

2018-2019



**ATLANTIC POLICY CONGRESS
OF FIRST NATIONS CHIEFS SECRETARIAT**

**HEALTH RESEARCH AND COORDINATION
2018-2019 ANNUAL REPORT**

Completed By:

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Executive Summary

Atlantic Policy Congress of First Nations Chiefs Secretariat (APC) is a policy research organization that analyzes and develops culturally relevant alternatives to federal policies that impact on the Mi'kmaq, Maliseet, Innu and Passamaquoddy communities and people.

APC's continues to focus on the important needs of the communities for funding and basic services to meet the growing health needs in every community.

This report will outline the following work completed under health research and coordination services:

- Health Partnership Meeting Cycle;
- Health Directors' Meetings;
- Health Conference;
- MMAYC activities;
- Nursing Policies;
- Other Health Policy Activities; and
- Overall management of the APC Health Staff.

This annual report will demonstrate the progress completed from April 1, 2018 to March 31, 2019.

Work Plan Activities

Objective 1: Administer the Atlantic First Nations Health Partnership (Health Partnership)			
Activities	Results Achieved	Staff Responsible	Timeframe
<p>1. Coordinate the logistics for all Health Partnership Meetings, its committees, and other working groups.</p>	<p>PUBLIC HEALTH AND PRIMARY CARE (PHPC) COMMITTEE</p> <ul style="list-style-type: none"> • Three regularly scheduled PHPC Committee meetings; • Seven PHPC Sub-committees (Healthy Child Development, Healthy Living, Chronic Disease Prevention and Management Strategic Action Plan, Communicable Disease Control, Home Care, Jordan's Principle, Health Assessment and Surveillance) solicited ideas from Health Directors and proposed funding initiatives to the Committee; • Received direction on work priorities from the Health Directors and Health Partnership meetings; • Tracked the progress of expanding First Nations representation on provincial/federal bilateral committees; • Updated the committee work plan for the year; • Provided guidance and oversight around FNIHB program planning; • Lead committee on the development of the new Chronic Disease Prevention and Management Strategic Action Plan; • Continued oversight regarding Indigenous Early Learning and Child Care funding; • Many of the PHPC's committee items will be moved over to the Child and Youth Committee; • The Committee provided oversight and advice to several ongoing projects, the Children's Oral Health, Aboriginal Diabetes Initiative (ADI), Midwifery, Fetal Alcohol Spectrum Disorder (FASD); • Continued oversight regarding Jordan's Principle funding including the approval of the regional advisory committee terms of reference; • Continued tracking PHPC work as it pertains to the Truth and Reconciliation Commission's (TRC) Calls to Action; • Received updates and presentations on: Indigenous Services Canada (ISC) Atlantic Emergency Planning, FNIHB ATL progress and plans in support of acting on TRC Calls related to PHPC programs, Health Adaptation and Climate Change, monitoring lead in drinking water, 	<p>Director of Health, Health Policy Analyst, Mental Wellness Project Manager, NIHB Navigator, and Health Partnership Coordinator</p>	<p>April 1, 2018 to March 31, 2019.</p>

