

# ANNUAL REPORT

# 2016-17



Nisichawayasihk Cree Nation  
FAMILY AND COMMUNITY  
Wellness Centre Inc.



# 2016-2017 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 "Ketiyatisahk" (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 2016/17 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 2016/17 Nisichawayasihk Cree Nation Family and Community Wellness Centre Annual Report. This report outlines the highlights, challenges and accomplishments of the past year and provides an overview of our goals for the year ahead.

The Centre continues to build upon the strengths and gifts of our children and families, and the wisdom of our elders, while guiding our programming with political encouragement and support from our elected leadership.

As we reflect on more than a decade and a half of providing a holistic approach to community wellness, we are reminded that the guiding compass of the Centre grew out of a community-based strategic planning process which culminated in the theme "A Pathway to Restoration" in June, 1999. To this day, we work to provide a fully integrated health-related and Child and Family services system, acknowledging the strength of our people and recognizing how much we can accomplish as a community, by working together.

Once again, the past year has been filled with many accomplishments and we have had to overcome various challenges. But as in years past, we have relied on our guiding principles and vision to allow us to navigate through obstacles such as budget and funding cutbacks, the increase in demand for CFS services and administrative barriers.

As we continue to find ways to better serve our community, we are excited by the development of several new proposed programs like the Esiki sha cik Parent

Coaching, Little Sisters Keeper, Jordan's Principle, Wechitotan Kita Mithwayachik Kichawasismina Nak, and – all aimed at improving the community-based approach to reduce children in CFS care and to provide better services for children and families.

Although these new programs are pending budget approval, we are confident they will integrate well and complement our existing services at the Centre.

Change has always been, and continues to be, the dominant theme, as we cannot meet the needs of our community by simply tinkering and making minor cosmetic adjustments to existing policies and program designs. New and bold innovative approaches are required to meet the needs of our community. They are more integrated, culturally-based, holistic in nature and acknowledge the important role of community responsibility and self-determination.

As we move forward, I have great confidence that the Centre's board and staff will work collectively to develop innovative, holistic and integrative programs and services to improve the lives of our Citizens. We will continue to seek the advice of our community members, political leaders and elders in the development and delivery of services.

Together we will continue to build a system where decisions are made at the community level to build the capacity of individuals, families and communities in our community.



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



## Message from the Board

### Board of Directors

- Joyce Yetman, *Chair*
- Roslyn Moore, *Vice Chair*
- Jacqueline Hunter, *Director (Outgoing)*
- D'Arcy Linklater, *Director (Incoming)*
- Natalie Tays, *Director*
- Agnes Spence, *Director*

The NCNFCWC Board of Directors is pleased once again to report to our community and highlight the Centre's accomplishments.

The board is responsible for ensuring the organization's vision, mandate and direction is maintained and that steady progress is made to achieve the Centre's targeted goals.

We strive to operate from a framework of cultural competence and cultural safety which ensures culturally appropriate services.

We also provide streamlined, effective service, with the highest level of standards and decision making possible to allow children and families to receive appropriate services.

We hope the Centre will continue to be recognized as a reliable resource that families look to in order to strengthen family capacity through direct services and through connections to Indigenous culture.

In the 2016/17 reporting year we have been especially pleased to complete the three-year process of developing and passing the Financial and Administration Policies and Procedure Manual.

Strides have also been made to complete the guidelines manual for communicable diseases and our Day Care policies. As we look ahead, we will be updating our Human Resources policies to meet current legislative changes. We are in a continual

process of updating and standardizing the policies, procedures and regulations of our many programs.

We will also continue to work at all levels to integrate our Centre's core values into every aspect of our organization, and to increase our understanding and accountability for demonstrating these values in the services we provide to children, families and the community.

We wish to thank the staff and management at all our offices and value the front-line work and commitment they provide to achieve the greater goals of the organization. Their many accomplishments and their ability to overcome shared challenges give us a great sense of pride.

It is with respect that we recognize and thank our community partners for working together for the wellbeing of children and families.

We would also like to acknowledge our Lawyer The Honourable Madam Justice Lore Mirwaldt, whom, with many of our board in attendance, was appointed to the Court of Queen's Bench – Family Division (October 2016).

Together, as a community with a common directive, we share responsibility for the wellbeing of the organization and the integrity of our services for our Nehetho Nation. By encouraging and empowering our families, children and community we will continue to instill the belief that "it takes a village to raise a child."

– Board of Directors, 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.

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.

This 2016/17 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.



