

ANNUAL REPORT 2017-18



A Holistic Approach to
Community Wellness



Nisichawayasihk Cree Nation
FAMILY AND COMMUNITY
Wellness Centre Inc.

2017-18 Annual Report

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 "Ketiatisahk" (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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Please note: Financial Statements for the 2017-18 reporting year can be requested by contacting the NCN Family and Community Wellness Centre Inc.

Message from the CEO

Tansi. I am pleased to present the 2017-18 Nisichawayasihk Cree Nation Family and Community Wellness Centre annual report. It outlines the goals, accomplishments and highlights of the Centre's activities that serve our Citizens in Nelson House, Thompson, South Indian Lake, Leaf Rapids, Brandon and Winnipeg.

As our Nation continues to make bold moves towards self-determination, so to must our Citizens, families and community evolve. Planning for the success and well-being of the next seven generations means sowing the seeds now. Our holistic approach to community wellness creates opportunities for mental growth, physical health, and spiritual and emotional prosperity.

The wide spectrum of our programming is impressive, and enhances wellness for NCN Citizens in every stage of life, from the Dreamcatchers Headstart program to the Kehtiyatisak program. The environmental health department, foot care, and our programs for mothers and babies, among others, take care of the physical. Workshops, clinics and fairs throughout the year educate, counsel and support mental health. And the Wecihitowin Project and Rediscovery of Families nurture spirituality, and instill self-worth and pride in our heritage.

We have had stand-out successes. Jordan's Principle funding began to flow out of Ottawa, ten years after it was

adopted by Parliament. In NCN, it has created two community programs, a CFS home with special medical equipment, and changed the life of a little girl who is finally able to attend school with her friends.

And we have had setbacks. More than one social services department could not complete its mandate this year because they were short-staffed and couldn't meet demand. This is unfortunate news, and we are doing our best to hire and retain more professionals, but we must choose to see the positives: our care programs are in high demand, with good reputations and better results. Our Citizens are trying to improve themselves and they view our programs as trusted sources of support and information.

I am thankful for dedicated staff, who embrace policy and protocol with enthusiasm and care. In doing so, they lift spirits and foster wellness. Our board members are committed to bold, innovative approaches that create change throughout our community. Our elected leaders offer steadfast political support, allowing Citizens to look to our programs with confidence.

Together, with optimism and a clear vision, we are creating a bright future for our community.

Felix Walker
CEO, Nisichawayasihk Cree Nation Family and Community Wellness Centre



Executive Summary

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 continuing to undergo 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 2017-18 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 sections 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:

- 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.
- Incorporate Indigenous traditions, culture, language, customs, and the teachings of the community's Elders.
- Deliver mandated child and family services within a community capacity-building and health-promotion orientation.
- Oversee the implementation of health-related services and assume a leadership role in the transfer process of a local health authority.
- 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.

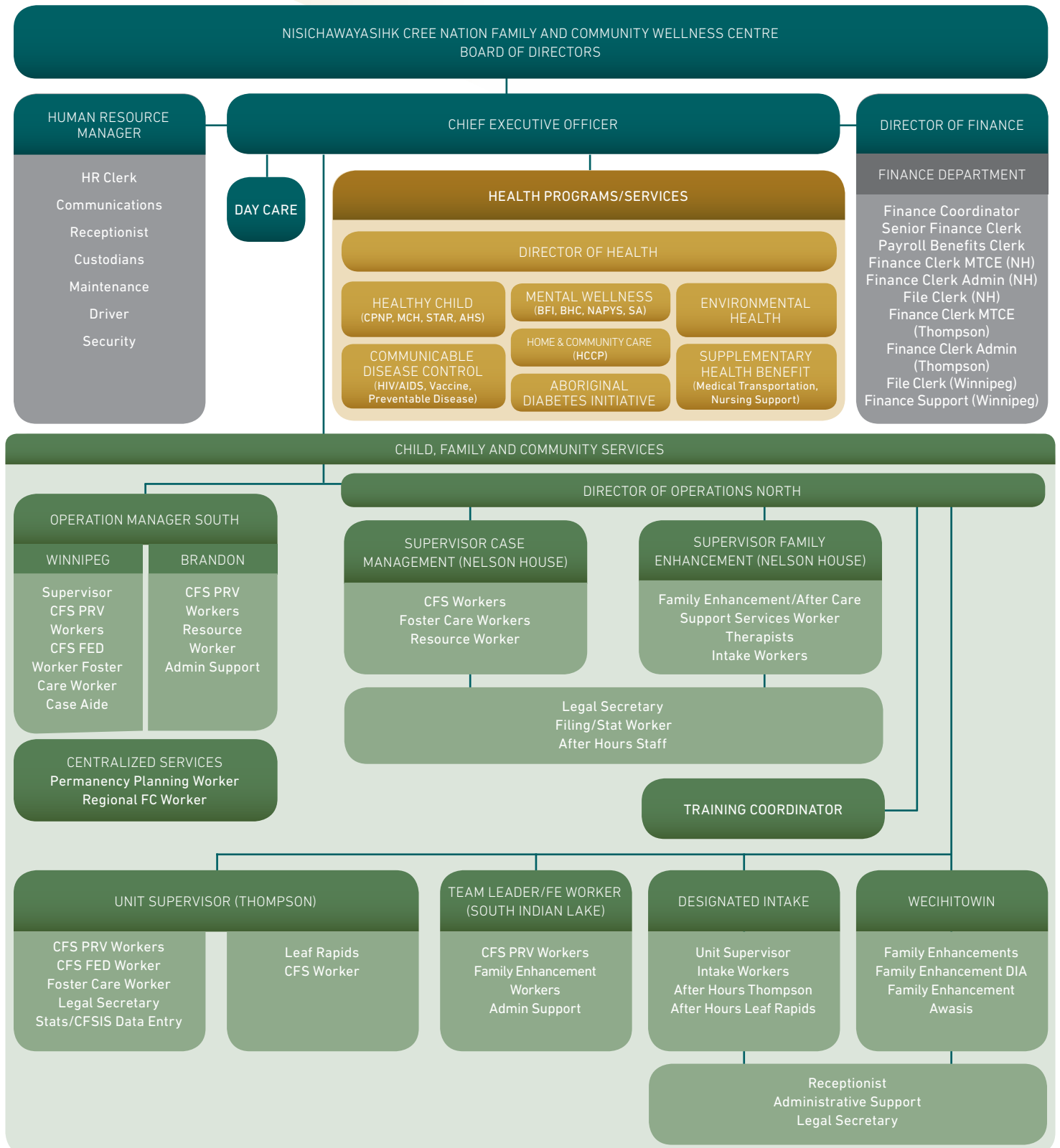
Mission

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



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 2017-18 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.



Key Highlights and Challenges

- Home and Community Care continues to expand its offerings to the community with a new Palliative Care program. Staff are receiving training and developing protocol.
- In its second year of operation, Foot Care Services offered support to 220 clients, which is 20 more than last year. As the number of Citizens with diabetes continues to increase, this will remain an invaluable service in our community.
- STAR FASD program had capacity for 30 participants but only had 25 due to persistent staff shortages. Two members of three-person staff were transferred to other NCN social services departments leaving the program unable to deliver all home visits as expected. This highlights the shortage of qualified social services professionals in our community.
- The Aboriginal Diabetes Initiative received \$5,000 to build a community greenhouse and began its construction at the Family & Community Wellness Centre. It will help to educate Citizens about the connection between a healthy diet and wellness.
- Through the Canadian Prenatal Nutrition Program (CPNP), 341 vouchers for the NCN Store were distributed to 89 participants. These coupons provide 4L of milk, frozen vegetables and a carton of eggs, and provide a crucial baseline for nutrition for pregnant women and new mothers.
- Tuberculosis continues to be a threat in the NCN Community. We have Citizens who have been diagnosed but refuse to receive treatment. This decision puts other Citizens at risk.
- NCN community health representatives (CHRs) continue to perform valuable services around Nelson House. Unfortunately, their work is often delayed by clients who sleep through appointments, or are intoxicated. CHRs also have to deal with unmanaged pets at houses and wild dogs around the community.
- The Dreamcatchers HeadStart Program celebrated 6 graduates this year, who headed to OK School with a strong foundation for learning!
- The Jean McDonald Treasures of Hope Daycare is in need of substantial work on its outside play area. Sod, landscaping and a play structure are all required to offer a healthy, safe outdoor learning environment for our children.
- The Maternal Child Health Program saw decreased numbers of clients and home visits. The program had difficulty in filling a vacant position, which affected the amount of work the department was able to perform.
- Thanks to Jordan's Principle funding, an eight-year-old girl who had never stepped into a school, due to physical requirements and lack of access, has started to attend classes on a schedule that attends to her needs.
- Over the course of 2017-18, the Medical Transportation program provided safe and reliable transportation for NCN clients to attend almost 8,800 medical appointments.
- The Wecihitowin Project lost funding and an agency partner (Awasis) but expects to complete 5 of its 7 annual parenting programs. Staff evaluated its materials and revamped its offerings to better serve clients.
- Counselling Services Department had almost 1,700 direct points of contact with NCN Citizens this year. The Elders Program is particularly popular, with 215 people attending its Christmas Feast and 135 people enjoying its outdoor activities.
- MBTelehealth program continues to grow. This year, 318 medical appointments, sessions and meetings were conducted by videoconferencing at the Medicine Lodge, Nursing Station, and Wellness Centre. This invaluable program allows patients to receive medical care without travel outside the community.

