# Q'WEMTSÍN HE&LTH SOCIETY

## PROGRAM & SERVICES

STATISTICS
2015/16

### QHS Events from April 1<sup>st</sup> 2015 – April 1<sup>st</sup> 2016

- April 9<sup>th</sup> 2015 TIB/ WPCIB Baby Welcome: 50+ people attended
- April 22<sup>nd</sup> 2015 Everything Her Day: 51+ people attended
- May 12<sup>th</sup> 2015 SIB Baby Welcome: 60+ people attended
- May 27<sup>th</sup> 2015 QHS TIB/ WPCIB Kindergarten Day: 24 children attended and approximately 20
   adults attended
- May 28<sup>th</sup> 2015 SIB Kindergarten Day: approximately 80+ people attended
- June 19<sup>th</sup> 2015 Aboriginal Walk Day at QHS: 10 people attended
- August 6<sup>th</sup> 2015 TIB Health Fair: 110+ people attended
- August 13<sup>th</sup> 2015 SIB Bike Rodeo and Family Fun Day: 60+ people attended
- September 17<sup>th</sup> 2015 SIB Health Fair: Approximately 150 people attended
- September 28<sup>th</sup> & 29<sup>th</sup> 2015 TB Skin test Taco Day: 71 people were tested
- October 29<sup>th</sup> 2015 Mammogram day @ QHS: 17 people attended
- November 2015 Movember Men's Night: 25 Men attended
- March 15<sup>th</sup> 2016 Women's Wellness day (PAP Day): 16 Women attended (every 6 months)
- March 30<sup>th</sup> 2016 Everything Her Day: 60+ women attended (see comment report)
- April 1st 2016 SIB Bike Rodeo: 78+ people attended

# Q'WEMTSÍN HEALTH SOCIETY

## HOME AND COMMUNITY CARE

STATISTICS
2015/16

### Q'wemtsìn Health Society - Home & Community Care - 2015 / 2016

- 149 clients have received care though QHS (TIB 106, Skeetchestn 31, Whispering Pines 7 and QHS 5). There were a total of 2634 client encounters between the three communities. Some of these clients are seen regularly and others as needed. Each visit is tailored to the client's individual need (anything from monitoring, to teaching, to listening and hearing what the client really needs). The majority of these clients have chronic conditions. There are also clients that have acute conditions ie. Clients with pneumonia or fractures that just need short term assistance. We also work in conjunction with the IHA Wound Management so clients can be discharged from hospital earlier or stay out of the hospital.
- 17 clients have received regular home support from the personal care workers.
  There are also a few clients who have periodic home support. An example of this
  would be a client with an acute/chronic condition who is hospitalized, and
  receives home support upon discharge until they are able to be independent
  once again.
- 24 clients are on the Medic Aid Program This is a personal help button system.
- Frozen Meal Program These meals were provided by the Aboriginal Agriculture Education Society BC which has been suspended since the summer of 2012 by the Aboriginal Agriculture Education Society BC). Since the suspension of this program we refer clients to "Meals on Wheels" or "Better Meals".
- Tub Program 10 clients take part in the Tub Program. There are clients from each community that utilize this program.
- 47 clients take part in the Foot care Program. There are clients from each Community utilizing this program.
- QHS has a registry of 19 chronic conditions. Cardiovascular disease, diabetes and severe forms of arthritis are the most commonly seen conditions in our Communities. The majority of clients, with a chronic condition, usually have more than one.

#### **Chronic Disease Management:**

 Monitoring with regards to prevention is done regularly. The clients are a driving force behind the care that they receive. When a change is noted the clients, with their permission, have been referred to a variety of health care professionals. Referrals have been made to RIH ER, General Practitioner/Nurse Practitioner, Specialists, Diabetic Education, Dietician, IHA Home Health, Occupational Health, Physiotherapy, Naturopath, Massage Therapy, Mental Health, Geriatric Outreach, Acquired Brain Injury, Podiatry and Dental. Some of the clients take the information on their own to their Health Practitioner.

