



2015-2016
**ANNUAL
REPORT**

Nisichawayasihk Cree Nation
FAMILY AND COMMUNITY
Wellness Centre Inc.

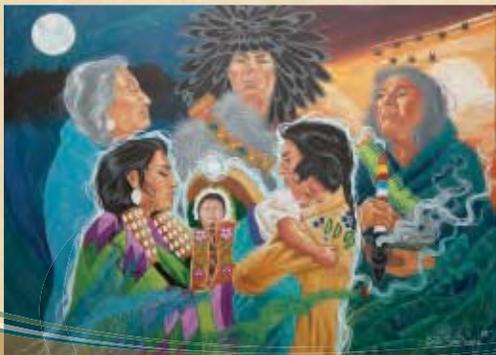


*Proud of Our 15 Years
Providing a Holistic Approach to Community Care*



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Cover Illustration by: GAYLE SINCLAIR

The cover artwork, created in 2015 is a symbol of community unity and connectedness; it represents the “circle of supports” for family systems. The core center of the circle represents the “spirit” that gives Mitho Pimatisiwin (a good life). Next to the core is the representation of an infant and toddler that gives purpose and meaning to parents. Around the parents are family supports such as aunts, uncles and grandparents. The grandparents signify the role of “Ketiysisahk” (the old ones) who are held in great esteem and respect. They are the keepers and transmitters of cultural knowledge. Around the old ones are the Warriors of the community. They are the protectors and leaders. They ensure safety and well-being for all. Each circle is related to the other and has their own role in order to respect, share, guide, and protect the children. The day sun and night moon represents the cycle of life and the life-long responsibility of caring for children. All relationships and interconnectedness to all Creation are of equal value and have strong principles to creating balance in life.

The concept of the Circle and Native Family Systems was developed and designed by Janet (Jann) Derrick. Jann is of Mohawk Ancestry and specializes in working with Native historical trauma. She is a registered Marriage and Family Therapist and presently a Ph. D. candidate. In 2000, she had published professionally *The Box and The Circle and Native Family Systems*, as well as contributing to books such *The Dispossessed* by Geoffrey York, Chapter 2; *Voices of Color-First Persons Accounts of Ethnic Minority Therapists and Multicultural Couple Therapy* ed. Rastogi and Thomas.



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Felix Walker
CEO Nisichawayasihk Cree Nation Family
and Community Wellness Centre

Message from the CEO

Tansi, 2015/16 proved to be a challenging year for the NCN Family and Community Wellness Centre. Some programs regressed, while other maintained a solid level of services or improved results.

Part of the reason for setbacks were largely due to funding claw-backs in provincial funding for the Child, Family and Community services budgets. This has resulted in a need to adjust and reallocate budgets for the future to lessen the impacts of the deficits.

The Centre will continue to lobby for changes to the funding model and to minimize the deficiencies in staffing levels, training funds and operating funds. If adjustments are not made to the federal and provincial funding levels, this will impact the Centre's ability to obtain a balanced budget.

The revisions to the funding models have also had a direct effect on our Children In Care (CIC) numbers. Although our approach to reducing the number of CIC remains one of the best among First Nations in Canada, CIC numbers increased from our record year last year to 336.

We continue to work toward improving the range of health and wellness services offered directly in Nelson House and ensure our off-reserve members in Thompson, South Indian Lake, Leaf Rapids, Brandon and Winnipeg also have a means for support.

The Centre's childcare and daycare programming continues to be valuable – assisting parents and guardians by providing a safe place for infants and youth to learn and grow in professional early-childhood development environments and prepare for school years. This program had an increase in preschool enrollment as well as in registration for the infant toddler program.

The Centre's Public and Environmental Health department had a significant increase in many service areas – while the number of visits to the Public Health Nurse and CHR Home Visits declined – overall, we continue to conduct improved safety and regulation tests and monitor for environmental issues as well as provide a level of quality care. Immunizations, diabetes care and special programs for mothers, infants and families continue to be integral in maintaining an effective level of health for NCN Citizens.

Regularly members of our First Nation are faced with violence, trauma, suicide and social issues that cause stress to individuals and the community as a whole. The Centre's Counselling and Family Enhancement along with our community and child services work together through programs like our *Wecihitowin Project*, *Circle of Care*, *Rediscovery of Families* and many other programs to give our community members access to positive cultural activities and meaningful supports. This effectively helps them to choose healthier living options. Over the fiscal year, the staff and volunteers at the Centre have held hundreds of events, training sessions, workshops, land-based activities and linkages that provide a holistic approach to healing and improve the well-being of individuals and families.

We are confident that proactive management of the obstacles in our path will allow the Centre to move forward in the coming year and allow us to achieve better results for all using our services and the community as a whole.

A handwritten signature in black ink, appearing to read 'Felix Walker'. The signature is fluid and cursive.

Felix Walker
CEO Nisichawayasihk Cree Nation Family
and Community Wellness Centre

Executive Summary

Board of Directors

- Joyce Yetman, *Chair*
- Roslyn Moore, *Vice Chair*
- Jacqueline Hunter, *Director*
- Natalie Tays, *Director*
- Agnes Spence, *Director*

The Nisichawayasihk Cree Nation (NCN) Family and Community Wellness Centre was established to support holistic wellness by providing additional opportunities for the Citizens of the NCN to build on their strengths as individuals, as members of families and as part of the community.

The Centre is undergoing an extensive process of reviewing and improving our programs, administration and services, based on community consultation and will be working to include the advice and evaluations of third-parties outside of the community to further improve programs. Strategic planning will continue to be conducted to identify objectives and goals and to help further develop action plans for Wellness Centre programs. Implementing these plans will allow the Centre to continually improve and be proactive in our operation and delivery of programming.

This 2015/16 annual report has been prepared to provide an overview of programming implemented by the NCN Family and Community Wellness Centre. The Wellness Centre has expanded and redefined programming over the course of the year to support our ongoing work within the community.

The elements of this report are as follows:

- 1 Governance**
Strategic directions, service delivery plans
- 2 Narrative**
Program descriptions, progress, highlights and challenges
- 3 Statistical Data for Community Health and Wellness**
Related to child and family services and community health/wellness.



Our facility and approach is unique as it uses a strength-based approach to support children and families. Relationships between programs, individuals and families are viewed as paramount to change. The Centre has adopted a mandate to reflect this commitment by working to:

- 1 Promote the development of new ideas and innovative measures and to bring about meaningful change for the children and families of NCN within a holistic approach to human services policy development and service delivery.
- 2 Incorporate Indigenous traditions, culture, language, customs, and the teachings of the community's Elders.
- 3 Deliver mandated child and family services within a community capacity-building and health-promotion orientation.
- 4 Oversee the implementation of health-related services and assume a leadership role in the transfer process of a local health authority.
- 5 Promote community wellness and individual well-being.



The implementation of the mandate is expressed through the wide range of community-based health related and child and family services designed to support holistic wellness from conception and birth through to adulthood and Elder care.

The Centre continues to work toward this model of integrated service delivery and the development of meaningful and effective programs, which reflect our community values and beliefs.

CORE VALUES

Social Justice: We will treat all residents of Nisichawayasihk Cree Nation equally.

Self-reliance: We will promote personal and family responsibility first.

Intrinsic Worth of People: We will think of everyone as having abilities, talents and skills that are essential to the overall health of the community.

Sustainability: We will provide services in a way that does not threaten our ability to meet basic human needs over the long term.

Cooperation: We will work together to achieve community wellness.

Community Wellness Focus: We will commit to a holistic health promotion orientation to program design and implementation.

INCLUSION POLICY

All members and residents of the Nisichawayasihk Cree Nation (children, youth, adults and elders) shall have the opportunity to participate in activities and enjoy health and wellness regardless of age, gender or physical condition.

