



A newsletter produced by Prince Albert Grand Council's Department of Health and Social Development

The Heart Beat



Winter Issue 2018

Signing of Land Use Agreement Paves the Path for New PAGC Health Clinic

Prince Albert Grand Council's Department of Health and Social Development (H & SD) is ready to turn the vision of a PAGC-owned and operated health clinic into reality.

The Medical Centre of Excellence will eventually include a primary care and walk-in physician clinic, a dental clinic, optometry services, laboratory and diagnostics, a retail and wholesale pharmacy, and a diabetes centre. Technical services will include TeleHealth, secure video-conferencing, secure instant messaging, and physician clinical software services. Advanced diagnostics, such as a CT Scan and MRI services as well as other revenue medical services tenants, will also be considered in later phases.

Mandated by a PAGC Chiefs' Resolution, signed on September 11, 2014, the Medical Centre, estimated to cost \$6.2-million in construction and fit up costs, is part of PAGC's long-term vision to establish a hospital. Some of the revenues generated from the clinic will be deposited in a Hospital Trust Fund.

In reference to the Treaty Right to Health and its Medicine Chest clause, PAGC Grand Chief Brian Hardlotte said it is necessary for First Nations to have control over its own institutions.

"The fact that First Nations continues to sit at the bottom of every social indicator is something that needs to change," said Grand Chief Brian Hardlotte.

"We believe that if we truly want to attain better health outcomes for our people, then it is necessary that we occupy the field in all areas of professional medical services, and we're pleased that this medical centre marks an important step in this direction."

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Cover photo: Artistic rendering of new PAGC Medical Centre

Message from the Director



Welcome to another issue of the *Heart Beat*. First of all, I want to acknowledge the tremendous work that our communities are doing in the area of health. It's a privilege to work with such a wonderful group of professionals and managers who are dedicated to improving the health outcomes of their communities.

At the same time, it is not an easy task as we continue to face challenges in many areas, such as children and youth care, especially with issues related to mental health and wellness, as well as programs and services for adults and the elderly. Yet, the communities have told us their needs and what they wish for their communities, and we have come to clearly understand the challenges that exist and what needs to be done.

We want to provide our communities with knowledge and the second-level support that will allow them to do their job on a day-to-day basis. But we also recognize their desire to make their vision a reality, which is often linked to funding and infrastructure. To that end, I am pleased that we have had many accomplishments in this area and more on the horizon. For instance, Shoal Lake Cree Nation has received a medical centre, as well as a daycare and HeadStart centre. In addition, we are working with Red Earth Cree Nation to build a brand new health centre, as well as a new wing for Hatchet Lake Denesuline Nation's health centre, which is estimated to cost about \$1.5-million. In the near future, we plan on building a new wing for Sakwatamo Lodge Family Treatment Centre.

We are proud of the progress we have made and we are looking forward to one particular project that has been in the works for several years now. We believe that the PAGC Medical Centre of Excellence, as presented in this issue, will have the greatest potential to help all of our communities. It will be a resource that has never been available to our First Nations. Its potential to be a support to all of our communities is something we are very excited about. We believe that the greatest thing that could happen is our ability to provide a better quality of health care to our communities. And, if we could achieve that, then we all will have been successful.

With that, I hope you enjoy this issue of the *Heart Beat*. Please feel free to contact us with any comments and suggestions.

Thank you. Pedomaya. Ninaskomin. Marsi Cho.

Sincerely,

A handwritten signature in black ink that reads "Al Ducharme". The signature is fluid and cursive.

Al Ducharme
Director of Health and Social Development
Prince Albert Grand Council

One of the final hurdles was finding a home for the 20,000 sq. ft. building. That was cleared on October 12, 2017, when the Peter Ballantyne Cree Nation (PBCN) signed a Band Council Resolution with PAGC for a 16-year Occupation and Use Agreement. Now that it has been approved, PAGC can proceed with the planning of the construction phase of the building, which will be located next to the current H & SD office situated south-west of the Senator Allan Bird Memorial gym.

PAGC Vice Chief Christopher Jobb played a key role in negotiating the agreement with PBCN.

“We are pleased that our long-standing relationship with PBCN continues and that we’ve received the approval from Chief Peter Beatty and the PBCN Council to stay on the Joseph Custer reserve for a long period of time, and for part of that land to be designated to the home of our new medical centre,” said PAGC Vice-Chief Christopher Jobb.

“Twelve bands have come together to be a part of this project. It’s so unique and it will be something that we can take ownership of. It’s now up to us to do what we need to do in order to determine our own future in health,” he added.