CHILD, FAMILY & COMMUNITY SERVICES

Overview

The NCN Child, Family and Community Services is committed to improving the lives of children and families and working with them to build healthy relationships. It is responsible for NCN children in Nelson House, Thompson, South Indian Lake (OPCN), Winnipeg and Brandon.

The Centre's innovative programs combine empowerment, traditional wisdom, and a western model of service delivery to create outstanding results. The proof of this successful model is a reduced number of children coming into care, and a smaller number of families with recurrent involvement with Child and Family Services.

When possible, the Centre creates a comprehensive care plan for all family members to heal holistically. It provides therapy, counselling, mentoring and other supportive services as required to families, parents, young people and children.

This year the Centre has explored options for new

program offerings. Although funding has not yet been secured, plans are being discussed. The following pages discuss these new programs and the current Child and Family Services offered.

Child Family and Community Services

- Intervention and Removal of the Parent program
- Circle of Care Planning Process
- Rediscovery of Families
- Bachelor of Social Work Co-Hort program
- Jordan's Principle
- Stepping Out on Saturday (S.O.S.) -discontinued

Proposed CFS Programs (Pending Funding)

- Esiki sha cik Parent Coaching program
- Little Sisters Keeper
- Wechitotan Kita Mithwayachik
- Kichawasismina Nak

HIGHLIGHTS AND/OR CHALLENGES

- Caseloads reduced from 774 last year to 607 this fiscal year.
- Children in care (CIC) often have to leave their home community (most often, they go to Winnipeg) to receive required services.
- The required 30-day face-to-face contact with an assigned case manager is difficult because the travel budget does not accommodate this need for CIC outside of the community.
- High unemployment and low education in the community often creates a dependence on social services, because parents cannot adequately meet their children's needs.
- Young parents often have inadequate parenting skills that can result in children coming into care due to neglect. This quickly creates an unfortunate cycle.

GOALS AND OBJECTIVES

- To improve the application process for children who require special needs funding.
- To reduce the number of extensions of care.
- To maintain/improve CIC levels over next five years as F/E program is developed.
- To have trained workers providing CIC support services.
- To increase compliance with face-to-face standards.
- To create timely, consistent and relevant CIC case plans.
- To maintain current IRAP approvals.
- To improve connections of CIC with their family and home community.
- To develop programming to improve independent living skills for families and CIC.

Children in Care



STATISTICS AND REPORTS

Case Type by Location – March 31, 2018

Brandon		Winnipeg		Thompson		Leaf Rapids		South Indian		Nelson House		Totals	
Fed	Prov	Fed	Prov	Fed	Prov	Fed	Prov	Fed	Prov	Fed	Prov	Fed	Prov
	43		34		35		10	26		20		46	122
	2		2		8		2	2				2	14
	1		22		8			6		20		26	31
												0	0
			1		2			1		6		7	3
												0	0
	16	9	118	36	89	6	5	16	5	92		159	233
			1									0	1
												0	0
0	62	9	178	36	142	6	17	51	5	138	0	240	404

CIC by Location

CIC BY LOCATION	2013	2014	2015	2016	2017	2018
Nelson House	167	125	82	102	114	92
South Indian Lake	30	17	14	7	21	21
Thompson	84	58	47	89	107	125
Leaf Rapids	16	18	10	16	5	11
Winnipeg	104	119	102	106	126	127
Brandon	26	19	23	26	20	16
TOTAL	427	356	277	346	393	392

Comparison of Apprehension Cases by Year

APPREHENSION CASES (BY YEAR)	NO.
2011	79
2012	70
2013	67
2014	49
2015	32
2016	48
2017	69
2018	X

CHILD FAMILY & COMMUNITY SERVICES (con't)

Aboriginal Status

ABORIGINAL STATUS	2015-16	2016-17	2017-18
Inuit	0	0	0
Métis	2	2	1
Non-Status	104	50	101
Not Aboriginal	2	0	0
Treaty Status	222	290	211
Unknown	0	45	10
TOTAL	330	387	323

Placement

PLACEMENT	2015-16	2016-17	2017-18
Foster Home	229	227	178
Residential Care	37	18	23
Independent Living	70	3	5
Own Home	11	6	4

Caseload

CASELOAD	2015-16	2016-17	2017-18
Children in Care	330	358	323
Extensions in Care	11	31	33
Voluntary Family Service	24	14	16
Protection	183	152	168
Expectant Parent Services	13	8	10
Family Enhancement	44	211	57
TOTAL	605	774	607

Count of Children Under Suspension

STATUS	2015-16	2016-17	2017-18
Children Under Suspension	3	8	11

On Reserve and Off Reserve Foster Homes and Places of Safety

FACILITY COUNT	ON-RESERVE 2016-17	ON-RESERVE 2017-18	OFF-RESERVE 2016-17	OFF-RESERVE 2017-18
Foster Homes	86	31	52	54
Places of Safety	63	10	14	68
Receiving Home		2		2
Removal of Parent		5		0



Wecihitowin Project

Wecihitowin “Helping Each Other”

The Wecihitowin Project uses traditional cultural activities and other resources to help First Nations families choose healthier living options. The Medicine Wheel Teachings are used as a foundational tool to help families know and understand the importance of balance in their own lives and in the lives of their family members.

The Wecihitowin Project is delivered by a team of two CFS workers and two Awasis workers. Participants come to the project by self-registration and referrals from Awasis, NCN, Nikan, Kinosa and others.

Activities include language and culture camps, spring ceremonies, harvesting, family adoption ceremonies, tipi teachings, rattle making workshops, youth focus group, mental health conference, Christmas hamper giveaways, and sage picking.

HIGHLIGHTS AND/OR CHALLENGES

- We are thankful for our Elders, Advisors and Teachers: David Sanderson, Rose Hart, Glen Tsessaze, and Sharon Cordell.
- There was high staff turnover this year, due to retirements and moves, and hiring new staff to fill those positions.
- Programming stopped from March to September to allow for these changes. Participants were welcome to receive our services on a drop-in basis.
- Staff took this time as an opportunity to take inventory of existing materials and how they were being taught, and to make changes to improve its offerings.
- Awasis Agency announced in March that it would be pulling out of partnership with the Wecihitowin Program. This affected the program's funding model such that this year, there are 5 scheduled program cycles, as opposed to 7.

Services include:

- Counselling
- Parent services/home visits
- Administrative assistance
- Office services
- Links to other community resources and program services
- Advocating
- Court support
- Transportation services
- Family and case conferencing

GOALS AND OBJECTIVES

- To have a continuous circle of connections with Elders, family members and community resources.
- To connect the past to the present, to be sensitive to the well-being of First Nation families.
- To provide prevention, early intervention, education, and support to families experiencing difficulties.
- To help parents understand well-being and to help them create it in their lives and in their children's, using traditional wisdom.
- To provide families with education, skills, methods and resources to reduce stress and conditions that may pose risks to children.
- To provide culturally appropriate services for Aboriginal families to meet their diverse needs.
- To create opportunities for families to connect with culture and the land.
- To maintain an open door policy with participants to ensure continuity of support.

WECIHITOWIN PROJECT (con't)

STATISTICS

During the 2017-18 fiscal year, 3 seven-week parenting program cycles were held. Each cycle covers one totem, teaching and topic per week:

WEEK	TOTEM	TEACHING	TOPIC
1	Beaver	Wisdom	Orientation
2	Eagle	Love	History
3	Buffalo	Respect	CFS Act
4	Bear	Bravery	Safety
5	Sabe	Honesty	Parenting
6	Wolf	Humility	Circle of Security
7	Turtle	Truth	Life Skills

Participation Rates

April 18, 2017 to June 1, 2017

REGISTERED	ATTEND 100%
8	2
10	3
6	0
4	2
6	3
7	5
2	1

Sept. 18, 2017 to Nov. 2, 2017

REGISTERED	ATTEND 100%
5	4
5	2
6	3
6	3
8	3
8	2
current	current

Nov. 20, 2017 to Jan. 25, 2018

REGISTERED	ATTEND 100%
4	2
4	1
4	0
5	0
7	1
6	2
3	3

Intervention or Removal of the Parent Program

This program aims to reduce stress and trauma for children when they come into the care of CFS by removing the parent from the home, instead of the child. The child remains in his or her home with family or support staff. The parent leaves the home and receives guidance, counselling and therapy from various social services at the NCN Family and Community Wellness Centre as required.