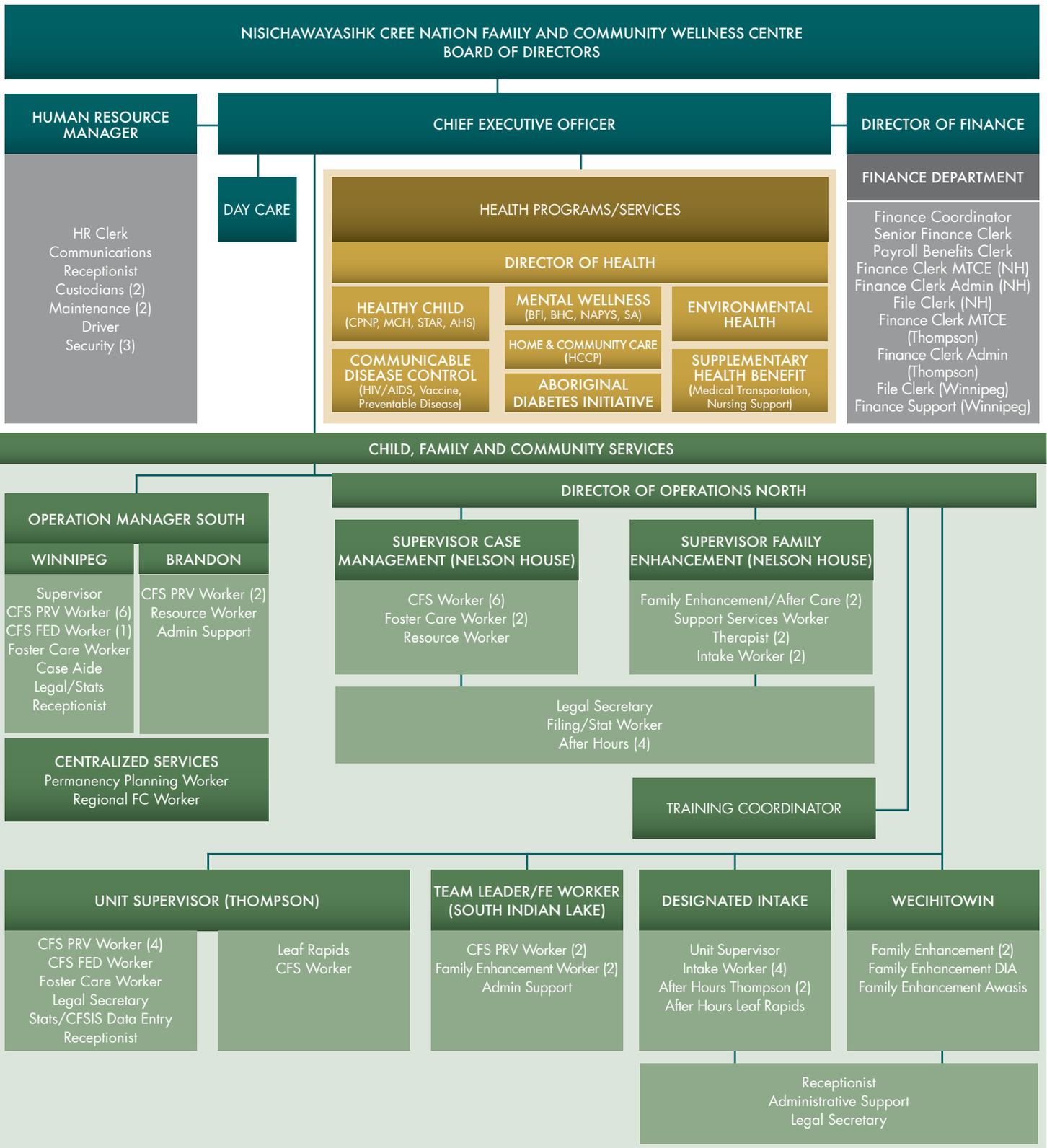
MISSION

To promote, nurture and foster a sense of holistic wellness through the provision of meaningful, community-based and culturally appropriate activities in a safe, respectful, and inclusive environment.

We're Committed to Helping Create Healthier Lifestyles

The NCN Family and Community Wellness Centre was among the first facility of its kind in Canada. It recognizes the strength of the Nisichawayasihk Cree Nation and how much we can accomplish by working together.

ORGANIZATIONAL CHART





KEY HIGHLIGHTS AND CHALLENGES

- Increased participation for many programs including enrollment in childcare and day care
- Funding claw-backs from Province of nearly \$600,000 for Family and Community Services is resulting in a budget deficit
- Dragon Fly pilot project – to address emerging issues surrounding bonding when children return home – was put on hold due to funding
- Future funding growth is uncertain at time of reporting, while budgets are managed
- The Centre continues to support the *Removal of Parent* program in cases of apprehension in Nelson House, but recognizes it is not always an option in Winnipeg, Thompson and Brandon
- Health/Environmental services had an increase in services provided to citizens while the visits to the Public Health Nurse and CHR home visits declined
- The overall number of Children in Care has increased from the last reporting year. Some of this increase is due to a change in how these numbers are calculated
- Diabetes Program recorded a slight increase in the number of diabetics treated
- Maternal and Child Health Program reported the number of babies born in the community was 75 – up from 73 last year
- STAR FASD Prevention Program reached maximum client capacity at current staff levels and conducted 225 home visits
- Counselling Services and Family Enhancement Program increased programming and had almost 2,000 direct points of contact with NCN Citizens this year
- The Fitness Centre recorded visits were down to 3,108 total visits, compared to the previous report of 6,600 visits
- In the fall of 2015 the centre launched a new website (www.ncnwellness.ca) and introduced a new corporate brand and logo for the Centre
- Wellness Centre staff attended the Women's United Nation Conference in March in New York, to present on the world-wide concern of the impacts of residential school on community, missing and murdered Indigenous peoples of our community and the colonial impacts on the community (including the Churchill river diverse). Response was strong internationally to the human rights concerns presented.



Year-In-Review

The NCN Family and Community Wellness Centre provides a wide range of health and wellness programs to Citizens both on- and off-reserve. Our holistic approach to care involves the collective unity of many services working together to achieve improved well-being and health for the individual, family and the entire community.

The following reports highlight some of the accomplishments from the 2015/16 fiscal year for each program along with statistics of individuals participating and receiving care. Programs or departments with goals and objectives for the next year have indicated the plans to improve services to Citizens, while other programs have maintained an effective level of service and will be developing goals in the near future as part of the strategic planning process.



Child, Family & Community Services

OVERVIEW

The NCN Child, Family and Community Services is committed to working with families to build healthy relationships. It is responsible for the investigation of child maltreatment and case management services for NCN children in Nelson House, Thompson, South Indian Lake (OPCN), Winnipeg and Brandon (with a presence in Leaf Rapids).

The Centre is committed to improving the lives of children and families in the communities it serves by engaging in culturally appropriate program planning and service delivery that is coordinated, responsive, and empowering. This commitment to empowerment, combined with using a western traditional model of service delivery has resulted in a reduction of the number of children coming into care as well as the number of families with recurrent involvement with Child and Family Services.

NCN CHILD FAMILY AND COMMUNITY SERVICES PROGRAMS

- Wecihitowin Project
- Foster Care Program
- Family Support
- Removal of Parent Program



HIGHLIGHTS AND/OR CHALLENGES

- The overall number of Children in Care (CIC) has increased from 303 to 336. Some of this increase is due to a change in how these numbers are calculated: extensions of care (EOC) numbers have been added back into the CIC numbers
- The Centre has entered its third year with the Bachelor of Social Work Co-Hort program. Enrollment has remained consistent at about 23 participants
- The Centre has seen a significant reduction in the Provincial Funding Level. Federal funding has increased by about \$200,000, but this number does not fully compensate for the decrease of funds from the province of nearly \$600,000. This has had several impacts, including limited training and the halt of a reunification pilot program
- Provincial funding model going forward has not been confirmed, but the Centre is concerned about its ability to obtain a balanced budget.

GOALS AND OBJECTIVES

- Develop program service manuals, enhance the website and formalize policies, orientation manuals and procedures over the next year
- Establish a centralized intake on NCN, a trained Child Abuse Committee and an Independent Living Program
- Address the difficulty of regular meetings for senior management by incorporating virtual technology to “sit in” from numerous locations
- Continue to focus on leaving children in the home and removing parents from the residence in cases of apprehension
- Focus on pursuing adoptions and legal guardianships with interested foster parents to reduce the 61% of CIC with permanent ward (PW) status
- Increase the number of families transitioned to family enhancement programming through improved and consistent administration, assessment and service delivery.

(Continued from previous page.)

GOALS AND OBJECTIVES

- Improve the coordination of services to children and families using the Circle of Care family planning model for those who need a combination of supports.
- Improve effectiveness of permanency planning services and adoption practices for all children including those with special needs
- Improve the application process for children who require special needs funding
- Improve administration, schedules and reporting functions, by increasing computer proficiency of staff and the revitalization of information technology (IT) and internet/intranet assets both on- and off-reserve
- Improve staff competency, retention, recruitment, safety and professional standards, through a coordinated short and long-term strategy and competitive salary scales
- Explore additional development and annual training for management and staff
- Address short-term projects and funding pressures, such as infrastructure, term positions and BSW training, by using a portion of the Centre's surplus
- Ensure accurate and timely information is sent out by NCNFCWC social media to the public, as it is a quick, easy and effective way to reach out to families
- Ensure that practices reflect provincial standards, regulations, and licensing, including case files, foster homes, face-to-face visits, program development frameworks, etc.
- Encourage relative placements for children and increase the number of culturally appropriate foster care placements
- Stabilize the number of children coming into care through increased family involvement, early intervention, prevention and resource-driven partnerships
- Reduce the number of children in care through the provision of proactive and culturally relevant programming
- Enhance Board accountability and transparency through effective governance, planning and evaluation
- Integrate service delivery for a wide range of early intervention and prevention programs and services
- Develop emergency response social media activity for NCN Emergency Committee and provide timely distribution of accurate information
- Ensure that practices reflect Provincial standards and regulations through ongoing commitment to continuous improvement and quality assurance.

