

2018

Tsilhqot'in Nation Health and Wellness Planning Report



Vicki Manuel

First Nations Health Authority

1/31/2018

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HEALTH PLANNING

Attendance

NAME	TITLE	ORGANIZATION	INFO
Connie Jasper	Health Manager	TNG	
Lorna Elkins	Health Program Coordinator	TNG	
Megan Dark	Dietician/Diabetes Educator	TNG	
Tanya Mores	Registered Social Worker	TNG	
Jimmy Lulua	Traditional Wellness Coordinator	TNG	
Dalton Baptiste	Band Manager	Xeni Gwet'in	
Annie C. William	Health Director	Xeni Gwet'in	
Tracy Tannis	Wellness Worker	Xeni Gwet'in	
Loretta William	Councillor	Xeni Gwet'in	
Thelma Stump	Health Director	?Esdilagh	
Dora Grinder	Health Director	Tsi Del Del	
Teresa Johnny	Health Director	Tl'exqox	
Pam Alphonse	Health Director	Tl'etinqox	
Lyndy Friesen	LPN	Tl'etinqox	
Vicki W. Manuel	Regional Planner	FNHA	Co-Facilitator
Dwayne Emmerson	Band Manager	Yunesit'in	½ day on Jan 31, 2018

Agenda – Monday, January 29th, 2018

TIME	ITEM	WHAT – WHERE	WHO
12:00	Lunch	Restaurant	All
1:00	Opening Prayer	Teresa	All
1:10	Introductions		All
1:30	Round Table - Question	“What We Hope to Accomplish for the Next Two Days	All
2:00	Review Report - Discussion	“Review of Current Health Plans” and Discussions	Presented by Connie
3:00	Break		
3:15	Review Report – Discussion	“Review Elders Care Study” and Discussion	Presented by Connie

Agenda – Tuesday, January 30th, 2018

TIME	ITEM	WHAT - WHERE	WHO
8:00	Breakfast	Restaurant	All
8:30	Start Time		All
8:10	Opening Prayer	Loretta William	All
8:15	Accomplish for 3 Days	Discussion from those just joining	Thelma, Annie, Tracy, Loretta
8:30	Funding Streams and Discussions	*Joint Project Board *Interior Health Funding *Health Actions *SET Funding	Presented by Connie
	Technical Tables Presentation & Discussion	*IRTT *IRAWC *FNHC *NHD	Presented by Connie
	Funding Streams	Jordan's Principles	Tanya
	Funding Streams	Elders Chronic Care Management	?
	Meeting Up-date	Clinicians Meeting	
12:00	LUNCH	Restaurant	All
1:00	TNG Presentations	*Traditional Wellness *Dietician *Social Work *Health Programs	Jimmy Lulua Megan Dark Tanya Mores Lorna Elkins
2:00	Question	"What do you want to Accomplish During the Next Fiscal Year"	TNG Staff – All
2:30	Break		
2:45	Presentations	What each community is doing and where their gaps are	Each Health Director *Thelma *Dora *Teresa *Annie *Pam *Vacant (Yunesit'in)
4:00	Closing		

Agenda: Wednesday, January 31, 2018

TIME	ITEM	WHAT – WHERE	WHO
8:00	Breakfast	Restaurant	All
8:30	Opening Prayer		All
8:40	Question	"Where do we go from here?" "Goals 2018-2019"	All
11:30	Closing		All
12:00	Lunch	Restaurant	All
1:00	Travel Home		