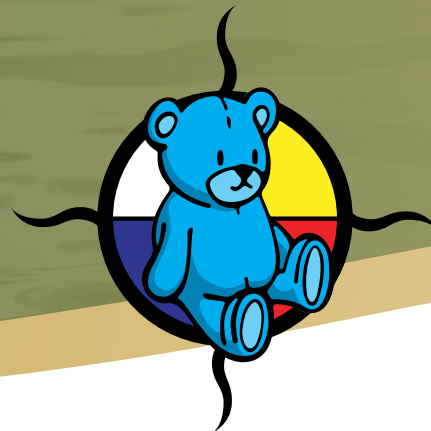
Our professionals and Elders saw similarities between residential schools and the child apprehension system, with long-term effects such as loss of culture, depression and addiction. The Removal of the Parent program is a community-based approach grounded in traditional Cree teachings, and aims to break the cycle of family trauma.



GOALS AND OBJECTIVES

- To improve the application process for children who require special needs funding.
- To reduce the number of extensions of care.
- To maintain CIC levels over next five years as F/E program is developed.
- To have trained workers providing CIC support services.
- To increase compliance with face-to-face standards.
- To create timely, consistent and relevant CIC case plans.
- To maintain current IRAP approvals.
- To improve connections of CIC with their family and home community.
- To develop programming to improve independent living skills for families and CIC.

Jordan's Principle Initiative



This legislation requires the government (federal or provincial) that first connects with a child in need to provide the required services, and resolve the funding issue later. It is a child-first principle intended to ensure that First Nations children do not experience delay, denial or disruption of services that are normally available to all other Canadian children.

Therefore, this funding supports families with children with special needs, helps to enhance the child's life, and facilitates health care interventions and developments. Clients and families may be referred to the Wellness Centre and the Jordan's Principle House by other social services, as well as self-referrals.

GOALS AND OBJECTIVES

- To ensure our most vulnerable Citizens – young people with complex medical issues – are not held back by their circumstances.
- To help children with special needs to receive the care and attention they need, while living among family, as is possible.
- To assist in their physical, social, emotional and daily life skills development, increasing their independence and allowing them to function in the community.
- To provide a fun and enjoyable atmosphere in order to encourage direct participation in programs.
- To relieve the stress of family members and caregivers of children with special medical needs.
- To assist families in receiving the support they need and advocating on their behalf.
- To create efficient delivery of funds, training and education, so that services can be provided as soon as they are required.
- To engage families and the community in working together to improve health services.

Children who reside on-reserve, live with their birth, adoptive or extended families, and have any of the following are eligible for assistance through Jordan's Principle:

- Mental disability
- Permanent physical disability
- Developmental delays
- Speech/language delays
- Autism spectrum disorder

HIGHLIGHTS AND/OR CHALLENGES

- Child development program in which development workers, with help from caregivers, identify child's strengths and goals, assists the child to develop and learn new skills. This happens in child's home, school or a child care setting.
- Intervention programs, such as nutrition awareness, speech/language supports, behaviour management, and life skills and training
- Socialization including arts and crafts, baking, fitness and activities
- Support groups for parents and caregivers
- Respite services in the child's home for parents who may need a short-term break
- Referral services for occupational therapy, physiotherapy, speech/language pathology, and audiology
- One of the new CFS homes in Nelson House was prepared with special equipment to meet the high medical needs of children, with funding from Jordan's Principle.
- An eight-year-old client who had never stepped into a school, due to physical requirements and lack of access, has started to attend classes on a schedule that attends to her needs.
- With federal Jordan's Principle funding, two programs have been created to address the gap in service and training that exists:
 - Stepping Out on Saturday: designed for children with an FASD diagnosis. They enjoy day trips and practice their social skills and self-regulation.
 - Wechitotan Kita Mithwayachik Kichawasismina Nak: assists children with complex needs and their caregivers, with a specific focus on mental health.

Family Therapy Services

Family Therapy Services, while primarily offering therapy and assessments to children and parents of Child and Family Services, also offered assistance to other NCN citizens who wished to work on mental health and other family concerns. There are two staff and one contract therapist who provided therapy; parenting capacity assessments; group interventions on a variety of topics including circle of security parenting, loss, trauma and self harm; circle of care meetings; and family circles for loss and bereavement. They also provide training to other staff on a variety of topics and supported community events.



HIGHLIGHTS AND/OR CHALLENGES

- Participation in the first Sundance
- Summer “Homecoming” culture camp for NCN children living in urban settings including Winnipeg, Brandon, Thompson located at the newly developed NCNFCWC site near Mile 35
- Spring School camp for NCN children where they learned traditional crafts, teachings, cooking set amongst beautiful teepees, lodges and natural surroundings.
- Spring culture camp for families from Nelson House, South Indian Lake and Thompson
- Traditional parenting and circle of security was delivered to South Indian Lake, Leaf Rapids and Nelson House
- “Trauma Lite” workshops were delivered to Family Enhancement parents.
- Circle of Care training was offered to Jordan’s Principle staff.
- Kosopatchekan – shake tent ceremony was attended by approximately 30 people
- An 8 week Homicide Bereavement Support Group was delivered through partnership with the Department of Justice and Aurora Family Therapy Centre. Participants were supported in their grief with traditional and “western” processes with the help of an Elder and Therapist.



A photograph of two people, likely Indigenous, standing in a room with a log wall. They are wearing traditional regalia, specifically wampum belts. The person on the left is wearing a green and orange belt, while the person on the right is wearing a purple and white belt. The room has a log wall with several framed pictures and posters. The lighting is warm and the atmosphere is respectful.

A Commitment to Improving lives and lifestyles...

Achieving health and wellness by incorporating Indigenous traditions, culture, language, customs, and the teachings of the community's Elders.

COUNSELLING SERVICES AND FAMILY ENHANCEMENT



Overview

The Counselling Services Program promote and enhances community wellness and individual well-being by providing holistic programming to support and 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.

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

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. The Counselling Services Department has implemented a number of prevention activities designed to meet these needs.

Critical Incident Stress Debriefing

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

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.

NCN Kehtiyatisak Elders Program

This weekly program (every Thursday afternoon, during the fall, winter and spring) is designed to bring elders together to socialize with their peers, to share stories and enjoy indoor and outdoor activities. Over the summer months, periodic outdoor activities are planned. It provides cultural and advocacy services for our elders.

GOALS AND OBJECTIVES

- To enhance safety and support for all community members and their families.
- To provide crisis intervention, aftercare and training for community members and caregivers.
- To provide ongoing assessments and referrals for treatment, after care and rehabilitation.
- To provide both Western and Traditional concepts of therapy in individual, couple, group and family counselling.
- To offer traditional teachings that help family members relate to each other and create an understanding of each others' roles and responsibilities.
- To create improved links between families and community resources.
- To report any forms of child abuse (including threats of suicide or self-harm) to CFS.



STATISTICS

TYPES OF INTERVENTION	TOTAL
	204
Counselling	*note this does not include Therapists, Nursing Station, school and RCMP stats
Grief support	33 families
Suicide Intervention	52
Critical Stress Debriefing/Management	10
Elder Abuse	18
Domestic Violence	4
Homicide Bereavement Support	63
Total	384

WORKSHOPS/TRAINING/RETREATS	TOTAL
Rediscovery of Families	88
Women's Retreat- Land Base	32
Anger Management	45
Men's Retreat- Land Base	38
Cultural Camp with NNCEA	125
Family Cultural Camp	75
Land Base Education	42
Memorial Feast	70
Total	515

ELDERS PROGRAM	TOTAL
Indoor winter activities	275
Outdoor activities	135
Christmas Feast	215
Valentine Feast	150
Medicine Picking	31
Berry Picking	31
Total	837

Family Enhancement



This program provides support to families to prevent children from being placed in CFS care. Any family experiencing challenges that interfere with their ability to provide basic necessities are eligible for support services, whether voluntarily or as 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. Preventative measures provide one-time support and/or emergency respite service and help address relevant issues.