## 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.



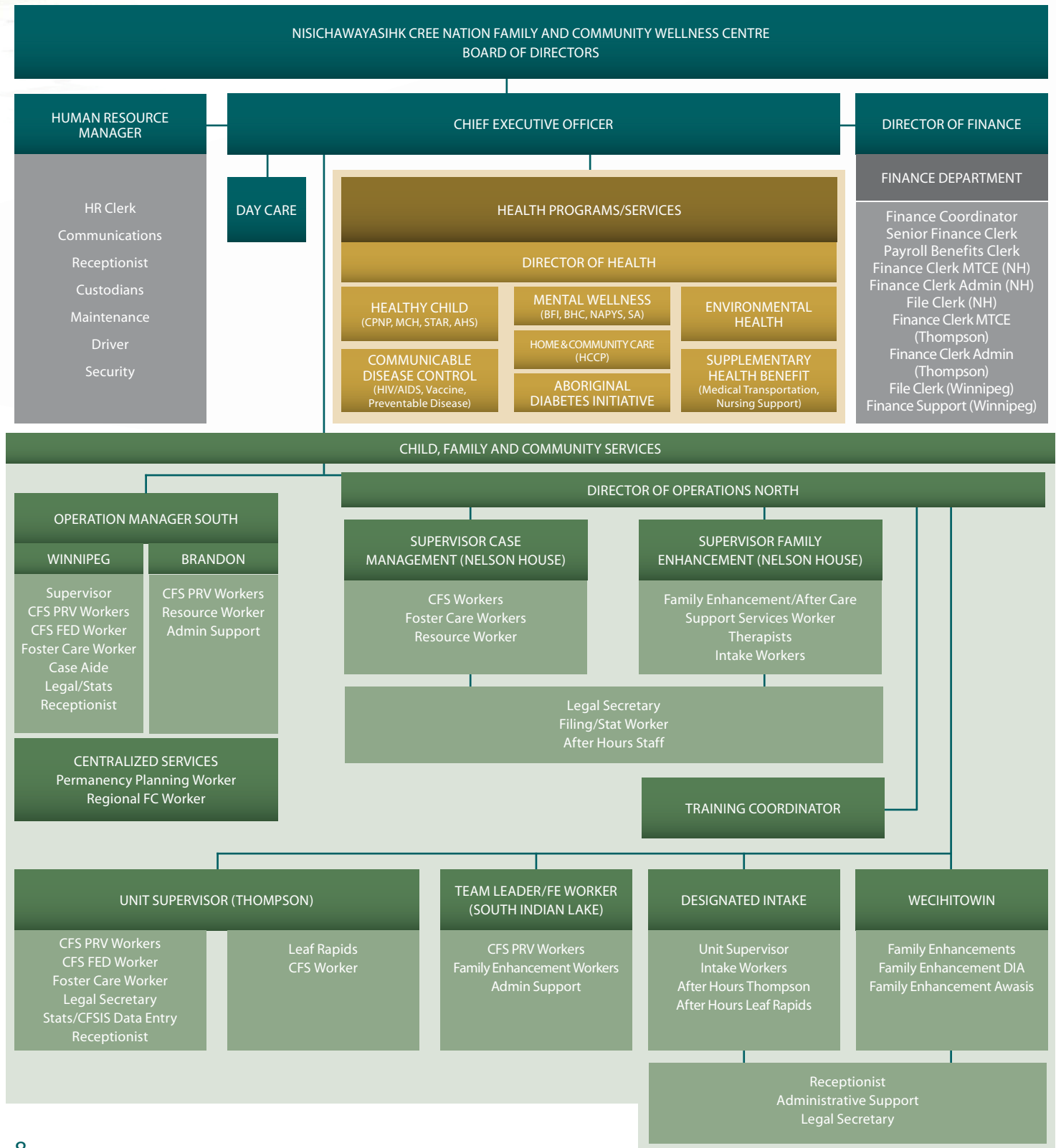
## Mission

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



- Children in care cases have increased from 346 in 2015/16 to 393 in 2016/17, but are still lower than when the center first transitioned to the new funding model.
- The Centre has experienced an increase in apprehensions in both Nelson House (due to a number of large families involved in services) and South Indian (increase incidents with alcohol and family violence).
- Creation and development of new programs in Child and Family Services, including Little Sister's, Eski-sha-cik Parent Coaching, Jordan's Principle Initiative and Wechitotan Kita Mithwayachik Kichawasismina Nak. Some of these programs are not up and running due to funding restraints.
- STAR FASD program is running at maximum capacity with 30 clients; 10 of those are new to the program.
- The Wecihtowin Project continued to bring its participants to meaningful sites in the NCN community, including Miles 20, 34 and 35; McCreedy Park; and Cedar Park.
- Maternal and Child Health received many more referrals this year at 14, up from 2 last year, indicating the program is respected as a benefit to mothers and the community.
- Home and Community Care is now able to offer foot care services to community members (in part thanks to professional development), and provided more acute care, such as wound care and dressing changes.
- CFS therapy services reports 15 suicide assessments, down from 23 last year. This suggests there have been less incidents requiring crisis interventions.
- The innovative Intervention and Removal of Parent program continues to gain attention across the province, country and internationally. NCN CFS staff have provided training to help communities as far away as Kelowna, BC to establish their own programs.
- A two-day workshop on Cree language teachings was attended by almost 30 staff members, NCN Citizens and Medicine Lodge clients.
- Two new CFS homes have been outfitted with special equipment to meet the high medical needs of children, with funding from Jordan's Principle.
- While the Removal of Parent program is hugely successful, many NCN homes do not meet the provincial standards to allow children to stay in their own homes. In some cases, the Wellness Centre has used its own capital dollars to meet these requirements.
- Participants in the Circle of Care program have called it empowering and helpful, however, the current client-worker ratio is 35:1, making it difficult to meet the program's objectives.
- More than 100 families have participated in Rediscovery of Families, however, funding shortfalls mean the program can only operate sporadically.
- The Bachelor of Social Work Co-Hort Program has about 25 participants again this year. There are talks underway to establish a similar program with University of the North. As NCN social services continue to expand, there is a great demand for professionals with this training.
- Counselling Services have increased for suicide prevention and anger management to meet demands for support in the community.
- Public health has effectively improved awareness, and health promotion. This is evident as more Community members are taking initiative to reduce health concerns.
- Early years daycare class was smaller this year due to all day kindergarten at OK school. Graduation 2017 had 6 graduates.

## 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 2016/17 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 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

- 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.
- The current funding model does not allow for training of support service positions, such as respite workers.
- The current Intervention and Removal of Parent (IRAP) process is extremely time-consuming.
- Winnipeg-based third-party care providers are not committed to ensuring connection with family and home 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

### *Children In Care*

CHILDREN IN CARE (CIC) STATUS	2015	2016	2017
Apprehension	32	58	<b>70</b>
Temporary Ward	36	31	<b>47</b>
Perm Ward – Court	184	187	<b>217</b>
Perm Ward – VSG	7	18	<b>6</b>
Voluntary Placement Agreement	36	17	<b>21</b>
Transitional	0	0	<b>0</b>
Petition Filed	7	20	<b>4</b>
Order of Supervision	1	0	<b>7</b>

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

### *Comparison of Apprehension Cases by Year*

APPREHENSION CASES (BY YEAR)	NO.
2011	79
2012	70
2013	67
2014	49
2015	32
<b>2016</b>	<b>48</b>
<b>2017</b>	<b>69</b>



### Aboriginal Status

ABORIGINAL STATUS	2015/16	2016/17
Inuit	0	0
Métis	2	2
Non-Status	104	50
Not Aboriginal	2	0
Treaty Status	222	290
Unknown	0	45

### Placement

PLACEMENT	2015/16	2016/17
Foster Home	229	227
Residential Care	37	18
Independent Living	70	3
Own Home	11	6
<b>TOTAL</b>	<b>347</b>	<b>254</b>

### Caseload

CASELOAD	2015/16	2016/17
Children in Care	330	358
Extensions in Care	11	31
Voluntary Family Service	24	14
Protection	183	152
Expectant Parent Services	13	8
Family Enhancement	44	211
<b>TOTAL</b>	<b>605</b>	<b>774</b>

### Count of Children Under Suspension

STATUS	2015/16	2016/17
Children Under Suspension	3	8

### On Reserve and Off Reserve Foster Homes and Places of Safety

FACILITY COUNT	ON-RESERVE	OFF-RESERVE
Foster Homes	86	52
Places of Safety	63	14
<b>TOTAL</b>	<b>149</b>	<b>66</b>

# Wecihitowin Project

The Wecihitowin Project uses traditional cultural activities and other resources to help First Nations families choose healthier living options. Every family is supported by using the Circle of Care model, which is based on the Medicine Wheel and includes holistic practices.

The Wecihitowin Project is delivered by a team of two CFS workers and two Awasis workers. They collaborate with each family to create an achievable family plan that is monitored throughout the Project's timeline. Activities include sharing circles, land-based activities, counselling, home visits, advocacy, family and case conferencing, court support, transportation services, recreation, links to other community resources, and community family spirit programs.

## HIGHLIGHTS AND/OR CHALLENGES

- Guest speakers provided guidance on Grief and Loss, Family Enhancement sharing circle, CFSA Training and other valuable topics.
- Participants enjoyed cultural activities such as rattle making, tipi teachings, harvesting, spring ceremonies, and language and culture camp.
- Wecihitowin staff prepared and delivered 15 Christmas hampers to our Wecihitowin families.
- Workers attended professional development sessions throughout the year, including Safe Talk Training, Hope North Workshop on Suicide Prevention and Mental Health Wellness for Youth, Traditional Parenting, tanning hide workshop, FE Conference, Applied Suicide Intervention Skills Training (ASSIST), Awasis Conference, Family Enhancement conference, and the Community Awareness forum on Fentanyl.

## SERVICES INCLUDE:

- Counselling
- Parent Services/Home visits
- Administrative Assistance
- Office Services
- Advocating
- Court Support
- Transportation Services
- Family and Case Conferencing
- Other duties as assigned with respectful agencies

## GOALS AND OBJECTIVES

- To provide families with education, skills, methods and resources to reduce stress and conditions that may pose risks to children.
- To teach parents harm reduction skills and strategies.
- To shift the focus from Intervention to Prevention.
- To help parents understand well-being and to help them create it in their lives and in their children's, using traditional wisdom.
- To create opportunities for families to connect with culture and the land.
- To build relationships with Elders, family members and community resources.
- To maintain an open door policy with participants to ensure continuity of support.
- To reduce the number of children in care of agencies.

**The Wecihitowin team would like to extend our deepest thanks** to the following Elders, Advisors and Teachers for taking the time to share their valuable knowledge with the staff and participants:

• David Sanderson

• Jack Robinson

• Lloyd Daniels

• Marie Ballantyne

• Andy Daniels





## STATISTICS AND REPORTS

The Wecihtowin Project runs four cycles of programming every year. Families often request participation in the Wecihtowin Project; many are referred by NCN, Awasis Agency, Kinosao, and others. Each family that participates is invited to attend seven weeks of programming. Each week focuses on different topics and teachings.

Weekly topics included: History and Culture, Understanding the Child Welfare System, Acknowledging Anger, Minopimatisowin "Living a Good Life," Time Management, Traditional Parenting, Circle of Security, Residential Schools, Parenting Skills, Acknowledging Emotions, Grief Workshop, Self-Care, Healthy Relationships, Child Development and Life Skills.