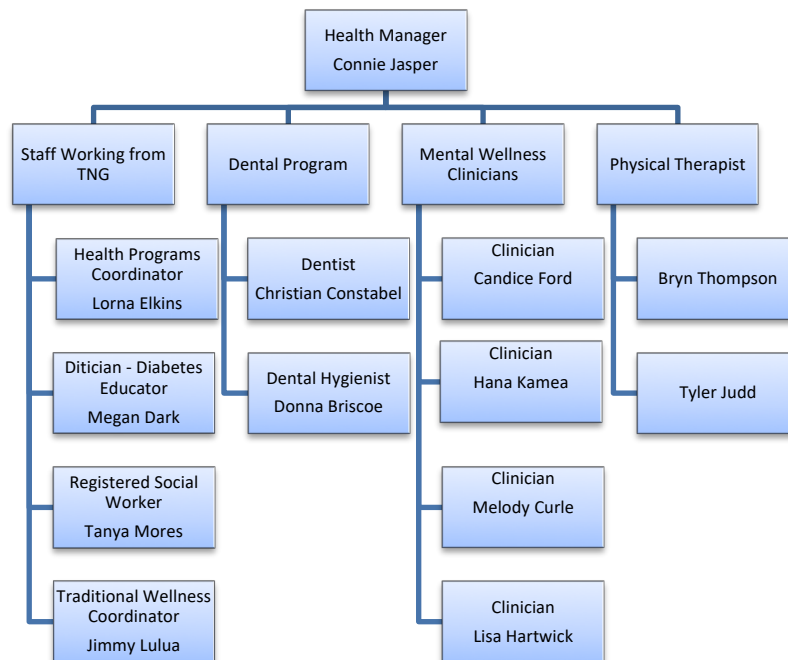
Question: What Do We Hope To Accomplish During The Next Two Days?

AREA	POINTS to CONSIDER
FUNDING	<ul style="list-style-type: none"> • Plan for Sustainability • Identify funding Opportunities
BEST PRACTICES	<ul style="list-style-type: none"> • Opportunity to Pick your Brain • Share Best Practices at each community • What are other communities doing in their community? • Learn from Others
PROGRAMS	<ul style="list-style-type: none"> • Dieticians Time: input form Communities on how Dietician’s time is best spent in each community. • MWSU: identify mental health needs of community/nation • MWSU: address mental health issues in people and community • Social Worker: Educate on SW role at hospital • Traditional Wellness: Focus on TW in health plans • Traditional Wellness: Ways to pay Healers
SELF-CARE	<ul style="list-style-type: none"> • Cross Country Skiing • Catch up on Sleep • Hot Tub it Up •
PLANNING	<ul style="list-style-type: none"> • More Direction – on what nation can do to support Communities • Identify what we need to plan for at Community Level and Nation level • Identify ways to work together • See what the Nations Plan is for health going forward • For more programs/services in community for Elders and Youth
Collaborate	<ul style="list-style-type: none"> • Connect with Communities / Staff and collaborate • Get together with communities – see what communities want • Get together and plan as a Nation (to compliment services in community)

TNG Funding Streams

FNHA	Contribution Agreement	<ul style="list-style-type: none"> Health Manager
JPB	Joint Project Board Registered Health Professionals	<ul style="list-style-type: none"> 1 Full time Clinician – 4 Contracted Clinicians ½ Time Physical Therapists – 2 Contracted Positions 1 Full time Dietician – Employee Position 1 Full time Registered Social Worker Nurse Practitioner Supports – Medical Office Assistant
IHA	Interior Health Authority	<ul style="list-style-type: none"> One .6 Nurse Practitioner One .8 Nurse Practitioner Mental Health Navigator - Now Lorna’s Position (this no longer funded after August 2018)
FNHA	FNHA - Health Actions	<ul style="list-style-type: none"> Traditional Wellness Coordinator Diabetes Road Show (Feb 2018) Home Care Assistant Training Health Strategic Planning –(HD-Sunpeaks) Health Education Workshops – Cooking Classes Health Website Development
SET Program	Dental Program	<ul style="list-style-type: none"> Dentist Dental Hygienist
FNHA	CA – Healers	<ul style="list-style-type: none"> Funding flow through TNG to each community to be used by September 2018 for Healers