GOALS AND OBJECTIVES

- To provide families with support to identify issues that have a negative impact on their daily lives, to find practical solutions, and to enhance strengths.
- To raise awareness of traditional values, beliefs and culture as these relate to relationships within NCN families.
- To build on the collaboration which already exists within the Family and Wellness Centre, and with external services and programs as well.
- To continue to provide activities, workshops and programming, with an emphasis on the cultural component.

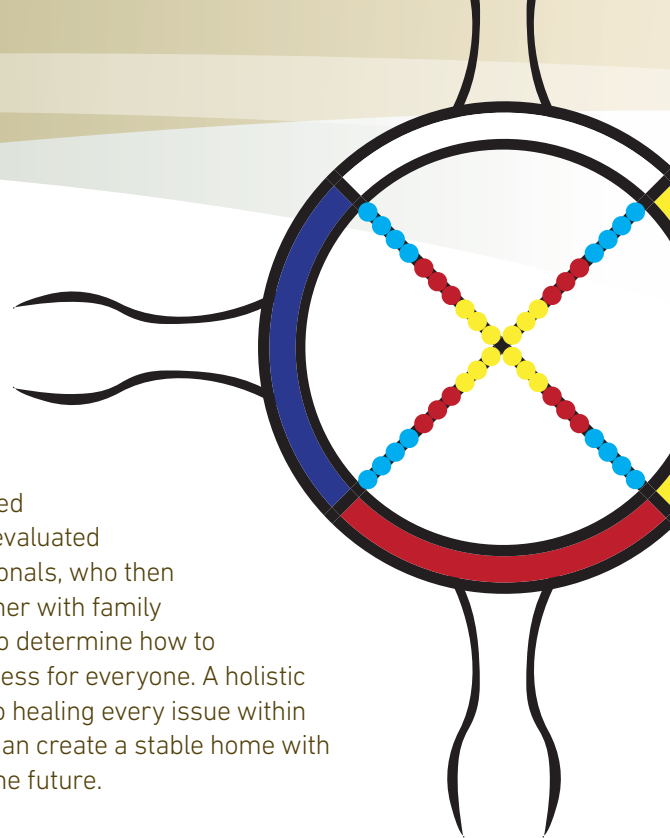


Circle of Care Planning

This program is based on the holistic teachings of the Medicine Wheel, which serves as a guide in creating a care plan for families that require a combination of social services. Every family has a different Circle of Care plan, based on its unique challenges. Options could include counselling, daycare, fitness and nutrition education, arts and culture, and more.

Shared responsibility, shared decision-making and shared accountability are important in the Circle of Care and integral to its mandate. The mental, emotional, physical and spiritual well-being of parents,

children and extended family are evaluated by professionals, who then work together with family members to determine how to create success for everyone. A holistic approach to healing every issue within the family can create a stable home with a plan for the future.



HIGHLIGHTS AND/OR CHALLENGES

- There is increased communication and cooperation between social service programs within the Wellness Centre, and between families and social services.
- Families feel empowered by choosing which programs they believe will be helpful.
- CFS workers are currently overwhelmed by their workloads, due to funding shortfalls.
- Client-worker ratios remain high. This makes the development and overseeing of services required for the Circle of Care model difficult to achieve.

GOALS AND OBJECTIVES

- To enable families to have a feeling of teamwork and a positive vision for their future.
- To ensure problems from the past will be resolved.
- To help each family member feel loved and appreciated.
- To ensure every individual will have effective coping strategies for dealing with stress, frustration and anger.
- To increase efficiencies within the social services.
- To acknowledge and address the mental, emotional, physical, and spiritual needs of families.

Rediscovery of Families Program

This program is based on the values, beliefs, languages and traditional practices of the Nisichawayasihk Cree peoples. It aims to introduce or re-engage individuals and families with traditional culture.

Along with counsellors, therapists and Elders, and families enjoy on-the-land exercises and other activities that help them learn (and remember) how to be loving, supportive parents. Activities can include fishing and berry picking, Cree ceremonies and spiritual practices, and exploration of community histories and significant sites. This program promotes a “return to the family” through culture, as it is the strength of families that has sustained our community through difficult times.



HIGHLIGHTS AND/OR CHALLENGES

- More than 100 families have participated in the Rediscovery of Families program.
- Most families report a stronger sense of identity and connection, an increased feeling of responsibility for their family and community, and improved family functioning while in camp settings.
- Elders have reported a greater sense of purpose in guiding families and in teaching cultural values and knowledge to younger generations.
- Several crucial components of the program are not realized due to funding shortfalls, such as follow-up meetings, leadership training, and monthly family programming.
- Water pollution within the community means further travel to set up camp and therefore increased program costs.
- Staffing shortages mean the program cannot run on a consistent basis.

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.

GOALS AND OBJECTIVES

- To help families implement healthy traditional practices into their daily lives.
- To teach individuals the tools they need to create a strong, loyal family unit.
- To provide long-term supports to families, such as parenting programs, language classes and Elder teachings, after they’ve completed the camp component.
- To create contractual positions for two Elders, two support workers and one cultural and program coordinator to achieve the goals of the program.
- To procure funding to purchase boats, motors, and ski-doo’s to transport families and supplies to camp site.

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 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:

- Community health assessments
- Health surveillance – Communicable Disease reporting
- Health Promotion – community partnership
- Disease and Injury Prevention – Immunizations/vaccine preventable diseases
- Health Protection – monitoring of community water, public restaurant inspections
- Emergency Preparedness and Response
- Aboriginal Diabetes Initiative
- Maternal Child Health Program
- STAR FASD Program
- Medical Transportation
- Tuberculosis Champions

HIGHLIGHTS AND/OR CHALLENGES

- Government funding has increased and opportunities for submissions have increased for health related programs.
- Improved awareness, health promotion is evident as more Community members are taking initiatives to reduce health concerns as evident by PSA and Stats.
- Due to lack of staff, there is an increase in overtime and longer wait times for clients.
- Dog Control – met with Chief and Council about issues and recommendations. New initiatives have taken shape.
- Home visits – high demand for rescheduled home visits, or scheduled pickups. Requires rescheduling and lost time for drivers and nurses.
- Safety hazards around homes effect staff workplace safety (i.e. Unapproachable homes due to Drugs/Alcohol).
- Increased awareness via radio PSA's, Health Fair, immunization, posters, letter reminders and social media.

GOALS AND OBJECTIVES

- To submit proposals requesting more funding for salaries.
- To increase vaccine rates to 90% which will better protect community.
- To ensure all health programs utilize electronic charting data base.
- To enhance employee safety and increase dog control awareness.
- To correct misinformation obtained by health staff and community regarding health issues presented by others or social media.

STATISTICS

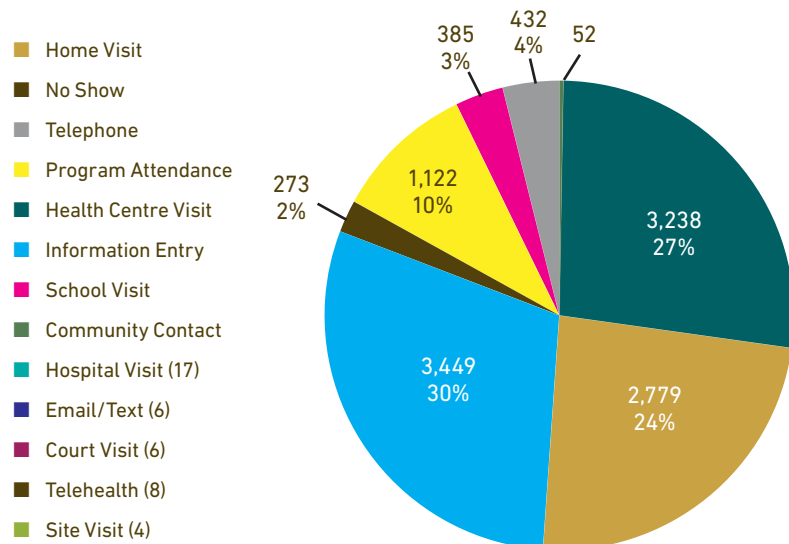
Encounters by Type

Total Encounters	11666
Total Members	1501
Encounters per Member	7.8
# of Groups	5
# Sessions	114
# Individuals Attending	198