### Chronic Disease Management (continued):

- Clients are provided with Client information Sheets so that if they need to seek
  medical attention, their medical history and current allergies and medications are
  listed. These information sheets are utilized by paramedics if called to the client's
  home as well as ER Doctors and Nurses. These information Sheets are also
  utilized by the rest of the Health Care Team at QHS.
- Referrals to Balanced Foot Care or Progressive Step. Proper footwear helps to prevent falls and increases client comfort.
- Referrals to People in Motion for disability parking passes (usually clients are given information on how to contact the service themselves).
- Injury Prevention a great deal of work is done with the Housing Departments to provide a safe environment for the clients. Some of these included referrals to the Occupational Therapist for safety and equipment need recommendations.
- Referrals to QHS programs such as Mental Health (Picku Multani), Dietician (Ellen Duncan), Naturopath (Melissa Bradwell), Massage Therapist (Meaghan Atchison), Immunizations (CHN) and Dental Hygienist (Crystal Chartrand).
- Hearing Testing. A list of Kamloops Hearing clinics has been compiled for clients to choose a clinic to have their hearing tested as needed.
- Medic Alert any clients with health issues including allergies may send away for a Medic Alert that indicates if they have allergies and lists medications and any diagnosed medical conditions.
- Ensure 32 clients that have accessed the Ensure program. Clients that require dietary supplement based on Medical needs have received a prescription from their Doctor and approval from their Band.

**Encounters by Type** Qwemtsin Health Society Reporting Period

253 13 19.5	000
Total Encounters Total Members Encounters/Member	# of Groups # Sessions # Individuals Attending

133 133 2 2 74 30

Bobbi Sasakamoose Kathrin Jules Lisa McDonald Lisa Perry, RN Tiger Sperling Virginia Sheep

**Encounters by Staff** 

- 66
Σ
2046
Ç
a
ő
Fehruser
Ŀ
a
-
- ₹
7
~
٠,٩
ш
2014
4
$\overline{}$
2
-
À
_
7
March 31.
=
-
2

## Q'WEMTSÍN HEALTH SOCIETY

## CHILDREN'S ORAL HEALTH INITIATIVE

STATISTICS
2015/16

#### May 25, 2016 Children's Oral Health Initiative Stats

#### Crystal Chartrand Registered Dental Hygienist

COHI Annual Permission- Positive response-369

COHI Screenings/Examinations-303

Fluoride Varnish Applications-723

Pit and Fissure Sealants-O As of yet

#### **Adams Lake Indian Band**

COHI Annual Permissions- Positive Response-65

COHI Screening/Examinations-50

Fluoride Varnish Applications-121

Pit and Fissure Sealants-0

#### TK'emlups Indian Band

COHI Annual Permission-Positive Response-193

COHI Screenings/Examinations-166

Fluoride Varnish Applications-406

Pit and Fissure Sealants-0

#### Little Shuswap Indian Band

COHI Annual Permissions-Positive Response-39

COHI Screenings/Examinations-34

Fluoride Varnish Applications-56

Pit and Fissure Sealants-None as of yet

#### **Simpcw First Nations**

COHI Annual Permissions-Positive Response-36

COHI Screening/Examinations-25

Fluoride Varnish Applications-68

Pit and Fissure Sealants-0

#### Skeetchestn Indian Band

COHI Annual Permission-Positive Response-31

COHI Screenings/Examinations-25

Fluoride Varnish Applications-68

Pit and Fissure Sealants-0

#### Whispering Pines Clinton Indian Band

COHI Annual Permissions-Positive Response-5

COHI Screening/Examinations-0

Fluoride Varnish Application-0

Pit and Fissure Sealants-None as of yet

# Q'WEMTSÍN HEALTH SOCIETY

## PRIMARY HEALTH CARE

**STATISTICS**2015/16

Organization	Outombain II - III O
Janizadon	Qwemtsin Health Society 130 Chilcotin Rd
•	Kamloops, BC V2H 2G3
Report Title	Encounters by Type
Reporting Period	April 1 2015
Date Report Generated	July 28, 2016 Storted at 20144 AM
Menu Item	Encounters by Type Spreadsheet Completed
Flogram Groups Selected -	- ALL Programs - Reporting Communities Sologied - Karry
Type Groups Selected	rically Certife Visit, Health Ce Locations of Service Selected
- Para Croapo Colcolog	ALL Encounter Purposes -
	- ALL Encounter Formats -
Staff Selected	Jacqueline Giggs, Jocelyn Rhode, MSN, NP(F), Karen Irving, MScN, NP(F),
Total Encounters	1301
Total Members	234
	204
# of groups	0
# individuals attending	0
# sessions	0
Our Band/Others	
Our Band	188
Others	46
	40
On/055 D	
On/Off Reserve	
Off	206
	28
Staff Member En	counters
Jacqueline Giggs	13
Karen Irving, MScN, NP(F)	566
Lorri Toop	5
Melissa Bradwell	283
Micheline Wiebe	33
Shannon Campbell	11
Type of Visit	
Health Centre Visit	833
Home Visit	11
nformation Entry	
elephone (Community Mer	50

