



**Prevention Programs Subcommittee  
April 19 & 20<sup>th</sup>, 2016**

<b>Co-Chairs:</b> Calvin Badger, Treaty 8 Shawn Grono, FNIHB (April 19, 2016)	<b>Subcommittee:</b> Heather Hirsch, Treaty 7 Parminder Thiara, FNIHB (April 19, 2016) Wendy Ward, Treaty 8
<b>HCoM:</b> Beverly Swampy Darcy Jagodzinsky (April 19, 2016)	<b>Liaisons:</b> Nicole Tailfeathers, Treaty 7 Nora Alook, Treaty 8
<b>Guests:</b> Michelle Cardinal, Saddle Lake	<b>Regrets:</b> Lisa Beaverbone, Treaty 6 Tammy Bruno, Treaty 6 Arleen Thomas, Treaty 6

1. **Meeting Call to Order** **9:22 a.m.**
2. **Invocation** **Heather Hirsch**
3. **Introductions**
4. **Review of Minutes** **December 9 & 10, 2016**  
 Elders – The item was discussed at the Co-chairs meeting and will also require further discussion at the Operations & Support Subcommittee and Co-Management. There are discussions on funding to have 3 Elders present at each subcommittee meeting.

*2015-04-19-#01 Moved by Wendy Ward, to accept the minutes for December 9 & 10<sup>th</sup>, 2015, seconded by Shawn Grono, all in favor, motion carried.*

**January 12, 2016**

*2016-04-19-#02 Moved by Parminder Thiara, to accept the minutes for January 12, 2016, seconded by Heather Hirsch, all in favor, motion carried.*

**Action Item:** Community Health Promotion Worker/CHR to be added to the agenda for the next meeting and to have Kay Half present. Discuss traditional ways of healings and the inclusion of language in the health promotion program. Heather Hirsch will provide a briefing note/areas of consideration that can be reviewed by subcommittee and forwarded to the institutions.

5. **HCoM Update** **Darcy Jagodzinsky**  
 Several meetings have been taking place with the Co-Chairs, The HCoM Evaluation Task Force and the Financial Analysis working group.
  - An email will be going to all subcommittees from the Financial Analyst Working group to get feedback on what positions they would like to see within the salary parity analysis.
  - Another area that the Financial Analysis working group will be looking is the process for awards regional projects. An application process will be forwarded and it will also include a reporting component.



- The HCoM Task Force will be looking at subcommittee structures and discussing the role of the subcommittee members and accountability. It is the role of subcommittee members to report back to their respective communities, leadership, etc. This action supports communication.
- An HCoM Orientation manual is being worked on jointly with Co-Chairs of each subcommittee and will be ready by the fall of 2016.
- HCoM will be upgrading the website where all subcommittee will be sent a link to access all the documents that are required for each subcommittee meeting. Documents will no longer be sent via email and an ID and password will be sent out to everyone to access those documents from the site.

**6. Alberta Region Chronic Disease Prevention Action Plan** **Steve Pederson**

The Alberta Chronic Disease and Prevention Action Plan has been approved by the subcommittee. A final presentation on the outcome of the event was presented to the subcommittee. Communities are inquiring about the next steps for the initiative. Subcommittee will need to decide how they wish to proceed in building a plan for the next few years and what are the things that can be done to support the collaborative. One suggestion would be to refine the Terms of Reference of this subcommittee to reflect the work.

**Action Item:** add item for discussion on the next agenda. Review the funding that is set aside to move forward on the action plan. Inform Contribution Agreement holder to forward the document to the communities. Parminder to follow up with working group to identify the dissemination plan.

*2016-04-18-#03 Moved by Parminder Thiara that the Prevention Programs Subcommittee approve the Chronic Disease Prevention Action Plan on the HCOM website, seconded by Heather Hirsch, all in favor, motion carried.*

**7. Lunch** **12:00 -1:00 p.m.**  
**8. Nutrition Team** **Laurina Panas**

**\*\*Documents discussed will be forwarded to the subcommittee for their review.**

The Alberta FNIHB nutrition training series are available to those who have access to One Health website. Alberta Health Services also provides documents that can also be on the site. Any success stories related to food security can be given to the team so they can be posted on the site as well. Fact sheets are available on different topics and can be used by the health professionals in the community and how they can get information.

- Subcommittee can direct any questions to Judy Halladay, FNIHB.

**9. Fentanyl Update** **Shawn Grono**

FNIHB has been heavily engaged with communities that would like additional information to support those being impacted by Fentanyl. Shawn Grono sent an email to all Health Directors with information about naloxone kit training and kit positioning. The email also included information on how communities with transferred nursing services could access information on Naloxone training and kits through Alberta Health Services website "drugsfool.ca". The kits are in over 500 pharmacies and health centers. Health Canada has



now delisted naloxone as a prescription medication and once the Province does it's work on changing it's legislation/policies the kits will be available without a prescription. There should not be any costs for a kit. Education resources can also be accessed on the AHS portal (drugsfool.ca) and you do not have to be a nurse to do the training. Subcommittee would like to discuss the cause of the problems for people using the drugs and the social determinants of health.

