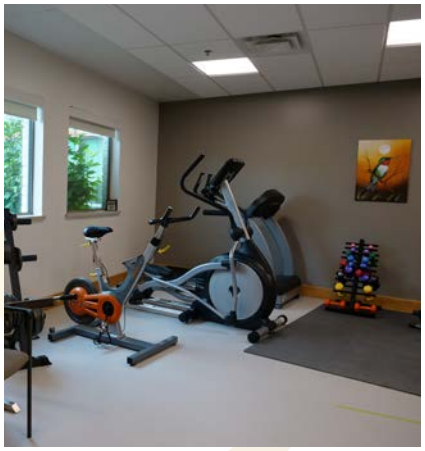
Carla Patterson, Environmental Health Officer and Team Lead
Tim Bonish, Environmental Health Officer
Simrat Shergill, Environmental Health Officer
Dominic Nokusius, Water Quality Technician

SCOPE

The Therapies Rehabilitation program developed in July of 2022, through a Needs Assessment conducted in partnership with the File Hills Qu'Appelle Tribal Council Health Services and University of Saskatchewan.

We provide services to the 11 First Nations Communities in the FHQTC. These services consist of Occupational Therapy and Physical Therapy which include home visits in community, outpatient care as well as the inpatients at the All Nations Healing Hospital.

The therapies program provides services such as assessing home environments for equipment and accessibility, providing rehabilitation services for people following injuries or surgery and helping individuals leave the hospital to home environments safely.



The therapies department also attends community health fairs and treaty days to provide health promotion related to falls prevention and physical activity.

Currently our team can provide OT and PT assistant services. We are looking forward to increasing PT services and implementing community fitness programming and health promotion in the future as our program continues to grow.

REFERRALS

- OT Outpatient Referrals: 127 (90% of these referrals have been OT community visits due to intermittent PT services).
- ANHH Inpatient Referrals: 113
- PT Outpatient Referrals: 12 (Intermittent PT Services)

THERAPY TEAM

Natasha Cozman, Occupational Therapist
Tara LaRochelle, OT/PT Assistant
Crista Kaytor, Physical Therapist
Katelyn Fisher, Physical Therapist

Miko-Mahikan Red Wolf

SCOPE

The four pillars that guide the rights-based approach to this harm reduction program includes:

1. Traditional Knowledge Keeper Oversight and elder availability to offer direction, guidance and support
2. Educational component tailored to community requirements
3. Harm reduction services to provide a safe space for clients
4. Treatment of HIV, Hepatitis C and Opiate Use Disorder, Case Management Practices and Outreach Services

OVERVIEW

The Miko-Mahikan Red Wolf program maintained between 120- 170 people on the Opioid Agonist Therapy (OAT) program. As of March 31, 2023 there were 127 people receiving OAT. In addition to Fort Qu'Appelle and the surrounding communities, people from Regina, Yorkton, Esterhazy, and Kamsack continue to access the comprehensive services at Red Wolf.

With the increase of toxic drug poisoning/ overdose deaths in Saskatchewan, the Red Wolf team is available to provide education in the communities regarding safe drug use. During this fiscal year the Red Wolf team provided 467 naloxone kits to community members. Red Wolf also trained 292 people on how to recognize a toxic drug poisoning/ overdose and how to administer naloxone. In addition, every person starting the OAT program receives a prescription for several take home naloxone kits.

During this fiscal year, Red Wolf recorded 3241 harm reduction interactions in which supplies were provided. The distribution of harm reduction supplies is based on recommended best practices. There are no limits placed on the quantities of supplies requested by any individual. All services are confidential and we do not require any identifying information from any individual accessing these services. This harm reduction approach provides an opportunity for those using drugs to be engaged and connected to services if and when they choose to do so.

Miko-Mahikan
Red Wolf

OVERVIEW CONTINUED...