STATISTICS

Overview of Children in Care

Since last year the Centre has had an increase in the overall number of Children in Care (CIC) cases largely because extensions of care (EOC) were added back to the CIC numbers. While it has not hit the high level as when the Centre first transitioned to the new funding model, it is a significant increase over last year.

| CHILDREN IN CARE STATUS | 2015 | 2016 |
|-------------------------------|------------|------------|
| Apprehension | 32 | 58 |
| Temporary Ward | 36 | 31 |
| Perm Ward – Court | 184 | 187 |
| Perm Ward – VSG | 7 | 18 |
| Voluntary Placement Agreement | 36 | 21 |
| Transitional | 0 | 0 |
| Petition Filed | 7 | 20 |
| Order of Supervision | 1 | 0 |
| TOTAL | 303 | 336 |

| CIC BY LOCATION | 2014 | 2015 | 2016 |
|-------------------|------------|------------|------------|
| Nelson House | 125 | 82 | 102 |
| South Indian Lake | 17 | 15 | 7 |
| Thompson | 58 | 52 | 79 |
| Leaf Rapids | 18 | 10 | 16 |
| Winnipeg | 119 | 120 | 106 |
| Brandon | 19 | 24 | 26 |
| TOTAL | 356 | 303 | 336 |

Comparison of Apprehension Cases by Year

| APPREHENSION CASES (BY YEAR) | NO. |
|------------------------------|-----------|
| 2011 | 79 |
| 2012 | 70 |
| 2013 | 67 |
| 2014 | 49 |
| 2015 | 32 |
| 2016 | 58 |

Aboriginal Status

| ABORIGINAL STATUS | RECORDED # |
|-------------------|------------|
| Inuit | 0 |
| Metis | 2 |
| Non-Status | 104 |
| Not Aboriginal | 2 |
| Treaty Status | 222 |
| Unknown | 0 |
| TOTAL | 330 |

Placement

| PLACEMENT | RECORDED # |
|--------------------|------------|
| Foster Home | 229 |
| Residential Care | 37 |
| Independent Living | 70 |
| Own Home | 11 |
| TOTAL | 347 |

Caseload

| CASELOAD | RECORDED # |
|---------------------------|------------|
| Children in Care | 330 |
| Extensions in Care | 11 |
| Voluntary Family Service | 24 |
| Protection | 183 |
| Expectant Parent Services | 13 |
| Family Enhancement | 44 |
| TOTAL | 605 |

Count of Children Under Suspension

| STATUS | RECORDED # |
|---------------------------|------------|
| Children Under Suspension | 3 |

On Reserve and Off Reserve Foster Homes and Places of Safety

| FACILITY COUNT | ON RESERVE | OFF-RESERVE |
|------------------|------------|-------------|
| Foster Homes | 36 | 172 |
| Places of Safety | 29 | 25 |
| TOTAL | 65 | 197 |



WECIHITOWIN PROJECT

The Wecihitowin project provides First Nations children and families ongoing support by involving them in positive traditional and cultural activities and other resources to help them choose healthier living options. Through early intervention, prevention, education, and family supports the program has a continuous circle of connections that improve the well-being of individuals who may be experiencing difficulties in their lives.

A team of four workers including two NCN-CFS workers and two Awasis workers deliver services and programs which include community family spirit events, sharing circles, recreation, land-based activities, counselling, parent services, administrative/logistics assistance, linkages to other community resources, advocating, court support, transportation services as well as family and case conferencing.

RESOURCES AND PROGRAMS USED:

- *Raising the Child*
- *Back to Basics*
- *Rediscovery of Families Program*
- *Circle of Care Model*
- *Wabano Parenting Bundles*
- *I am a Kind Man Program Manual*
- *Journey Beyond Abuse Manual*
- *When a Child Becomes Strong*
- *Mother of Red Nations – “Understanding the Child Welfare System”*
- *Traditional Parenting Program Manual*
- *Anger Management*
- *Parent & Teen Communication*

HIGHLIGHTS AND/OR CHALLENGES

- Wecihitowin assisted the Awasis Thompson with Easter hamper deliveries and a party (11 families received food hampers as well as Easter baskets for the children) and a Christmas Party as well as holiday hamper deliveries
- Wecihitowin class attended the “Hope North Suicide Prevention Workshop”
- Over the reporting year, Wecihitowin held clothing giveaways, craft nights, open houses, community barbecues, sweat ceremonies (every Sunday), Merchandise Bingo night, cook outs, snowshoeing & snaring lessons, family potlucks, land-based cultural activities, games nights, Sharing Circles, sun-dances, smudging, drumming, women’s teachings and other community/family events or activities
- Wecihitowin assisted with participant registrations to summer family camps and participation at Teepee teachings
- Wecihitowin staff participated in training and workshops including: Mile 20 Spring Ceremonies, traditional medicine harvests, “Life Skills” program, Awasis Family Enhancement training, Awasis Conferences, Trauma and addictions Workshops, cultural teachings, All Nations Gathering, “Practical Strategies for Engaging Youth” Workshop, Triple P training, CFSIS training, FASD Alliance Workshop, CFSIA training
- Two recorded referrals were made to Crisis Shelter, two to Addictions Foundation of Manitoba, one referral to AFN and one to mental health services.



GOALS AND OBJECTIVES

- Protect children through support of families
- Apply education, skills, resources, and methods to families that will reduce stressors and conditions that may pose risks to children.
- Provide practical strategies to strengthen families
- Shift from Intervention to Prevention
- Teach parents Harm Reduction skills and strategies
- Ensure that family is fully supported by using the Circle of Care model on first contact and with file closure
- Develop plan to ensure progress is monitored and achieved
- Implement a Holistic Traditional practice and approaches to service delivery
- Reducing the number of children in care of agencies
- Provide opportunities for families to connect with the culture and the land
- Use the Medicine Wheel Teachings as a foundational tool for helping families know and understand the importance of balance in their own lives, but also in the lives of their families
- Establish and keep an open door policy with participants to ensure the continuity of support
- Build relationships with elders, family members, and community based resources
- Address family issues using the strengths-based perspective that exists within First Nations families.

STATISTICS AND REPORTS

In the 2015/16 fiscal year Wecihitowin's programs, were carried out in three cycles as follows:

| CYCLE #1 (APRIL - JUNE 2015) | # REGISTERED | # COMPLETED |
|--|--------------|-------------|
| Orientation Week | 7 | 4 |
| Addictions IFO Sessions | 4 | 2 |
| Parenting Bundles | 8 | 2 |
| Understanding Child and Family Services | 7 | 3 |
| Circle of Security | 6 | 1 |
| Family Life | 6 | 0 |
| Anger Management and Healthy Relationships | 7 | 2 |
| General Parenting | 11 | 9 |
| Traditional Parenting | 11 | 2 |
| TOTAL | 67 | 25 |

10 referrals were recorded from NCN, 36 from AWASIS and Split Lake and 10 from other agencies or self-referrals.

| CYCLE #2 (OCTOBER - NOVEMBER 2015) | # REGISTERED | # COMPLETED |
|---|--------------|-------------|
| Orientation Week | 11 | 7 |
| Culture and History | 7 | 6 |
| Understanding Child and Family Services | 6 | 6 |
| Traditional Parenting | 10 | 5 |
| Minopimatisowin | 9 | 6 |
| Kindness "I am kind" Coed | 9 | 8 |
| Life Skills Discussion | 7 | 7 |
| TOTAL | 59 | 45 |

21 referrals were recorded from NCN, 39 from AWASIS and Split Lake and 4 from other agencies or self-referrals.

| CYCLE #3 (JANUARY - MARCH 2016) | # REGISTERED | # COMPLETED |
|---|--------------|-------------|
| Orientation Week | 11 | 10 |
| Culture and History | 11 | 9 |
| Understanding Child and Family Services | 10 | 3 |
| Acknowledging Anger | 14 | 8 |
| Minopimatisowin | 10 | 8 |
| Traditional Parenting | 9 | 5 |
| Circle of Security | 6 | 4 |
| Life Skills | 7 | 4 |
| Positive Parenting | 5 | 5 |
| TOTAL | 83 | 56 |

32 referrals were recorded from NCN, 15 from AWASIS and Split Lake and 34 from other agencies or self-referrals.

INTERVENTION AND REMOVAL OF PARENT PROGRAM



With the recent and long-awaited findings on Canada's residential school system, First Nations communities fear that generational loss is happening again due to the large numbers of aboriginal children in foster care. The NCN Family and Community Wellness Centre may well be "ahead of the curve" when it comes to services and innovative approaches to care for children involved in apprehension or potential foster cases. In Nelson House the Centre operates a *Removal of Parent program* – a community approach to reducing the trauma of child apprehension. The parent is removed from the home to take part in culturally appropriate counselling or care programs while the child is supported in-home by family or support staff. Families are then reunited after a care plan has been implemented and completed.

The Truth and Reconciliation Commission (TRC) concluded – after six years of research – that the treatment of aboriginal people in residential schools amounted to "cultural genocide." Despite the fact that the last institution closed in 1996, survivors say that the country's foster system is having a similarly destructive effect on the community.

The Wellness Centre's *Intervention and Removal of Parent program* is leading the way to alternative care, and has pioneered a new approach for both parent and child that will keep children out of foster care.

Prior to the Removal of Parent Program, apprehension was the only recognized approach to secure a child from an unsuitable or unsafe living environment.



HIGHLIGHTS AND/OR CHALLENGES

- The overall number of Children in Care (CIC) has increased from 303 in 2014/15 to 336 in 2015/16. Some of this increase is due to a change in how these numbers are calculated: extensions of care (EOC) numbers have been added back into the CIC numbers.

GOALS AND OBJECTIVES

- In 2016/17 the Centre will be focusing more on the approach of leaving children in the home and removing parents from the residence in cases of apprehension
- The Centre will continue to provide methods to care for children that are influenced by child apprehension and further reduce situations where the child is at risk.

Public Health

OVERVIEW

Public Health is focused on illness prevention, health promotion and health protection across the lifespan of Citizens. Our programs aim to provide conditions in which people can be healthy and focus on the entire population, not on individual patients or diseases. Our public health department consists of one Public Health Nurse (PHN), four Community Health Representatives (CHRs) and one medical vehicle driver to deliver child and family health-related services.

