



Q'wemtsín Health Society

Annual Report

Fiscal Year

2013-2014

Providing Services To:

Tk'emlúps te Secwepemc

Skeetchestn Indian Band

Whispering Pines/Clinton Indian Band

ANNUAL REPORT 2013-2014



EXECUTIVE SUMMARY

1

PROGRAM STATISTICS

2

SKEETCHESTN MATERNAL CHILD HEALTH STATISTICS

3

TK'EMLÚPS & WHISPERING PINES MATERNAL CHILD HEALTH STATISTICS

4

2013-2014 NEWSLETTERS

5

COMMUNITY-BASED REPORTING TEMPLATE 2013-2014

6

Q'wemtsín Health Society (QHS)
Annual Report for Fiscal Year 2013/14

Executive Summary

It has been a very exciting year with the transition from FNIH to the FNHA. We have witnessed some positive changes and we appreciate and agree with the wellness philosophy. The transition from a medical-treatment model to a client-focused care model of holistic wellness, to encourage self-care and improve self-worth makes sense. The idea that we as leaders should model self-care is brilliant, and the concept that clients learn better when participating in fun events, connecting with family and other people are two great examples of how FNHA really "gets it".

QHS has been involved with all levels of the transition. We host the Secwepemc Health Directors HUB which includes 12 Health Directors representing 16 out of the 17 communities. I am the co-chair of the Secwepemc Health Caucus for our nation which includes the 17 Chiefs and the health leads for each of the communities. Since the development of our caucus as a nation we identified health priorities for our nation health plan and have done a lot of work together around elder care and mental health. I am also a board member of the FNHDA representing the Interior region. I have been involved at the regional table in developing the regional health plan, and also participated in the development of the Interior Health Authority (IHA) LOU with the nation. My participation at these tables keeps QHS current and involved with transformation.

QHS has collaborated with many organizations and communities throughout the year to discuss issues, problem solve, build relationships, and plan delivery of services. QHS has worked in partnership with our neighboring communities on many projects. We deliver the COHI program to three additional communities as well as the three we serve. In partnership with the IHA, FNIH, and the Secwepemc Health Directors we developed the Secwepemc Communicable Disease protocol, which was signed in 2010 and is to be reviewed annually by all three parties. QHS has been participating in the Secwepemc Injury Surveillance project since its inception in 2004 and has hosted and managed several budgets and/or projects for the nation.

In partnership with IHA, Q'wemtsín Health has been delivering Primary Health Care services since 2007. Presently IHA provides a Nurse Practitioner and MOA two full days per week. Initially when the LOU was signed in 2007 there was also four hours per week of GP service provided. Unfortunately the GP retired and the health authority has not found a replacement resulting in many of our clients being left without a GP. This has become a hardship for many including those that reside on the Kamloops Indian reserve. The Kamloops municipal transit system does not come over to the reserve, so transportation becomes an issue for citizens to get to any type of clinic or find a new physician. Therefore we have a very long list of clients in need of a family GP who basically end up in emergency in order to receive care from a physician.

QHS has received many compliments from the IHA about the delivery of services here at QHS, and it has been said that this is one of the best primary health care sites in the Interior. Over the years of operation we identified a need for mental health services, dental care services, and had many requests for alternative medicine. In addition to the mandated public health and homecare services we also provide mental health counselling, dental clinic services and we offer naturopathic medicine for clients that meet the eligibility criteria. The benefit of having all the different disciplines of the health care team in one location is smooth delivery of services and excellent follow up to care. I have had executives from IHA ask me "why Primary Health Care is so successful at QHS". My answer:

- We have broken down barriers and built trust and rapport. It is a culturally sensitive site, it's a safe place, and it belongs to the community members.
- Lots & lots of laughter!!!
- Improved access, close to the community
- Clients like the convenience of having all services in one place
- Excellent staff delivering care as a "TEAM" including IHA staff
- Privacy, confidentiality are made a priority

We take pride in what we do here and we care how we do it. QHS has been gifted with outstanding staff that work hard to deliver the best care possible and sincerely care about their clients.