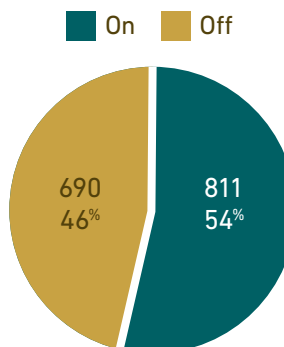
Encounters by Staff

Alexandria Moodie, ADI/CPNP	664
Alfreda Thorne MCH	8
Amber Spence	16
Benita Spence JP-CFI	131
Charlene Kobliski	1
Corrine Hart MCH	26
Danette Blacksmith	1714
Dawn Hartie MCH	38
Eleanor Erickson JP-CFI	99
Elizabeth McDonald	2
Irene Spence FASD	28
Jean Johnson RN MCH/FASD	36
Karen Spence JP-CFI	123
Kristen Moore JP-CFI	74
Kyle Thorne JP-CFI	16
Kyra Hart FASD	143
Laura Hart JP-CFI	428
Leta Walker HCA	549
Lewis Dumas JP-CFI	136
Lorna Garrioch RN	2031
Lynda Wright RN, HD	565
Margaret Munroe HCA	267
Mustimuhw Admin	1
Nancy Mcleod	1495
Roba Frost	638
Sarah Spence (mat leave)	138
Shawna Ross	912
Stephanie Hart	1071
Thomas Weenusk	174
x Agnes Denechezhe	1
x Andrew Spence JP-CFI	135
x Deanna Bonnefoy ADMIN	6

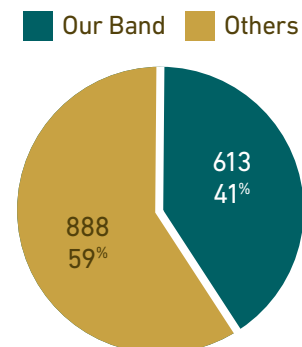
Encounters by Type of Visit



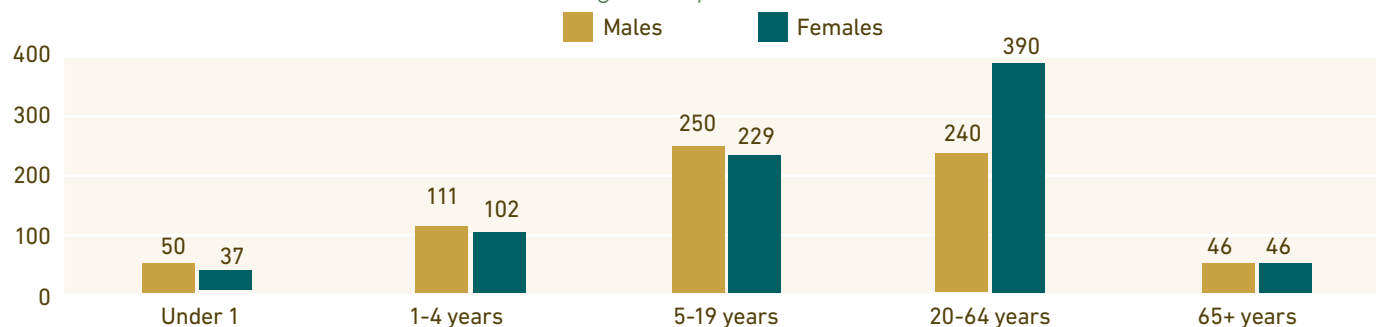
On/Off Reserve



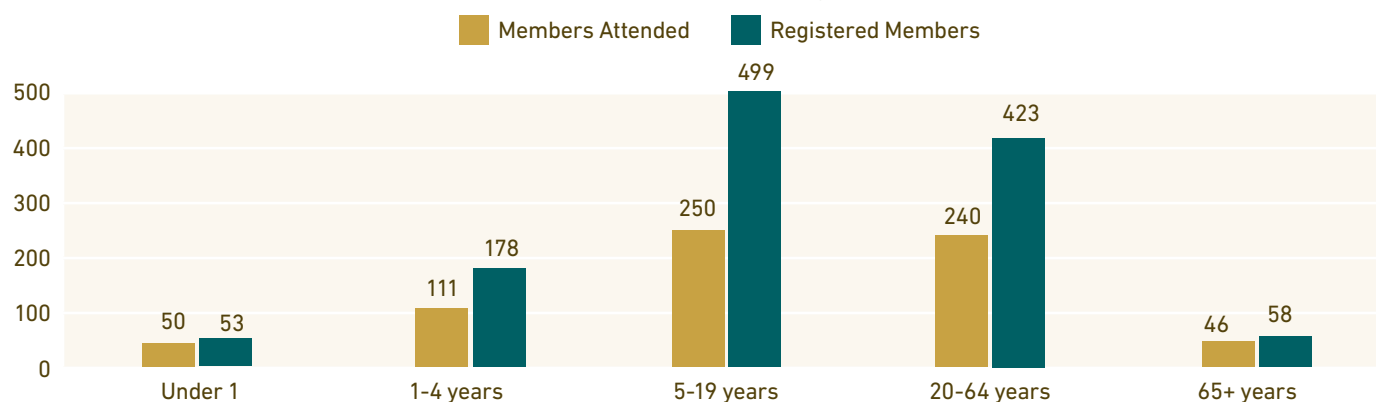
Our Band/Others



Age Group and Gender



Services Accessed by Age – Male



Services Accessed by Age – Female



Communicable Disease

	2017-18
Total Encounters	507
Total Members	253
Encounters/Member	2.0

Encounters by Staff

Amber Spence
Lorna Garrioch RN
Lynda Wright RN, HD
Stephanie Hart
Thomas Weenusk



Comparison of 2014 to 2018 Public/Environmental Health Services Provided

TYPE OF SERVICE	NUMBER 2014/15	NUMBER 2015/16	NUMBER 2016/17	NUMBER 2017-18
Distribution Sites	255	381	345	430
Cisterns (Holding tanks)	232	120	93	92
Water Treatment Plants: Raw	32	66	31	x
Water Trucks	9	20	16	25
Total Number of Samples	6	603	254	x
OT Gas Bar sample	-	-	-	9
Quality Control Sample	-	-	-	9
Home inspections (Mould/crawl spaces/plumbing)	87	42	13	8
Fumigation	31+8 re-infestations	33	27	54
Public Health Nurse visits/CHR Home Visits	500 (73 infants)	104	294	x
Tank Cleaning Requests	27	16	11	12
Reminder Letters for Vaccinations	490	143	244	x
School/Community Presentation	10	18	12	x
Infection control (FNIHB)	1	1	1	x
Contraceptive Distributions	1,025	4,550	10,000	1,550+
Dog Bite Reports	N/A	N/A	3	x
Rabies report	12	8	8	x
Mumps	N/A	N/A	28	x
STREP Pneumoniae	N/A	N/A	1	x
STIS chlamydia/gonorrhea/Syphilis/HIV/AIDS HEPS	66	N/A	31	x
Annual Health Report attendees	-	-	579	x
Immunization carnival/Health Fair	435	N/A	39	x
Pandemic Planning	35	N/A	N/A	x
Sewage Tanks Replaced	-	-	-	3
Workshops and Meetings	-	-	-	5
TOTAL	3,828	6,105	12,030	x

Immunization and Vaccination Program



NCN children must receive all of their immunizations for their own safety, and to increase the “herd immunity” of our community.

While immunizations and vaccines are voluntary in Manitoba, they help protect our young children and all Citizens, especially those with health conditions, from disease.

There are four staff members in the immunization program and they follow the vaccination protocol mandated by the provincial government.

In the first two months after birth, newborns are scheduled to have regular monthly immunization shots, and then again at 4, 6, 12 and 18 months.

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

Children 4-6 years of age

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

Children in Grade 4

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

Children in Grade 6 (Girls Only)

- Human Papillomavirus (HPV)

Children in Grade 6

- Human Papillomavirus (HPV)

Children 14-16 years of age

- Tetanus, Diphtheria, Pertussis (Tdap)
Hepatitis B Vaccine
- Human Papillomavirus (HPV) school year

STATISTICS

Infant Immunization

In 2017-18, the immunization program had 2,749 encounters with 905 NCN Citizens. Of these, 2,157 were in the health centre, 36 were home visits and 17 were school visits.

	2017-18
Number of NCN infants eligible for vaccination	X
Infants completed vaccination	X
Total Vaccine Doses Administered	X

Public Health Immunization Clinic

	2017-18
Total Encounters	2,749
Total Members	905
Encounters/Member	3.0

Tuberculosis Community Program



Nisichawayasihk Cree Nation has a Tuberculosis Community Champion, who tracks the disease within the community and oversees the care of Citizens with tuberculosis.

Tuberculosis is a contagious disease that generally affects the lungs, but can also affect the brain, kidneys and spine. It is a potentially life-threatening disease that is transmitted through the air. Those with diabetes, substance abuse issues, and others with weakened immune systems are more susceptible to tuberculosis. While tuberculosis cases have declined in the last 30 years, in 2008, the tuberculosis rate among First Nations people was almost six times greater than non-Indigenous Canadians.