Our public health experts specialize in prevention, awareness, education and protection in areas that include pre/postnatal clinics, chronic illness, fetal alcohol spectrum disorder (FASD), immunizations, programs for high risk pregnant moms and postpartum mom and baby visits.

Education, support and referrals are also provided for HIV/AIDS education, sexually transmitted infections (STI), postpartum, flu clinics, diabetes and other health related issues as deemed necessary.

We also conduct safety and regulation tests and monitor for environmental issues such as mould, insects, water, sewage concerns and restaurant inspections.



PUBLIC HEALTH PROGRAMS INCLUDE:

- Immunizations
- Aboriginal Diabetes Initiative
- Maternal Child Health Program
- HIV/AIDS, Disease Prevention
- STAR FASD Program
- Prenatal Program
- Medical Transportation
- Nursing Support
- Mental Wellness Programs
- Environmental Health
- Home & Community Care



HIGHLIGHTS AND/OR CHALLENGES

- Conducted educational sessions (including reproduction health Grade 5 classes and pre/postnatal classes); chronic clinics; blood pressure and blood sugar checks; and immunization clinics (such as pre-school blitz, flu clinic and mandatory school vaccines)
- Implemented Mustimuhw charting and yearly calendar
- Submitted proposals for an increase in funding to supplement CHR training budget
- Environmental Health Services completed over 5,000 meaningful tasks to improve and monitor Citizen safety.

GOALS AND OBJECTIVES

- Enhance Communicable Disease Control (CDC) to prevent the occurrence and spread of communicable disease through increased prevention, awareness and immunizations
- Increase awareness and participation for members to receive vaccines
- Conduct more and increase attendance for education, awareness, prevention monitoring and surveillance of STIs including HIV
- Improve administration functions and record keeping for all CDC activities
- Improve health promotion and injury/illness prevention by:
 - Improving prenatal classes/clinics, postnatal visits, postnatal classes, family planning, breastfeeding
 - Enhancing child health clinics, injury prevention education, development assessments, nutrition guidance, parenting
 - Broadening school health resources for teachers for vision, hearing, growth screening and adolescent health education on sexual health and puberty
- Improving adult health via prevention of diseases such as cancers, diabetes and hypertension
- Enhance administrative procedures including notification to parents, collecting consent forms, assisting in-home health teachings
- Create additional awareness to programs through organized health education workshops, posters, newsletters and website
- Further develop client and community advocacy, cultural liaison and environment health initiatives
- Further integrate health planning by coordinating annual activities, sharing our vision, and by enhancing teamwork to ensure programs work together
- Explore the effective use and implementation of eChart, Panorama and the Mustimuhw Community Electronic Medical Record (cEMR) client-centric electronic medical recording and charting system to improve record keeping
- Evaluate and enhance the use of Telehealth video link services for training and education.

Overview of 2015/2016 Public/Environmental Health Services Provided

| TYPE OF SERVICE | NUMBER COMPLETED 2014/15 | NUMBER COMPLETED 2015/16 |
|--|--------------------------|--------------------------|
| Distribution Sites | 255 | 381 |
| Cisterns (Holding tanks) | 232 | 120 |
| Water Treatment Plants: Raw | 32 | 66 |
| Water Trucks | 9 | 20 |
| Total Number of Samples | 6 | 603 |
| Home inspections (Mould/crawl spaces/plumbing) | 87 | 42 |
| Fumigation | 31+8 re-infestations | 33 |
| Public Health Nurse visits/CHR Home Visits | 500 (73 infants) | 104 |
| Tank Cleaning Requests | 27 | 16 |
| Reminder Letters for Vaccinations | 490 | 143 |
| School/Community Presentation | 10 | 18 |
| Infection control (FNIHB) | 1 | 1 |
| Contraceptive Distributions | 1,025 | 4,550 |
| Rabies report | 12 | 8 |
| STIS chlamydia | 59 | N/A |
| STIS gonorrhea | 7 | N/A |
| Syphilis | 0 | N/A |
| HIV/AIDS | 0 | N/A |
| HEPS | 0 | N/A |
| Immunization carnival/Health Fair | 435 | N/A |
| Pandemic Planning | 35 | N/A |
| TOTAL | 3,828 | 6,105 |

IMMUNIZATION AND VACCINATION PROGRAM



Immunizations and vaccines are voluntary in Manitoba and help protect all Citizens, and especially those with health conditions, from disease. The immunization program conducted the following shots this year:

Children Under 18 months of age

- Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenza type b (DTaP-IPV-Hib)
- Pneumococcal Conjugate 13 valent (Pneu-C-13)
- Rotavirus
- Meningococcal C Conjugate (Men-C-C) Vaccine
- Measles, Mumps, Rubella (MMR) Vaccine

Total Vaccinations Recorded for Children Under 18 mths. | 241

Children 4-6 years of age

- Tetanus, Diphtheria, Pertussis, Polio (Tdap-IPV)
- Pneumococcal Conjugate 13 valent (Pneu-C-13)
- Measles, Mumps, Rubella (MMR) Vaccine

Total Vaccinations Recorded for Children Age 4 – 6 | 18

Children in Grade 4

- Meningococcal C Conjugate (Men-C-C) Vaccine
- Hepatitis B Vaccine

Total Vaccinations Recorded for Children in Gr. 4 | 86

Total Vaccine Doses Administered in 2015/16

| VACCINES | DOSES 2014/15 | DOSES 2015/16 |
|----------------------------------|---------------|---------------|
| DTaP-IPV-Hib | 280 | 127 |
| Tdap | 75 | 31 |
| Hepatitis B | 172 | 103 |
| HBV – Hepatitis B | 63 | 25 |
| Influenza (Fluzone Quadrivalent) | 800 | 391 |
| MMRV | 70 | 15 |

Children in Grade 6

- Human Papillomavirus (HPV)

Children 14-16 years of age

- Tetanus, Diphtheria, Pertussis (Tdap) shots were given to 31 children
- Hepatitis B Vaccines were given to 13 children
- Human Papillomavirus (HPV) shots were given to 25 children

Total Vaccinations Recorded for Children age 15-16 | 69

INFANT IMMUNIZATION

In the first two months after birth, newborns are scheduled to have regular monthly immunization shots. These shots are provided within the program.



DIABETES PROGRAM

The staff of the diabetes program works with NCN Citizens to help decrease the rising rates of diabetes by conducting workshops at the local schools, youth centre and the Wellness Centre.

HIGHLIGHTS AND/OR CHALLENGES

- Conducted workshops to educate community members about healthy eating, healthy cooking, shopping healthy, reading labels, and physical activities
- Provided information on the services and supports available to members with diabetes or those caring for a family member with diabetes (in Cree language or with an interpreter)
- Held fitness classes, cooking classes, traditional activities, gardening and healthy meals within the school
- Conducted home visits, to ensure all diabetics were receiving proper care and treatment
- Worked in partnership with all health programs to ensure clients received safe and adequate care and treatment in accordance with Manitoba Diabetes Care recommendations
- Provided foot care referrals to Thompson/HCCP
- Referred patients to Diabetes Integration Project and Diabetes Retinal Screening Program (NHRA) every 3-6 months
- Referred diabetics to the gym, which is free for members to access
- Acknowledged National Aboriginal Diabetes Awareness Day on May 6, 2016
- Conducted 25 Telehealth sessions between April 2015 and September 2016
- Held a Chronic Breakfast with 298 participants and Nutrition Month with 25 participants
- Promoted gardening within the community to give members access to healthy fruits and vegetables. We have about 25 gardeners, 28 gardens and one greenhouse in the community
- Scheduled 107 Diabetes Integration Project Appointments and had 39 participants. Three sessions were cancelled or rescheduled.

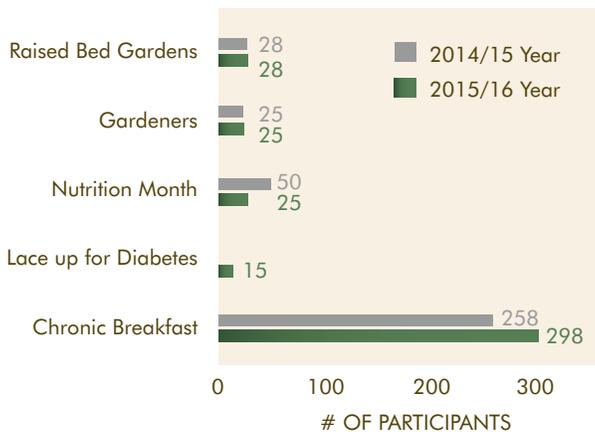


STATISTICS

Diabetics and Diabetes Sessions

| DESCRIPTION | 2014/15 | 2015/16 |
|---|-------------------------------|--------------------------------|
| TOTAL DIABETICS: | 147 | 154 |
| TYPE I DIABETICS: | Male (1) Female (2) | Male (1) Female (1) |
| TYPE II DIABETICS: | Male (51) Female (96) | Male (54) Female (98) |
| TELEHEALTH SESSIONS HELD: | 24 | 25 |
| DIABETES INTEGRATION PROJECT ATTENDEES: | 86 scheduled, 30 showed (35%) | 107 scheduled, 49 showed (46%) |

Participants in Diabetes Programs and Activities



Note: Retinal Screening, Dietitian visit from D.I.P, World Diabetes Day, National Aboriginal Diabetes Awareness, Biggest Loser Competition, Healthy Cooking Class, Gardening Workshop, Nourishment project and the Foot care program statistics were unavailable at time of reporting.