### 2016-17 Participation by Cycle

CYCLE	WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5	WEEK 6	WEEK 7	TOTALS
Cycle #1 Spring (April-June)	8	7	5	7	9	7	7	27 total classes, 21 referrals, 30 completion certificates, 12 participation certificates
Cycle #2 Summer (June-October)	–	–	–	–	–	–	–	–
Cycle #3 Fall (October - November)	9	11	11	13	13	14	10	25 total classes, 19 referrals, 46 completion certificates, 23 participation certificates
Cycle #4 Winter (January - March)	7	8	6	6	8	8	5	27 total classes, 15 referrals, 32 completion certificates, 16 participation certificates

### 2016-17 Referral Communities and self-referrals

	NCN	AWASIS	OCN	CREE	KSMA	MÉTIS	NIKAN	SELF	OTHER	TOTAL
Referrals	38	34	1	6	0	0	14	4	1	98

### 2016-17 Signed In

MONTHS	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	TOTAL
Sign ins	42	93	77	35	38	33	128	117	104	92	81	51	891

#### ADDITIONAL PROGRAM EVENTS AND ACTIVITIES:

- Family Night
- Game Night
- Craft Night
- Parent Sharing Circles
- Land Based Cultural Activities
- Spring Ceremonies
- Sweat Lodge
- Smudging
- Sundance
- Full Moon Ceremony

#### RESOURCES USED:

- Circle of Security
- Raising the Child
- Back to Basics
- Rediscoveries 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
- Traditional Parenting Program Manual
- Mother of Red Nations – "Understanding the Child Welfare System"

# 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.



## HIGHLIGHTS AND/OR CHALLENGES

- This model has received attention across the country, and is praised for its innovative approach.
- Other First Nations communities have been inspired by this approach and are considering it for their own purposes.
- Parents who have gone through the program say they have a better understanding of their role and responsibilities.
- These families have an increased willingness to accept supportive services.
- Many homes in the NCN community do not meet provincial standards to allow the children to stay in their own homes.
- The Wellness Centre has used its own capital dollars to meet building codes and licensing requirements in order to have children remain in their own homes.

## 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.

# Bachelor of Social Work Co-Hort Program

This program is in partnership with the University of Manitoba. Participants are able to further their studies in Social Work and achieve their bachelor degrees using a distance education model. It is designed for part-time study, which allows local NCN professionals to remain at work while pursuing their education.

This program is now in its fourth year of collaboration with the University of Manitoba, and has consistent enrolment of about 25 students every year. The program is in discussions with the University of the North to begin a similar program in September 2018. The application/screening process is expected to begin this fall.



## HIGHLIGHTS AND/OR CHALLENGES

- The increased number of people with appropriate social work training creates improved recruitment and retention of Wellness Centre staff.
- Enrolment in the program has remained consistent.
- Social, emotional and academic supports are provided through the Wellness Centre, which increases success of program participants.
- As NCN social services continue to develop and grow, more workers with higher level social work training are required.
- When participants have to leave for training and assessment, work flow and service delivery is affected.

## GOALS AND OBJECTIVES

- To increase the number of professionals with appropriate social work training in the NCN community.
- To maintain service delivery and work flow while staff pursue their training.
- To achieve full potential and efficiency in our social services programs through further education of our staff.
- To receive INAC funding to create a 1.0 full-time equivalent position, which would provide coverage as required while staff pursue post-secondary training and ongoing professional development.



# Esiki sha cik Parent Coaching

New Program  
(Pending Funding)

Almost 50 per cent of NCN families involved with CFS have been involved with the agency more than once. This unhealthy cycle of apprehension and reunification is often because there are limited resources and support available to families after they're brought together again.

Esiki sha cik is a new program that aims to increase the long-term successes of child and family services in Nisichawayasihk Cree Nation. After parents receive the programs suggested in their care plan, such as parenting classes and addiction counselling, they will continue to receive in-home coaching. In this way, they have support and guidance as they develop effective parenting practices, and as the family continues to develop life skills.



## HIGHLIGHTS AND/OR CHALLENGES

- Family meetings with parent coaches that encourage open communication, problem resolution and goal setting.
- Support and resources for families to create success in all aspects of life including spiritual health, nutrition, fitness, financial stability.
- Families often finish their recommended counselling and therapy, and reunite with the best of intentions, but are unable to implement positive change.
- The esiki sha cik program has been fully developed, but has not been implemented due to funding constraints.

## GOALS AND OBJECTIVES

- To stop the cycle of apprehension and reunification and to see reunification as the one turning point for a family.
- To teach parents to assess their own and their children's mental, emotional, spiritual and physical health.
- To support families as they create independence and stability for themselves.
- To create positions, salaries and benefits for 4 parent coaches.
- To provide further professional development, education and training for parent coaches.
- To receive funding to cover costs of travel, equipment (cell phones, computers, vehicle maintenance, etc.) and program materials.

# Little Sisters Keeper

New Program  
(Pending Funding)

This new program addresses the high rate of domestic violence, sexual assault and abuse in First Nations communities. Working specifically within the NCN community, Little Sisters Keeper aims to educate all Citizens about the complex reasons behind violence and to build awareness about the effects of victims' trauma on their lives.



Sexual abuse and domestic violence is a terrible crime in many ways. Victims often feel a sense of shame and secrecy that makes accepting help, finding justice and creating change difficult. This program aims to provide education, prevention, intervention and support services for all women when they need it, here in our NCN community, instead of seeking help in the city.

## HIGHLIGHTS AND/OR CHALLENGES

- Individuals, families and our community will have increased knowledge about the impact of victimization, the needs of victims, available services and relevant legislation.
- The program will develop informational materials for schools, counselling groups and women's programs.
- Many victims face discrimination, shaming and lack of support when they come forward to report what has happened to them. This creates secrecy and allows abuse to continue.
- Children grow up in abusive homes and accept that it is normal. The cycle continues into another generation.
- The Little Sisters Keeper has been fully developed, but has not been implemented due to funding constraints.

## GOALS AND OBJECTIVES

- To provide support for women as they come forward, recover from their trauma and navigate the justice system.
- To coordinate services and identify gaps among existing agencies such as RCMP, schools and the Nursing Station.
- To create three positions, including a family therapist and support workers with training in domestic and sexual violence.
- To provide further professional development, education and training for support workers.
- To receive funding to cover costs of travel, equipment (cell phones, computers, vehicle maintenance, etc.) and program materials.

# Jordan's Principle Initiative

New Program

This legislation 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. Jordan's Principle requires the government that first connects with the child in need to provide the required services, and resolve the funding issue later.

This newly funded program works to bridge the gap in care for Indigenous children.



## Jordan's Principle

A Child First Initiative

### HIGHLIGHTS AND/OR CHALLENGES

- Jordan's Principle created federal funding for two of the new CFS homes in Nelson House to be prepared with special equipment to meet the high medical needs of children.
- In March, Dr. Cynthia Wesley-Esquimaux visited NCN to discuss vision, design and implementation of Jordan's Principle.
- Jordan's Principle has yet to be fully implemented in Manitoba or in any province across Canada.
- The allocation of funding for training is received by the provincial government rather than First Nations communities, which creates downtime and inefficiencies.
- There is limited access to specialized mental health services within our community.

### GOALS AND OBJECTIVES

- To allow children with special needs to receive the care and attention they need, while living among family, as is possible.
- To relieve the stress of family members and caregivers of children with special medical needs.
- To create efficient delivery of funds, training and education, so that services can be provided as soon as they are required.



# Wechitotan Kita Mithwayachik Kichawasismina Nak

New Program  
(Pending Funding)

Children with complex medical needs often also deal with accompanying mental, emotional, social and spiritual concerns. They are often at higher risk of mental health issues, due to their physical condition and/or social issues. Caregivers of these children are also at risk, due to stress and burnout.

This program intends to approach the care of these children holistically, by integrating psychological and psychiatric services into intervention and support planning, which is typically concerned with physical needs. It is estimated that there are 100 children in our NCN community who would benefit from this holistic care model.



## HIGHLIGHTS AND/OR CHALLENGES

- Families and children will have access to a psychiatric nurse and a family therapist as part of the program's holistic care mandate. Additional consultation support from a child psychologist or psychiatrist will be available.
- The Wechitotan Kita Mithwayachik Kichawasismina Nak program has been fully developed, but has not been implemented due to funding constraints.

## GOALS AND OBJECTIVES

- To host day and evening programs for children and families to reduce isolation and promote positive mental wellness and social support networks.
- To empower families and caregivers via workshops and training on child development, provide complex needs advocacy, and support resources.
- To create two positions: a full-time equivalent psychiatric nurse and a family therapist.
- To receive funding to cover costs of travel, equipment (cell phones, computers, vehicle maintenance, etc.) and program materials.