	<p>children’s facilities in communities, and Healing Our Nations;</p> <ul style="list-style-type: none"> • Provided oversight and engagement on regular project funding for the coming fiscal year; • Engaged on future new budget investment funding, new midwifery funding, and future Tobacco Control funding in the Atlantic Region; and • Finalized and completed the annual Committee Self Assessment. <p>MENTAL WELLNESS COMMITTEE</p> <ul style="list-style-type: none"> • Three regularly scheduled Mental Wellness Committee meetings; • Received direction on work priorities from the Health Directors and Health Partnership meetings; • Four working groups (Capacity and Training, Non-Insured Health Benefits (NIHB) Medical Transportation, Treatment Centre Governance and Treatment Service Diversification) met several times; • Updated the Committee Work Plan; • Provided guidance and oversight regarding the Treatment Centre Infrastructure Assessment; • Received updates and presentations on managing symptoms of psychological distress, depression, and/or anxiety in treatment preferences and experiences of Indigenous adults, Hepatitis C and its connection to mental health and substance abuse, “Know More” – National Communication Campaign re Opioids, Service Canada services for on-reserve residents, discussion re employment and housing opportunities for Atlantic First Nations community members on-reserve recovering from addictions, an overview of mental wellness service delivery in Nunatsiavut and Cannabis; • Building Community Capacity to apply for future Canadian Drugs and Substances Strategy (CDSS) funding opportunities; • Received updates on the projects to support victims of family violence and provided advice on future funding; • Continued to provide guidance and direction to the joint Assembly of First Nations (AFN)-NIHB National Review; • Continued to work towards implementation of the Mental Health and Addictions Strategic Action Plan; and 		
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	<ul style="list-style-type: none"> • APC presented the 2019 Atlantic Mental Wellness and Addictions Training Conference, a three-day conference was held between March 12 to 14 at the Crowne Plaza in Moncton, New Brunswick. In total, 86 delegates attended from across the Atlantic, including Health Directors and health centre workers, treatment centre directors and workers, community nurses, organizational leaders, and more. There were 12 presentations, panels, and workshops on topics ranging from suicide prevention and life promotion to motivational interviewing. Full presentation and workshop lists are available upon request from APC Health. <p>NON-INSURED HEALTH BENEFITS (NIHB) COMMITTEE</p> <ul style="list-style-type: none"> • Three regularly scheduled NIHB Committee meetings; • Updated the Committee Work Plan and Multi-Year Business Plan; • Received direction on work priorities from the Health Directors and Health Partnership meetings; • Joint AFN-NIHB Review including First Nation engagement; • Appeals Process, NIHB Navigator work, The Elder Care Working Group, NIHB Dental department and scope of practice, medical cannabis; • Provided guidance for the development of a new Elder Care Working Group Terms of Reference Document; • Implemented the Elder Care Strategic Action Plan; • Continued to provide guidance and oversight in the development of funding to provide traditional healer services to First Nations Clients; • The Atlantic has received a new NIHB Navigator and the position will be hosted in New Brunswick by Wolastoqey Tribal Council Incorporated; • Advised on issues related to the use of dental therapists in communities; • Continued investigation into the available resources for First Nations interpreters/liaisons in provincial hospitals; and • Received presentations and provided feedback/guidance on new Jordan’s Principle funding. <p>HEALTH PARTNERSHIP</p>		
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	<ul style="list-style-type: none"> • The Atlantic First Nations Chiefs updated their health priorities in September 2016; Mental Wellness (including Mental Health and Addictions) and Chronic Diseases (including Prevention and Management). These priorities have directed much of the work for 2018-2019; • Three regularly scheduled Health Partnership meetings; • Received regular reports on the Aboriginal Health Human Resources Initiative (AHHRI), Bilateral Committees, and the Health Services Integration Fund (HSIF); • Received regular reports from the Health Directors Co-Chairs; • Received regular reports from the three Committees' Co-Chairs; • Received regular updates on the Mi'kmaq Maliseet Atlantic Youth Council (MMAYC); • Received regular financial updates on project funding from FNIHB/ISC; • Completed the Chronic Disease Prevention and Management Strategic Action Plan; • Maintained guidance and oversight for the First Nations Control Models Working Group; • Maintained guidance and oversight for the four approved projects to support victims of family violence; • Maintained guidance and oversight over Jordan's Principle funding in the Atlantic region; • Received presentations from the AFN, Service Canada, cannabis legalization, prescribing stimulants to children and youth age five to 24, community-based worker training opportunities, new funding to expand midwifery services in First Nations communities and other federal departments, organizations, provincial governments, and health authorities. These presentations began conversations around First Nations health care gaps, the social determinants of health, and opportunities for collaboration between the Health Partnership and these other bodies; • Health Partnership voted to action additional funding for community-based wrap-around opioid replacement therapy, which will be implemented in an additional six communities; • The Atlantic First Nations Chiefs voted to be the interim governance structure for the Indigenous Early Learning and Child Care Initiative (IELCCI); and 		
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		<ul style="list-style-type: none"> • A Child and Youth Committee will be re-established and reintroduced to the Health Partnership cycle. <p>SUPPORT MEETINGS</p> <ul style="list-style-type: none"> • Organized three Health Partnership Co-Chairs agenda planning sessions (one meeting in advance of each Health Partnership meeting); • Organized three First Nations Caucus agenda planning sessions (one meeting in advance of each Health Partnership meeting); • Organized three Committee Coordination Group meetings to delegate tasks that cross the boundaries of one committee into another (one meeting after each cycle); and • Organized three Health Partnership Policy Group meetings to address policy concerns in Health Partnership operation (one meeting after each cycle). 		
2. Complete Partnership Activities	Health Policy	<ul style="list-style-type: none"> • Provided policy support for the Health Partnership, its committees, and working groups; • Drafted mental wellness and addictions training plan for community-based workers; • Held mental wellness and addictions training conference in March; • Discussed collaboration with PHPC Committee using innovation funds; • Liaised with the New Brunswick Mental Health Commission re an Atlantic-wide conference (scheduled for April 2020); and • Completed Treatment Centre governance review. 	Director of Health, Health Policy Analyst, NIHB Navigator, and Mental Wellness Project Manager	April 1, 2018 to March 31, 2019.
Objective 2: Conduct Three Atlantic Health Director Meetings				
Activities	Results Achieved		Staff Responsible	Timeframe
1. Complete Three Atlantic Health Director meetings	<ul style="list-style-type: none"> • Three meetings were held, one in Truro, NS and two in Moncton, NB; • APC organized all the logistical arrangements including venue rental, catering, development of the agendas, meeting packages, and completed minutes (June 13 and 14, October 24 and 25, and February 13 and 14); • The Health Directors received regular updates on the Health Partnership and its committees and provided feedback for the Health Partnership Committees; 		Director of Health, Health Partnership Coordinator, and Health Admin Assistant	April 1, 2018 to March 31, 2019.