MATERNAL CHILD HEALTH PROGRAM

The *Manitoba First Nations Strengthening Families Program* promotes the realization of strong, healthy, supportive First Nation families by helping them to live a balanced lifestyle with access to holistic care. The voluntary program uses a strength-based empowering approach, grounded in First Nation culture to promote healthy children, families, women (preconception, prenatal, birthing, postpartum) and fathers.

Key components and service areas of the program include: health promotion; home visitation; referrals; access and case coordination of services for families enrolled in the program; and linkages with other services to support prenatal women and families. The program also provides case management and supports for families with complex needs.

PROGRAM COMPONENTS INCLUDE:

- Health Promotion
- Home Visitation
- Referral, access and case coordination of services for families enrolled in the program; and
- Linking with other services to support the prenatal and family.
- Case Management for families with complex needs.



HIGHLIGHTS AND/OR CHALLENGES

- In 2015/16 the number of babies born to mothers in the community was 75 – up from 73 last year.
- Celebrated 10 years of operation for the program.

GOALS AND OBJECTIVES

- Empower families
- Promote physical, emotional, mental and spiritual well-being of women, children, and families
- Promote trusting and supportive relationships – parent/child, care provider/family, and resource to resource
- Increase the community's capacity to support families

STATISTICS

Participation in 2015/16

| ACTIVITY | TOTAL |
|--|-----------------------------------|
| Intake | 40 |
| Development Screens | 59 |
| Home Visits | 175 |
| Referrals to Maternal Child Health Program | 2 |
| Strengthening Families Screen | 20 |
| Decline/Discharge | 84 |
| Edinburgh Postpartum Screens | 135 (30 prenatal, 105 postpartum) |

PRENATAL NUTRITION PROGRAM

The program for expectant mothers provides nutrition screening, counselling, education; maternal nourishment and breastfeeding education; promotion and support. The overall goal of CPNP is to improve nutritional health of mothers and infants. In 2015/16 there were 55 prenatal and 25 post-natal participants. There were 20 participants who made pillows in our breastfeeding support group and a total of 378 milk coupons were distributed.

PREGNANCIES

Certain pregnancies are considered higher risk to carry full-term. The Centre offered assistance to 70 pregnant mothers considered higher risk. The recorded pregnancies with diagnosed risk factors were:

- Maternal age less than 20 (Pregnancies: 8)
- Maternal age 35 or higher (Pregnancies: 3)
- Smoking during pregnancy (Pregnancies: 34)
- Alcohol/substance use (Pregnancies: 5)
- Diabetes diagnosed before or after pregnancy (0)
- Previously diagnosed postpartum mood disorder (0)

BIRTHS

A total of 75 births were reported in the community of those 64 were full-term and 11 were pre-term. Often pre-term births require additional health services and follow-up.

| BIRTH WEIGHT CATEGORY | FULL TERM | PRE TERM |
|--|-----------|-----------|
| Less than 5 lb. 9 oz. (less than 2500g) | 0 | 11 |
| Between 5 lb. 9 oz. and 8 lb. 11 oz. (2500g – 4000g) | 56 | 0 |
| More than 8 lb. 11 oz. (more than 4000g) | 8 | 0 |
| TOTAL | 64 | 11 |

BREASTFEEDING PROGRAM

Mothers are encouraged to breastfeed babies in the early development. Mothers in the program are educated on the benefits of breastfeeding and monitored for the duration of the care in the first year. The following statistics were recorded for the 42 mothers who recorded feeding duration in 2015/16:

| DURATION OF BREASTFEEDING | NUMBER OF PARTICIPANTS |
|---|------------------------|
| Breastfed less than 3 months (15 weeks) | 13 |
| Breastfed for 6 months (24 weeks to 27 weeks) | 2 |
| Breastfed for longer than 6 months (28 weeks +) | 15 |
| Did not initiate breastfeeding | 11 |
| Did not report | 1 |
| NUMBER OF PARTICIPANTS | 42 |

INFANT SOLID FOOD INITIATION

For postnatal care the infants who turned 6 months in the reporting year who initiated solid food during the time periods were as follows:

| SOLID FOOD INITIATION TIMEFRAME | NUMBER OF INFANTS |
|---------------------------------------|-------------------|
| Before 6 months | 6 |
| At 6 months | 35 |
| After 6 months | 9 |
| Unknown when solid food was initiated | 25 |
| TOTAL | 75 |



STAR FASD PREVENTION PROGRAM

The vision of the *Success Through Advocacy Role Modeling – Fetal Alcohol Spectrum Disorder* (STAR FASD) program is to reduce the number of babies exposed to and living with the effects of alcohol and/or drug exposure while in their mother’s womb. It is a voluntary, harm reduction model based on developing positive, supportive, mentoring relationships with women who have used substances during their current or recent pregnancy. These relationships are maintained for three years: long enough to help these women make changes that will make a difference in their lives.

The STAR program values the lives of women who are at risk of giving birth to alcohol/drug affected children. They are typically from families characterized by substance abuse, neglect, poverty

and domestic violence. They have been labelled “hopeless,” and mistrust the professionals, systems and resources meant to help them. The STAR Program believes that through relationships with women who themselves have overcome some of these challenges, our participants can make important changes for their own health and their families.’ These changes will reduce the number of children at risk of suffering the harmful consequences of alcohol and/or drug exposure during pregnancy.

The STAR Program’s goals are achieved through an evidence–based, home visitation, mentoring, and case management program delivering culturally safe and appropriate interventions and support services to high-risk women and their target child.

HIGHLIGHTS AND/OR CHALLENGES

- In 2015/2016, the program hosted 30 active clients. Five clients are no longer active or are transient, and 6 were closed.
- This year our program enrolled 13 new clients, and we are at maximum capacity. Both mentors have 15 clients each for a total of 30 participants.
- Conducted 225 home visits to clients of the 253 attempts
- 30 clients were visited on a bi-weekly basis and 15 weekly
- We have made further inroads into the community, through our health fair, immunization carnival, school presentations, and CPNP classes.
- Our program manager is enrolled in a two-year program called Community Centre Therapy Program. This professional development will further facilitate our goals and objectives.

GOALS AND OBJECTIVES

- To assist women to engage in harm reduction strategies and/or obtain alcohol and/or drug treatment
- To support women in their efforts to provide a safe and healthy environment and improved quality of life for themselves and their children
- To link women to community resources in order to help them reduce isolation, to improve access to needed resources, and to become more independent
- To reduce the number of alcohol/drug exposed births through abstinence from alcohol/drugs and improved access to reliable family planning methods
- To demonstrate to community service providers strategies for working more effectively with this population through advocating to improve the outcomes for both women and children
- To facilitate access to FASD diagnosis and to connect clients to multidisciplinary teams and other internal/external supports and services.

MEDICAL TRANSPORTATION

Medical Transportation has been successful making runs to Thompson daily and on weekends. The vehicles include a passenger 4X4, a passenger van, a wheelchair accessible van and a 12 passenger van. Nearly 10,000 NCN Citizens are transported annually for local or out-of-town medical appointments by truck, van and aircraft. The program is working

to improve patient scheduling and notification procedures. Vehicle maintenance due to extreme road and weather conditions remains an impact on fuel and repair costs. A 20X20 maintenance garage has been recommended along with a replacement for the ford van by 2017.



NURSING STATION

The NCN Nursing station provided immediate medical and health care and immunizations to NCN Citizens in the reporting year. More serious medical patients were transported to Thompson or Winnipeg via transportation services.



Home and Community Care

OVERVIEW

Home visits and assessments are conducted to address the needs of clients requiring such things as continuing care, extended care and respite. The program offers elderly people with disabilities and individuals with persistent or acute illnesses the opportunity to receive the care they need in their home and community.

Home care is provided mainly by registered nurses, licensed practical nurses and certified health care aides. Home care nurses and health care aides work together in cooperation with other relevant community-based services and programs to focus on the client. HCCP nurses maintain competency through online training seminars and telehealth video training.

When possible, HCCP focuses on care within the client's home. Clients are more relaxed in the privacy of their own home and are more compliant

with treatments. This contributes to faster healing time and more initiative in managing their own health.

TYPES OF SERVICES PROVIDED:

- Structured client assessment
- Referrals and linkages within and outside the community (i.e. BRHA-physiotherapy, dietitian, foot care, respite, hearing centre and homecare)
- Managed care process, home care nursing services and personal care services (i.e. palliative care, bath/personal care, homemaking referral, home care maintenance, health promotion, program monitoring/reporting requirements, wheel chair transportation within the community, teaching of medication regime and ordering and delivery of equipment and supplies)
- Record keeping and data collection.

