

**Dehcho
Regional Wellness Council Meeting
August 2, 2017
10:00 a.m.
Kakisa, NT**

Minutes

Council Members Present:

Ruby Simba, Chair
Hilda Sabourin
Raymond Michaud
Janna Deneron
Brenda Jumbo

Regrets:

Hilda Tsetso

Staff Participants:

Georgina Veldhorst, Chief Operating Officer
Kristen Campbell, Executive Assistant/Project Coordinator
Kevin Taylor, Executive Director – Corporate and Support Services

Guest:

1.0 Call to Order - RWC Chairperson
Meeting called to order at 10:43 a.m.

2.0 Reflection / Prayer
Offered by Georgina Veldhorst

3.0 Attendance (see above)

4.0 Approval of the Agenda - RWC Chairperson

Motion to approve the Agenda August 2, 2017

Motion to approve: Raymond Michaud

Second Hilda Sabourin

All in favour: all

Motion carried

5.0 Approval of the Previous Meeting

Motion to approve the Minutes April 18, 2017

Motion to approve: Raymond Michaud

Seconded by: Brenda Jumbo

All in favour: all

Motion carried

6.0 Chairpersons Report - RWC Chairperson

RWC Chairperson Ruby Simba provided a verbal report. She attended the Leadership Council meeting in Inuvik from July 12-14. NTHSSA – Dehcho Region's Associate Chief Operating Officer Wilson Dimsdale, Manager Primary Care Rayleen Swansen and Manager of Continuing Care Amy Stipdonk traveled to Kakisa on July 6 for a public meeting to discuss services available to Kakisa residents. These staff confirmed that Kakisa residents are free to choose where they access services—Hay River or Fort Providence and that this choice is up to the individual person. They also discussed the assessment of Home Care needs in the community, identifying that the need is increasing with an aging population.

Ruby also talked about suicide in the Dehcho communities.

7.0 Council Members Report – RWC Members

Raymond Michaud – Fort Simpson

The two issues he would like to discuss are included on the agenda, so he will save his feedback for the appropriate times. He would like to see the Regional Wellness Council write a letter to the new leadership in regards to suicide prevention.

Hilda Sabourin – Fort Providence

Nothing to report at this time.

Janna Deneron – Fort Liard

Some residents in Fort Liard feel that by reaching out to the nurse-on-call after hours, they are being an inconvenience. Some residents choose to go to Fort Nelson in the case of an emergency as they don't feel like a burden there.

Elders in Fort Liard find it difficult to communicate with staff at the Health Centre, as none of the front desk staff speak Slavey.

Brenda Jumbo – Sambaa K'e

Miscommunication in Sambaa K'e: there have been times where a nurse arrived in the community with no notice and residents that required appointments missed out.

This miscommunication ties into the nurse complaints over accommodations. With little to no notice, it is difficult to have the room cleaned. The trailer is not used solely for health and social services staff, but is an accommodation shared by the community for visitors.

Sambaa K'e residents would like eye and dental teams to spend more time in the community, so that everyone can be seen. One day of appointments can result in patient's missing out on needed work, and force them to travel to another community.

There are also concerns regarding medevacs. It seems that some people are getting priority over others, which is not fair to those who need medical attention. Residents have also come back from medevacs with liquor in their bags.

Concerns were also raised over RCMP and Coroner response times during critical incidents.

Ruby Simba – Kakisa

Ruby encouraged all RWC members to ask questions of their communities as to how health and wellness can be improved.

8.0 Business Arising from the Previous Meeting Minutes

8.1 Mental Health and Addictions

Ruby would like to bring this discussion back to the next meeting to give the members more time to discuss with their communities.

A discussion was facilitated by NTHSSA – Dehcho Region Chief Operating Officer, Georgina Veldhorst, providing Council members the opportunity to discuss the recent suicides and ways that the NTHSSA – Dehcho Region could make mental health services more meaningful and accessible.

The following is a summary of the feedback/advice received.

- Help needs to be available to those who need it, when they need it. They should not be put on a waiting list.
- When a critical incident occurs, we need to look at the larger picture and have supports in place for the families as well, not just the patient.
- There should also be a touch base after the initial incident to check in on the family/community.
- Significant losses, bullying, and substance abuse increase the risk of suicide and communities need to be aware of these scenarios.
- Many in the communities are not aware of mental health or the services available. If service providers spoke the Dene language, it may be easier to connect with the community.
- Men also may not wish to speak to a female counselor, but there are no men in these positions.
- We would like to see separate men and women matrix programs.
- For communities where Social Services is in a separate building, residents don't want to go to the social services building as there is an image associated with going to the facility. It makes people feel ashamed, and rumours spread.
- Opportunities to have sessions outside on the land may help break down the barrier accessing mental health services.
- There are on the land incentive programs in other communities targeted to specific groups: those without family or without somewhere to stay. The idea is to give incentives to be sober and out on the land. An example of one community is a gift from the band of \$50 a day, with the promise that you must go out on the land. The council does not want to see you in town that next day, spending money at the liquor store.
- When mental health counselors came to the community after the last critical incident, many in the community thought it was too soon for them to do individual sessions. They didn't want to talk right away; they wanted the counselors to sit and grieve with them and be part of the community.
- Focusing on training and educating our youth would be beneficial to the communities. Many youth issues stem from home and bullying is a big problem in schools.
- Having a treatment centre closer to home may encourage people to seek help as well.
- There are concerns over violence when people are drinking or using drugs. Substance use increases someone's risk of suicide.
- When someone makes a serious attempt, they leave for a few days and come right back to the community. Follow-up is not enforced and there are no