	<ul style="list-style-type: none"> • The Health Directors received regular updates on the Mental Health and Addictions Strategic Action Plan and the development of its implementation phase; • The Health Directors received regular updates on the APC Health Department, including all ongoing projects housed at APC and APC staffing; • The Health Directors were engaged with the development of the Chronic Disease Strategic Action Plan; • The Health Directors were engaged on how best to distribute new budget funding; • The Health Directors were engaged on how best to allocate training funds for this fiscal year; • The Health Directors have continued to develop a new Terms of Reference; • The Health Directors retain two Co-Chairs to Chair the Health Directors meetings and observe Health Partnership meetings; • Thirty-eight attendees participated in the Health Directors meeting on June 14 and 15, 38 attendees were at the October 18 and 19 meeting, and 35 attendees were at the February 21 and 22 meeting; • The Health Directors received presentations and updates on many best practices around midwifery, doula, palliative care, harm reduction service delivery, Diabetes Canada, mentorship to support community health nursing certification in Atlantic First Nations communities, and how to become a Certified First Nations Health Manager from the First Nations Health Managers Association. on Cannabis, continued engagement on Jordan's Principle, Correction Services Canada, Direction 180, and the Heart and Stroke Foundation of Canada; • To dig into the social determinants of Health, the Health Directors received updates about the Atlantic First Nations Water Authority and the proposal for a Housing Partnership in the Atlantic; and • All meeting agendas, minutes, and other meeting materials are available upon request. 		
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Objective 3: Organize and Host an Annual Regional Health Conference

Activities	Results Achieved	Staff Responsible	Timeframe
<p>1. Organize and host an annual regional health conference.</p>	<ul style="list-style-type: none"> • APC held its annual Atlantic First Nations Health Conference from November 13 to 15 at DoubleTree by Hilton in Dartmouth, Nova Scotia; • The theme was “Better Health Through Traditional Wisdom”; • The Health Conference was planned by a committee comprised of representatives from health-related organizations including APC, FNIHB/ISC, various tribal organizations, and First Nations communities; • In grand total, approximately 128 delegates attended. • Throughout the three days of the Health Conference, there were numerous sessions taking place. These were Regional Network for Community-Based Indigenous Health Research, a plenary on Chronic Disease Prevention and Management Strategic Action Plan, Mental Health and Chronic Disease Linkages (ACES Study-Effects of Childhood Trauma), Help Make Indigenous Services Canada the Best It Can Be, Wikimanej Kikmanaq Family Group Conference, Wraparound Community Based Programming, Fentanyl and Naloxone, Mental Health and Suicide, Elder Care, Diabetes and School Screening Program, Elder Isolation, Men’s Sexual Health, Taking Care of our Spirit Through Cultural Healing, and Thunderbird Regional Cannabis Report for the Atlantic and Dalhousie University on Culture and Trauma; • The conference included an Honouring Our People Awards dinner. This celebrates the achievements of those who have contributed to the health field in support of First Nations communities in the Atlantic and who are making a difference in the lives of those with whom they work. The evening entertainment was provided by Eastern Eagle and dancers; • Overall, it was a successful Health Conference with constructive feedback. The Final Report is available on APC’s website at: https://www.apcfncc.ca/images/uploads/AFNHC_-_Final_Report.pdf 	<p>Director of Health, Health Policy Analyst, Mental Wellness Project Manager, NIHB Navigator, and Health Partnership Coordinator</p>	<p>April 1, 2018 to March 31, 2019.</p>
Objective 4: Support Mi’kmaq Maliseet Atlantic Youth Council (MMAYC) Activities			
Activities	Results Achieved	Staff Responsible	Timeframe