TNG - Health Team



Traditional Wellness Coordinator – Presentation, Jimmy Lulua

- March – May: Research Project, Xeni Gwet'in Youth Wagon Trip Deni House Traditional Foods, Meat Butcher, hunting protocol training.
- June – August: Traditional Harvesting, Fishing, Canning, Drying Fish
- September: November: Men's group, Xeni Gwet'in, Tsi DelDel
- December – February: Snaring, Trapping, Paul Grinder TNG, Tletincox't'in and Xeni Following Model
- Health Team Member: Tsilhqot'in National Government
- Xeni Gwet'in Men's Wellness Group
- Tsi Del del Men's Wellness Group
- Trapping – Paul Grinder TNG Fisheries
- Community Harvesting – Fishing and Canning, Gatherings
- Tlesqox Traditional Parenting with Denisiqi
- All Nations Spring Classic Walk Run
- Work to Give – Punky Lake Wilderness Society
- Interior Health Research – SFU – Traditional Foods
- Deni House Drumming – 1st Thursday of each month
- Traditional Advisory Committee
- Freezer Project – Assisted Stewardship to complete
- Diabetes Roadshow – 1st a year
- Ulkatcho – Youth and community 'Xeni Gwet'in Youth Wagon Trip' – Fundraiser

Language – Tsilhqot'in Nation Language Fluency

Total Population: 3474

Fluent Speakers 774

Understand of somewhat speak – 586

Not fluent: 2114

Dietician – Diabetes Educator – Presentation By: Megan Dark

Main Projects:

1. **Diabetes Road Show** – February 2018
2. **Traditional Foods in the Deni House Project:** Forest to Fork Project funding – FNHA and IHA – a Wild Meat procurement meat program – expanded to Deni House, -a pilot project. Working with support services from hospital to expand into hospital to bring in moose, deer.
3. **Chilcotin Radio:** Anaham and Red Stone (pilot) – asked to put together some education on nutrition using radio medium. D
4. **FN Food Systems Project:** Provincially funded, FNHA funded, heart and stroke funding: for community gardens. Scope expanding to different food security needs and incorporating wild foods.
5. **Work to Give Project** – applied to the Vancouver foundation: to bring more food skills programing to communities and to work towards “food-charters” - it is our right to healthy food and food from the land. Requesting funds from this to make this happen.

Working in all Other Areas of need:

- Client counselling: diabetes, heart disease, kidney disease
- Group education: nutrition workshop on requested topics
- Staffing education on request
- School nutrition – cook education, support to teachers, sometimes education to youth, youth workers (program supports and education)
- Resource development – incorporating traditional foods and medicines, tailored for community health literacy needs
- Food Skills training (capacity building) eg: cooks training, gardening, preserving
- Support to food security & Sovereignty projects
- Nationwide project work
- Community freezers in each community
- Incorporate wild game into the schools thru hunter training curriculum program

Dieticians – SWOT

STRENGTHS	WEAKNESSES
<ul style="list-style-type: none"> • Working along the whole prevention spectrum • Able to build relationships with members & Staff • Three buckets of prevention: • Working at all stages of food security continuum: Food Security continuum: 	<ul style="list-style-type: none"> • Doing a little of everything but nothing well • A lot of prep time behind what you see in community • Limited time to put to project work <ul style="list-style-type: none"> ○ Ie: Tsilhqot'in plant walk project ○ Ie: kids cooking curriculum ○ Ie: food-based ec dev projects • Travel Audit: 7-9 days travel / month (1.5 weeks)
OPPORTUNITIES	THREATS
<p>More capacity building of staff – opposed to direct education</p> <ul style="list-style-type: none"> • Diabetes peer mentorship program • Health promotions position at TNG <ul style="list-style-type: none"> ○ Not registered professional but have health promo knowledge ○ Ideally from the nation 	<ul style="list-style-type: none"> • May look like: <ul style="list-style-type: none"> ○ Cluster work with a community or project ○ Time spent increasing capacity of staff – less direct work with members ○ Forming community food coalitions of steering committees

Activity – Health Promotion Continuum

- Red Sticker – #1 top priority, yellow sticker - #2 priority, Green Sticker - #3 Priority
- Post its – ideas not there
- Helping Megan to prioritize her work
- Areas:

HEALTH PROMOTION COTINUUM						
Individual Health Downstream				Nation & Community Health		
Nutrition	Group Teachings	Food Skills Capacity Building	Train the Trainer	School Youth Nutrition	Food Security	Food Environment
Kidney Disease, Obesity, Over eating, diabetes, heart disease	Diabetes, other health topics, women’s and men’s topics	Healthy Cooking, general healthy eating, foraging wild foods, shopping, budgeting, meal planning, preservation of foods, growing foods/gardening	Nurses, teachers, cooks, Tsilhqot’in radio health education, Band Staff, Youth Workers, Home Support	Nutrition Resource Teacher, kids cooking program, school cook education, school gardens, and salad bars	Assist with meals on wheels, community food, councils, coalitions, food based economic development projects	Assist with meals on wheels, community food, councils, coalitions, food based economic development projects
# 2 RED		# 3 RED			#1 9 RED	

Participants were asked to place their stickers on what was most important for their community with a red sticker, #2 priorities a yellow sticker and #3 priorities is a green sticker.

Based on that system, the goals in order of importance are:

- Goal #1: Food Security
- Goal #2: Nutrition
- Goal #3: Food Capacity Building
- Goal #4: School Nutrition was a close fourth

Registered Social Worker Presentation By: Tanya Mores

Have been absent for 8 months

- Registered SW of TNG – general social work area
- Child protection is a SW function– but not part of her program
- Mostly dealing with social piece – individual, family, community
- **Developing a Booklet specifically for “residential care”** and the process – to education nation members on the process, identify each care facility in WL, identify what the process and guidelines are, if they have to go to 100 Mile House – or Quesnel- what does that look like, Supporting families in understanding the daunting processes and paper work. Understanding the subsidy, the criteria, - the financial piece is the hugest part of it. Getting families to share financial is the biggest part of the process. Families need to have their tax information.
- **Develop a Booklet for Respite Care:** developing a booklet around this also process around the respite process, who is eligible, what it the facility like, how long can a person stay there, who provides it, what is the cost. Understanding if respite can go to home.
- **Hospital Beds:** individuals in hospital and they are there for extended stay and what is the policy around that? It is not always paid for and what is the cost of that?
- **Question:** Dora – before they go into care (Elder) a question regarding ‘power of attorney’-2 different power of attorney options..... Just for financial, or one for medical decision as well. (A living Will)
- **Work with Cariboo Memorial Hospital:** They do have a SW – this was huge gap – and no navigational piece especially the discharge planning portion. There is now an APN in CMH. Gateway another area that is good about connecting with me on Tsilhqot'in members. Trying to break into working with and in the Emergency department – but it has been the most difficult area to work in.
- **Work collaboratively with the Clinicians:** To support them or help them out as much as possible through offering workshops, etc.

Health Program Coordinator By: Lorna Elkins

- **Assisted Living Training** – 8 students – 2 dropped out –down to six, 4 from Anaham, 2 from Stone, it is going good but it is making sure they are making sure they do their assignments. A lot of babysitting. They will graduate – End of September 2018. Program was free to community.
- **Connecting with Each community** – to see what kind of workshops you want
- **Telehealth** – testing signal for telehealth, and the signal very low and the equipment out of date, need to see where this is at.

Community Presentation on Program, Services and Gaps

Tl'etinqox

Programs & Services	Gaps
Dentist Physician Nurse Practitioner Nutritionist Wellness coordinator Home support Youth workers School lunch program Garden Head start Hunting and trapping Ambulance – outpost RCMP Gym and fitness center	CHR, RN Care Aide Health Coach – Wellness Coach – to Home care Language Waste management – recycling Medical conference – Teleconference Mental wellness Nutrition

Xeni Gwet'in

Programs & Services	Gaps
Health Director Receptionist – patient travel 1 women wellness worker Medical driver – 4 days a week and maintenance of the building/ vehicles Community development leader – Elders Care – Elders meetings, - Elders Gathering, etc Community support worker (3) – check blood pressure, Elders – Elders and youth and Youth , youth activities, Ladies Wellness Coach - NADAPP work , ladies night, etc. Doctor – once a month...only ½ a day.... Dentist – once a month Nurse Practitioner Physio Therapist Clinician – Counsellor – once a week Buckles – Traditional Wellness – Touch for Health Nurse .5 (IHA) Wood Chopper – 6 month of the year – for the Elders Community Drivers – drive the van (class 4) Canning Workshop Annual Brittney Gathering	1 men wellness worker Mental Health – more awareness around MH – looking at resources at education of staff and community Rehabilitation after community comes back from treatment Housing - for members and Professional staff Nursing Support – Electronic medical records (right now we paper) CHR – positon taken away – we need it back Men's Wellness Coordinator Traditional Coordinator Home Support – Expand (8 trained members – we want to bring home) Telehealth Policy and Procedure and Strategic Planning