When first infected with the tuberculosis germ, people do not usually feel sick or show symptoms. This is why it is a dangerous disease and difficult to contain. tuberculosis can take hold in conditions where there is inadequate housing, malnutrition and poverty.

Screening and antibiotic treatment are crucial in containing tuberculosis numbers in our community and wiping out the disease entirely.

STATISTICS

	2017-18
Number of Citizens with tuberculosis	X
Number of adult men	X
Number of adult women	X
Number of those under 18	X
Number of patients who successfully completed their medication regime	X

GOALS AND OBJECTIVES

- To improve the health status of NCN Citizens living with tuberculosis.
- To encourage clients to take medication regularly as instructed by health provider and to complete their regimes.
- To increase knowledge and understanding of tuberculosis and its effects within family and community members.
- To implement screening clinics to prevent the disease from spreading to more Citizens.

HIGHLIGHTS AND/OR CHALLENGES

- Components of the tuberculosis program include weekly medication, direct observed therapy and direct observed preventive therapy.
- Tuberculosis remains a threat in the NCN community.
- Not many NCN Citizens are educated about tuberculosis, what factors may increase its prevalence, and its effects.
- There are NCN Citizens who refuse to receive tuberculosis treatment. This decision puts others at risk.

Manitoba Telehealth Program



Telehealth is the use of secure information technology to connect patients with health-care providers regardless of their location. They are able to see, hear and talk about their medical conditions without travel. Telehealth can be used for:

- Clinical services such as consultations, follow up, case conferencing, and patient education
- Continuing education for health-care employees and providers

- Health-related education for patients, families and the public

- Health-care administrative meetings

Currently, there are 189 telehealth sites across the province, and that number is projected to rise.

MBTelehealth maintains strict privacy of client health information. All information collected, recorded, stored, used or disclosed follows the protocol of the Winnipeg Regional Health Authority and *The Personal Health Information Act*.

HIGHLIGHTS AND/OR CHALLENGES

- Telehealth improves access to health-care services not typically available in our community.
- This technology reduces time away from home and work, and reduces stress and costs.
- Allows family and friends to more easily participate.
- Connects family members who are unable to travel to visit a friend or family member on an extended stay in hospital (when requested by a health-care provider).
- Unfortunately, not all specialties are available through Telehealth.
- Interpretation services are not always available at the clinical site, resulting in language barrier.
- Technical issues can cause appointments to be cancelled, or can interfere with the quality of communication.

GOALS AND OBJECTIVES

- To provide secure videoconferencing for health-care services, continuing education, meetings and family visits between communities across Manitoba.
- To provide quality information and knowledge here at home without the stress, time and cost of travel.
- To create public awareness through advertising, healthcare fairs, personal communication.
- To provide opportunity for staff and community members to attend specific information sessions offered through Telehealth.
- To collaborate with Travel to identify appointments for which NCN Citizens are currently travelling that could be completed by Telehealth instead.
- To support any Telehealth clinical at the nursing station that requires peripherals or support.
- To strive for more than 300 Telehealth sessions for Nelson House Nursing station and the Family Community Wellness Centre in the next fiscal year.

STATISTICS

DESCRIPTION	MEDICINE LODGE		WELLNESS CENTRE	
	2016/17	2017-18	2016/17	2017-18
CLINICAL	46	48	187	201
EDUCATION	1	0	14	1
ADMIN	1	3	6	3
TELEVISIT	0	9	0	0
TOTAL	48	60	207	258

Prenatal Nutrition Program



The Canadian Prenatal Nutrition Program (CPNP) is a community-based program administered (for First Nations women on-reserve) through Health Canada. It provides support to improve the health and well-being of pregnant women, new mothers and babies facing challenging life circumstances, such as poverty, teen pregnancy, isolation, substance abuse and family violence.

HIGHLIGHTS AND/OR CHALLENGES

- Prenatal class every Wednesday
- Sewing classes: bonnets, bibs, baby moccasins, breastfeeding pillow
- Purchased breast pumps for client use
- Breastfeeding support as required
- Grocery store tours with nutrition and label reading sessions
- Seeding and gardening sessions
- Ongoing cooking classes
- Vouchers for NCN Store which includes 4L of milk, frozen vegetables, and a carton of eggs

GOALS AND OBJECTIVES

- To improve the health status of NCN women who are pregnant, and their babies in utero and through infancy through education and activities designed to promote positive thinking and healthy living.
- To help our clients understand the importance of maternal nourishment, and to teach the skills to create a healthy diet at home.
- To provide nutrition screening, counselling and education at all stages of pregnancy and new motherhood to help clients adapt to new healthy lifestyles.
- To increase the rates of healthy birth weights in the NCN community.
- To encourage clients to attempt breastfeeding as a first choice of nourishment for their babies through education, promotion and support.
- To create partnerships within communities to support vulnerable pregnant women and new mothers.

STATISTICS

Participation

	2017-18
Number of participants	89
Number of sessions	42
Milk Vouchers distributed	341
Prenatal Intake	23

Post Partum Visits

	2017-18
Total Encounters	321
Total Members	271
Encounters/Member	1.2

Staff

Lorna Garrioch RN
Lynda Wright RN, HD
Stephanie Hart
Thomas Weenusk

Maternal Child Health Program



The Strengthening Families Maternal Child Health Program (SFMCH) is a family focused home visiting program for pregnant women, fathers and families of infants and young children from 0-6 years of age. The program provides support to families in First Nations communities that builds on their strengths and addresses the family's needs, questions and concerns. The goal for every family is a balanced lifestyle, grounded in First Nation culture, with access to holistic care.

This is a voluntary program composed of the following elements:

- Home visitation- support from specially trained home visiting staff
- Case management for families with complex needs
- Health promotion and educational activities
- Links and referrals to other programs and services to support all members of the family

HIGHLIGHTS AND/OR CHALLENGES

- Biggest challenge was trying to fill the vacant position in our program. Ultimately this affected the amount of work we were able to provide to clients and the community.
- Staff absenteeism was high because of personal and health-related issues.
- It is always difficult to perform scheduled home visits, as clients leave home, don't get up or refuse to answer door.

GOALS AND OBJECTIVES

- To increase confidence, knowledge and skills in regards to parenting and care of infants and young children.
- To empower mothers and fathers to create strong, healthy First Nations families.
- To nurture the community's capacity to support families.
- To promote trusting and supportive relationships between parent and child, care provider and family and resource to resource.
- Through community health fairs and job fairs.

STATISTICS

Participation

ACTIVITY	TOTAL 2015/16	TOTAL 2016/17	TOTAL 2017-18
Intake	40	46	11
Development Screens	59	65	11
Home Visits	175	158	13
Referrals to Maternal Child Health Program	2	14	2
Strengthening Families Screen	20	64	6
Decline/Discharge/Discontinue	84	113	23
Postpartum Screens	135 (30 prenatal, 105 postpartum)	9	11
Family Assessments	—	7	2

Post Partum Visits

TYPE OF VISIT	TOTAL 2017-18
Health Care Visit	280
Home Visit	29
Information Entry	9
Program Attendance	1
Telephone	2

Foot Care Services



When you have diabetes, foot care is an important part of treatment.

A foot care nurse is a registered nurse or a licensed practical nurse, who has taken in addition to their formal training as a nurse, specialized training in foot care. They work along with a team of health care professionals such as family doctors, podiatrists, chiropodists, physiotherapists, and others to help keep a person mobile and decrease their risk of developing foot ulcers which can lead to amputation.

Foot care nurses can help reduce heavy calluses, corns and trim deformed or thickened nails. Nurses also assess feet for circulation sensation, edema (swelling), and assess for the potential risk of ulcer development and falls.

Sores can take longer to heal, so any diabetes foot problems should be evaluated by a physician/doctor.

Basic foot care includes as a minimum the following:

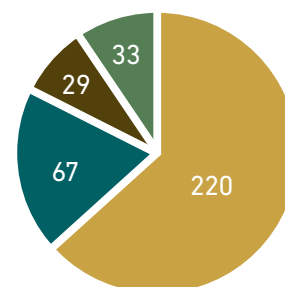
- Basic foot and lower limb assessment
- Basic wound assessment

- Basic footwear assessment/examination
- Corn and callus reduction
- Nail care
- Client education and health promotion (foot related)
- Referrals to footwear fittings
- Referrals to medical specialists.