HIGHLIGHTS AND/OR CHALLENGES

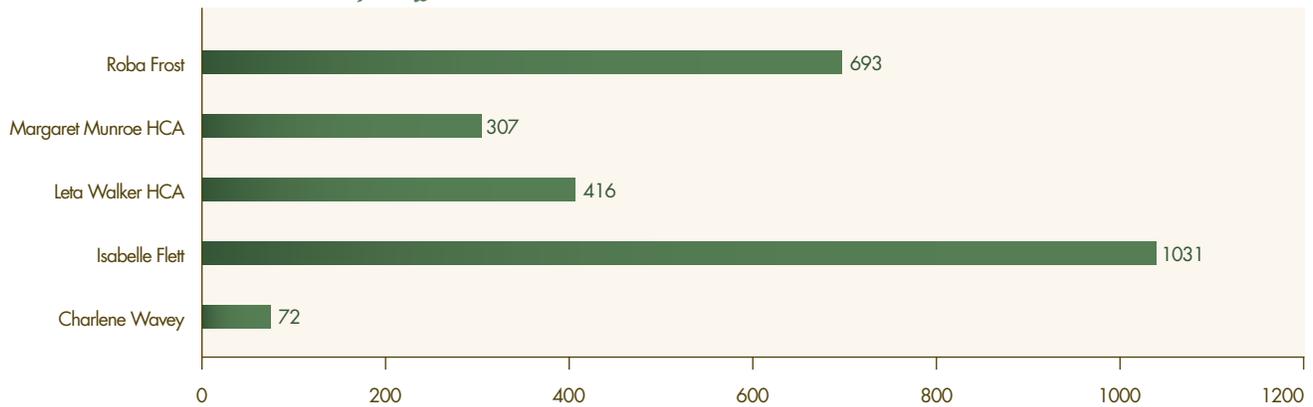
- HCCP charting and documentation is now electronically uploaded on the Mustimuhw eCMR system
- In June, HCCP coordinator Glenda Gray presented a webinar to First Nations Communities across Canada about effective practices on building and maintaining partnerships
- Staff attended various training and improvement programs including: eSDRT and Mustimuhw training, legal issues in nursing, interpretation of lab tests, geriatric gems, pediatric TB education, wound care and surgical wound webinars, non-violent crisis intervention and KTC quarterly meetings
- HCCP continues to work closely with the Regional Health Authorities to ensure NCN Citizens are aware of health services available to them while out of the community. HCCP communicates with NRHA and WRHA to discuss discharge planning for NCN Citizens to ensure services/medical equipment are in place.

GOALS AND OBJECTIVES

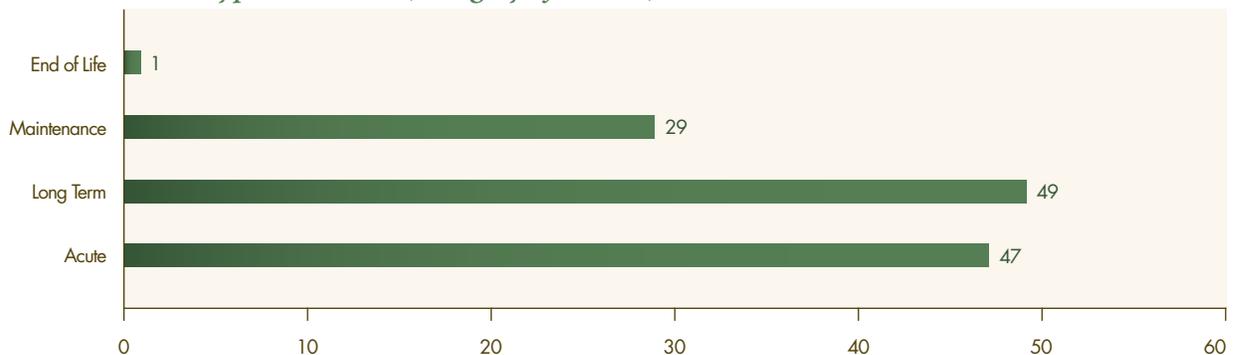
- Improve safe, competent and efficient care services to clients, their families and/or support systems
- Further enhance the services already in the community
- Assist client, family member and supports to acquire and maintain emotional, mental, physical and spiritual well-being and strive towards independent living by providing holistic care and support services
- Improve quality services through ongoing staff and professional development
- Demonstrate improved accountability in all areas of service management
- Uphold the required nursing education competency as required through the College of Registered Nurses by completing online training seminars; Tele health video training and attending the health related courses.

STATISTICS *Home and Community Care Client Type 2015/16 –Category of Care Service*

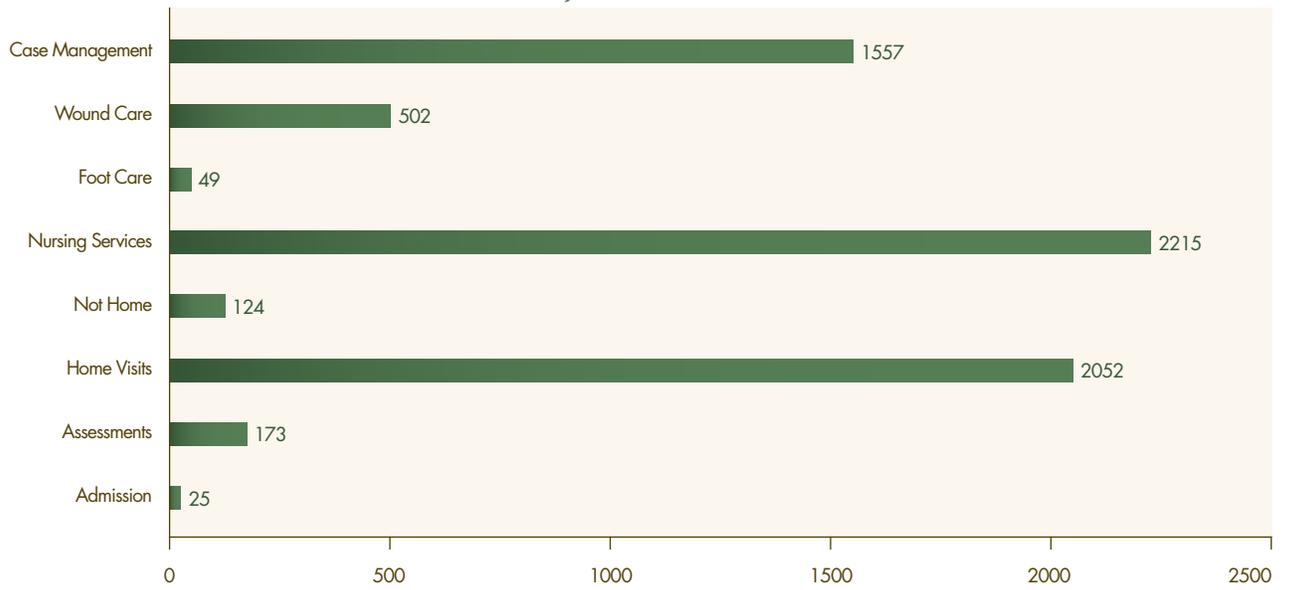
Encounters by Staff 2015-2016



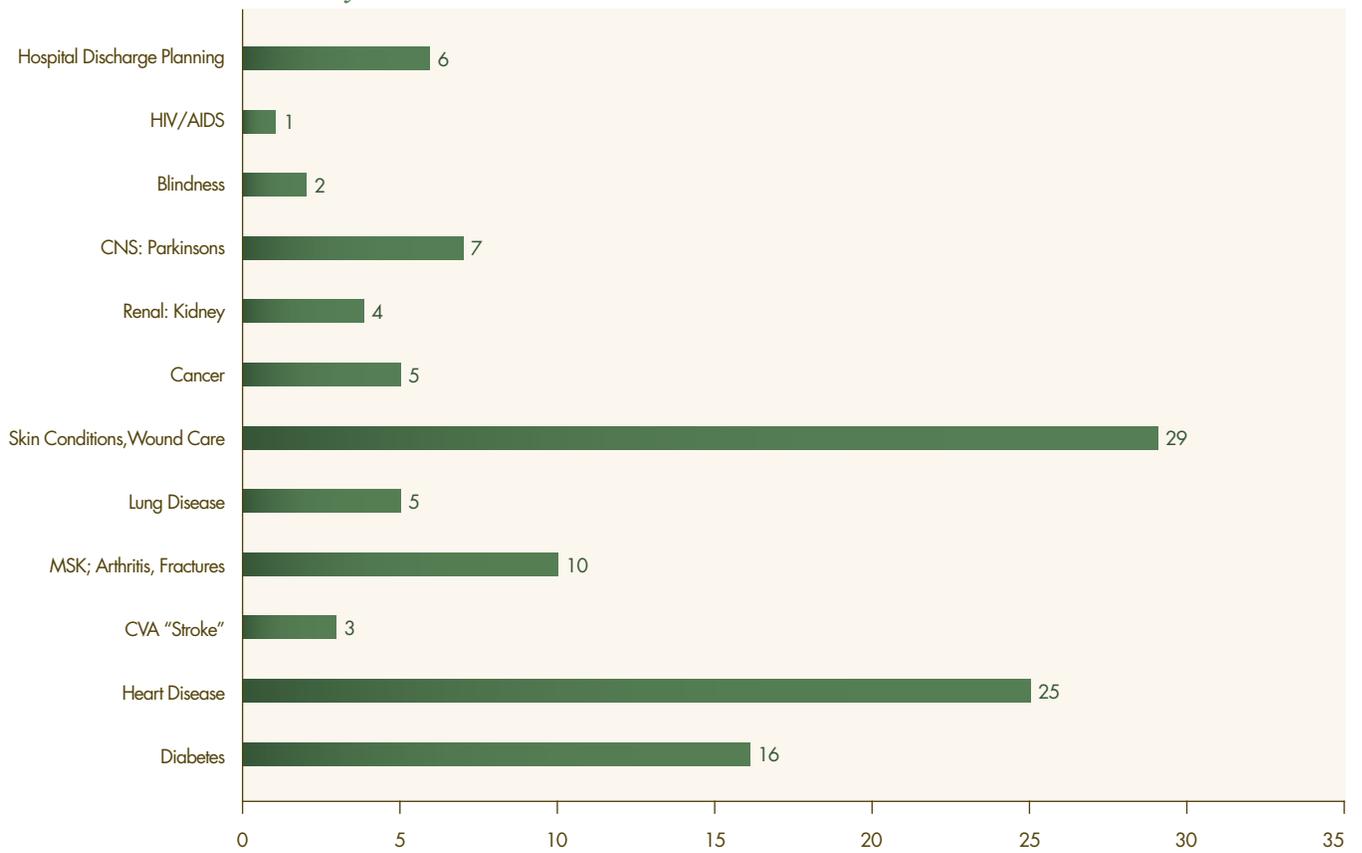
Client Type 2015-2016 (Category of Service)



Home Care Total Service Delivery



Reasons for Home Care Services 2015-2016



Counselling Services and Family Enhancement Program

OVERVIEW

The Counselling Services Program is one of the Family and Community Wellness Centre services that strives to promote healing and assistance in enhancing the lives of families in NCN. The Family Violence Initiative Program and Building Healthy Communities Program have been combined to meet the holistic needs of our community and establish a coordinated community-based service approach to all aspect of counselling.