TK'emlups

## 51B

Organization	Qwemtsin Health Society 130 Chilcotin Rd
	Kamloops, BC V2H 2G3
	250-314-6732
Report Title	Encounters by Type
Reporting Period	April 1, 2015 March 31, 2016
Date Report Generated	June 29, 2016 Started at 04:00 PM Completed
Menu Item	Encounters by Type Spreadsheet
Program Groups Selected Type Groups Selected	- ALL Programs - Reporting Communities Selected Skeetches
Purpose Groups Selected	nealth Centre Visit, Health Ce Locations of Service Selected No Locations
Formats Selected	- ALL Encounter Purposes - - ALL Encounter Formats -
Staff Selected	Jacqueline Giggs Josephy Bhada MON NEGOTA
- Same Saleston	Jacqueline Giggs, Jocelyn Rhode, MSN, NP(F), Karen Irving, MScN, NP(F),
Total Encounters	316
Total Members	105
# 05 000000	
# of groups	0
# individuals attending # sessions	0
11 003310113	^ 0
Our Band/Others	
Our Band	75
Others	30
On/Off Reserve	
On	0.4
Off	· 84 21
	21
Staff Member E	Encounters
Jacqueline Giggs	5
Karen Irving, MScN, NP(F)	182
Melissa Bradwell	112
Micheline Wiebe	17
Type of Visit	
Health Centre Visit	276
lome Visit	3
nformation Entry	190
Felephone (Community Mer	36

Skeetchestn

WPCIT

	<u>-</u>			
Organization		130 Chilcotin Ro Kamloops, BC 250-314-6732	V2H 2G3	,
Report Title Reporting Period Date Report Generated Menu Item Program Groups Selected Type Groups Selected Purpose Groups Selected Formats Selected Staff Selected	<b>Encounters by Type Spreadsh</b>	Reporting Comr Locations of Ser	nunities Selected vice Selected	Completed  Qwemtsin  _No Locati
Total Encounters Total Members	101 29			
# of groups # individuals attending # sessions	0 0 0			
<b>Our Band/Others</b> Our Band Others	16 13			÷
<b>On/Off Reserve</b> On Off	18 11			
Staff Member Jacqueline Giggs Karen Irving, MScN, NP(F) Melissa Bradwell Micheline Wiebe	Encounters 1 35 64 1			
<b>Type of Visit</b> Health Centre Visit Home Visit Information Entry	96 1 4	<u> </u>		

Clinton.

## Encounters by Type Qwemtsin Health Society

Reporting Period

March 31, 2015

April 1, 2016

Karen Irving, MScN, NP(F Encounters by Staff Jacqueline Giggs Lorri Toop

434 9.3

Encounters/Member

Total Encounters Total Members 10 27 31

# Individuals Attending

# of Groups # Sessions

Marilyn Mounsey MOA Micheline Wiebe Renata Johnson MOA Sarin Burke MOA

Shannon Campbell

A. Nurse Practitioners From Pren Relephone (Community Member) Health Centre Visit 44, 1% ife mation Entry **Encounters by Type of Visit** 30, 1%