“It’s now up to us to do what we need to do in order to determine our own future in health,” said PAGC Vice-Chief Christopher Jobb.

Led by PAGC’s Health Commission Chiefs as well as the H & SD Health Directors, PAGC H & SD’s Director of Health Al Ducharme said that this approach contributes significantly to the overall health and well-being of the northern communities.

“We are not trying to create a health system outside of the provincial one,” said Ducharme, who says that continued partnerships with the newly-amalgamated provincial health region will be key to its success.

“We want to be part of that larger system, and we want our communities to come to our facilities and be assured that we are offering the same level of care to them. We will be operating within that same



Livecare will bring new technology for the delivery of medicine, using Telehealth, the Internet and newer technological tools

system with all the same safeguards and abilities to provide the necessary care, equipment, people and infrastructure,” he said.

“The significant difference here is that we will have a First Nations’ voice in how those services will be provided and bring forward the voices of our First Nation communities, which have been missing in the process. To this end, we are confident that this medical centre is the best solution.”

PAGC has contracted a private company, Livecare, to manage the project and its operations. The BC-based company has extensive experience in improving “the disparate physician services shortfall in rural communities with urban physician services.” Most recently, the company has worked with the Nisg’ga Nation in BC to provide them with healthcare service through a partnership with the Nisg’ga Valley Health Authority.

A strong supporter of First Nations self-determination, Dr. Amit Mathur, Chief Operating Officer of Livecare, said that his team of doctors is looking forward to working on this new project.

“PAGC has shown leadership by saying they want to make a change and improve health care service,” said Dr. Mathur.

“That’s what enticed us, and, frankly, that’s why we are more than happy to be partners with PAGC.

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ADI Hosts Workshop on Indigenous Youth Mentorship



L-R: Shirley Woods, Joanna Thich, Jennifer Oldford, Marsha Fiddler, Dr. John McGavock, Amanda Henry and Eva Ross.

In early January, H & SD's Aboriginal Diabetes Initiative (ADI) hosted a province-wide obesity education event with funding from Indigenous Services Canada.

For two-and-a-half days, 40 community workers and health care professionals from across the province gathered to learn more about factors that affect children's health, such as the influence of the school environment on children's food intake, and the impact of gut microbiota on obesity.

Dietitian Jennifer Oldford said the ADI team wanted to focus on new approaches to working with children and youth.

"We know that we develop most of our habits early on in life, so the idea is that if we can have a positive influence on children's lives, then those habits will stay with them in the long term, and hopefully help decrease their risk of developing some of the chronic diseases associated with being overweight and obese, such as Type II diabetes, high blood pressure, heart disease, and high cholesterol," she explained.

The event featured a keynote presentation by Dr. Jon McGavock, a researcher and scientist at the University of Manitoba and the Children's Hospital Research Institute. He spoke about the Indigenous Youth Mentorship Program (AYMP), which is an after-school program delivered by high school

students for elementary school students.

It is based on an "Indigenous model of resilience," which is the key difference between his program and mainstream ones.

"More Indigenous youth are being diagnosed than other Canadians and that has a lot to do with our colonial history and the residential school atrocities. So, programs like this one that focus on resilience and integrating culture could play an important role in the decolonizing effects that we have seen with past generations," explained McGavock.

The program runs for 20 weeks over the course of a school year and it is usually run by health leaders in the community.


A typical high school students leave their classrooms early and go to the local elementary school. Then they meet up with the grade 4 students and walk them to the cafeteria or the gym where they have a healthy snack. When they are finished, they take part in low to high intensity activities for 45 mins, such as tag games, and then might play some traditional games, ending off with another game of dodgeball or another activity. Some communities play science and engineering games, or read to one another. Each session ends with a sharing circle.

Oldford said it is important for the ADI to take a more holistic approach to preventative strategies.

"There are a lot of misconceptions where many people think that if someone were to eat less and move more, then they wouldn't be overweight or obese, but we are learning that it's more complicated than that."

Public Health Nurse Marsha Fiddler is excited about bringing this program to the schools at Cumberland House Cree Nation.

"We start activities in our communities but they don't last long. But one of the things I noticed with this program is that involves a mentorship, so if we could get more mentors in the community to help the younger ones, I think it could last longer than other programs we've had before," said Fiddler.

"Some of our youth are already involved in activities, so I think I'll start with them and then hopefully it will expand with more and more participants." 

Preparing Future Fitness Leaders

Over the past year, H & SD's Aboriginal Diabetes Initiative (ADI) team have been focussing on ways to promote physical activity as a way to ensure a healthy lifestyle and help to prevent and manage Type II diabetes in PAGC communities.