<p>TNG - in our community - Support of community – members always willing to pitch in whenever possible Green house and community garden – 3 students from community and then health staff harvest Fundraising – up to \$3000 per month Bathing Facility – a shower - wheel chair access tub also. Xeni Gwet'in Youth Wagon Trip Two ... machines OD kits – naloxone training Fitness Center – equipment services Old day care getting renovated – getting a new daycare being built in the new year</p>	
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Tl'esqox, Tsi Del Del, ?Esdilagh

Programs and Services	Gaps
<ul style="list-style-type: none"> • Health Director • HS and HSW having luncheon • Crafts with young moms • Composting • AD has sweat once a month • HS garden/community garden (grasshoppers) • MH on Mondays does a group with ladies • Youth worker has brought in Traditional speakers for youth • Youth worker taking youth to watch Hockey game in 86 • Youth worker has taken youth to Court Links • HCN once a month Foot care: • IH – Movie Day • After youth (school) program / field trips/lunch on Elders • Full time – RN Presentation/ walking/ program/ bike safety / babysitting course / workshop/ traditional activities (culture/language Program) • Raising chickens (23) – 2 dozen /daily – Elders those in need • 5 development workers –clients • Woodcutting contract – logging partner drop off logs • Treatment (RN) 	<ul style="list-style-type: none"> • Water system for garden poor • A & D ½ time – would be good to have full time position and funding for this • Up to date training: support from FNHA – for all health workers • Need new medical vehicle • Need class 4 drivers – class 5 drivers • Require job descriptions • Require policies developed • Require 10 year Health Plan HD Training

<ul style="list-style-type: none"> • Foot Care (RN/LPN) • Interpreter (Agnes) • Nurse Support (NNADP/CHR) • Staff (community safety committee) • Prenatal Vouchers/car seats • Mobile Treatment – Nenqayni/ Denisiqi • Good Food Box – diabetes – Prenatal • Medication Delivery / Courier / Staff deliver to home • Home visits by HCCP/NP • Traditional Healers / cultural activities – invite from outside • Elders traditional stories • Comprehensive community planning • Dietitian visits • Mental Health Counselling • Elder council Circle • Nurse do diabetic screening • Birthday Celebration • NP / Doctor visits • Physio Therapist visits • 3 month health planning with staff – scheduling • Band / health activity scheduling off/on reserve/ developing policy • New skating rink 	
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Gaps - Identified

AREA	POINTS to CONSIDER
PLANNING	<ul style="list-style-type: none"> • For Off-Reserve • Continuity of Care – in all programs/services • Community Website – Health Sights • Confidentiality Training: Oath of Ethics, duty to report, for all health staff and address in policy • Human Resource Training: for Health Managers and Health Managers • Housing for Health Care Professionals going into communities. • Translators: one from each community – on call • Recruitments, Training, Education – youth target
MENTAL WELLNESS SUBSTANCE USE	<ul style="list-style-type: none"> • CLIENT: to Gateway – to Renner House – to Nothing (client has not where to go) • Basic Counselling Skills • More Training for NADAPP Workers (ie: new drugs, confidentiality training) • Bring NADAPP workers together 4X a year: debriefing and wellness

