

## Yellowknife Regional Wellness Council Meeting Minutes

**Thursday October 24, 2019**

**6:00 PM – 9:00 PM**

**Goga Cho, 2<sup>nd</sup> Floor Boardroom**

**Mission:** Working with people to optimize wellbeing through the provision of collaborative and culturally appropriate health and social service

**Vision:** Healthy People, Healthy Families, Healthy Communities

**Values:** Collaboration Accountability Integrity Respect


**Attendance:**


- ✓ **Nancy Trotter**
- ✓ **Liz Liske**
- ✓ **Karen Hamre**
- ✓ **Liliana Canadic, COO**
- ✓ **Michelle MacDonald, EA – Minutes**
- R Melanie Murphy, Senior Advisor Governance**
- ✓ **Brandie Miersch**
- ✓ **Marie Speakman**
- ✓ **Emelie Saunders**
- ✓ **Katey Simmons**

**Guests:**

- Dr. Andy Delli Pizzi, Deputy Chief Public Health Officer, DHSS**
- Andrea Brown, Territorial Manager Mental Health and Addictions, NTHSSA**
- Kathleen Mackay, Manager CMHAS, NTHSAA-YK Region**
- Heather Hannah, Manager Epidemiologist & Surveillance Unit, DHSS**
- Jillian Waruk, Epidemiologist & Surveillance Unit, DHSS**
- Tim VanOverliw, Executive Director, NTHSSA**
- Peter Long, Territorial Manager, Patient Movement (Medical Travel), NTHSSA**

#	Item
1.0	Call to Order The meeting was called to order at 6:15pm.
2.0	Reflection / Prayer Meeting began with a prayer lead by Emelie Saunders
3.0	Welcome & Introductions <i>Acknowledgement of Chief Drygeese traditional territory of the Yellowknives Dene.</i> Introductions were made around the table.

4.0	<p>Safety Overview</p> <p>Liliana reviewed safety and emergency procedures for the building</p>
5.0	<p>Additional Agenda Items</p> <p>No additional agenda items</p>
	<p>5.1 Approval of the Agenda</p> <p>Brandie moved to approve the agenda, Emelie seconded. All in favour.</p>
	<p>5.2 Declaration of Conflict of Interest</p> <p>No conflicts were declared.</p>
6.0	<p>Presentation – Youth Public Health Dr Andy Delli Pizzi, Deputy Chief Public Health Officer, DHSS</p> <ul style="list-style-type: none"> <li>• Dr Andy Delli Pizzi presented “Youth Health in Yellowknife Region”</li> <li>• Discussion: <ul style="list-style-type: none"> <li>• Question about the increase in male mortality under 1 – answer unknown but DHSS can provide</li> <li>• Discussion about Stats Bureau survey and the survey for e-cigarettes</li> <li>• Disclaimers missing from graphics</li> <li>• DHSS is open to feedback of how to show stats</li> <li>• Suggestion that in the future data can presented in a more respectful way with focus on more positive stats</li> <li>• Concern about how we are empowering youth and the issue of vaping in schools</li> <li>• Discussion about a media based learning tool which is being brought to 33 communities</li> </ul> </li> </ul> <p> Youth Health in Yellowknife Region.pc</p>
7.0	<p>Presentation – Youth Mental Health Andrea Brown, Territorial Manager Mental Health and Addictions, NTHSSA</p> <ul style="list-style-type: none"> <li>• Andrea Brown presented “Child and Youth Care Counsellors”</li> <li>• Discussion <ul style="list-style-type: none"> <li>• Travelling Counselling is currently happening (team goes in 3x/year)</li> <li>• Social worker issue in one community – conflict of interest between staff and community children</li> <li>• Privacy with having CYCC in schools instead of the health care centre</li> <li>• DHSS working with principals in each region in regards to supporting youth privacy, confidentiality and ethically sharing information</li> <li>• CYCC are being oriented to look at preventative promotion and intervention</li> <li>• CYCC initiative has an established structure but there is a need to work together to address youth issues as each region is different</li> <li>• Working groups have been established that include Superintendents and front line support staff</li> </ul> </li> </ul>

	 CYCC Presentation.pdf
8.0	Previous Meeting Minutes - Review and Approval  Emelie moved to approve the minutes, Karen seconded. All in favour.
9.0	Business Arising
	9.1 Medical Travel – Presentation <ul style="list-style-type: none"> <li>• Tim VanOverliw &amp; Peter Long presented Q&amp;A about Medical Travel</li> <li>• Discussion             <ul style="list-style-type: none"> <li>• Issues with calling medical travel and experiencing long messages and difficulty speaking with medical travel staff, dropped calls, language barriers</li> <li>• Call system will be changing in the future to a queue style setup and extending staff hours in the next fiscal year</li> <li>• Story shared about a person on medical travel that was left at the airport as Vital Abel didn't have their name on the list</li> <li>• Standards of service are not being used right now</li> <li>• Focus right now is better medical travel training for front line and clinic assistants and providing visual aids</li> <li>• Reviewed process of medical escorts, referrals and the limitations</li> <li>• To change the policy in regards to medical escorts, RWC needs to take forward to Leadership Council</li> <li>• Patients staying with family are paid directly for accommodations and not directly to billet/host which is an issue</li> </ul> </li> </ul>
	9.2 Draft plan for the year (a) can we meet the 3 <sup>rd</sup> Thursday of the Month? <ul style="list-style-type: none"> <li>• Members agreed that this would work</li> <li>• Letter to be sent to three governing bodies in Fort Resolution to ask what presentation they want</li> </ul> (b) Łútsël K'é visit. <ul style="list-style-type: none"> <li>• Nancy sent letter to Lutselk'e about meeting there this month but there was a miscommunication</li> <li>• Liliana is visiting Lutselk'e on Oct 30<sup>th</sup> about contracts</li> <li>• Plan for spring visit to give lots of time to prepare and check availability of Chief &amp; Council</li> </ul>
	9.3 Stanton Volunteer Program up-date – defer till January
	<ul style="list-style-type: none"> <li>• Deferred because Leadership Council does not meet until end of November</li> <li>• Report back in January</li> </ul>
10.0	New Business
	9.1. Northern Conversations, recommendations from Yellowknife event: Falling through the cracks <ul style="list-style-type: none"> <li>• Recommendations from Northern Conversations were circulated to council members. The recommendations are also being circulated to the Legislative Assembly, MLA's, media and the public by the Northern Conversations group.</li> <li>• Suggested for Northern Conversations to attend the next RWC meeting in November</li> </ul>