STATISTICS

Participation: Basic Foot Care Services

- With Diabetes
- Services accessed
- New/follow-up
- No show/cancelled



HIGHLIGHTS AND/OR CHALLENGES

- Foot care is accessible to all NCN community members.
- Department includes four Certified Foot Care Nurses
- Two home care nurses have completed their Nursing Foot Care certificate.
- Transportation for foot care patients provided as required.
- Information about Type 2 Diabetes is available on community board at Nursing Station.
- Offered health promotions, such as walking challenges, one-on-one education, weekly telehealth sessions on diabetes (Thursdays)
- Participated in Community Health Fair to raise awareness of services and provide information.

GOALS AND OBJECTIVES

- To provide effective foot care services to NCN community.
- To avoid diabetes related foot complications.
- To educate the public and those with diabetes about foot care related topics.
- To work collaboratively with health care team and providers.
- To refer patients to appropriate professionals, community health programs, physicians, etc.
- To improve quality services through ongoing staff and professional development.
- To uphold the required nursing education competency as required through the College of Registered Nurse/College of Licensed Practical Nurses.

Aboriginal Diabetes Initiative (ADI)



ADI delivers education, activities and clinics to promote healthy living, to help everyone manage their diabetes, and to help reduce the prevalence of diabetes in NCN Citizens.

In delivering the mandate of this program, the focus is on healthy eating, physical fitness, risk factors, screening and diabetes management. Treatment and

care is in accordance with Manitoba Diabetes Care guidelines.

Our diabetes management is educational and fun. Clients learn how to manage diabetes through a healthy lifestyle and medication, as required. They also educate friends and family, and help them to avoid the disease through healthy living.

GOALS AND OBJECTIVES

- To improve the health status of NCN Citizens, through activities designed to contribute to the promotion of healthy living and supportive environments to help reduce the prevalence and incidence of diabetes.
- To focus on addressing healthy eating, food security, physical activity and obesity, as well as increasing awareness of diabetes, its risk factors and complications and supporting diabetes screening and management.
- To build more raised beds for community members.
- To encourage members to proactively grow their own food.
- To encourage Citizens to participate in traditional harvesting, such as berry/medicine picking and fishing and hunting.
- To educate members on the benefits of greenhouses.
- To work toward more greenhouses within the community and more individual family gardens.

HIGHLIGHTS AND/OR CHALLENGES

- Educated Citizens about the connection between vegetables and health, and promoted gardening within the community.
- Kidney Health presentation at OK School and at the Family & Community Wellness Centre from an outreach team from Winnipeg
- Provided foot care referrals
- Referred patients to the Diabetes Integration Project, Diabetes Retinal Screening Program and DIP dietician
- "Healthy Breakfast" sessions every Monday for fasting blood work clients
- Conducted a "Walk for Wellness Challenge" and purchased pedometers for client use
- Weekly telehealth education session every Thursday for NCN Citizens living with diabetes
- Received \$5,000 to build a community greenhouse and began its construction at the Family & Community Wellness Centre

STATISTICS

Diabetics and Diabetes Sessions

DESCRIPTION	2014/15	2015/16	2016/17	2017-18
TOTAL DIABETICS:	147	154	155	143
TYPE I DIABETICS:	Male (1) Female (2)	Male (1) Female (1)	Male (1) Female (1)	Male (X) Female (X)
TYPE II DIABETICS:	Male (51) Female (96)	Male (54) Female (98)	Male (55) Female (98)	Male (X) Female (X)
TELEHEALTH SESSIONS:	24	25	25	X
INTEGRATION PROJECT:	30 attended (35%)	49 attended (46%)	0 (no site visits)	20 attended

Participants in Diabetes Programs and Activities

DESCRIPTION	2014/15	15/16	16/17	17/18
RAISED BED GARDENS	28	28	28	X
GARDENERS	25	25	25	X
NUTRITION MONTH	50	25	50	X
CHRONIC BREAKFAST	258	298	171	133

STAR FASD Prevention Program



The vision of the Success Through Advocacy Role Modelling – Fetal Alcohol Spectrum Disorder program is to reduce the number of babies exposed to and suffering the effects of alcohol and/or drug exposure while in their mother's womb.

It is a harm reduction model which pairs vulnerable women who have used substances during their current or recent pregnancy with mentors who have themselves overcome similar challenges. These positive, supportive mentoring relationships are maintained for three years, long enough to help these women make changes to better their own lives and their children's. These changes are expected to 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 and objectives are achieved through an evidence-based, home visitation, mentoring, and case management program that delivers culturally safe, appropriate interventions and support services to

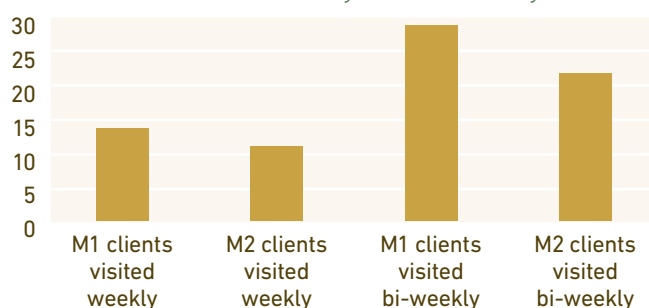
high risk women and their target child.

STAR (FASD) Program is a voluntary program and received permanent funding in 2015.

Active Clients and Visits

	2014-15	2015-16	2016-17	2017-18
Active Clients	27	30	30	25
Encounters	984	225	1,207	XXX

Clients visited weekly and bi-weekly–2018



Mentor 1 aimed for 14 weekly visits. Mentor 2 aimed for 11 weekly visits

HIGHLIGHTS AND/OR CHALLENGES

- This year, we had 25 active clients. The maximum capacity for this program is 30 participants.
- Some of the program's clients have also attended parenting classes and treatment centres over the course of the year, which highlights the multidisciplinary approach of the program.
- STAR FASD attended Health Fair, National Addiction Awareness week, and various community events to increase visibility within the community.
- Due to persistent staff shortages, we were unable to deliver all home visits as expected. Mentor 1 left for maternity leave; Mentor 2 was transferred to Jordan's Principle department; and Program Manager was moved to CFS for three months. This highlights the shortage of qualified social services professionals in our community.

GOALS AND OBJECTIVES

- To assist women in harm reduction strategies and receive alcohol and/or drug treatment as required.
- 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

This program is meant to keep paramedics in the Nelson House community in the case of an emergency, rather than using those professionals to transport non-life threatening medi-vacs to Thompson Hospital. Our program completes daily runs to Thompson, on Sundays between 12:00 and 8:00pm, and Monday to Friday from 7:30 am to 11:30 pm.

We also provide local transportation to and from the Fanny Hartie Medical Centre.

The medical transportation fleet includes:

- 2018 Chevy Suburban 4X4 for the Thompson run
- 2017 15-passenger Chevy Express van for out-of-community trips
- 2014 Ford Econoline wheelchair accessible van
- 2016 Mercedes Benz 12-passenger van as backup

HIGHLIGHTS AND/OR CHALLENGES

- Over the course of 2017-18, we provided transportation for NCN clients to almost 8,800 medical appointments.
- Clients who cancel at the last minute cause delays in others' pickups.
- Cost of fuel, repairs, tire replacement and safeties every 6 months put pressure on budget.
- Medical transportation vehicles should be replaced every 3 years or 300,000 kilometres for safe and reliable travel.
- Available funding for operation and maintenance is a continuous challenge. We hope for a substantial increase of annual funding from \$17,000 to \$50,000.



HOME AND COMMUNITY CARE

Overview

The Home and Community Care program supports people of all ages who require care at home, at school or in the community.

When Elders and people with complex medical conditions of all ages can remain at home, levels of depression and isolation are reduced, and their emotional, mental and spiritual wellbeing is stronger. Home care, with the support of family and friends, can make this possible.

Home visits and assessments are conducted to address the needs of clients who require support such as continuous care, extended care and respite. Our professionals create and follow through with personal care plans based on medical background, current health, abilities and support.

Types of Services Provided:

- Structured client assessment
- Referrals and linkages within and outside the community (such as physiotherapy, dietician, foot care, respite, hearing centre and homecare)
- Managed care process, home care nursing services and personal care services (palliative care, bath/personal care, homemaking referral, home care maintenance, health promotion, program monitoring/reporting requirements, teaching of medication regime, ordering and delivery of equipment and supplies, assessment for Long Term Care, advocating)
- Record keeping and data collection

HIGHLIGHTS AND/OR CHALLENGES

- More referrals and linkages to specialists.
- Staff attending improvement programs and training, including eSDRT, @your side/St. Elizabeth, Mustimuhw, palliative, chronic disease, wound care, Aboriginal Diabetes Conference, foot care, staff retreat and development workshops, KTC quarterly meetings
- The program continues to work closely with Northern Regional Health Authority and Nursing Station to ensure NCN Citizens are receiving holistic care
- Palliative Care is a new program for our department. Our professionals are receiving training and developing protocol.