<p>PRIMARY CARE</p>	<ul style="list-style-type: none"> • Recruitment – Retention Nurses: Needing to fill nursing positions in community • Home Support Workers: bring together for training (update their skills), diabetes Education/training • Nutrition Strategy: (nation – community): healthy meal planning, portion control, diabetic training, build on what elders know is healthy eating. • Access to patient Records • Telehealth & Teleconferencing
<p>TRADITIONAL WELLNESS</p>	<ul style="list-style-type: none"> • Home Base to Work out of (in community/nation) • Balance in Traditional Wellness Coordinators: a man and a woman for each community • Full Time – Traditional Wellness Coordinator(s)
<p>ELDERS</p>	<ul style="list-style-type: none"> • Community Programs for Elders • Utilize summer students to help in the homes • Recruiting youth to train for Home Care • Health Specific Job Fair • Identify affordable heating system for elders home (wood shortage) • Identify Tsilhqot'in interpreters for elders who are in the hospital (on call) male and female • Activities • Cultural activities • Wills and Estates • End of Life Planning • Place in community for elders to walk safely – especially in winter months • Training Elders in mobility issues: use of canes, wheel chairs • Nutrition training • How their bodies change as they age • Home Support: training family members how to care for their Elders. • Meals on wheels • Transportation of elders • To keep Elders in home we need to proper staff and training and education
<p>YOUTH</p>	<ul style="list-style-type: none"> •
<p>HOME CARE</p>	<ul style="list-style-type: none"> • Training for HSW – updating • Need more in our communities certified • In home care • Home visits • More medical professional within the community • Palliative care/ training / education / COPD – Diabetes • Rehab for those who fall in the gaps (ages: 20-64) • Home improvements – renovations: safety/necessity/water/power • Family training / support • Hire and train more home support workers (homemakers) • Hire full time wood choppers / chimney cleaning/ snow shoveling • Home Makers Training • Recruiting Program • Helping Elders adjust to new direction/ lifestyle/ loosing BCDL due to age.

Mental Health Workshop Ideas

Trauma	Grief and Loss	Sexual Abuse – Assault
Support Groups	Traditional Teachings: numbers who are they?	Language Barrier Translation
On the Land Activities	Traditional Medicines – Harvesting	Workshops on Mental Illness
Fund Traditional Activities - support communities	Bring Youth together to create awareness on drug about / alcohol	Teen Workshops: budgeting, life skills
Prevention Workshops – sexual abuse / Assault	Elders to come together more	Younger Children Workshops
Elders Abuse	Recruitment Program	

Health Directors Input Into TNG – Health Team Work Plan

TRADITIONAL WELLNESS	<ul style="list-style-type: none"> • Traditional Speakers: <ul style="list-style-type: none"> ○ Baby baskets, dip net making, snaring, trapping, moccasin making, medicine making, making hides - the process ○ Pow-wow dancing – singing ○ Chilcotin songs – Roger, Cecil, Grant ○ Legends, life stories, sharing (media) • List of Guest Speakers: workshop on traditional medicines • Men’s Wellness: <ul style="list-style-type: none"> ○ Support group, AA, coming out of jail – circle ○ Meet court order requirements • Grounding: improve health, sleep, energy, equine ... (FNHA) • Sweat Lodge: Sauna – Polar Bear Swim • Parenting: Language – Tsilhqot’in • Set a net in the lake – winter time • Gun Safety • Fishing and Hunting Rituals • Basic Tsilhqot’in rituals
SOCIAL WORK PROGRAM	<ul style="list-style-type: none"> • Come to communities to talk about hospital procedures (triage), about TNG role as their SW – luncheons, general band assemblies, elders groups • Specific workshops and presentations of what TNG SW provides • Community identify translators

	<ul style="list-style-type: none"> • Provide brochures about services of the SW • Prevention workshops – addictions, elder abuse, domestic violence, post intervention suicide, sexual assault, mental health, family violence • Connecting with youth workers • Community social department • Individual Wellness – power of attorney, • Meet with HD about priorities • Aging Out – supported living • Connect with nurses – Scotties House in the area
DIETICIAN	<ul style="list-style-type: none"> • Tsilhqot'in cookbook with nutritional teachings • Nutritional education for head start – daycare • Tsilhqot'in elders gathering: camping in nation, funds from each band rather than sending elders to BC gathering, storytelling, ceremony on the land • Connecting communities for medicines drives • Irma / Hector: traditional teachings • Work - stormy – youth workers – sugary drinks and junk food
HEALTH PROGRAMS	<ul style="list-style-type: none"> • Workshops: personal wellness – (don't take it personally), debriefing • Training for staff: janitorial refresher • Health Director training: CHR, LPN, RN, NADAP, fun staff day, health fair day • Elder Wellness Sessions • Adults • Awareness topics • Chronic Illness – Palliative Respite: Chilcotin traditional teachings around palliative care, colleagues workshop at round lake, midwife training, doula support – pregnant / moms • Healthy Meals to Elders • Good Food Box ((Yunesit'in) • Conflict resolution • Lateral violence • Self-care • Choices program • Tsilhqot'in Language program – Traditional Laws and way of life
Health Programs Work-shop Priorities Based on Health Directors in put	<ol style="list-style-type: none"> 1. CHOICES PROGRAM (8 stickers) but this cannot be covered by the Nation, funding has to come from communities 2. CHRONIC ILLNESS – PALLIATIVE – RESPITE – chilcotin traditional teachings around palliative care 3. TRAINING FOR STAFF – Janitorial refresher 4. SELF-CARE