It is designed to promote and enhance community wellness and individual well-being by providing holistic programming to empower individuals and families. The programming offered includes the *Rediscovery of Families Project*, individual, couples and family counselling, critical incident stress debriefing, advocacy, bereavement support and workshops.

PREVENTION INITIATIVES

In order to effectively address the needs of the community, it is imperative community members are able to participate in relationship building activities, which promote healthy lifestyles and address issues before they escalate.

CRITICAL INCIDENT STRESS DEBRIEFING

Critical Stress Debriefing is a process which supports the community members through a traumatic experience such as the death of a loved one.

The Counselling Services department staff includes a supervisor, two community support workers, an Elder's program coordinator and two family therapists.

COUNSELLING AND FAMILY ENHANCEMENT PROGRAMS:

- Rediscovery of Families
- Circle of Care
- NCN Kehtiyatisak Project



SUICIDE PREVENTION

Suicide continues to be a serious issue in our community. Counselling Services provides intervention to the community with suicide ideations and works to help create awareness and prevention.

ELDERS PROGRAM

The Counselling Services oversees the Elders Program. This program is designed to bring elders together to socialize with their peers, to share stories and enjoy indoor and outdoor activities.

HIGHLIGHTS AND/OR CHALLENGES

- We are delivering more programming in conjunction with more community groups including Family Enhancement, Family Therapist, Elders, RDF, BFI, BHC, NAYSPS, CFS, Headstart, Public Health, Personal Care Home, Education, ADI, HCCP
- Counselling Services had almost 2,000 direct points of contact with NCN Citizens this year.

GOALS AND OBJECTIVES

- Enhance safety and support for all community members and their families
- Provide improved crisis intervention, aftercare, and training for community members and care givers to deal with crisis
- Provide ongoing assessments, counselling services and referrals for treatment, after care and rehabilitation
- Provide both Western and Traditional concepts of therapy to support, guide and assist in alleviating issues through individual, couple, group and family counselling
- Provide traditional teachings that allow community members and their families to relate to each other and create an understanding of each others' roles and responsibilities in their own family unit
- Create improved links between families and community resources
- Continue to report any forms of abuse including threats of suicide or self-harm to child and family service if it involves child abuse of any form
- Increase funding to employ more staff, receive more training, and develop more space.

STATISTICS

Counselling and Support Services Provided in 2015-16

| COUNSELLING SERVICES PROVIDED/SUPPORTED | 2015/16 TOTAL |
|---|---------------|
| Mediation Groups | 2 |
| Community Group Vigils | 10 |
| Peer Support Sessions | 10 |
| Debriefing/CISM groups | 12 |
| Support Groups | 15 |
| Families Anger Management sessions | 20 |
| Bullying and Suicide Presentations | 30 |
| Safe Talk Counselling | 44 |
| Circle of Care (Family Participants) | 8 |
| Girls Hug-in (Participants) | 21 |
| Ladies Night (Participants) | 30 |
| Coming of Age Ceremonies (Participants) | 50 |
| Bereavement Support (Participants) | 60 |
| Youth Conference (Participants) | 222 |
| Family Camps, Men's Retreats, Women's Retreats and Youth Group (Participants) | 350 |
| Elder Programming (Hours) | 800* |

*Recorded in Hours

FAMILY ENHANCEMENT PROGRAM

The program provides support to families to prevent children from being placed in CFS care. Preventative measures provide one-time support and/or emergency respite service and help address any issues that may be relevant. Families experiencing various challenges that interfere with their ability

to provide basic necessities are eligible for support services whether voluntarily or implemented by the program. A strengths perspective and empowerment approach to family planning is used to build family relationships and connections, via supportive solutions or the Circle of Care process.

An eight-week parent program is also used to assist and guide the families. Parents learn how to take care of themselves while learning to connect with their children in new ways and get involved in healthy community supports. Topics covered are Traditional Parenting, Circle of Security, anger management, living in two cultures, roles and responsibility of the parents, orientation to the child welfare system, budgeting, cooking classes, health and hygiene, safe sex/STI, self-care, positive discipline, self-esteem and building healthy relationships.

CIRCLE OF CARE PROGRAM

The *Circle of Care* program is based on the principles of the holistic teachings of the Medicine Wheel. This year, it continued to act as a guide for working with families who require a combination of several services. The program provided support to help individuals and families find balance in their lives.

An emphasis was placed on the values of “planning together” with a direct involvement of family to implement services collaboratively. This means efforts were taken to increase shared responsibility, shared decision-making, shared goals and shared accountability.

The program continues to be coordinated through a multi-service plan approach intended to strengthen families who have a number of challenges. It supports and encourages the active participation of extended family, elders and spiritual leaders.

GOALS AND OBJECTIVES

- Provide children, youth, elders, families and their communities with additional coordinated multi-service support and refine program offerings to achieve maximum benefit for members
- Build on the collaboration and strengths, which already exists within the Wellness Centre and its sub-offices, as well as other services and programs external to the Centre.

REDISCOVERY OF FAMILIES

The purpose of the *Rediscovery of Families* Project is to support families, with guidance and teachings of the Elders and support workers, in finding practical ways to care for families in a manner that is consistent with our community values, beliefs and traditions. This includes opportunities to reconnect with the land through participation in traditional activities such as fishing, setting fish nets, cleaning fish, picking and learning about the medicine plants, picking berries, hunting, ceremonies (pipe and sweat lodge ceremonies) and exploring historical sites like the dancing circles.

HIGHLIGHTS AND/OR CHALLENGES

- Held several on-the-land and traditional activities to facilitate family bonding and unity.

GOALS AND OBJECTIVES

- Raise awareness of traditional values, beliefs and culture as these relate to relationships in NCN families
- Provide families with the support required to identify strengths or issues that have had a negative impact on family functioning and find practical solutions that can be used in every day life
- Reconnect more families with the land as a source of food, medicine and spirituality
- Improve family service approach at the community level when families return from Leftrook Lake to meet service and resource needs.

NCN KEHTIYATISAK (ELDERS) PROJECT

Another Counselling Services Program is the NCN Kehtiyatisak (elders) project. It provides cultural and advocacy services to our elders with weekly peer-to-peer gatherings and periodic outdoor outings for medicine and berry picking, nature walks, and ceremonial camps.

Child Care and Community Wellness

OVERVIEW

Child care in the early development years is important to prepare young learners for their school years. The Centre offers daycare services and plenty of activities for preschool children to assist them in early childhood development.

DREAMCATCHERS HEADSTART PROGRAM

This is an early intervention children development enrichment program for children, from birth to six years of age, and their families living on-reserve. Our time is based on learning centres with a strong focus on language development and parental involvement.

Program services are delivered by early-childhood educators, community workers, elders, administrators, parents and community volunteers. This year's themes and lessons included:

- Nutrition
- Telling/Knowing Time
- Counting money
- Knowing Time
- Seasons
- Easter Egg Hunt
- Sight words and math
- Germs & Hygiene
- Halloween safety
- Birthday parties
- Traditional teachings
- Mini Festival – fun fair, bingo, snow sculpture contest, fishing derby, traditional events

KEY COMPONENTS:

- Culture and language
- Health and hygiene
- Education
- Social support
- Nutrition
- Parental involvement

PROGRAMS:

- Infant/toddler Program (prenatal – 3 years)
- Preschool Program (4-6 year olds)
- Parenting Program

CHILD CARE AND COMMUNITY WELLNESS PROGRAMS INCLUDE:

- Dreamcatchers HeadStart Program
- Jean McDonald Treasures of Hope Day Care Centre
- Fitness Centre

HIGHLIGHTS AND/OR CHALLENGES

- This year 27 preschool students registered for the Head Start Program up from last year's 21 students
- The Infant and Toddler program had 14 children and 8 parents registered compared to 11 children and 9 parents in 2014/15
- A field trip in June took children to Thompson to tour the fire hall, eat at a restaurant and play at the new park
- 2015 Dream Catchers Graduation was held in June for 16 graduates
- The program continues to have no registration fees. Programs, transportation and nutritious snacks are provided free of charge daily. Enrollment is all year at our Centre
- Open houses held in September and January.
- The centre-based program ran forty-two weeks, with a two-week spring break in March.