**Action Item:** Trauma informed care presentation to be added to agenda for next meeting. AHS has videos that can be watched. It is agreed that all HCoM Subcommittee members should have the information on trauma informed care.

**10. Injury Prevention Evaluation Framework**

**Sarah Sy/ Co-Chairs**

The document was sent to the subcommittee a few weeks ago to review and provide feedback. In 2010, the subcommittee received data on injuries, which is the leading cause of death for First Nations. A working group was developed to work on a strategy. Nadine McRee developed the strategy, which included a background review. The document also included community voices, government, and non-government stakeholders on ideas about the vision. This document formed a framework rather than a strategy. The model is shaped like a Headdress and is considered over arching to ensure that communities could develop their own specific programming. There needs to be an evaluation of the impact and if the actual process is being implemented. AFNIGC wrote the document and presented to this group and FNIHB provided them with all the background documentation.

**Action Item:** Subcommittee members to review the Injury Prevention Evaluation Documents and provide final feedback to AFNIGC by May 13, 2016.

**11. Food Security Strategy Framework**

**Parminder Thiara**

A symposium was supported and a strategy was developed as a request from communities. There was an action plan that was built from there and a working group is looking at incorporating traditional foods. AFNIGC also developed the evaluation framework, which subcommittee members are going to send AFNIGC any final feedback by May 13, 2016.

*2016-04-19-#04 Moved by Wendy Ward, to approve the Injury Prevention Evaluation Framework and the Food Security Strategy Evaluation framework with the option for the subcommittee members to review documents and provide feedback to AFNIGC by May 13<sup>th</sup>, seconded by Parminder Thiara, all in favor, motion carried.*

**12. Subcommittee Priorities**

Subcommittee needs to discuss and identify priorities. This can be accomplished after the HCoM Committee meets to discuss their priorities, subcommittees can seek further direction.

**13. Meeting Adjourned**

**3:30 p.m.**

**14. Day 2 Meeting Call to Order**

**9:05 a.m.**

**15. DEP Options**

**Chris Babcock**

An options paper was presented in June 2015 on the program and its various deliveries. The feedback that was received was on internal changes, which support communication on the program. The program is for diabetic clients to have their retina screened by a



photographer for complications from diabetes. Communication was the most common feedback and several health staff were not aware of the program. A concern was that diabetic clients are unaware of the significance of getting their eyes tested.

**Recommendations for improvement:** Require a more determined and enhanced involvement with all, FNIHB staff, photographers and community health staff by using tools with branding posters and informing diabetics about the programs. More engagement by photographers and community health staff and that they are fully aware of the program.

**Next Steps:** Meet with the Treaty 6 Health Directors. There also isn't a way to determine how many people are being serviced by Alberta Health Services. Would have to write in new pamphlets and brochures to get out to the health centers. **Action Item:** Subcommittee request a program evaluation to see if the program is meeting it's needs and add to the agenda for the next meeting. Discuss the need of the program and the indicators.

**16. ADI Face to Face Meeting**

**Sarah Sy**

There was a meeting in Ottawa in January 2015, which was scheduled to determine that ADI national priorities. There was a lot of information sharing for the different regions and what work has been done but no new information. There were a few different presentations by national organizations; Canadian Diabetes Association presented their 2015 report, which were priorities are to increase communications and engagement with Aboriginal communities and prevention of amputation, eliminating discrimination, and improvements of self-management support for children in schools. NADA (National Aboriginal Diabetes Association) gave an update on their programs and what resources they have for healthy living, on website, diabetes prevention and management, tool kits, sharing success stories and best practices. There were roundtable presentations from the regions and what they are doing in each region. The focus for the next few years in Alberta Region is based on the 3 strategies, Injury Prevention, Food Security and Chronic Disease Prevention Management (CDMP). There was also a national CDPM framework that was presented. This framework can be used as a guideline for the regions. For the next national meeting, the subcommittee requests that for a Prevention subcommittee representative to attend.

**17. Car Seat Safety Update**

**Calvin Badger**

Treaty 6, 7 & 8 areas have all received the car safety seat training.

**18. Homecare Nurses Working Group (Call for Treaty 8 Rep)**

**Lorene Weigelt**

The current Treaty 8 representative has changed position and is finding it difficult to continue to attend the meetings. The group is currently going over a policy review, as there has to be a lot of research and standards. There has been a final draft of standards and now working on connecting the standards to policy. The group needs one more year to completed the work.

**Action Item:** Treaty 8 do a call out for the representative and inform Lorene of the selection for the upcoming meeting in May 2016.

**Action Item:** Homecare Nurses Working Group to be added to the next agenda.

**19. Meeting Adjournment**

**10:45 a.m.**

**20. Date and Time of Next Meeting**

**June 28 & 29<sup>th</sup> - Edmonton**