While the staff are busy delivering great services the Board of directors are continuously finding ways to ensure that QHS operates efficiently and does so while meeting high standards of care. Our five year evaluation was submitted in September of this year, and we are using the recommendations to guide our work and planning for the future. We also contracted an expert in privacy to assess our operations, assist in developing policies and train the staff and board about the importance of protecting people's privacy and information. It was an excellent learning experience for all of us and we are confident now that we are protecting information properly and according to legislation.

Another big project this year has been the Skeetchestn Health Clinic. QHS has sent health care staff to Skeetchestn since 2001 to deliver programs and services from the band office. This year Skeetchestn provided a house, and in partnership with QHS converted the upstairs into a small community health clinic. Now Skeetchestn has a reception area, small exam room, nursing office, mental health counselling office, community kitchen and of course washroom facilities and waiting area. It offers the client's privacy which was impossible at the band office where everyone knows everyone and could see where they are going, and who they were seeing.

Since the opening in January 2014 the community members have made it their own and the atmosphere is a cheerful warm place to receive services and sometimes just visit and connect. Besides primary health care services the center has become alive with activities around the kitchen table. One gathering provided space for those that attended the diabetic conference in Penticton this year to share what they learned with other diabetics and community members.

The kitchen was ringing with laughter and the incidental teaching that occurred with the staff in the room was extremely affective. The community members as well as the QHS staff are all very grateful for this healthy safe space to gather and work in.

Not only was it an exciting year, it has also been a very busy year. With these three extra projects, our ongoing annual events, the day to day operations and keeping up with the transition and now transformation the year has flown by. To provide the reader with a snapshot of what we accomplished here at QHS please find the following enclosed:

- QHS Program & Services Statistics 2013/14
- QHS News Letter (April 2013 to March 2014)
- CBRT 2013/14 for each community
- QHS audited Financial Statements March 31, 2014

In closing I would just like to thank the First Nation's and Inuit Health Branch for all their support over the years and welcome to our new First Nations Health Authority.

Respectfully,

Colleen LeBourdais, R.N., B.S.N.
Health Director

Q'WEMTSIN
HEALTH SOCIETY

PROGRAM &
SERVICES

STATISTICS

2013/14

1. Home & Community Care

- 196 clients are seen regularly (TIB 126, Skeetchestn 53, W.P.10) Most clients have chronic conditions and we have a few post op or discharged clients that may need Dr.'s orders followed ie: drsg changes, stoma care, etc.
- 12 clients receive home support from the personal care workers regularly along with a few that need care periodically
- Medic Alert–There are 19 clients that have medic alert
- Bath / Foot Care Program– 6 clients are on the bath program (5 on waitlist)
- 35 clients are on the foot care program (TIB 25, Skeetchestn 6, W.P. 4) H.C. staff have been trained and certified to do foot care. This improves access for those client's that have transportation issues etc.
- QHS has a registry of 16 chronic conditions. Several clients have more than one condition. Cardiovascular, diabetes, and arthritis have the most registrants.
- Screenings provided annually through the kidney association, Seabird Island diabetic team, mobile mammograms, health fairs and other events
- Referrals are sent to external organizations as required ie: people in motion, occupational therapy, etc.

