



**Operations & Support Subcommittee Special Meeting
November 13, 2020I, via Zoom**

<p>Co-Chairs: Shawn Grono, FNIHB Tyler White, Treaty 7</p> <p>Margo Dodginghorse, Treaty 7/SNTTC</p> <p>Liaisons: Laurie Belcourt, Treaty 8</p> <p>Observers: Bonnie Healy, Treaty 7/BCTC</p>	<p>HCoM: Erin Solway, Coordinator Debra Loyie, Admin Assistant (recorder)</p> <p>Members: Barry Phillips, Treaty 8</p> <p>Presenters: Dr. Chris Sarin, MOH, FNIHB Sibi Abraham, FNIHB Fiona Hossack, FNIHB</p> <p>Regrets: Tracy Potts, YTC/Treaty 6 Colleen McDonald, ECN/Treaty 6 Steve Courtoreille, Treaty 8 Nathalie Lachance, FNIHB</p>
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1. **Call to order/Opening Prayer** **Co-chairs**
 - With a quorum present the Co-chairs called the meeting to order at 10:05am
 - Special meeting to validate the engagement of communicable disease/outbreak management, COVID-19 immunization workflow enhancement in response to COVID-19 for all First Nations in Alberta
2. **Introductions** **Subcommittee**
3. **COVID -19 Immunization Workflow Enhancement in response to COVID-19** **FNIHB**
 - Dr. Chris Sarin reported to the Subcommittee that Alberta spike in cases is now highest in Canada, working with TSAG to prepare for additional activity, two projects to be validated by SC so engagement with Alberta First Nations using eHEALTH dollars
 - Summary of Communicable Disease/Outbreak Management: there is currently no communicable disease outbreak management information system for First Nations, CDC efforts require integration of communicable disease and outbreak management and immunization systems, as many communicable diseases are vaccine preventable.
Vision To build upon existing First Nation infrastructures and information systems to provide the level of information management needed by FNs communities, enable more effective and efficient communicable disease and outbreak management and enhance the ability to perform effective surveillance
 - Recommendation Currently, CHIP is the standard used for managing community health information, including immunizations within First Nation communities in Alberta. CHIP is also the only point of care system in AB with two-way real-time provincial integration for immunizations. Enhancing CHIP with a COVID-19 communicable disease and outbreak module would be most cost-effective option, would integrate all relevant public health information into a single application, and would be the fastest to roll-out across all First Nations in AB. Familiarity of the application would minimize disruptions that would be involved with introducing another application by a different vendor. FNIHB is currently supporting implementation of real time integration of immunization records with the province across all First Nations in Alberta, through CHIP.
 - Summary of COVID-19 Immunization Workflow Enhancement the National Advisory Committee on Immunization (NACI) recently released guidelines to improve the safety of immunization services in the presence of COVID-19 that recommends, minimizing face-to-face time in the clinic, minimizing contact with commonly touched surfaces, and streamlining workflow with electronic processes, such as online booking, vaccine education and consent. NACI guidelines highlight additional measures needed to minimize the risk of COVID-19 transmission in the workplace for immunization services.



Vision To build on existing First Nations infrastructure and information systems to provide the most effective and efficient immunization services possible, in compliance with the latest NACI guidelines and in response to community needs. To implement features that would provide optimal safety of immunization services in compliance with NACI recommendations for immunization services during COVID19 and beyond. This will be achieved by minimizing face-to-face time; minimizing contact with commonly touched surfaces; and streamlining workflow.

- Recommendation Currently, CHIP is the standard used for managing community health information, including immunizations within First Nation communities in Alberta. Enhancing CHIP features to improve program workflow in accordance with NACI recommendations would be a cost-effective option to increase the safety and efficiency of immunization services during COVID19, for a COVID19 mass immunization campaign, and for the post-COVID19 era.
- COVID-19: Lessons Learned from First Wave: First Nations in Alberta are facing an unprecedented pandemic, and the response in all communities experiencing COVID19 outbreaks with respect to case management and contact tracing can quickly overwhelm community and ISC staff. Integration of remote contact tracers is complicated by the lack of a shared electronic record. Community response must maintain core public health functions. Relying on AHS has lead to delays in timeliness and effectiveness.
- Sibi Abraham reviewed for the Subcommittee the proposed budget for consideration: FNIHB-AB eHEALTH received \$500K (\$350,000 remaining) in funding to support COVID-19 related projects: 1. Communicable Disease/Outbreak Management Module total \$250,000. 2. Immunization Workflow Enhancement total \$150,000. Investment would be a one-time development and implementation cost with no impact to current sustainability
- Timeline for development and implementation is 5 – 6 months, hope both projects ready and available by March 2021
- Best approach: Divided into two separate projects for SC approva

2020-11-13: #1 Motion the Operations & Support Subcommittee moved to approve and accept the \$250,000 investment for Communicable Disease/Outbreak Management Module allocated from the COVID-19 eHEALTH funding. Moved by Barry Phillips, Treaty 8. Seconded by Tyler White, Treaty 7/BCTC. Motion CARRIED

2021-11-13: #2 Motion the Operations & Support Subcommittee moved to approve and accept the Immunization Workflow Enhancement of \$150,000 allocated from the COVID-19 eHEALTH funding and an additional \$50,000 from the Region. Moved by Tyler White, Treaty 7/SNTTC. Seconded by Barry Phillips, Treaty 8. Motion CARRIED

4. Adjourn

11:56am