## Stepping Out on Saturday (S.O.S.)

This is a former day program for children in care, or those involved with CFS, who have a FASD diagnosis or confirmed prenatal exposure to alcohol. The program, which was operated at the Centre, was discontinued part way through the reporting year because the program coordinator moved on.

The S.O.S. program participants were referred for assessment at the Manitoba FASD Centre. These children had the opportunity to learn about and practice social skills and self-regulation in a safe, structured environment among trained support workers. Children learned appropriate behaviour while gaining real-life experience. Caregivers also had the opportunity to enjoy a date of respite.



### HIGHLIGHTS AND/OR CHALLENGES

- This program ran in four centres in the province (Winnipeg, Brandon, Portage la Prairie and Thompson), and in two First Nations communities (Bloodvein and Pauingassi).
- It was offered to Nisichawayasihk Cree Nation children and caregivers until discontinued this year.

### GOALS AND OBJECTIVES

- To give these children an opportunity to practice their social and self-regulation skills.
- To give caregivers a break from the stresses of dealing with a child with special needs.
- To explore options to re-establish the program hosted by the Centre

# Therapy Services

Family Therapy services provides individual, couple, family and group therapy to NCN Citizens with the primary goal of enabling families to develop their own methods of managing these problems more effectively. Case workers make referrals to the program's two clinical family therapists, with consent of the Citizens and families they're supporting.

Family Therapy oversees several initiatives:

**Circle of Security (COS)** parent training is a relationship-based early intervention program that enhances attachment security between parents and children. The program presents video examples of secure and problematic interactions between parents and children aged zero to five. Healthy options and the principles central to COS are outlined with animated graphics.

**Teen Support Groups** for girls include education, celebrations, and arts and crafts with topics

including healthy relationships, sex, the role of women in ceremony, coming of age, and self-care. Public health workers and LGBTQ2 speakers deliver informative presentations.

## **Intervention and Removal of Parent Program**

has seen great success in NCN since it began in 2002. Lately, there has been high interest from other communities and provinces, and our therapists have created and continue to provide thoughtful training.

**Homicide Bereavement Support** was established in 2013 in partnership with the University of Winnipeg Aurora Family Therapy Centre. It helps individuals and families to cope with the painful reality of losing a loved one to homicide and those reported missing. This 10-session support group was delivered to 34 participants at the Wechitowin facility in Thompson. It also held a pipe ceremony and cultural activities at Mile 20 for spring ceremonies.

## HIGHLIGHTS AND/OR CHALLENGES

- Our family therapists facilitated three Circle of Security trainings for 26 parents in Nelson House, Leaf Rapids and South Indian Lake.
- Family Enhancement workers also received Circle of Security training, and have since been facilitating the program independently.
- A family therapist created a "trauma, loss and coping" group for parents in the Family Enhancement program, with five consistent attendees, and some occasional.
- Girls in care of CFS, including 6 from Nelson House and 4 from Thompson, participated in a teen girls group created with their unique needs in mind.
- Removal of Parent training was provided for CFS staff, RCMP, Chiefs and councils, Elders and health care workers in Grand Rapids First Nation, Oposkwayak Cree Nation, Island Lake First Nation, and Kamloops, BC.
- The Homicide Bereavement Support group hosted a vigil and feast for 40 participants to honour those who've died by homicide.
- Proposals for additional programming, including Little Sisters' Program, group home-E'takastepetakoseyan, Eski-sha-cik Parent Coaching Program, and Homicide Bereavement Support Group, were developed and submitted.
- A two-day Mental Health and Addictions training program for 30 participants was facilitated by Crisis and Trauma Resource Institute, with help from the MKO Mental Health Wellness Coordination Initiative.
- The Wellness Centre delivered a two-day workshop on Cree language teachings for 25 staff, community members and Medicine Lodge clients.
- A cultural camp coordinated by NNCEA and FCWC was attended by more than 50 students and community members.



## GOALS AND OBJECTIVES

- To provide clinical counselling and assessment services for parents and their children.
- To provide support and teach skills to children experiencing emotional or behavioral problems.
- To create, develop and implement more initiatives to serve NCN needs.
- To continue the strategic plan that addresses suicide in the NCN community.
- To continue the focus on programs such as ASIST and Safe Talk T4T, which provide life-saving suicide alertness skills.

## STATISTICS

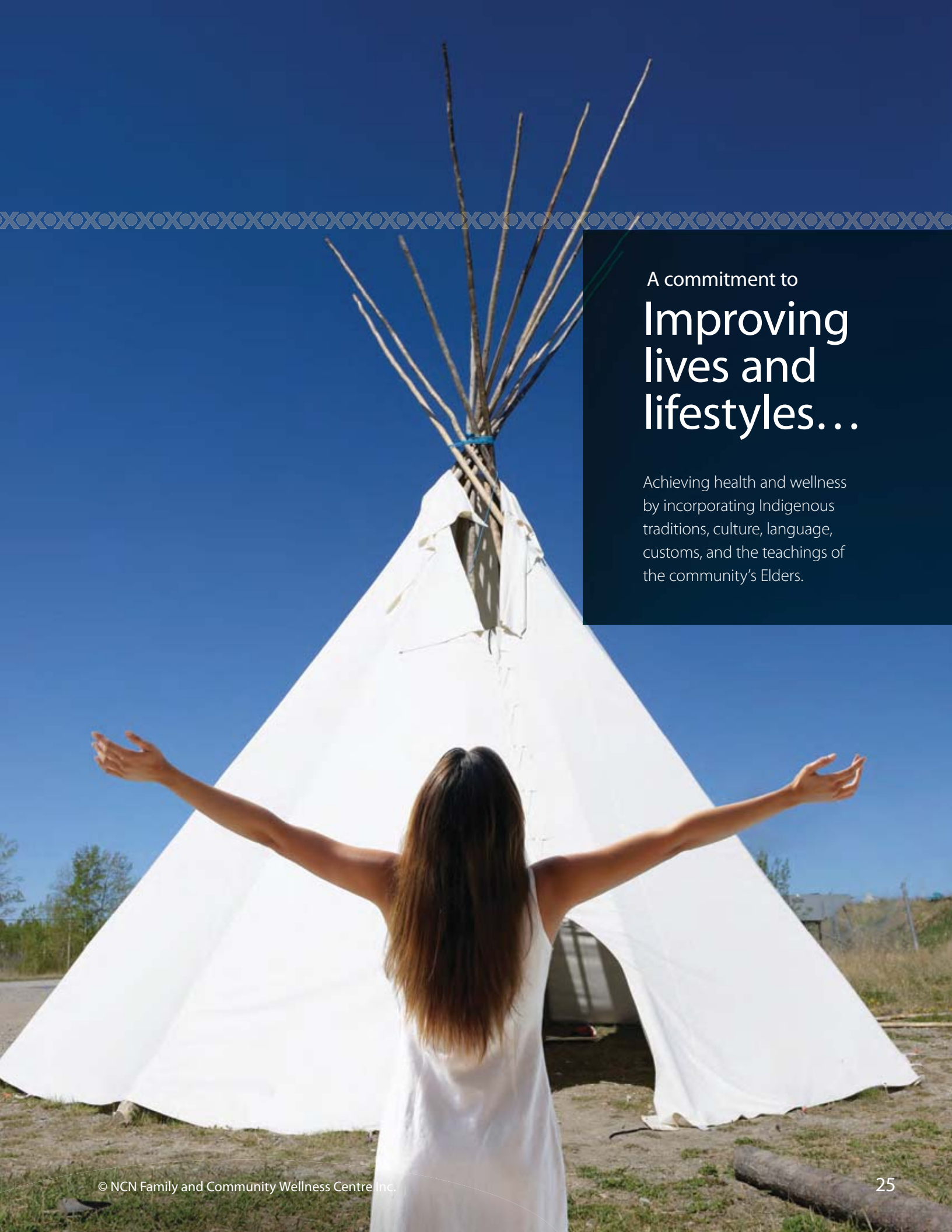
### 2015/16

ACTIVITY	TOTAL 2015/16
Crisis intervention (suicide assessments)	23
Critical incident debriefing	115 @ 9 sessions
Individual therapy	271 hours (148 in Nelson House)
Couples therapy	19 hours
Family therapy	72 hours
EAPs	44 hours

### 2016/17

ACTIVITY	TOTAL 2016/17
Crisis intervention (suicide assessments)	15
Critical incident debriefing	22 @ 3 sessions 10 @ 1 session
Individual therapy	200 hours (114 in Nelson House)
Couples therapy	14 hours
Family therapy	31 hours
EAPs	31 hours





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 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. It is designed to promote and enhance community well-being by providing holistic programming to empower individuals and families.