2. Community Health Nursing

A. Circle of Life Program

- The purpose of this program is to provide professional and confidential support, advocacy, and guidance to the child-bearing women and her support system throughout the pre & postnatal period. To be eligible the clients must be a permanent resident on in one of the three communities

- As soon as mother is aware she is pregnant she may join the program until baby is 18 months
- Stream will determine how much time the nurse spends with the mother one on one and other referrals such as mental health counselling and/or treatment if necessary
- All registered mothers receive a \$50.00 gift certificate every month
- Upon completion of 18 month immunizations will receive a portrait gift certificate

B. Public Health Services

- Services are legislated through Public Health Act and is the organized effort of the health sector to protect and improve the health and well-being of the population and includes the following services:
- Immunizations
- Communicable Disease Control
- Seasonal flu Vaccines
- TB monitoring
- School Health (see below for details)
- Contact Tracing

C. School Health Program

- QHS provides school health at Skeetchestn community school and the Skelep school of Excellence.
- School programs include health education, screening, immunizations, and girls/boys personal growth and development groups (girl power & 2B boys)
- Kindergarten readiness/screening

Details and statistics can be found on the following pages for each community and have been provided by the Community Health Nurses.

2013/2014

SKEETCHESTN STATS FOR:

- **Pre/Post Natal Care**
- **Communicable Disease Control (CDC)**
- **Skeetchestn Community School**
- **Screening & Community Events**

Stats (April 1, 2013-March 31, 2014) from Diane Procter, CHN

Skeetchestn 1027 encounters, 232 members served

TIB, WP and Skeetchestn 1384 encounters, 426 members served

Encounters by Visit Type – Almost half of visits were at health center followed by home visits and school visits.

Graphs attached for breakdown of clients seen by age.

Skeetchestn - Pre/Postnatal

10 participants on pre/postnatal (Circle of Life) program

8 babies born

1 set twins – delivered pre-term.

All babies breastfed at birth.

No one under the age of 19 on the COL program for Skeetchestn

Communicable Disease

154 Members immunized SIB. (this includes all vaccinations)

97 members received influenza vaccine at SIB

4 members provided with TB skin tests

Skeetchestn Community School

Four Grade 6 student this year, received all immunizations.

Four Grade six students received TB skin tests.

TB screening for school staff complete. 100% screened.

Numerous Sessions at SCS including:

Handwashing K-2 (7 attendees)

Handwashing Grade 3-4 (5 attendees)

Handwashing Grade 5-7 (7 attendees)

K-2 Private Body Parts and Personal Safety - (8 attendees)

Grade 4 Girls - puberty and hygiene (2 attendees)

Grade 4 Boys – Puberty and hygiene (2 attendees)

Grade 4 girls and boys – Substance abuse (4 attendees)

Grade 5-6 girls – puberty (5 attendees)

Grade 6-7 boys- Puberty, sex education, STI's – (3 attendees)

Grade 8-12 boys – Sex ed, STI's (3 attendees)

Girls Group – Five after school sessions for girls grade 2-5 inclusive. (8 girls)

Girls Group – 3 lunchtime girls group (8 grls)

Anaphylaxis teaching – Skeetchestn School Staff (5 attendees).

Kindergarten Day

Held in Skeetchestn May 8th. K-2 class attended plus preschool and community members. Hearing screenings IHA done. Total attendance about 30.

Baby Welcome

8 babies, 6 wrapped. Around 60 people attended.

Health Fair

Provided cholesterol screenings and glucose checks at annual Skeetchestn and TIB health fair.

Families and Tots Group – drop in, COHi provided toothbrushes and screening, community health nurse available. 13 participants.

Mammogram Day – Skeetchestn – Mobile screening. 17 women screened.

Kidney Screening – September 2013. 14 people screened.