Tsilhqot'in Nation – Health Priorities 2018-2019

AREA	DETAILS
MWSU	<ul style="list-style-type: none"> • NADAPP – Bring workers together and provide more training and support • Confidentiality Training for all Workers • Basic Counselling Training for workers • Self-Care
TW	<ul style="list-style-type: none"> • Traditional Healer Funding (have to use by September 30th, 2018) – HD must submit a report to Connie on use of this funding prior to funds being released.
PC	<ul style="list-style-type: none"> • Home Care Funding: Hire a coordinator to develop plan re: funding 2019 – plan for retention of RN's • Home Support Worker – Training for current workers
ELDERS	<ul style="list-style-type: none"> • Hire the Elders Worker – new fiscal year – secure funding for this position
YOUTH	<ul style="list-style-type: none"> • Find Funding for Child and Youth Clinician
PLANNING	<ul style="list-style-type: none"> • Pandemic and Emergency Management Community Level Planning • Human Resource Training for Health Directors

Community Health and Wellness Plans

- Individual Community Health and Wellness Planning – where are communities at

Yunesit'in	Dwayne: Yunesit'in 5 yr. plan expires this year Have a home and community health plan, but I have not shared that information very broadly. This is still a good document for those 5 – 10 year plans.
Xeni Gwet'in	Annie : Xenigwet'in - expires in 2019, started the process of planning, been working on the financial aspect of the plans. Would like to hear from my community on what they want in the plan.
Tl'etingox	Pam – Anaham – Health Plan – will be touching base with finance manager - however on the other side, been doing our CCP – with health - a few weeks – going to PG for planning with staff on CCP – health .
Tl'esqox	Teresa Johnny – just needs to update it...not sure when it expires.
Tsi Del Del	Dora - Health Planning at a standstill- have not found a consultant that I am comfortable with.... 5 yr. health plan expires in a bit. Need help with the funding portion of it.
?Esdilagh	Thelma – still needs to do work plan, has been working on it

Discussion - Pharmacare – Health Benefits – by Megan Dark – Dietician

- Connie: if you are getting denied for prescriptions that previously were funded – make sure you go through the appeal process.
- Megan: If you actually look into the drugs that are or not covered the changes are huge, diabetic meds – is huge – for those meds the good meds to be covered you have to first fail on the other meds covered by pharma care. BC now has the worse drug coverage in Canada
- Patricia and Tristian (NP in community) – getting training – so they have better ways to deal with the pharma care transfers.
- Megan write a letter – act as an advocate for the communities on this pharma care issue

Action Items:

1. Connie set up Pandemic Planning Session with FNHA Rep and HD from 6 communities and include Ulkatcho
2. Connie organize setting up Elders Study in Each Community
3. Connie - get \$75K – hire RN to get work done regarding Home Care/ Elders/Nursing
4. Megan Dark – Dietician – draft a letter on behalf of the Nation's communities (act as an advocate) and send letter to Loretta to advocate with FNHA – letter from communities – not from TNG – has to be community driven
5. Connie to invite Billie Jean M – up to meet with communities on their individual community health and wellness plans.
6. Connie asks FNHA come to do a presentation on the Pharmacare changes to communities.
7. Vicki To finish Draft Report and send off to Connie for final edits.