### 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.

### 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.

### ZUMMER ADVENTURE CAMP

This camp program allows kids to participate in cultural programming and on the land camp experiences.

### 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.

### COUNSELLING SERVICES AND FAMILY ENHANCEMENT INCLUDES:

- Suicide Prevention and Light up the sky
- Community Art shows
- Workshops in numerous areas such as Anger Management, Healthy Relationships, SafeTalk
- Hug In for girls
- Training for staff
- Building new camp site for Rediscovery of Families
- Zummer Adventure Camp.

## HIGHLIGHTS AND/OR CHALLENGES

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>■ Two staff completed 3rd year Social Work program.</li> <li>■ One staff member enrolled in 10-month program.</li> <li>■ SafeTalk certified staff provided workshops to community.</li> <li>■ Cultural Family camp at mile 35 – partnered with Child and Family Services sub offices to bring children home to participate in family camp.</li> <li>■ Elders activities run every Thursday such as berry picking (when possible), cooking, crafts, medicine picking (when possible) and games.</li> <li>■ Communication between FNIH Therapists and FCWC Counselling Department is an ongoing issue that needs to be improved to better assist the community.</li> </ul> | <ul style="list-style-type: none"> <li>■ High demand for Anger Management programming.</li> <li>■ Moved Rediscovery of Families camp site to mile 35 due to maintenance being done at Leftrook.</li> <li>■ Anger Management held monthly to meet the demands of the community.</li> <li>■ Suicide Prevention workshop held for community twice this year.</li> <li>■ Successfully ran family cultural camp at mile 33.</li> <li>■ Organized a Heart and Stroke community walk in memory of our community member Willie.</li> </ul> |
|---|--|



## GOALS AND OBJECTIVES

- To provide ongoing assessments, counselling services and referrals for treatment, aftercare and rehabilitation.
- To provide both western and traditional concepts of therapy to support, guide and assist in alleviating issues through individual, couple, group and family counselling.
- To provide traditional teachings that allow community members and their families to relate to each other and create an understanding of each other's roles and responsibilities in their own family unit.
- To create improved links between families and community resources.
- To continue to report any forms of abuse including threats of suicide or self-harm to child and family services if it involves child abuse of any form.

## STATISTICS

### *Counselling and Support Services Provided in 2016/17*

COUNSELLING SERVICES PROVIDED/SUPPORTED	2016/17 TOTAL PARTICIPATION
Elders Programming	302
Elder Abuse	4
Rediscovery of Families	241
Domestic Violence	9
Grief Support Families	5+
CISM	96+
Circle of Care Families	9+
Anger Management	86
Safe Talk	17
Counselling Services	257
Suicide ideation	39
NAYSPS	19
Hug-in	37
Land Base Education	112
Unhealthy relationships	27
Domestic Violence Conference	40

+ indicates there were additional participants however totals were unavailable.

# Family Enhancement

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 services 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 voluntary or implemented by the program. A strength perspective and empowerment approach to family planning is used to build family relationships and connections via supportive solutions or the Circle of Care process.



This year activities and programs included:

- Providing respite to families through a Family Services Agreement
- One-time support/bereavement donations
- Community Pow wow club
- Community Yoga classes
- Community Activities for children/youth
- Drum making classes
- Soccer program for children.

## HIGHLIGHTS AND/OR CHALLENGES

- 2 staff completed 3rd year Social Work program.
- Completed 3 cycles of the parent program for our families.
- Participated in the family cultural camp.
- Summer Adventure Camp was re-established and running in the community again this summer through a partnership with ATEC Summer Student Program.
- Disruption of parent program due to limited space.

## GOALS AND OBJECTIVES

- Community is reaching out for supports more often through Family Enhancement workers.
- To secure funds to allocate to more similar activities, workshops and programming.
- To continue to build on the collaboration and strengths which already exist within the Centre as well as other services and programs that are external to the centre.
- To continue to raise awareness of traditional values, beliefs and culture as these relate to relationships in NCN families.
- To continue to provide families with support to enhance strengths and identify issues that have a negative impact on family functioning to find practical solutions that can be used in every day life.



## STATISTICS

### Participation

Activities	Participants
Yoga	61
Pow Wow	24
Movie Night	35
Soccer	25 registered for 9-11 yrs old
Drum making	12
Parent Program	51 participants from April 2016 to March 2017

# Circle of Care Planning Process

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 are upwards of 35:1. This makes the extra development and oversight 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.
- To receive additional funding to provide a 0.5 FTE position to support Circle of Care by coordinating meetings, preparing family plans and monitoring progress.



# 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.



## 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.

## 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.

# 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.

## HIGHLIGHTS AND/OR CHALLENGES

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>■ Currently, there is funding for (1) full-time public Health nurse. This is grossly insufficient to serve 3000 people living in the community. A Proposal for additional funding for 2 Public Health nurses was developed.</li> <li>■ Data Entry Clerk, implemented full complete use of electronic charting which means 0 paper use for Reports.</li> <li>■ Condom distribution is up, STI's and dog bites have decreased, PSA Free Community.</li> <li>■ Improved awareness, health promotion is evident as more Community members are taking initiatives to reduce health concerns as evident by PSA and Stats.</li> <li>■ Increased door reminders and letters to members.</li> <li>■ Due to lack of staff, there is an increase in overtime and longer wait times for clients.</li> <li>■ Dog Control – met with Chief and Council about issues and recommendations.</li> <li>■ Home visits – high demand for rescheduled home visits, or scheduled pickups. Requires rescheduling and lost time for drivers and nurses.</li> </ul> | <ul style="list-style-type: none"> <li>■ Cold chain breaks (alerts) – Delays Vaccine use.</li> <li>■ Safety hazards around homes effect staff workplace safety (i.e. Unapproachable homes due to Drugs/ Alcohol).</li> <li>■ Lack of Technical Support.</li> <li>■ Number for Communicable Diseases Control (CDC's) has decreased.</li> <li>■ Number of staff encounters has increased as per electronic charting.</li> <li>■ Increased awareness via radio PSA's, Health Fair, immunization, posters, letter reminders and social media.</li> <li>■ Implemented data clerk, complete use of Electronic charting, creating charts and health promotional calendar.</li> <li>■ The 2-day annual health fair had 353 registered guests sign in on the first day of the Health Fair and 223 registered guests sign in on the second day. In total, we had 576 registered guests attending.</li> </ul> |
|--|--|

## 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.

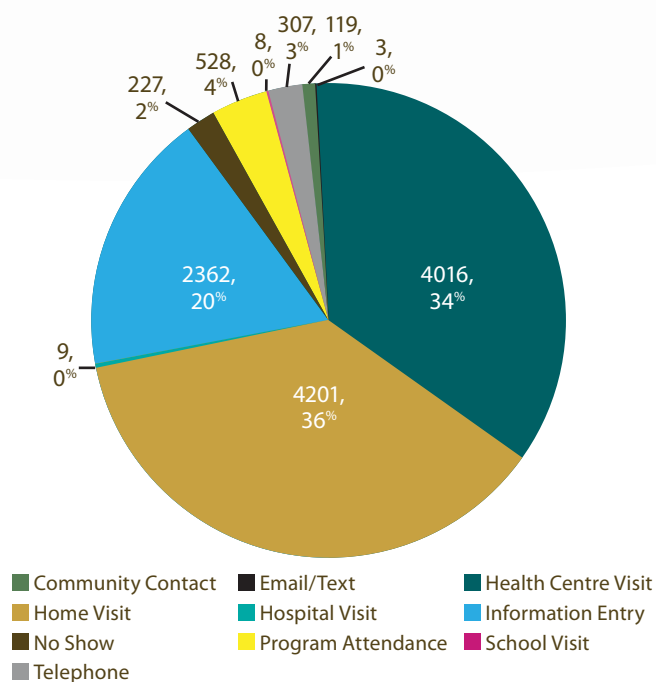
## STATISTICS

*Encounters by Type*

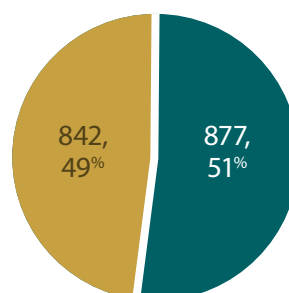
Total Encounters	11,780
Total Members	1,719
# of Groups	107
# Sessions	499
# Individuals Attending	205