Open to new opportunities, the team booked Joel Pederson from Fitness 2J2 to deliver a fitness training workshop, which was provided through a sponsorship of \$10,000 from Affinity Credit Union.

Made available to each of the H & SD communities, nine participants from Montreal Lake, Red Earth, and Cumberland House Cree Nations attended the three-day workshop at the Margo Fournier Center.



Fitness 2J2's Joel Pederson and Montreal Lake Cree Nation's Matthew Cote

"We find that physical activity is one of the things we're lacking in our communities," said Dietitian Joanna Thich.

"So, we were hoping the participants would take the information and the knowledge they gained from this training and take it back to the community and, hopefully, inspire them to start fitness groups of their own or bring fitness into their everyday jobs," Thich added.

Joel Pederson, a member of Fond du Lac Dene Nation, has an extensive background in sports and fitness that traces back to his involvement in sports from a young age. Earlier in his career, Pederson

went on to serve as an Infantry Sergeant Major with the Canadian Armed Forces and moved on to become a Police Sergeant with the Saskatoon Police Service.

Now that he is retired, Pederson is transforming his passion for fitness into a larger social cause.

"Recognizing the fact that there are a number of people in our communities who are inactive is concerning to me, and if there's one way I can help out, even if it is helping out one person, then for me, that's success," said Pederson.

The main goals of the program are to help students gain strength, enhance sports performance, and improve their functional lifestyle. It is designed to be inclusive by incorporating scalable exercise for all ages, abilities, and genders. He begins with an introduction to the theoretical components of exercise, including physiology, the cardiorespiratory system, anatomy, motor movements, the skeletal system, and energy system. From there, he instructs the students on how to develop their own workout programs.

"We cover a lot of material. We are also able to transition it into an actual physical workout, so there is a transference of information into the practical aspect," he added.

Matthew Cote, a Phys-Ed teacher from Montreal Lake Cree Nation, participated in the workshop. He teaches grades one to nine at the Senator Allan Bird Memorial School.

An "all-around athlete," Cote said he has taken other coaching workshops but none of them focussed on the fitness component.

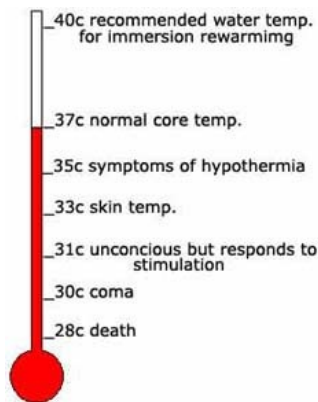
"His workshop taught me more technique to what I'm going to teach my students. It's different from coaching clinics, which just teaches you how to do drills," said Cote.

A clear admirer of Joel's teaching style, Cote said he plans on reviewing and refining his current modules.









"Joel is an awesome person - he does anything and everything he can to bring about best in anyone and everyone. My plan is to orient more of the fitness into my gym classes and teach them more about the techniques and why we do them." 🍌

How to Prevent Hypothermia

The dangers of low body temperature happen when you are in cold temperatures too long. Hypothermia can occur at any time of the year. Normal core body temperature is 37°C. When the body temperature drops below 35°C, you have Hypothermia. Elders and children are at greater risk.



CAUTIONS IN FIRST AID FOR HYPOTHERMIA

-   DO NOT use radiant heat (fire, electric heaters)
-   DO NOT rub affected area
-   DO NOT provide person alcohol
-   Avoid putting person in the bath

What can I do to help myself or others?

- Best home remedy is avoid going outdoors when not necessary.
- If you must go outside, dress properly.
- If you begin to show signs of hypothermia, go indoors.
- Remove wet clothing
- Warm with extra clothing, blankets or heating pad.
- Use your own body heat to warm the other person.
- Do not rub exposed areas.
- Offer warm liquids
- Travel with a partner for safety and let people know where you are going.
- Prepare a winter survival kit with you on trips
- Check weather conditions

11 Safety Tips for Snowmobile Safety

Snowmobiling is a popular winter activity. Think STAY WARM and SAFE every time you head out.