Encounters by Type
 Qwentisin Health Society
 Reporting Period

Total Encounters	1027
Total Members	232
Encounters/Member	4.4

# of Groups	20
# Sessions	104
# Individuals Attending	58

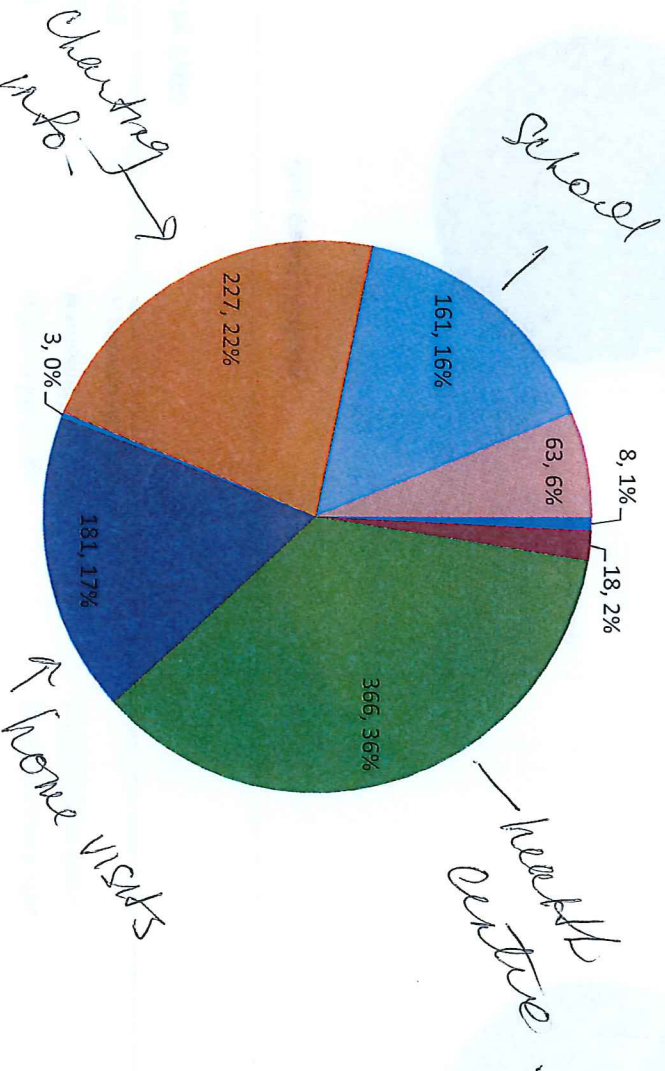
April 1, 2013

March 31, 2014

Encounters by Staff
 Diane Procter, RN, BSN,

1027

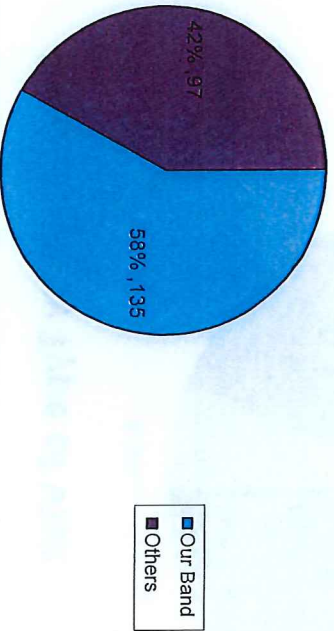
Encounters by Type of Visit



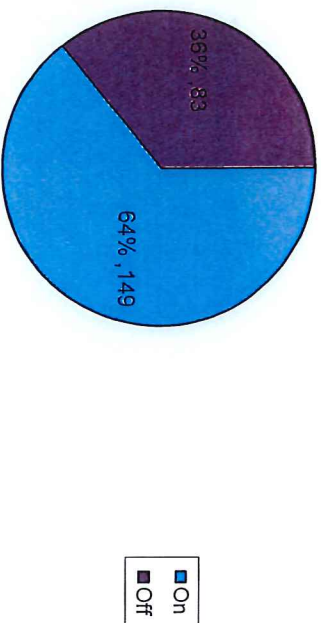
- Field Visit
- Home Visit
- School Visit
- Group Meetings
- Hospital Visit
- Telephone (Community Member)
- Health Centre Visit
- Information Entry