*Encounters by Staff*

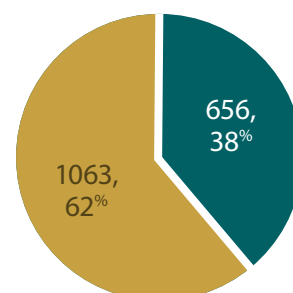
Alexandria Moodie, ADI/CPNP	322
Alfreda Thorne MCH	6
Charlene Kobliski	36
Danette Blacksmith	48
Eleanor Erickson JP-CFI	611
Irene Spence FASD	13
Jean Johnson RN MCH/FASD	41
Larry Tait Sr	29
Laura Hart FASD	608
Leta Walker HCA	886
Lorna Garrioch RN	1,635
Lynda Wright RN, HD	561
Margaret Munroe HCA	554
Melfina Linklater	29
Mustimuhw Admin	1
Nancy Mcleod	117
Roba Frost	847
Stephanie Hart	1,410
Agnes Denechezhe	8
Charlene Wavey	674
Corrine Hart MCH	353
Cynthia Spence	554
Deanna Bonnefoy ADMIN	6
Faith McDonald CHR	12
Isabelle Flett	1,187
Jenette Blacksmith	224
Karen Beardy	72
Kyra Hart FASD	620
Tamara Beardy	216

*Encounters by Type of Visit**On/Off Reserve*

■ On ■ Off

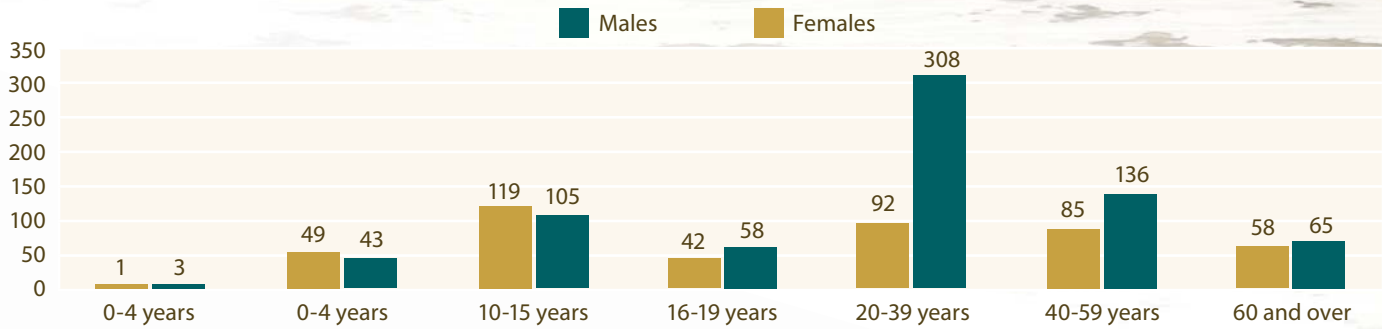
*Our Band/Others*

■ Our Band ■ Others

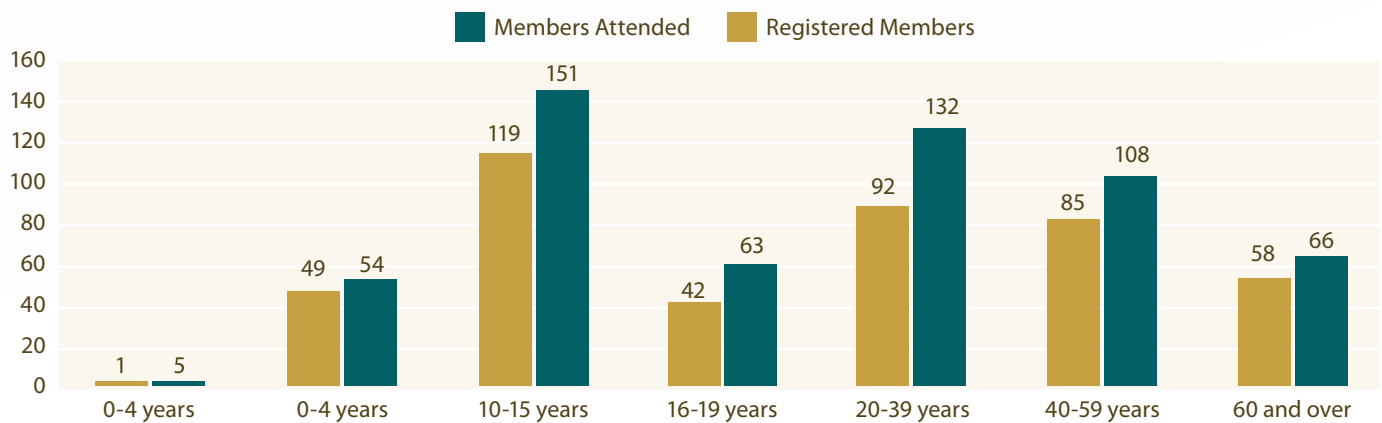




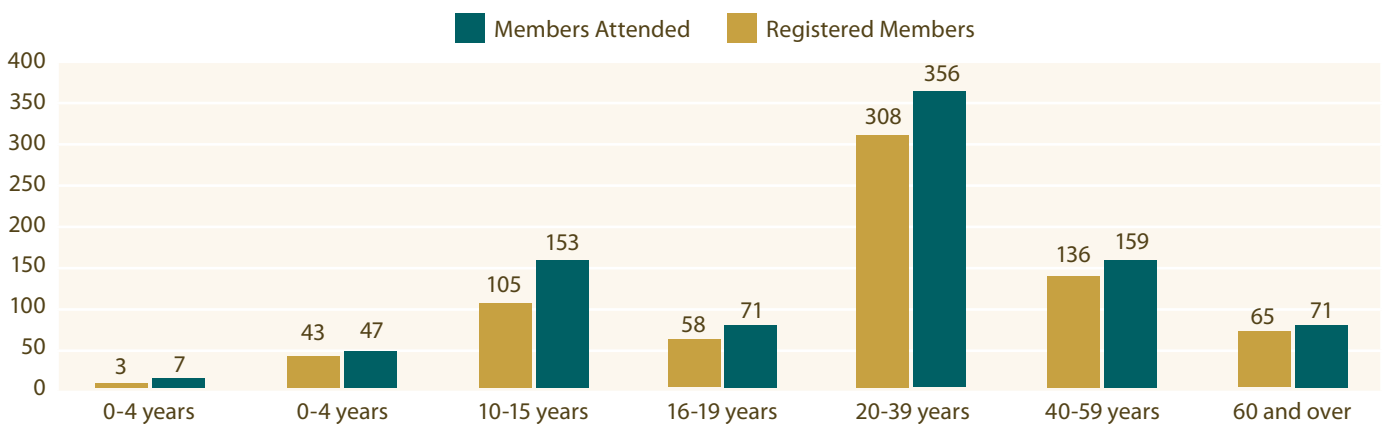
### Age Group and Gender



### Services Accessed by Age – Male



### Services Accessed by Age – Female



### Comparison of 2014 to 2017 Public/Environmental Health Services Provided

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



# Immunization and Vaccination Program

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

## STATISTICS

### Infant Immunization

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

Total eligible infants for vaccination	117
Infants completed vaccination	58 (50%)