additional supports for someone with more severe mental issues like schizophrenia. People do not like to discuss community members of concern with RCMP or Mental Health and Social Services staff. More community wellness programs may help make those barriers disappear.

- There needs to be more discussion on mental health in the future. Start with the word “mental” and find out what people know and understand and build upon it.
- Suggest reaching out to the communities with mental health information and discussing mental health issues using segments on the radio (CBC, CKLB). The announcers in the regions speak the language, and may be able to help spread information about mental health.

Georgina thanked Council members for their advice and feedback. NTHSSA – Dehcho Region is keen to improve its Mental Health and Addictions services by improving access and making them more relevant to the residents of the Dehcho and will bring back a draft action plan to the next Regional Wellness Council meeting. This feedback and advice will inform this action plan.

9.0 Activities and Priorities

9.1 Draft Hierarchy of Values

Georgina Veldhorst spoke about tools being implemented by NTHSSA and the Department of Health and Social Services, to improve quality in all aspects.

One of the tools is a Hierarchy of Values (Attached) that staff can use on a daily basis to make decisions when there is not a clear-cut policy outlining direction (attached). The draft was brought forward to the RWC for feedback.

The following advice/feedback was received from the Regional Wellness Council:

- For value number for which currently states the following:

Equity for the Marginalized

The corresponding question for staff to ask themselves states “*Does this decision ensure care or service does not vary and is the same standard of quality regardless of personal characteristics, geographic location, socioeconomic status?*”

Council members felt that the value was important but that the corresponding question did not capture the essence of the value and recommend the following corresponding question, “does this make it easier for people who have the greatest need, or the hardest time accessing the system, have better outcomes” is a more accurate wording.

- Integrate the Dene Laws and Values into the draft values

Georgina shared that there is discussion about whether this should be a hierarchy or not. After some discussion, there was consensus that the Council members believe that a hierarchy is more useful, but that relationships should be higher in the hierarchy. Relationships are essential in our communities.

10.0 Learning, Development

Questions were raised about more orientation training for RWC members. Georgina Veldhorst advised that more orientation training for the Regional Wellness Council is planned once the vacant position is filled.

11.0 Decision Items and Recommendations to the NTHSSA Leadership Council

11.1 Medical Travel Policy Changes – Dehcho Region

This item is a follow-up on previous discussions held at the Dehcho RWC and a recommendation made to the leadership council.

Kevin Taylor, Executive Director – Corporate and Support Services delivered a presentation on the changes to the Medical Travel Policy. (see attached)

One of the concerns brought forward regarding the medical travel policy was the per diems for food and accommodations. Raymond Michaud noted the meal allowance of \$18 a day is low compared to the federal allowances. He also has concerns regarding the lack of incentive to drive for appointments vs. flying. Encouraging road travel would be more cost effective for the government, and they should be allowing two days to travel, not just one.

Kevin Taylor explained that this is a cabinet level policy, and these concerns have been noted and will be brought forward when the policy is up for review. As it is a cabinet level policy, it is a lengthy process to make changes to it. Kevin indicated that he would develop a briefing note to take to the Department of Health and Social Services that outlines the concerns regarding the current medical travel policy.

Recommendations to NTHSSA Leadership Council:

Recommendation: That the NTHSSA engage in discussions with Airport Way Medical Centre with a goal to enter into an agreement for Dehcho residents to access healthcare services in Fort Nelson.

Moved: Raymond Michaud

Second: Hilda Sabourin
All in favour: all

Recommendation carried.

Recommendation: That the present Medical Travel Meal and Accommodation Allowance be increased to follow the Federal Meal and Accommodation Allowance schedule.

Moved by: Raymond Michaud
Second: Janna Deneron
All in favour: All

Recommendation carried.

12.0 Action Items Review

- NTHSSA – Dehcho Region will look into background information on the Nats'ejee K'eh Treatment Centre
- Dehcho Region staff to provide an update on the Dehcho Region Action Plan for Mental Health and Addictions

13.0 Closing Reflections / Prayer

Next meeting – Meetings have occurred in Fort Liard, Fort Simpson, Kakisa.

- RWC October 2017—location to be determined. Jean Marie River would be preferred, if they can accommodate. Hay River Reserve or Fort Simpson. If we go to JMR, first have an engagement session where the public can ask questions about the RWC, prior to having the RWC meeting.

Prayer offered by Raymond Michaud.

14.0 Adjournment - RWC Chairperson

Adjourned at 5:13 p.m.