Encounters by Type

Qwemtsin Health Society Reporting Period

April 1, 2016

March 31, 2015

259

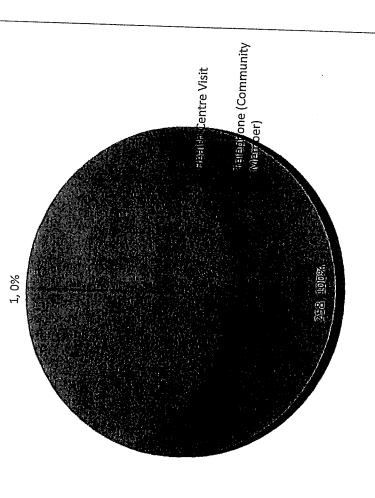
Encounters by Staff Picku Multani

259 5.9 Encounters/Member Total Encounters Total Members

# Sessions # Individuals Attending # of Groups

000

Encounters by Type of Visit



Hental Wellness Comselling

## Encounters by Type

Qwemtsin Health Society Reporting Period

439 124 3.5 Total Encounters Total Members

Encounters/Member

# of Groups # Sessions # Individuals Attending

000

Encounters by Staff Melissa Bradwell

ealth Centre Visit Encounters by Type of Visit %0′0

439

March 31, 2016

April 1, 2015

**Encounters by Type** Qwemtsin Health Society Reporting Period

April 8, 2016

November 17, 2015

Encounters by Staff Meaghan Atchison

225

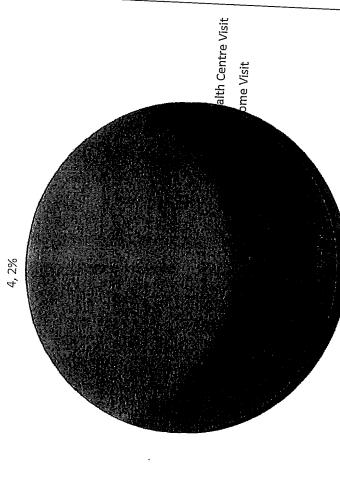
225 43 5.2 Encounters/Member Total Encounters Total Members

# of Groups

# Sessions # Individuals Attending

000

Encounters by Type of Visit



Massage Therapist.

## 2015/2016 SKEETCHESTN STATS FOR:

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

#### April 1<sup>st</sup>, 2015 - March 31, 2016

#### Diane Procter, CHN

#### Skeetchestn

445 members served

1550 encounters

#### Circle of Life Program

- 12 on CPNP program
- 6 babies born
- 4 breastfed at birth
- 4 babies born between 5lb 9oz to 8lb 11oz
- 2 babies born more than 8lbs 11oz
- 4 babies breastfed at 6 months

#### **Communicable Disease Program**

142 members immunized

109 influenza shots given

14 TB skin tests SCS

#### **Skeetchestn Community School**

#### **Kindergarten**

4 kindergarten boosters given. 2 booked for summer 2016.

#### Grade 6

4 grade 6 students received immunizations. 100% of population.

#### Grade 9

1 Grade 9 student immunized. One booked summer 2016.

#### <u>Other</u>

#### Other:

#### Skeetchestn Health Clinic and Community

Bike Rodeo. August 13<sup>th</sup>, 2015 33 participants.

Bike Rodeo. April  $1^{st}$  2016. – 41 participants. Assisted with helmut fittings. Rural RCMP members also in attendance.

September 9th, 2016. FASD awareness day. 25 people attended.

Monthly Families and Tots group. Well attended with a great number of dads attending.

Kindergarten Day - May 28th, 2015 and May 19th 2016. Attended by preschool and K-2 class. Hearing screening with two referrals in 2016. No referrals for hearing follow-up in 2015.

Mobile mammogram - 12 women screened.

Baby Welcome Ceremony – 6 babies wrapped 2015

#### **Skeetchestn Community School**

Girls group in school. Targeting girls grades 2-4. Topics include hygiene, relationships, boundaries, friendships. 10 group sessions. During classroom hours to accommodate students from out of community.

Sexual education and STI's to grades 8-10.

Handwashing K-2.

Body parts and personal safety K-2.

Anaphylaxis teaching staff.

Diabetic teaching to staff and students grade 2-4 class.

Attended Skeetchestn Health and Career day April 13th. Cholesterol and BP screening done. Screened approximately 40 kids and talked about diabetes and blood sugar.

#### Miscellaneous

Presented with Sarah Bennett, CHN at Everything Her Day on HIV/Aids and Hep C.

Attended Annual Health Fair and provided screening for cholesterol, blood sugar and blood pressure.

Attended annual nursing conference, annual CDC workshop and FASD workshop through UBC interprofessional education.

Completed cultural competency training online.

Currently recertifying for immunization certification (every 3 years).