GOALS AND OBJECTIVES

- Demonstrate more effectively that locally controlled and designed intervention strategies can provide First Nations' preschool children with a positive sense of themselves, and opportunities to develop fully and successfully as young people
- Provide a safe, reliable and well-structured facility of care and programs.



JEAN MCDONALD TREASURES OF HOPE DAY CARE CENTRE

The Centre, offers parents affordable, quality childcare for their children and continues to provide meaningful experiences in a positive learning environment.

The Centre provides opportunities for children to learn and discover new and creative hands-on preschool activities, while they explore and play in various discovery centres. Our Early Childhood Educators provide a daily, structured, theme-based program designed to introduce and enhance social skills and preschool readiness.

HIGHLIGHTS AND/OR CHALLENGES

- The Daycare had 8 infants and 18 preschoolers registered, down slightly compared to the previous fiscal year of 7 infants and 24 preschoolers registered
- Activities this year included traditional teachings, science, drama, fine motor, gross motor, reading, construction in a fun and play-based environment
- Special events included; children's day events show & tell mini winter festival, fun fair, spirit week, fire drill practices and field trips
- Seeds of Empathy (SOE) program taught children about their own feelings and empathy, social inclusiveness, bullying and unkind acts.
- Lower registration was recorded at ATEC.

GOALS AND OBJECTIVES

- Continue to provide meaningful opportunities to learn in a structured, safe and nurturing learning environment
- Improve activities to promote the social, emotional, mental and physical growth of each child
- Enhance partnerships with other child and health programs to support and promote healthy living and positive choices
- Provide stimulating learning environments and facilities
- Reduce fees to make program available to working parents or those needing income assistance.

FITNESS CENTRE

This popular facility is open throughout the week and has an aerobic exercise area, the latest fitness equipment, and change rooms. NCN members can discover how to modify the onset of cardiac disease, lessen the risk of diabetes and build overall strength and endurance for a long, healthy life.

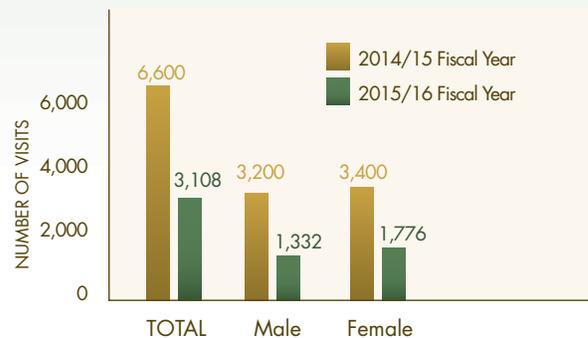
GOALS AND OBJECTIVES

- Provide effective staffing and program offerings to increase participation
- Effectively maintain and improve equipment

HIGHLIGHTS AND/OR CHALLENGES

- The recorded gym visits were 3,108 total visits – of those 1,332 were male and 1,776 female visits. Compared to the previous years gym visits of 6,600, which were made up of 3,200 male visits and 3,400 female visits.

Annual Visits to Fitness Centre



Conclusion

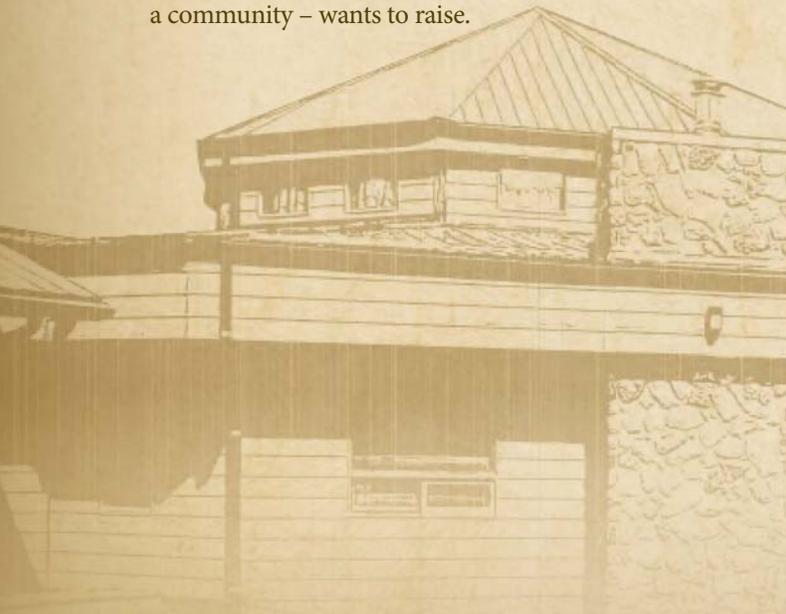
Although it was a challenging year financially, the Centre continues to provide essential services and programs to the Nisichawayasihk Cree Nation without interruption. We are working to ensure quality standards, staffing and expect our overall commitment to holistic care will carry forth.

The NCN Family and Community Wellness Centre continues to deal with community crisis and issues. Citizens are affected by incidences of violence, neglect, drugs and alcohol abuse, sexual abuse and suicide attempts that have become a part of their daily lives.

The Centre will continue to look at new ways to support families and to develop effective and meaningful community-based services. The Centre will also look to the community for guidance – to be there to listen and to share ideas.

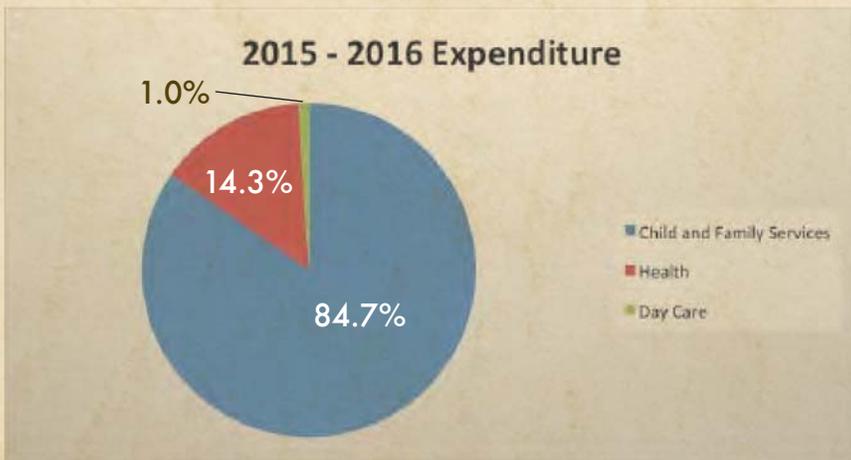
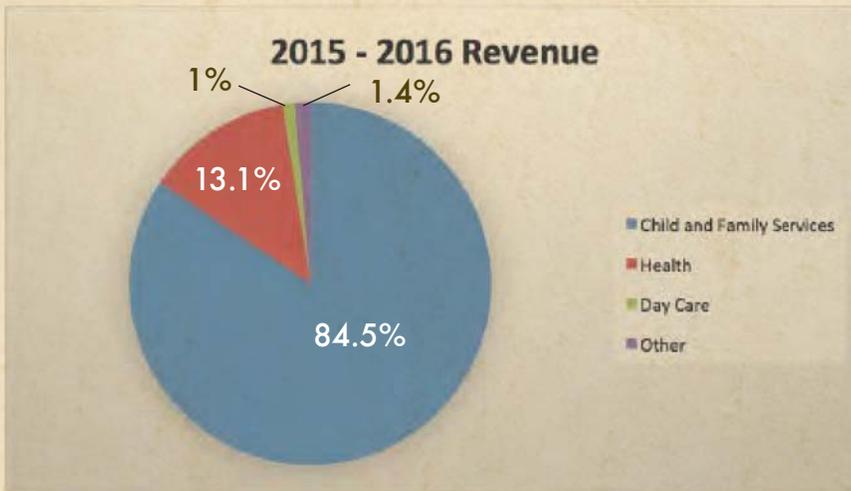
Nisichawayasihk Cree Nation is a community with values, with beliefs and well-connected families. It is imperative the Centre takes an honest look at the future we are creating for children.

It takes a community to raise a child and it is up to everyone to decide what kind of children NCN – as a community – wants to raise.



Financial Summary

In 2015/16, the NCN Family and Community Wellness Centre received just over \$23.8 million in revenue and expended just over \$23.8 million in core operations and programs, resulting in a \$30,910 deficit for the fiscal year. Accumulated surplus for the Centre currently sits at just over \$4.0 million. The surplus is created by the Federal CFS Activities. While the Centre is working on a spending plan for the surplus funds, carrying out those plans are challenging due to the significant receivables owing from the funders.



The NCN Family and Community Wellness Centre received an unqualified audit report for the year ended March 31, 2016. To view copies of the complete audited financial statements and notes to the financial statements please contact the NCN Family and Community Wellness Centre. Where/if discrepancies exist between this report and the full audited report, the complete audited financial report shall be considered final.



Nisichawayasihk Cree Nation
FAMILY AND COMMUNITY
Wellness Centre Inc.

“In unity we promote community awareness,
empowerment and a safe environment
as we move toward holistic wellness.”



Nisichawayasihk Cree Nation
FAMILY AND COMMUNITY
Wellness Centre_{Inc.}
A HOLISTIC APPROACH TO COMMUNITY WELLNESS

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