### 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

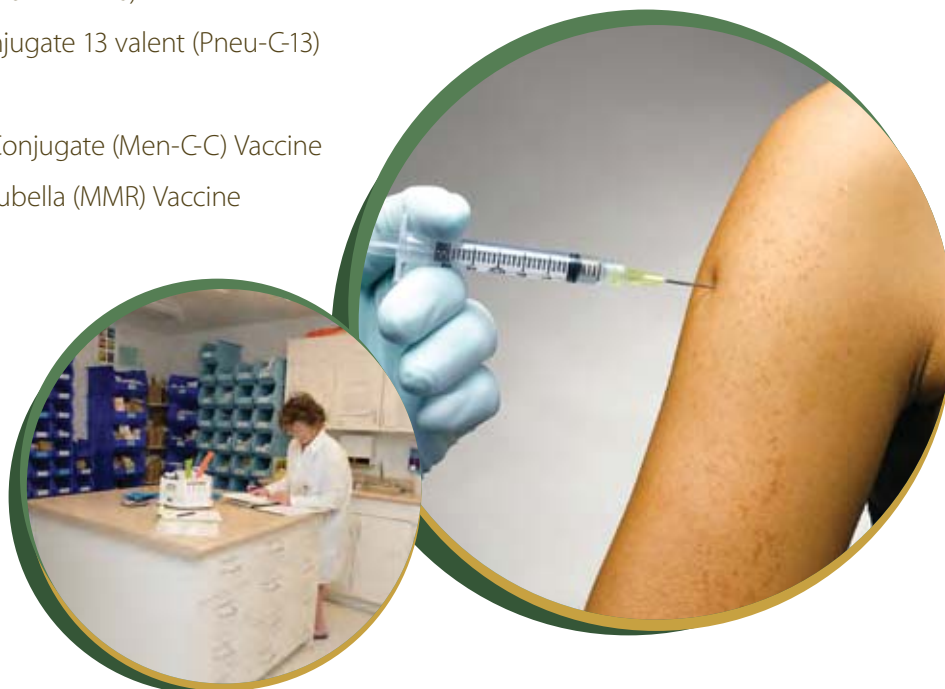
- Meningococcal C Conjugate (Men-C-C) Vaccine
- Hepatitis B Vaccine

### Children in Grade 6

- Human Papillomavirus (HPV)

### Children 14-16 years of age

- Tetanus, Diphtheria, Pertussis (Tdap) shots
- Hepatitis B Vaccines
- Human Papillomavirus (HPV) shots





## Prenatal Nutrition Program

The new national framework for Canada Prenatal Nutrition Program has three core elements.

1. Nutrition screening, counselling, education;
2. Maternal nourishment; and
3. Breastfeeding education, promotion and support.

The overall goal of CPNP (improved nutritional health of mothers and infants) can be achieved through these core elements. Therefore, no less than 75% of total funding should be used to support these core elements through activities that meet the needs of our community.

### HIGHLIGHTS AND/OR CHALLENGES

- Prenatal Classes every Wednesday.
- Milk Coupon Distribution to participants (4L Milk, Carton on Eggs, Bag of frozen vegetables).
- Candle Making (Bee's Wax) sessions.
- Breastfeeding Pillows (Sewing Classes).
- Moss Bags teachings and sewing session.
- Cooking Classes (ongoing).
- Purchased Breast Pumps.
- Self Care sessions.
- Breastfeeding supports.
- Limited/small office space for the amount of resources.
- No funding for a vehicle to do home-visits or monies for fuel.



# Maternal Child Health Program



The public health nurse team oversees this program. They provide help for families (mothers especially) with health promotion; prenatal nutrition program; breastfeeding support; home visitation; referrals; access and case coordination of services for families; and links with other services. The program also provides case management and supports for families with complex needs.

An important component is the Manitoba First Nations Strengthening Families Program, which 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, women (through preconception, prenatal, birthing, postpartum) and fathers.

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

- The program received many more referrals than previous years, which suggests it is a valuable and esteemed service within the community.
- It is a consistent challenge to procure home visits after clients have agreed to participate in the program.

## GOALS AND OBJECTIVES

- To help mothers through preconception, prenatal, birthing and postpartum stages.
- To support families and promote the holistic well-being of families.
- To empower mothers and fathers to create strong, healthy First Nations families.
- To promote trusting and supportive relationships between parent and child, care provider and family, and resources and family.
- To continue to promote the program through community health fairs and job fairs.

## STATISTICS

### Participation

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



## Foot Care Services

When dealing with diabetes, foot care is an important part of treatment for NCN Citizens.

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.

### HIGHLIGHTS AND/OR CHALLENGES

- Foot Care is now accessible to community members in need of care.
- Referrals and linkages to specialists can now be more easily obtained.

### GOALS AND OBJECTIVES

- To assist NCN Citizens and help more individuals avoid diabetes related foot complications.
- To create education and awareness to make Citizens aware that prevention is the priority.
- To assist clients by advocating and providing referrals.
- 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 by completing online training seminars, Telehealth video training and attending the health related courses.

## STATISTICS

### Participation: Basic Foot Care Services





# Aboriginal Diabetes Initiative (ADI)



The goal of the ADI program is 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. Focus is placed 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.

## 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 work on initiating a community garden within the Wellness Centre and getting a greenhouse built for food security in the Centre.
- To build more raised beds for community members.
- To proactively encourage members to grow their own food.
- To allow more time to be spent during harvesting season and encourage more berry/medicine picking, and traditional fishing and hunting.

## HIGHLIGHTS AND/OR CHALLENGES

- Conduct workshops to educate community members about healthy eating, healthy cooking, shopping healthy, reading labels and physical activity.
- Provide information on services and supports available to members with diabetes or those caring for a family member with diabetes.
- Encourage fitness with, "The Biggest Loser Completion."
- 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.
- Referred patients to Diabetes Integration Project and Diabetes Retinal Screening Program.
- Referred diabetics to the gym, which is free for members to access.
- Conducted Telehealth sessions.
- Held Chronic Breakfast.
- Promoted gardening within the community to give members access to healthy fruits and vegetables.
- ADI Purchased a Rower (gym equipment).
- Limited office space for the amount of resources.
- No funding for a vehicle to do home-visits or monies for fuel.

## STATISTICS

### Diabetics and Diabetes Sessions

DESCRIPTION	2014/15	2015/16	2016/17
TOTAL DIABETICS:	147	154	155
TYPE I DIABETICS:	Male (1) Female (2)	Male (1) Female (1)	Male (1) Female (1)
TYPE II DIABETICS:	Male (51) Female (96)	Male (54) Female (98)	Male (55) Female (98)
TELEHEALTH SESSIONS HELD:	24	25	25
DIABETES INTEGRATION PROJECT ATTENDEES:	86 scheduled, 30 showed (35%)	107 scheduled, 49 showed (46%)	0 (no site visits)

### Participants in Diabetes Programs and Activities

DESCRIPTION	2014/15	2015/16	2016/17
RAISED BED GARDENS	28	28	28
GARDENERS	25	25	25
NUTRITION MONTH	50	25	50
CHRONIC BREAKFAST	258	298	171

# STAR FASD Prevention Program

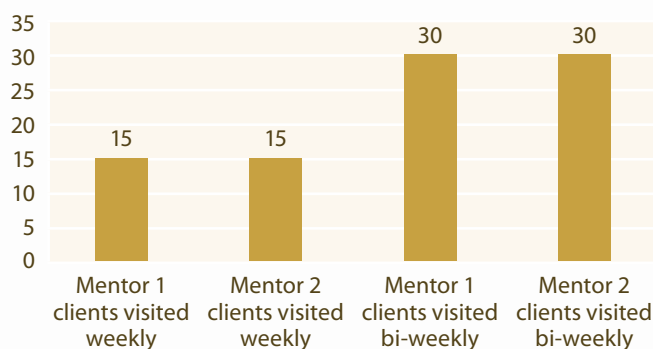


The vision of the *Success Through Advocacy Role Modeling – Fetal Alcohol Spectrum Disorder* (STAR FASD) program is to reduce the number of babies exposed to and living with the effects of alcohol and/or drug exposure while in their mother's womb. It is a voluntary, harm reduction model based on developing 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'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.

*Clients visited weekly/bi-weekly*



## HIGHLIGHTS AND/OR CHALLENGES

- Both mentors have 15 clients each. Our max for the program is 30 and this year we picked up 10 new clients.
- Linking and working with all programs, doing presentations at the school for grades 2–8 and family enhancement, CPNP classes.
- Setting up displays for community events, Immunization Carnival, Health Fair, National Addiction Awareness week.
- Also some clients in the STAR FASD program have been attending parenting classes and treatment centres throughout the year.
- The Star Program was permanently funded as of July, 2015.