	<ul style="list-style-type: none"> <li>• Council members asked to review document and message Nancy with comments.</li> </ul>
11.0	<p>Chairperson Report</p> <ul style="list-style-type: none"> <li>• Refer to report for details of things done</li> </ul>
12.0	<p>COO YK Region Activity Update Child and Youth Care Counsellors Initiative (information attached, to be discussed under 7.0)</p> <ul style="list-style-type: none"> <li>• Discussion &amp; feedback from presentations: <ul style="list-style-type: none"> <li>• Interesting information but not a lot of chance to provide advice on any aspect of the program.</li> <li>• Presentation didn't talk about foster care population and how school systems fit in</li> <li>• Issue of calling CFS for a student but no follow-up from CFS back to the principal.</li> <li>• Challenges of keeping counsellors in the small communities</li> <li>• Request for local information related to community and to see the record of the survey</li> <li>• Suggested that there should be a liaison between people of the land, elders and social services</li> <li>• Wellness funding is different between communities and funding goes on membership</li> <li>• Suggestions for youth engagement at November meeting includes: YKDFN Ambassadors, Side Door/ Hope's Haven (services provided), Traditional Wellness Camp (youth participants)</li> </ul> </li> </ul>
13.0	<p>Roundtable Updates- Community activities, questions and concerns</p>
	<ul style="list-style-type: none"> <li>• A member requested information on possibilities to explore mental health follow-through. In particular, if a patient made a call to the clinic for same day appointment and one was not available. The health care provider suggested to patient to go to emergency, is it possible for the clinic to let the hospital know that a patient has been referred? For two reasons so the hospital can be prepared with information about patient and if the person in crisis does not show up, there could be some follow-up.</li> <li>• A member asked if it is possible for hospital receptionists, as matter of standard practice, ask a patient coming to emergency if there is anyone they can call on their behalf to stay with them? This seems particularly important for those presenting with in mental health crisis, but is important for anyone on their own. Basically, the hospital is not a great place to be by yourself in an emergency (and usually at other times too).</li> <li>• Members would like to see the results of the Seniors questionnaire. There is an understanding that responses predominantly came from better-abled seniors. Is there going to be effort to see what less-abled seniors would like?</li> <li>• A member identified that the Department of Education, Culture and Employment created a relatively simple summary of 8 of their programs, along</li> </ul>

	<p>with service standards. Is it possible and worthwhile to create a, plain language summary for some of NTHSSA’s programs? (Healthy families; child and youth care counsellors; medical travel; addictions treatment; community counselling; foster parents?). If it includes service standards (which are good to have), also include what happens if standards are not met.</p> <ul style="list-style-type: none"> <li>• A member identified the need for a second social worker which was confirmed that the position will be filled soon.</li> <li>• A member questioned how patients are assessed for mental health issues in their community and why they aren’t taken to the police station to be held. A response was provided from the Mental Health Manager that there is a new risk assessment tool that was just rolled out in health centres.</li> <li>• A member suggested with cannabis edibles becoming legal in a few months, that they look too much like candy. Awareness needs to be brought in to schools as it is important to have information that is trusted.</li> <li>• A member brought up the fact there is a 9 week waiting list for counselling services. The Manager of Mental Health encouraged that people call for same day service especially if the situation is urgent (violence, child involved, etc).</li> <li>• A member stated that mental health is an on-going issue in their community</li> <li>• A member questioned why Indigenous knowledge is not incorporated into the health system.</li> <li>• A member asked about mental health issues and when to involve Child &amp; Family Services. It was clarified that Child &amp; Family Services has a standardized safety assessment tool for screening. Voluntary services are offered if parents engage.</li> <li>• A member wondered about how Territorial Treatment Centre (TTC) Placements are done. Members are asked to contact Liliana who can connect you with the right staff.</li> <li>• Another member has concerns about edibles as well and stated that kids don’t want to go trick or treating.</li> <li>• A member requested an update on the midwifery program</li> <li>• A member suggested that the concerns from the Northern Conversations letter could be answered through the primary health care reform and informing the public as to the plans.</li> </ul>
13.0	<p>RWC Outstanding Action Items – Hand Book</p> <ul style="list-style-type: none"> <li>• Sent forward to Leadership Council.</li> </ul>
14.0	<p>RWC Report to Leadership Council- what items do we want to take forward to the Leadership Council?</p> <ul style="list-style-type: none"> <li>• Next Leadership meeting is Nov 26-28.</li> <li>• Homework: Think about what we need to bring forward to the Leadership Council.</li> </ul>
15.0	<p>Closing Reflections / Prayer</p>
	<p>Marie closed the meeting with a prayer.</p>

16.0	Adjournment
	Meeting was adjourned at 9:15pm.

Next Meeting – November 21