1. WEAR A HELMET!
2. Be careful driving in areas you don't know well
3. Operate a machine that is the right size .
4. Don't pull kids behind you on slides or carpets
5. Travel at safe speeds
6. Wear proper clothing
7. Only carry one passenger with you
8. Ensure headlights and tail lights work for others to see you
9. Carry a First Aid kit
10. Children and teens under 16 years old should not drive your snowmobile.
11. NEVER DRINK ALCOHOL while driving a snowmobile



NITHA Announces New Data Sharing Pilot Project



L-R: LLRIB's A/Health Director Lisa Mayotte, Stanley Mission's Health Director William Roberts, former CEO of MCRHR Andrew McLetchie, PAGC's Health Director Al Ducharme, NITHA's Executive Director Mary Carlson, and Northern Medical Services's Finance and Admin Manager Olena Schemenauer.

The need for better collaboration among healthcare workers and the need for improved efficiencies around client medical record management has recently resulted in a new data sharing agreement involving First Nations in northern Saskatchewan.

The partnerships brings together PAGC, LLRIB, Northern Intertribal Health Authority (NITHA), and the former regional health authorities Mamawetan Churchill River Health Region and Kelsey Trail to allow First Nation-employed healthcare workers to access the Electronic Medical Record (EMR) system currently used by physicians and off-reserve care providers.

In December 2018, NITHA's Executive Director Mary Carlson made the announcement with representatives from each of the signatories at a formal signing ceremony.

"Today is a big day for all of us. It's a giant step forward to be able to sign this agreement with the province, which will allow for the sharing of their EMR system and its data while respecting OCAP principles and assuring the autonomy of our First Nations," said Carlson.

"Our staff have worked long and hard to get where we are now. In particular, eHealth Advisor Charles

Bighead has been at the tables since day one, training everybody on it, as well as obtaining the funding needed to make it happen."

The signing of the agreement formalizes the rules of how client medical information and community-level aggregate information will be protected, as well as how it may be accessed, used, and disclosed.

Physicians have used an EMR for a few years during "Doctor's Day" clinics on the reserve; however, First Nation-employed nurses could not access the EMR which effected continuum of care.

Through the new agreement, there will be one record per patient that will help to pull together information from across different jurisdictions and reduce duplication.

It will also be integrated with other clinical systems, such as the pharmaceutical and laboratories systems, and allow for timelier sharing of health information across jurisdictions, which will ultimately lead to improved patient care.

Health Director Al Ducharme said that there are many benefits the agreement will bring to the long-term management of health information and population health.

Through the new agreement, there will be one record per patient that will help to pull together information from across different jurisdictions and reduce duplication.

"We have a number of communities who are very interested in ensuring that the sharing of health information for the betterment of our communities. It has always been our goal to manage our own health care, including our own statistics, and this agreement signals a step in this direction," said Ducharme.

"We appreciate the opportunity to engage in a cooperative and more collaborative relationship with our current partners, and we hope we are setting a precedent for the future for many other First Nations." 🍀

They are focussed and want to get this done, and our job is to help PAGC get there by lending all the experiences we have in running hospitals, clinics, and diagnostic centres throughout every step of the way.”

Al Ducharme said that Livecare seemed like a “natural fit” because of its successes with newer technology and their past work with other First Nations in Canada.

“We wanted to work with a company that not only knows medicine from the ground up but a company that is able to take that knowledge and transfer it into a new technology for the delivery of medicine, using Telehealth, the Internet and newer technological tools,” said Ducharme.

“PAGC has shown leadership by saying they want to make a change and improve health care service. That’s what enticed us,” said Dr. Mathur.


Dr. Mathur added that technology, such as Telehealth, is one of the best ways to provide continuity of care.

“We see its value in every space, whether it is in pharmacy or long-term care homes or in family practices,” he said.

“So, having that technology background of EMRs, integrated with telemedicine -- even a personal health record where a member can manage their own health and go from one community to another and not have to start explaining their entire health history again -- will make a difference in the quality of health-care services and delivery.”

A primary component of Livecare’s contract is to build capacity that will eventually allow a transition of its management and control to PAGC.

It will also ensure that PAGC community members will have opportunities in employment and training in the field of health management and pharmaceuticals.

A sod-turning ceremony will take place in the Spring. 

H & SD News Briefs



On January 29th, Tobacco Control Coordinator Abigail Kaptung’ei and her team held a contest during their awareness campaign for National Non-Smoking Week. Go to H & SD’s Facebook Group Page to check out the winners.



On January 9th, PAGC held a Memorial Feast and Round Dance for the late Leonard Hardlotte, Ritchie Bird and Vince Robillard at the Senator Allan Bird Memorial gym.



Prince Albert Grand Council Health & Social Development Head Office

Chief Joseph Custer Reserve #201

851 - 23rd Street West

P.O. Box 1775

Prince Albert, SK S6V 5T3

Tel: 306-953-7283 Fax: 306-763-6611

www.pagc.sk.ca/health/

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