## 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.

## STATISTICS

### *Encounters by Type*

Total Encounters	1,207
Total Members	34
Encounters/Member	72

# 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. Approximately 8,850 NCN Citizens made requests for transportation services over the reporting year for local or out-of-town medical appointments by truck, van and aircraft.

## HIGHLIGHTS AND/OR CHALLENGES

- Provided adequate local patient transportation to and from the Fanny Hartie Medical Centre and residence.
- Provided patient transportation from Nelson House to Thompson for out of community Medical appointments.
- Notifying patients for scheduled appointments and last minute changes in clients, delays pickups for the other patients for appointments.
- Started transporting 3 dialysis patients; 2 patients are in a wheel chairs; 3 times each week departing at 10:00 a.m. and returning at 8:00 p.m. every Monday, Wednesday, and Friday.
- A challenging factor is the continuous fuel increase and repairs (i.e. replacements of tires due to poor road conditions to Thompson).
- Nelson House, extreme weather conditions present challenges.
- Increase of TB Patients to transport to and from residence and the Nursing Station, Monday to Friday.
- All van safeties are scheduled to be completed every 6 months instead of every year.



## GOALS AND OBJECTIVES

- To replace 2014 van in April 2017.
- To request a 20x20 garage for maintenance and servicing medical transportation vehicles.

# Fannie Hartie 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

The Home and Community Care program provides care to people of all ages who require help and support at home, at school or in the community. It offers home care, continuing care, extended care and respite, and conducts home visits and ongoing assessments. Whenever possible, the program aims to allow community members to remain at home, which reduces depression and isolation, and preserves their emotional, mental and spiritual well-being.

Our professionals create and follow through with personal care plans based on medical background, current health, abilities and support. Patients are continually monitored to ensure proper progress and referrals to other medical professionals (such as physiotherapy, dietician, foot care, etc.) are made as required.

### 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

- The Home and Community Care team has had a busy year, with more referrals for patients and links created to specialists.
- More acute care services were provided to clients, such as wound care and dressing changes.
- The program now offers foot care services to community members.
- Staff increased skill set by attending many professional development programs, including eSDRT, palliative, Mistimuhw, chronic disease and foot care training.
- The program continues to collaborate with Northern Regional Health Authority and the Nursing Station to ensure Citizens receive holistic care.

### GOALS AND OBJECTIVES

- To further improve and enhance competent and efficient care services for clients and their 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 well-being.
- To help clients achieve independent living as far as is possible.
- To uphold the required nursing education competency as required by completing online training seminars.

## STATISTICS

### *Home Care Total Services*

ACTIVITY	TOTAL 2015/16	TOTAL 2016/17
Case Management	1,557	503
Wound Care	502	1,289
Foot Care	49	46
Nursing Services	2,215	2,766
Not Home	124	190
Home Visits	2,052	2,565
Assessments	173	675

### *Client Type*

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

### *Reasons for Home Care Visits*

ACTIVITY	TOTAL 2015/16	TOTAL 2016/17
Blindness	2	1
CNS, Parkinson	7	3
Renal, Kidney	4	2
Cancer	5	3
Skin conditions/wound care	29	37
Lung disease	5	2
MSK, arthritis	10	1
CVA, stroke	3	1
Cardiovascular Disease/Heart Disease	25	14
Diabetes	16	19
Auto-immune	1	3
Gastro-intestinal	-	1
Genitourinary condition	-	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:

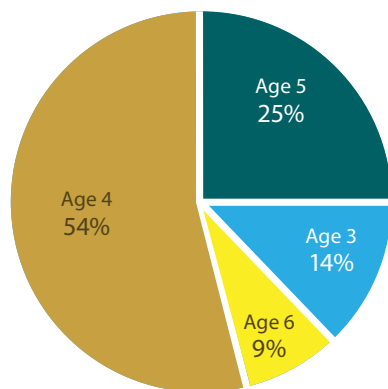
- Dreamcatchers HeadStart Program
- Jean McDonald Treasures of Hope Day Care Centre
- Fitness Centre

## Dreamcatchers HeadStart Program

We provide First Nations children with a positive sense of themselves by offering holistic support for the spiritual, emotional, intellectual and physical growth of each child. Our programs support children and encourages them to enjoy lifelong learning. We also help guide, support and encourage parents, guardians and caregivers to become active participants in their child's life. Our programming also focuses on the child's education and development while building partnerships and coordinating with other community programs and services.

### STATISTICS

*Dream Catchers  
Preschool  
Age Comparison  
2016-17*



### 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

### HIGHLIGHTS AND/OR CHALLENGES

- Cleaned and repaired minor mould issues in the classroom.
- Van-repairs and maintenance were completed.
- Graduation class was smaller this year, due to all day kindergarten at OK school. Graduation 2017 had 6 graduates.
- Mini Festival was a great success.
- Summer Program ran for 3 weeks in July and August.
- Infant and Toddler program had 2 toddlers that finished program.

### Dream Catchers Preschool Gender Enrolment 2016-17

	2016									
	APR-16	MAY-16	JUN-16	JUL-16	AUG-16	SEP-16	OCT-16	NOV-16	DEC-16	
Boys	8	8	8	5	5	13	13	12	12	
Girls	12	12	12	15	15	7	7	8	8	
Total	20	20	20	20	20	20	20	20	20	

	2017					
	JAN-17	FEB-17	MAR-17	APR-17	MAY-17	JUN-17
Boys	12	12	12	12	12	10
Girls	8	8	8	8	8	8
Total	20	20	20	20	20	18



## GOALS AND OBJECTIVES

- To inspire our children to be proud of who they are as First Nations children by using and building upon their traditional and cultural knowledge base.
- To support, promote, encourage and teach the children to practice healthy habits.
- To advocate and assist the children and families that utilize any one of our programs.
- To promote parental involvement.
- To source and allocate additional funds to salaries, benefits, travel and training, administration costs, operations, and program supports.

# Jean McDonald Treasures of Hope Day Care Centre

The Centre, established in 1998, offers working parents affordable, quality child care for their children and continues to provide meaningful experiences in a positive learning environment.

The Centre provides meaningful learning experiences and quality child care and guides mental, physical, social and emotional, and cognitive development. Children 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

- January 2016 – April 2017: 15 Preschool children and 6 infants registered.
- January 2016 – April 2016: 18 Preschool children and 8 infants registered.
- May 2016 – August 2016: 18 Preschool children and 7 infants registered.
- September 2016 – December 2016: 18 Preschool children and 5 infants registered.
- January 2017 – April 2017: 20 Preschool children and 5 infants registered.

## GOALS AND OBJECTIVES

- 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.
- To manage fees to make program available to working parents or those needing income assistance.

## Fitness Centre

This popular facility is open 7 days a week Monday–Friday, 12:00 p.m. to 9:00 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.

### HIGHLIGHTS AND/OR CHALLENGES

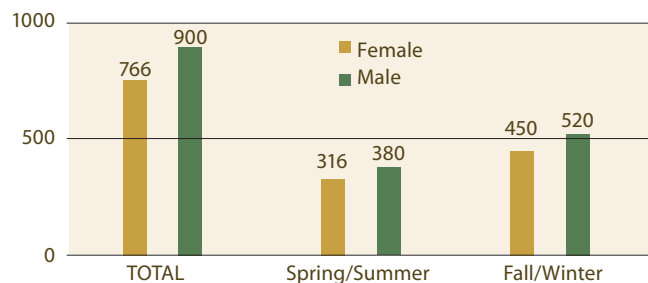
- Water damage due to flooding.
- New heater and air conditioning needs to be installed.
- Renovations needed due to water damage.
- Gym membership packages available as of fall 2017.

### GOALS AND OBJECTIVES

- To link the Gym and Fitness Centre to community participations such as the Medicine Lodge, high school and NCN staff.
- To have flexible accessibility for community members that require access to the Fitness Centre before and after hours.
- To effectively maintain and improve equipment.
- To provide effective staffing and programming to increase participation.
- To provide stimulating facilities, learning environments and programs.

### STATISTICS

#### *Number of visits*





Nisichawayasihk Cree Nation  
FAMILY AND COMMUNITY  
Wellness Centre<sup>Inc.</sup>

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





Nisichawayasihk Cree Nation  
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