Encounters by Type

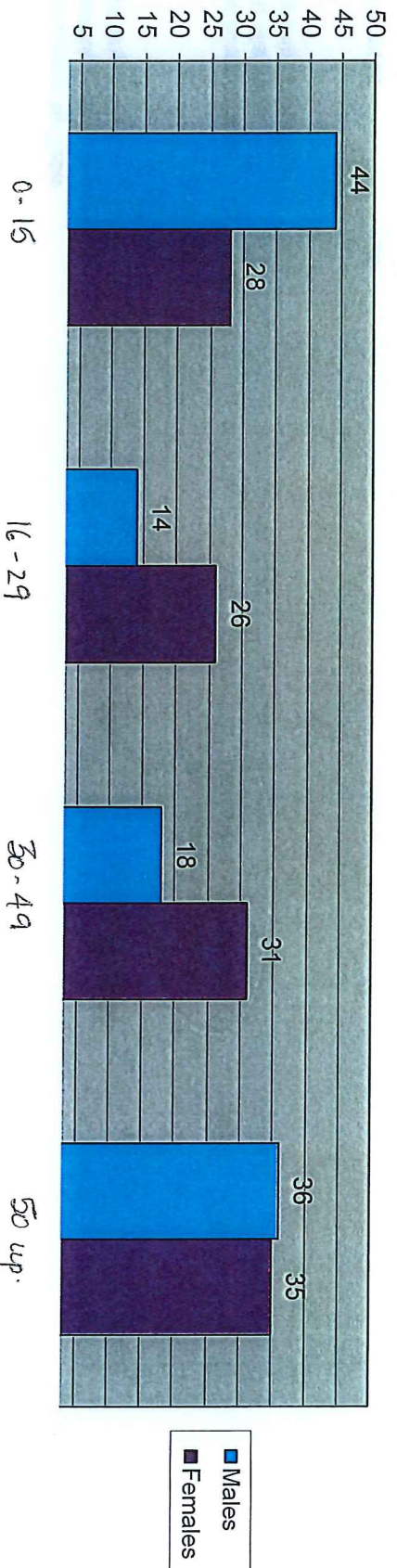
Our Band / Others

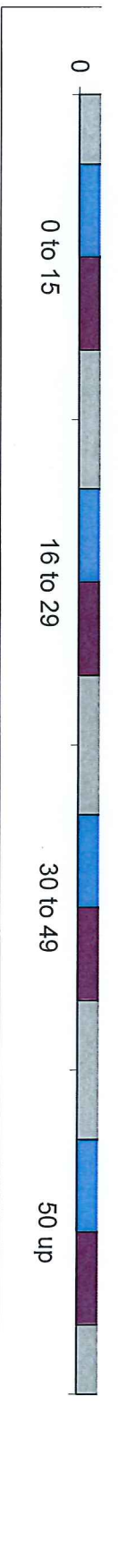


On/Off Reserve

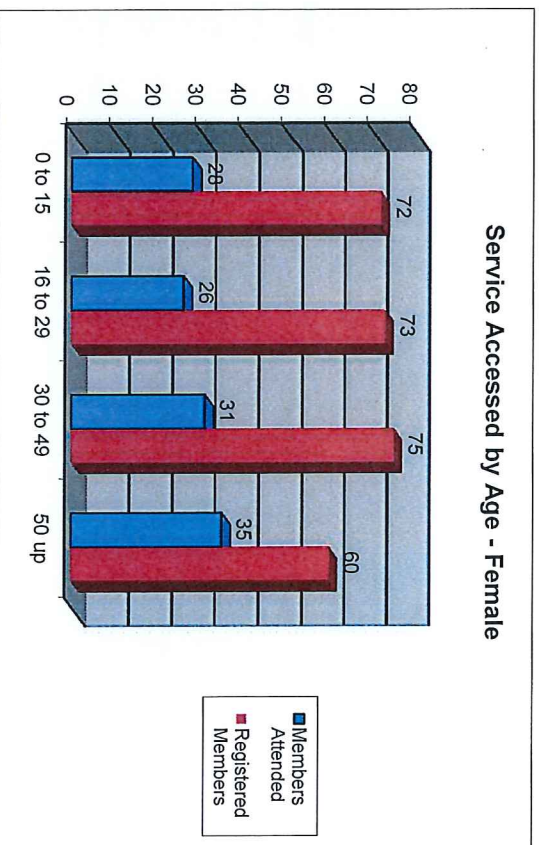
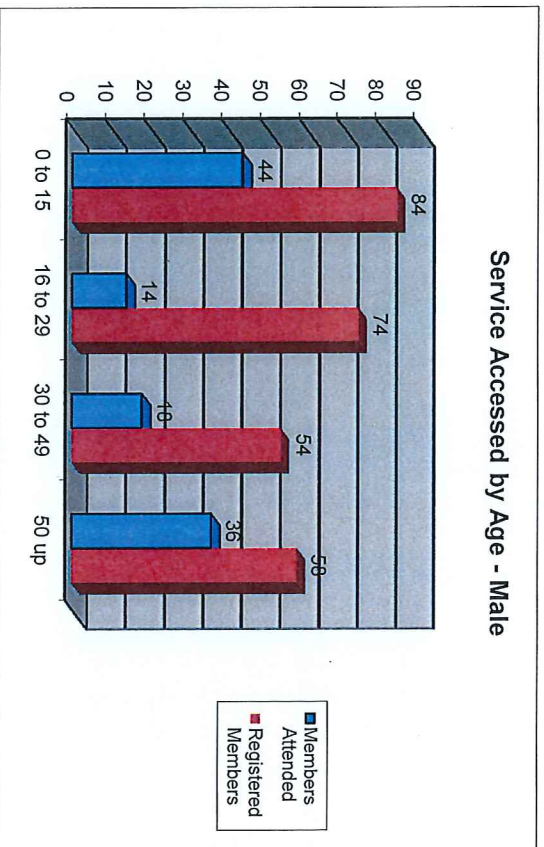


Age Group and Gender





Encounters by Type



2013/2014

TIB & WP STATS FOR:

- **Pre/Post Natal Care**
- **Communicable Disease Control (CDC)**
- **Skeetchestn Community School**
- **Screening & Community Events**

Stats (April 1, 2013-March 31, 2014) from Sarah Bennett, CHN

TIB /WP –1660 encounters, 424 members served

TIB - Circle of Life

10 babies born

10 breastfed at birth

6 babies between 5 lbs 10 oz. – 8 lbs 11 oz.

3 babies over 8 lbs. 11 oz.

1 baby under 5 lbs. 9 oz. (one month premature)

6 prenatal families currently on program

WP - Circle of Life

1 baby born

All were healthy weights

No prenatal families on program at this time

Total Participants

36 participants in the COL program in total for April 2013-April 2014 from TIB and WP (not counting Skeetch) (2 are duplicated due to having two children on program under 18 mos of age)

No one under the age of 19 on the COL program for TIB and WP

Was successful in the application to the BCAA/United Way car seat program – we received 15 convertible car seats to give to the families in the Circle of Life program.

Communicable Disease

All Vaccines

386 Members immunized at TIB

33 Members immunized at WP

57 at Q'wemtsin Health Society (staff and clients whose charts do not have a community attached)

Influenza Vaccines

249 Members provided with influenza vaccine at TIB

28 Members provided with influenza vaccine at WP

43 at Q'wemtsin Health Society (staff and clients whose charts do not have a community attached

TB skin tests

57 Members provided with TB skin tests (TIB)

2 Members provided with TB skin tests (WP)

12 Members provided with TB skin tests (QHS)

(See immunization coverage report for other stats regarding immunizations)

Skelep School

I have been assisting Christine with getting all children caught up with their immunizations at Skelep School throughout the year. See Christine's stats for more details regarding immunizations at Skelep

Little Fawn Daycare (Received folder in Sept. 2013 explaining role of CHN and offering services)