#### CBRT 2015-2016

#### **Question 35**

#### **HIV/AIDS**

- 1- Presentation and information booth at "Everything Her Day"
- 2- 2 school education sessions

#### **Tuberculosis**

1- Community school screening – teachers

#### **Immunization**

- 2 info at community health fairs
- $1-{\mbox{\sf FNHA}}$  workshop for education on immunization and other CDC topics
- 1 Annual influenza training
- 3 info in QHS monthly newsletter
- 1 info in Little Owl newsletter
- 4 Families and Tots group discussions about immunizations
- 10 monthly teleconferences CDC

#### Pandemic Planning

1 – emergency preparedness committee meeting attended by CHN's

#### Infection Prevention and Control

- 1 handwashing presentation in school
- 2 Posters educating students about handwashing in school

## 2015/2016 TIB & WP STATS FOR:

- > Pre/Post Natal Care
- > Communicable Disease Control (CDC)
- > Sk'elep School of Excellence
- > Screening & Community Events

#### Stats (April 1, 2015-March 31, 2016) from Sarah Bennett, CHN

#### TIB /WP - 1657 encounters, 458 members served

#### TIB - Circle of Life

- 4 babies born
- 4 breastfed at birth
- 1 babies between 5 lbs 10 oz. -8 lbs 11 oz. at birth
- 3 babies over 8 lbs. 11 oz. at birth
- 0 baby under 5 lbs. 9 oz. at birth
- 9 prenatal families currently on program

#### WP - Circle of Life

- 1 babies born
- O breastfed at birth
- 1 baby between 5 lbs 10 oz. -8 lbs 11 oz. at birth

No prenatal families on program at this time

#### **Total Participants**

- 28 participants in the COL program in total for April 2015-April 2016 from TIB and WP (not counting Skeetch) (2 are duplicated due to having two children on program under 18 mos of age)
- 1 client under the age of 19 on the COL program for TIB and WP
- 42 adults and children attended play group over the year, with an average attendance of 6 attendees per play group session (play group is every Wednesday from 10 am 12 pm)

#### **Communicable Disease**

#### All Vaccines

- 354 Members immunized at TIB
- 23 Members immunized at WP
- 38 at Q'wemtsin Health Society (staff and clients whose charts do not have a community attached)

#### Influenza Vaccines

- 240 Members provided with influenza vaccine at TIB
- 17 Members provided with influenza vaccine at WP
- 20 Q'wemtsin Health Society (staff and clients whose charts do not have a community attached

#### TB skin tests

- 84 Members provided with TB skin tests (TIB) (Christine and myself held a TB screening clinic at TIB, WP had one the previous year)
- 2 Members provided with TB skin tests (WP)
- 20 staff 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. Please see Christine's stats for more details regarding immunizations at Skelep.

## Little Fawn Daycare (Received folder in Sept. 2015 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 children in the 3-5 room

## Puss and Boots Daycare (Received folder in Sept. 2015 explaining role of CHN and offering services)

## Little Fawn Nursery (Received folder in Sept. 2015 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 children

#### Kindergarten Day

24 children attended (including LFN, LFD and Puss and Boots Daycare) at kindergarten day on May 27, 2015 (audiology (IHA), COHI, immunizations, development screening)

2016 kindergarten day was done on May 18, 2016-31 children attended with 4 referrals to physicians for ear wax concerns, 6 referrals to audiology for further hearing testing, 4 referrals to speech and language.

#### <u>Miscellaneous</u>

Assisted with Skeetchestn influenza clinic, Diane and myself presented at the Everything Her Day Workshop on HIV/AIDS and Hep C, participated in the annual health fairs for all communities with booths on immunizations, and cholesterol/blood sugar/blood pressure assessments

Training — currently getting re-certified in immunization competency (due every 3 years), attended the FNHA communicable disease conference, attended the smoking cessation Quit Now training in Kamloops, completed the Cultural Sensitivity Training online, registered to take the Douglas College Breastfeeding Course for Health Care providers in the fall of 2016