GOALS AND OBJECTIVES

- To improve safe, competent and efficient care services for clients, their families and support system.
- To further enhance the services already in the community – case conference with families.
- To improve quality services through ongoing professional development for staff.
- To assist clients and family members to acquire and maintain emotional, mental, physical and spiritual wellbeing.
- To help clients achieve independent living as far as is possible.
- To demonstrate improved accountability in all areas of service management.
- To uphold the required nursing education competency as required by completing online training seminars, tele-health video training and attending health-related courses.



STATISTICS

Home Care Total Services

ACTIVITY	TOTAL 2015/16	TOTAL 2016/17	TOTAL 2017-18
Case Management	1,557	503	2,536
Wound Care	502	1,289	1,025
Foot Care	49	46	67
Nursing Services	2,215	2,766	1,975
Not Home	124	190	180
Home Visits	2,052	2,565	2,565
Assessments	173	675	552
Total Encounters	6,682	8,034	8,900

Client Type

ACTIVITY	TOTAL 2015/16	TOTAL 2016/17	TOTAL 2017-18
End of Life	1	4	1
Maintenance	29	30	66
Long Term	49	34	42
Acute	47	25	34

Reasons for Home Care Visits

ACTIVITY	TOTAL 2015/16	TOTAL 2016/17	TOTAL 2017-18
Blindness	2	1	1
CNS, Parkinson	7	3	5
Renal, Kidney	4	2	3
Cancer	5	3	3
Skin conditions/wound care	29	37	34
Respiratory	5	2	1
MSK, arthritis	10	1	3
CVA, stroke	3	1	-
Cardiovascular Disease/Heart Disease	25	14	13
Diabetes	16	19	26
Auto-immune	1	3	-
Gastro-intestinal	-	1	1
Genitourinary condition	-	1	-
Frail Elderly	-	-	2
Dementia	-	-	1

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.

Child Care and Community Wellness Programs Include:

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

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. We recognize parents, guardians and caregivers as each child's first and best teacher, and require them to participate, through attendance, fundraising, etc. Our staff advocate for children and families in any way possible, including issuing milk coupons, escorting families for medical appointments, and writing support letters.

The program provides learning opportunities that acknowledge each child's learning style and developmental stage. Every day includes a strong focus

on healthy and hygiene and nutrition. We inspire our children to be proud of their First Nations culture and language. Traditional teachings occur in the classroom, on the land and at cultural cabins.

NCN Family and Wellness Centre highly recommends this program for all NCN children. There are no registration fees. Transportation and nutritious snacks are provided daily free of charge.

HIGHLIGHTS AND/OR CHALLENGES

- Typical preschool monthly enrollment was 19 students, with that number decreasing to 17 over the winter months.
- Summer Program ran for three weeks in July and August.
- Students enjoyed the Mini Festival and attended the Health Fair.
- We were proud to celebrate 6 Dreamcatchers HeadStart graduates this year.
- Mould issues in the classroom were resolved.
- Van required repairs and maintenance.

GOALS AND OBJECTIVES

- To provide First Nations children with a positive sense of themselves.
- To encourage and support children to enjoy lifelong learning.
- To support the spiritual, emotional, intellectual and physical growth of each child.
- To guide, support and encourage parents, guardians and caregivers to become active participants in their child's life.
- To provide various life skills and child development programs for First Nation parents, guardians and/or caregivers.
- To build partnerships and coordinate with other community programs and services to enhance the effectiveness of the program and the families that we serve.



Jean McDonald Treasures of Hope Day Care Centre

The Jean McDonald Treasures of Hope Daycare was established in 1998 to provide working parents and students in training with affordable quality child care. Our daycare is a place of Early Childhood Learning, and we are proud of our ability and opportunity to teach children skills that will prepare them for higher learning.

Our staff includes two Early Childhood Educator Level Twos; two Early Childhood Educator Level Ones; and two Child Care Assistants. We provide care for infants and toddlers ages 4 months to 2 years of age, and preschoolers ages 2 to 5 years of age.

Daily day care fees are \$25 per full day and

\$15 per half-day for working parents. We are pleased to offer full days to ATEC students at no cost (beyond providing their child's meals and snacks), and other students at \$10 per day.

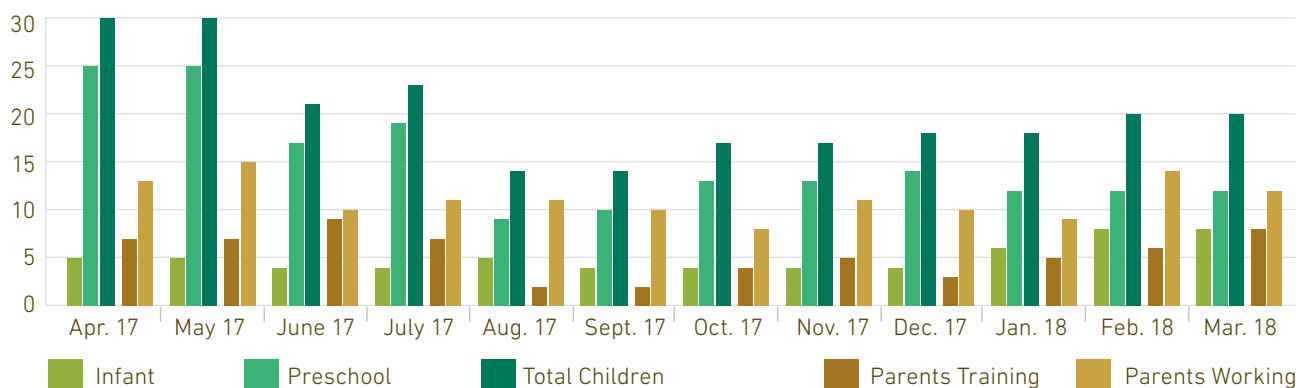
HIGHLIGHTS AND/OR CHALLENGES

- Enrollment was highest in April 2017 with 30 students, and at its lowest in August and September 2017 with 14.
- Washroom stalls were breaking down and were replaced this year.
- The outside yard needs substantial work, including sod, landscaping and a new play structure.

GOALS AND OBJECTIVES

- To provide meaningful opportunities to learn in a structured, safe and nurturing learning environment.
- To guide activities that promote the social, emotional, mental and physical growth of each child.
- To enhance partnerships with other child and health programs to support and promote healthy living, positive choices and the wellbeing of families.
- To demonstrate integrity, care and dignity in all aspects of practice.
- To manage fees so that our program is financially available to working parents or those needing income assistance.
- To encourage staff to pursue knowledge, skills and self-awareness for professional excellence.

STATISTICS (DAY CARE CENTRE)





Fitness Centre

This popular facility is open 7 days a week Monday to Friday 12:00 p.m. to 8:00 p.m. 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 lifestyle.

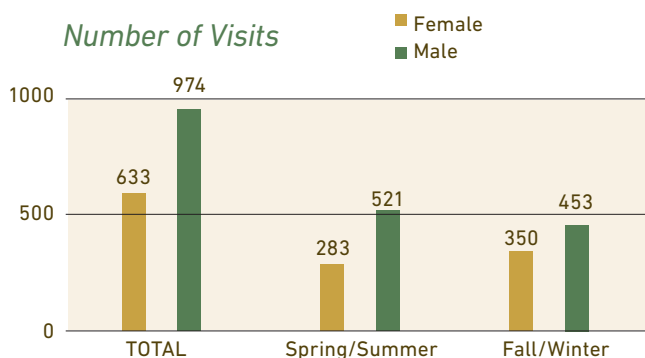
GOALS AND OBJECTIVES

- Linking the Gym and Fitness Centre to Community participations such as the Medicine Lodge, Highschool and NCN staff.
- Effectively maintain and improve equipment.
- Provide effective staffing and programing to increase participation.
- Provide stimulating facilities, learning environments and programs.

HIGHLIGHTS AND/OR CHALLENGES

- Flooding.
- Issues with staffing
- Water Damage due to flooding.
- New Heater and Air Conditioning needs to be installed
- Renovations needed due to water damage.
- Gym Membership packages are available for community members living on reserve.
- Flexible accessibility for community members that require access to the Fitness Centre before and after hours.
- New Locks and gym pass keys.
- Donations.

STATISTICS



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



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- To continue to provide meaningful opportunities to learn in a structured, safe and nurturing learning environment.
- To improve activities to promote the social, emotional, mental and physical growth of each child.
- To enhance partnerships with other child and health programs to support and promote healthy living and positive choices.
- To provide stimulating learning environments and facilities.



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