Vision screening from IHA (public health vision screening program)

Immunizations, Influenza vaccines, and TB skin tests done for daycare staff

Hand washing with the kids in the 3-5 room

Puss and Boots Daycare (Received folder in Sept. 2013 explaining role of CHN and offering services)

Little Fawn Nursery (Received folder in Sept. 2013 explaining role of CHN and offering services)

Vision screening from IHA (public health vision screening program)

Children will get hearing screening from IHA audiology at Kindergarten Day

Immunizations, Influenza vaccines, and TB skin tests done for Nursery staff

Hand washing with the kids (Sarah and Christine)

Kindergarten Day

14 children (including LFN, and Puss and Boots Daycare) at kindergarten day on May 22, 2013 (audiology (IHA), COHI, immunizations, development screening), 2013 kindergarten day to be done May 7, 2014

Wednesday, April-02-14

Stats (April 1, 2013 – March 31, 2014)

Christine LeBourdais, CHN

TIB/WP – 654 encounters, 323 members served

Kidney Screening Clinic – 45

Mammogram Clinic – 22

TIB Health Fair – 48 filled out satisfaction surveys

WP/CIB Health Fair – 10 filled out satisfaction surveys

Events attended as First Aid – 4 including Skeetchestn Health Fair

Girl Power and 2BBoys planned to start April 2014

Skelep School of excellence

Hearing Screening – 32

- 5 referred to IHA Audiology

Assisted IHA Vision Screening – 18

- 3 referred to Optometrist

Grade 5/6

- Reproductive education – 14
- Communicable Disease Education - 11
- Blood Borne Pathogens - 11

Hand washing

- Kindergarten – 19

Immunizations

Total students in Sk'elep School of Excellence- 124

Total in need of immunizations at beginning school year – 99

Total immunized out of 99 as of this date – 60

- Other immunization blitz planned for May 27 and June 19, 2014
- TB Skin tests planned for April 22, 2014.

Staff immunizations – Flu and TB testing done

Wednesday, April-02-14

Little Fawn Daycare

- Staff TIB skin test and Influenza Vaccine done

Little Fawn nursery

- Little Fawn Nursery – 18

Communicable Disease

Immunized

- TIB - 386
- WP/CIB - 33
- SIB - 158
- QHS - 57

Received Influenza Vaccine

- TIB – 249
- Wp/CIB – 28
- SIB – 117
- QHS – 43

Received TB Skin Test

- TIB - 57
- WP/CIB - 2
- SIB - 15
- QHS - 12

3. Dental Program

- QHS delivers the Children's Oral Health Initiative program to six communities (stats attached). Prevention program for 0 to 6 years.
- Dental clinic services have been provided since 2012 two times per month. Statistically the clinic has done the following this year:
 - 171 diagnostics
 - 77 cleanings
 - 224 fillings
 - 50 extractions
 - 4 denture restorations/fittings
- Building Expansion plans include a two chair dental operatory
- Dentists and chair side assistance are contracted by QHS

Details and statistics can be found on the following page for the Children's Oral Health Initiative (COHI) for the following communities:

- Adams Lake Indian Band
- Simpcw First Nations
- Tk'emlups Indian Band
- Skeetchestn Indian Band
- Little Shuswap Indian Band
- Whispering Pines/Clinton Indian Band