## Community Based Reporting 2015-2016

### Question 35 - Awareness and Education Activities Description

HIV/AIDS – Blood borne and sexually transmitted infections:
4 - school education sessions
f 1 – presentation and information booth at "Everything Her Day"
Total 5
Tuberculosis:
2 - information sent home with students at schools
2 - community wide screening and information days
Total 4
Immunization:
2 – information booth at community health fairs regarding immunizations
1-3 community health nurses attended the FNHA workshop for education on immunizations and other CDC topics
1 – 5 nurses attended the Interior Health Authority influenza training
10 – monthly nurses teleconferences attended by community health nurses
2 – discussions about immunization at play groups in the communities
2 – posters promoting immunization displayed in the health centre

#### Total 23

#### **Pandemic Planning:**

1 – emergency preparedness committee meeting attended by CHN's

3 – information in the QHS monthly newsletter

2 - information sent home with students at schools



## Title: Q'wemtsin Health Society Community Injury Report

Period covered by the report: 2015/2016

Date: March 17, 2016

Prepared by: Lee-Anne Deneault

Prepared for: Q'wemtsín Health Society



#### **Data Collection Network**

Q'wemtsin Health Society IP clerk along with a handful of QHS staff have been collecting injury surveillance forms for this fiscal year. There are less people collecting forms this fiscal year compared to last fiscal year. It is also noted that the only time forms are handed in is during an injury surveillance contest.

### Injury Prevention Activities/Resources (accessed/distributed/promoted)

The Secwepemc Nation Injury Surveillance Program has been promoted in various ways:

- Injury Prevention Clerk sends emails to staff and band workers as a reminder to fill out injury surveillance forms.
- The program has been promoted through our Q'wemtsín Health Society newsletter. The newsletter is distributed to our three communities Skeetchestn, Tk'emlúps te Secwepemc and Whispering Pines/Clinton Indian Band.
- Used the QHS website as a promotional tool.
- To get people filling out forms and interested in the program, we hosted an injury surveillance contest which was open to all three communities. This year's winner was a Tk'emlúps te Secwepemc band member. ————
- Had an information session for three communities at Hoodoos Restaurant.



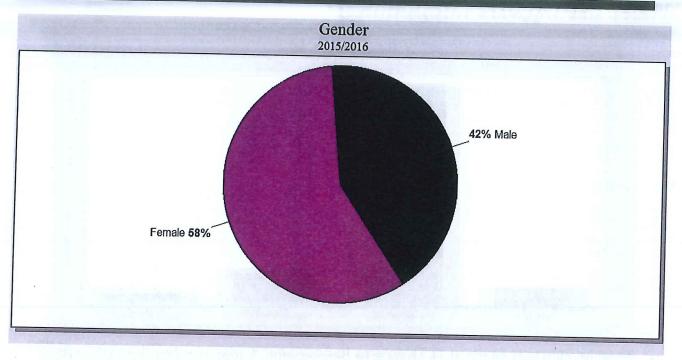


### Injury Prevention Training / Planning / Staff Development

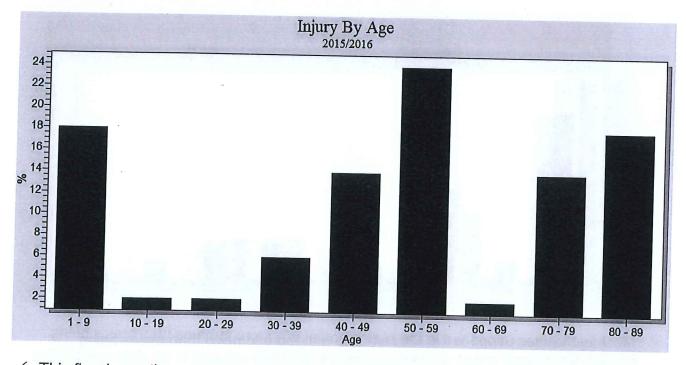
- Presently there is only one Injury Prevention Clerk. QHS invited other communities to train clerks as well as keep their own data information but they were unable to commit.
- There is a need to educate communities about the program as well as benefits of the program for each community.