We continue to see fall out from Covid restrictions to services within communities. Mental health concerns and grief/ loss resulting from a lack of support during Covid resulted in a higher need and higher acuity. We continue to provide access to mental health counselling through a contract basis.

We also provide food, transportation, referrals and crisis support. We strive to keep our communities safe and are diligent in following standards in relation to carries.

Yellow Thunderbird House has assisted several men in the community as they work to finding their own homes. A need for housing for women was also identified, which led to the opening of our second house. This house has three small suites which will allow for a women and/or a small family to have space and privacy. Red Wolf will continue to provide supportive and outreach services to the tenants of both homes.

We were successful in recruiting to our HIV/HCV outreach nurse position. This has allowed us to begin treating individuals with sexually transmitted and blood borne infections and will provide needed clinical support for continued screening, treatment and follow up of HIV and HCV.

As well in collaboration with Community Health Nurses in our communities we will jointly provide testing and treatment of sexually transmitted and blood borne infections in our new van directly in the community.

The new van has been modified to allow for exams, blood collection and treatment.

We continue to provide smoking cessation to our patients along with our community pharmacies. We are currently updating job description and will be recruiting to provide more prevention activities within our communities. We provide encouragement to adopt a harm reduction philosophy to those that are currently using tobacco.

STATISTICS

- 3630 appointments with NPs
- 2883 appointments with outreach navigators
- 1253 appointments with HIV/HCV Outreach nurse
- 294 appointments with Therapist
- Participated in 25 community needle pickups

RED WOLF TEAM

Stella DeVenney, Nurse Practitioner & Team Lead
Michelle Graham, HIV/HCV Outreach Nurse
Janelle Sebastain,Health Navigator
Shannon Arnason, HIV/HCV Educator
Shayla Leier, Outreach Navigator
Jessica Pelletier, Administrative Assistant

Commplementary Services: Women's Health Centre

OVERVIEW

The Women's Health Centre provides comprehensive services that focus on improving access to preventative health care for women. In a safe environment reproductive health care is available to meet the needs of the women from all our communities. Nurse Practitioners are able to manage and treat health concerns unique to women across the life span. The goal of the Women's Health Centre is to improve access to primary health care services for women.

- 3,434 Health Care Visits
- Average of 286 visits per month
- Total prenatal clients seen in Women's Health : 187

NURSE PRACTITIONER SERVICES

- Well Women Exams
- Breast Exams
- Pap Smears
- Outreach clinics in First Nation Communities
- Menopause Care
- Prenatal Care
- Contraceptive Counselling and Management
- STI Testing and Treatment
- Depression and Anxiety Assessment and Management
- Medical Care and Support for Lakeview Lodge Residents

MIDWIFERY

Midwives with the Midwifery Program attend births in the ANHH Birthing Unit and the Regina General Hospital Maternity Unit. The midwives provide pre- and post-natal care and support the women and their families. The program also offers Outreach Clinics in the FHQTC communities and weekly Parent Cafes, Mother and Baby Sessions.

WOMENS'S HEALTH CENTRE TEAM

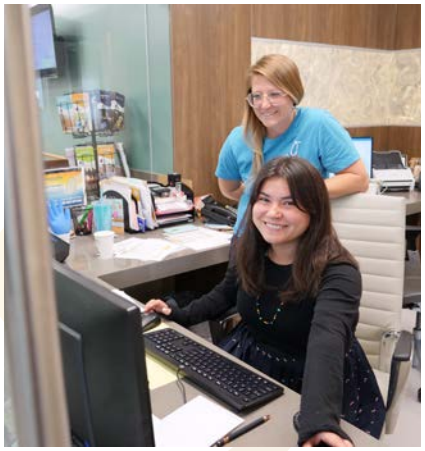
Stella DeVenney, Nurse Practitioner & Team Lead
Debbie Vey, Midwife
Lori-Ann King, Nurse Practitioner
Evelyn Steginus, Clinical Psychologist
Erin Wilson, Medical Office Assistant
Dr. R. Fakious, Physician