April 24 2014 Children's Oral Health Initiative Stats

Crystal Chartrand Registered Dental Hygienist

COHI Annual Permission- Positive response-318

COHI Screenings/Examinations-264

Fluoride Varnish Applications-474

Pit and Fissure Sealants-None as of yet

Adams Lake Indian Band

COHI Annual Permissions- Positive Response-54

COHI Screening/Examinations-50

Fluoride Varnish Applications-102

Pit and Fissure Sealants-None as of yet

Simpcw First Nations

COHI Annual Permissions-Positive Response-24

COHI Screening/Examinations-20

Fluoride Varnish Applications-32

Pit and Fissure Sealants-None as of yet

TK'emlups Indian Band

COHI Annual Permission-Positive Response-176

COHI Screenings/Examinations-149

Fluoride Varnish Applications-281

Pit and Fissure Sealants-None as of yet

Skeetchestn Indian Band

COHI Annual Permission-Positive Response-35

COHI Screenings/Examinations-22

Fluoride Varnish Applications-32

Pit and Fissure Sealants-None as of yet

Little Shuswap Indian Band

COHI Annual Permissions-Positive Response-27

COHI Screenings/Examinations-22

Fluoride Varnish Applications-27

Pit and Fissure Sealants-None as of yet

Whispering Pines Clinton Indian Band

COHI Annual Permissions-Positive Response-2

COHI Screening/Examinations-

Fluoride Varnish Application-2

Pit and Fissure Sealants-None as of yet

4. Diabetic Program

- 57 Diabetic clients served
- Assessment, screening, one on one education and referrals are provided by all of the registered nurses as well as the Nurse Practitioner
- Nutritional education and consultation, meal planning and in the kitchen hands on experience are provided by nutritionist and/or contracted Naturopath
- Foot care is provided for diagnosed diabetic clients
- In partnership with community 15 clients were sent to Diabetic conference in Penticton for education
- QHS arranges for the Seabird Island Diabetic team to come annually to do vision screening and various tests to assess progression of disease
- Kidney screening is done annually through the kidney foundation
- Annual screenings are offered at the health fairs and include:
 - Blood Glucose Monitoring
 - Cholesterol readings
 - Blood pressure checks
 - Bone density assessment
 - Foot exams

5. Injury Surveillance

- QHS continues to collect data on injury. Where, what & why injuries happen. Stats collected assist in identifying safety issues and also provides information that can be used for planning programs and accessing funding for prevention issues.
- Surveillance forms are submitted by QHS staff, band and school staff. Training has been provided to all staff
- Program is only funded for this fiscal year 7 will sunset

6. Pandemic Planning

- Community pandemic plans are due for review and revision annually. Done in partnership with the bands

7. HIV/AIDS

- Supply condoms
- Conference for nurses to attend
- No stats – very confidential
- Nurse Practitioner can test
- One on one mental health counseling provided to clients
- Education provided at schools, health fairs, workshops such as Men's night (2 offered this fiscal year. Both very successful and will be continued bi-annually), and in newsletters.

6. Primary Health Care

- QHS has signed MOU with the Interior Health Authority (IHA) to provide primary health care services. IHA provides staff, QHS is to provide space, front desk support, equipment & supplies.
- Nurse practitioner and Medical office assistant are provided by IHA 2 times/week (Tues/Thurs) for full days
- IHA staff seen 457 members and had a total of 1311 encounters
- The GP has retired and IHA has not been able to find a replacement. Currently it is reported that Kamloops is in need of 15 doctors to meet population needs. Unfortunately this reality is affecting QHS' ability to provide physician care and it has left many members without a GP.
- QHS contracts a naturopath 7 days per month for band members that reside permanently in one of the three communities

- Naturopath has seen 129 members and had a total of 502 encounters

10. Mental Health Counseling

- QHS provides one on one mental health counselling services to band members living on reserve (121 clients have been referred)
- QHS staff work in partnership with band NNADAP counsellors
- QHS supports 5 clients from each community to attend Choices annually
- QHS participated in Mental Health forum which included staff, band staff, mental health workers and external partners to discuss how to improve mental health services. This was a FNHA initiative and funded by them.
- No funding available for Youth Suicide prevention this year.

11. Data Management

- Mustimuhw is the e- health charting system QHS uses. This data base was developed and marketed by the Stolo nation. Health Canada was very resistant to support this but the FNHA are interested and willing. Mustimuhw will eventually be able to interface with Panorama (CDC information data base)