## Who is being injured?





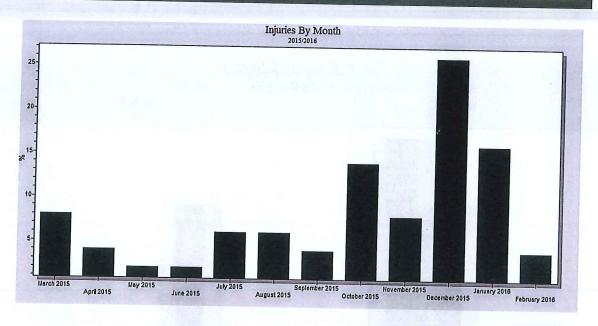
- ✓ Overall for this fiscal year 2015/2016 the total number of injuries recorded for communities were 50
- √ 58% of females and 42% of males were injured, showing more females than males being injured for this fiscal year



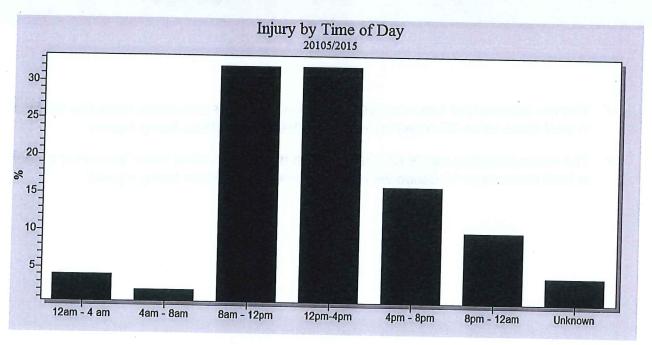
✓ This fiscal year the age group 50-59 years was among the highest that were injured.

### When are injuries occurring?





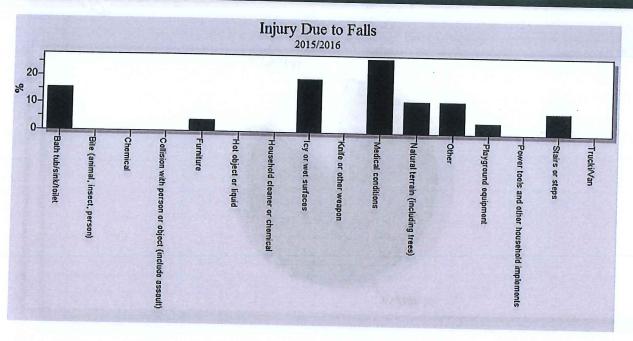
- ✓ Most injuries occurred in the month of December 2015 at 26%. There were 13 cases in total.
- ✓ The second most common time for injuries per month was in January 2016 at 16%. There were 8 injury cases in total.



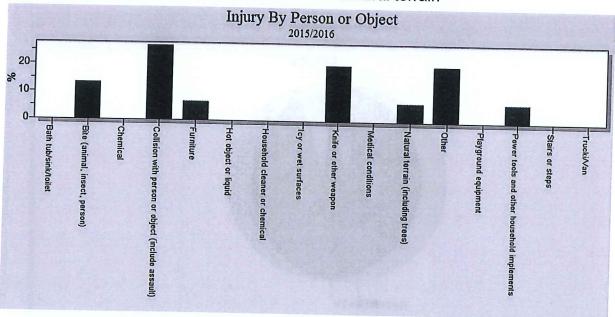
✓ For this fiscal year most injuries took place between the hours of 8:00am to 12:00pm and 12:00pm to 4:00pm

## What caused the injuries?





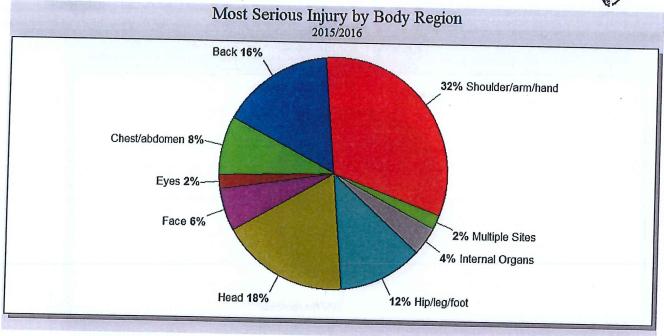
- The leading cause of falls were due to "medical conditions"
- The second leading cause of falls were due to "natural terrain"