Commplementary Services:
Pasikow Muskwa
Rising Bear Healing Centre

PROGRAM GOALS

- To improve access to culturallysafe care for individuals, familiesand communities that isinnovative, diverse and respectfulof various ways of knowing
- To enhance communityengagement, provide earlyscreening/ detection, and activeself-management across thecontinuum of care for KidneyWellness
- To support, strengthen, andfacilitate cultural healing throughTraditional and Spiritual Institutes

OVERVIEW



Pasikow Muskwa Rising Bear Healing Centre is a culturally enhanced Chronic Kidney Wellness Initiative. The centre provides holistic services for individuals, families and communities and includes traditional healing practices and/or clinical health services. Health care professionals address all aspects of health and well-being for Physical, Emotional, Spiritual and Cultural Health.

Satellite Dialysis Services opened September 26th, 2018 operating Monday, Wednesday, Friday to accommodate 12 patients.

Additional services for patients include; Traditional Medicine, Traditional and Spiritual counseling, smudging, prayer, feasts, Traditional Healer services, psychologist counseling, Home care and wound management, PT/OT services, diabetes education and follow-up, dietitian and pharmacist counseling and primary care services with support from Nurse Practitioner specialized in renal care.

An Independent Dialysis Suite is currently unoccupied by patients. The suite is currently in use as an additional Clinic Room. Previously was available allowing the use of home hemodialysis patients if water quality in their home is not suitable.

Services include; primary care services for conditions such as diabetes, hypertension, kidney disease, cholesterol management; counseling and education, dietitian and diabetes educator services, Traditional & Cultural services, Tele-health support for specialist appointments, 24 hour ambulatory blood pressure monitoring, outreach services.

Commplementary Services:
Pasikow Muskwa
Rising Bear Healing Centre

KEY OUTCOMES

- Nurse Practitioner led Primary Care clinic focuses on chronic disease. Needs continue to increase with patient complexity related to co-morbid chronic disease and the continuation of general strains on the health care system with long wait times for surgical and specialist referrals
- Traditional services and Traditional Medicine continue to be fundamental and available to access for all clients of Pasikow Muskwa; services provided by our Cultural Practitioner.
- Capability to complete 24hr ambulatory blood pressure monitoring
- Outpatient IV Iron for CKD on non-dialysis
- Clinic Nurse providing wound care, suture/staple removal, health teaching and promotion.
- Outreach NP services in communities – ongoing in 1 community
- NP services for Lakeview Lodge Personal Care Home Residents
- Work closely with specialty services, Nephrologists visit our unit every three months and Dr. Karunakaran with monthly Nephrologist clinics
- The Health navigator has had an increase in patient transportation for medical appointments, assisting clients in completing funding applications, and memory testing. Providing counselling with the main themes being coping with chronic disease, grief, relationship difficulties (caregiver burnout), and has completed Eye Movement Desensitization and Reprocessing training (EMDR) to better assist clients dealing with trauma.
- **Transonic Monitoring**: Routine transonic monitoring is completed on clients for assessment and surveillance of dialysis accesses; fistula or graft.
- **Independent Dialysis Suite:** Has been unoccupied. Available for the use of home hemodialysis patients if water quality in their home is not suitable. Currently being utilized as an additional clinic room.

EPISODES OF CARE

Total Episodes of Care: 5,791
Visits for Traditional Services: 878

RISING BEAR HEALING CENTRE STAFF

- Unit Coordinator/Head Dialysis Nurse
- Traditional Knowledge Keeper
- Primary Care Chronic Disease Nurse
- Dietitian
- Diabetes Nurse Educator
- Nurse Practitioner
- Health Navigator
- Pharmacist
- Medical Office Assistant
- Visiting Specialists


ALL NATIONS
HEALING
HOSPITAL

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