1. Host regular MMAYC meetings.	<ul style="list-style-type: none"> A MMAYC meeting was hosted in August. Meeting materials are available upon request. 	Health Policy Analyst	April 1, 2018 to March 31, 2019.
2. Assist MMAYC in carrying out the activities of MMAYC	<ul style="list-style-type: none"> The Health Policy Analyst at APC provided coordination and facilitation support to MMAYC; APC hosted the MMAYC Conference from August 17 to 19 at the University of New Brunswick in Fredericton, NB. The theme of the Conference was "Finding Strength and Resilience in Our Cultural Identity." Forty youth attended from 17 Mi'kmaq and Maliseet communities across the Atlantic. The Conference was organized by M Carroll Consulting and the MMAYC Co-Chairs were the primary points of contact for approvals and input on planning, content, and marketing for the event. The conference involved ceremony, cultural activities and entertainment, advocacy opportunities, and presentations and workshops on topics related to leadership, healthy relationships, being two-spirited, employment, art, finances, fitness and healthy eating, addiction and recovery, and more. 	Health Policy Analyst and Director of Health	April 1, 2018 to March 31, 2019.
3. Network with local First Nations youth councils.	<ul style="list-style-type: none"> MMAYC members are representatives on the AFN National Youth Council, which involves two youth each (one woman and one man) to represent NB/PEI and NS/Nfld. 	Health Partnership Coordinator	April 1, 2018 to March 31, 2019.

Objective 5: Support the Further Development of Provincial First Nations Nurses Policies

Activities	Results Achieved	Staff Responsible	Timeframe
1. Update the Provincial First Nations Nurses Policies	<ul style="list-style-type: none"> Not applicable for 2018-2019. 	Health Policy Analyst	April 1, 2018 to March 31, 2019.

Objective 6: Conduct other Health Policy Activities in Conjunction with First Nations and/or FNIHB/ISC

Activities	Results Achieved	Staff Responsible	Timeframe
1. Update Atlantic chiefs, Health Directors/Technicians and Other Relevant Stakeholders.	<ul style="list-style-type: none"> Six monthly newsletters completed. Health excerpts available upon request; Presentations to APC All Chiefs; Briefing notes for Chiefs and senior management; Three <u>Mi'kmaq Maliseet Nations News</u> articles: new staff, NIHB, and the Atlantic First Nations Health Conference. These articles raised greater awareness of APC Health Staffs' work; Distributed health policy documents via email to increase understanding and awareness of emerging and existing health issues; 	Director of Health	April 1, 2018 to March 31, 2019.

	<ul style="list-style-type: none"> Liaised with Atlantic Chiefs, Health Directors/Technicians, and other relevant stakeholders to update them on emerging and existing issues as well gather feedback for Health Partnership and other coordinated health approaches for addressing Atlantic health policy issues; and Outcome: Increased understanding of Atlantic health policy issues, increased awareness of potential solutions, and greater knowledge of health decisions made by FNIHB/ISC and/or the Health Partnership. 		
2. Other policy support	<ul style="list-style-type: none"> Participated in health policy tables such as NS Tripartite Health Committee, Dalhousie University, and the Heart and Stroke Foundation. 	Director of Health, Health Policy Analyst, Mental Wellness Project Manager	April 1, 2018 to March 31, 2019.
Objective 7: Overall management of the APC Health Staff			
Activities	Results Achieved	Staff Responsible	Timeframe
1. Management of staff activities and evaluation of performance	<ul style="list-style-type: none"> Management of day to day activities of the health department were completed by the Director of Health. Overall management of APC was completed by the Executive Director. Annual performance evaluations were completed for all applicable staff. 		April 1, 2018 to March 31, 2019.

For additional information or to request full meeting packages of meetings, please contact Jarvis Googoo via email at jarvis.googoo@apcfn.ca