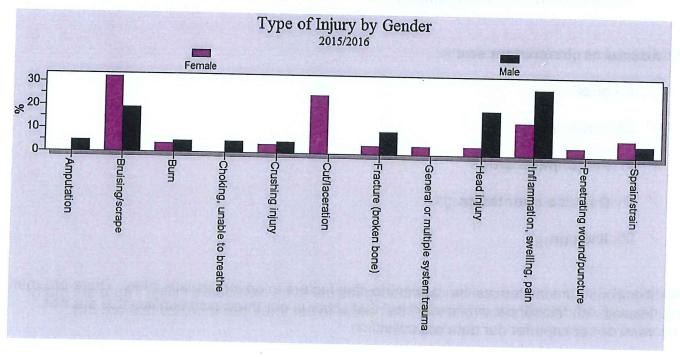
> The leading cause for "person or object" were due to injuries from "collision with person or object"

## Injuries by Body Region & Type of Injury by Gender





✓ Injuries by body region show where an individual is getting injured. The majority of body injuries happened on peoples shoulder/arm/hand at 32%



✓ For Bruising/Scrapes there were 9 cases at 32% in which more females than males were being injured.

### **Your Top Injury Priorities**



#### **Observations**

For this fiscal year 2015/2016 there was only 50 injuries recorded, this is for all three communities. For last fiscal year there were only 42 injury forms collected. The data numbers show a need to re-educate QHS staff, band workers and our three communities Skeetchestn, Tk'emlúps te Secwepemc and Whispering Pines/Clinton Indian Band.

Getting people interested in this program and filling out injury surveillance forms has been a challenge and continues to be challenging. To date here is a list of various activities the IP clerk has done within three communities:

- ✓ Hosted an info session for three communities
- ✓ Injury surveillance contest which was open to all three communities
- ✓ Sent reminder emails to QHS staff and band staff from three communities
- √ Hosted Bike Rodeos for communities
- ✓ Advertised in the QHS newsletter and website as well as, Skeetchestn Indian Band community newsletter called The Little Owl and Tk'emlúps te Secwepemc website.
- ✓ Distributed the Secwepemc Nation Injury Surveillance quarterly newsletter to three communities
- ✓ Distributed Secwepemc Nation Promotional material to three communities
- ✓ Provide home safety for elders and people with disabilities by doing home assessments and supplying them with bath mats, first aid kits, night lights, etc.
- ✓ Provide Medic lifeline to home care clients
- ✓ Regularly assess potential issues to prevent injuries at QHS clinics and address each issue as per recommendations
- ✓ Attend workshops to update education with respect to injury prevention
- ✓ During boys and girls group provide education to children about child safety at home/school

- 15 -

#### INJURY SURVEILLANCE FORM

(all information is confidential) Give completed form to: Q'wemtsin Health Society Ph: 250-314-6732 BACKGROUND INFORMATION FOR INJURED PERSON Date of Injury (Year/Month/Day) ( Date of Birth (Year/Month/Day) ( Gender ☐ Male ☐ Female **COMMUNITY INFORMATION** COMMUNITY OF INJURY (community where injury occurred): COMMUNITY OF RESIDENCE (community where injury person lives): **INJURY EVENT INFORMATION** Was the injury WORK RELATED? TIME OF INJURY ☐ YES ☐ NO (1) ☐ 12 AM – 4 AM (4) ☐ 12 PM - 4 PM (2) □ 4 AM – 8 AM (5) ☐ 4 PM - 8 PM (3) □ 8 AM – 12 PM Was the injury SPORTS RELATED? (6) □ 8 PM - 12 AM (7) ☐ UNKNOWN ☐ YES ☐ NO PLACE OF INJURY ☐ Home(inside a home or on home property) ☐ Outdoor Recreational Area (e.g. rodeo ground) ☐ Playground ☐ Indoor Recreational Area (e.g. indoor hockey arena) ☐ Daycare ☐ Public Place (e.g. shopping mall, church) ☐ School ☐ Wilderness/Bush ☐ Roadway ☐ OTHER (please specify) \_ If known-specify place of injury (location) e.g. name of playground, school, public place) Describe WHAT the injured person was doing when the injury occurred, what went wrong, and what actually caused the injury (please indicate if UNKNOWN) Explain WHY the injury occurred (e.g. medical problems, recent depression, weather or road conditions) ADDITIONAL CIRCUMSTANCES PROTECTIVE EQUIPMENT ☐ Unknown ☐ Not Applicable ☐ Unknown ☐ Not applicable ☐ Alcohol ☐ Seatbelt ☐ Protective occupational ☐ Solvents ☐ Child restraint equipment (e.g. eye goggles) ☐ Prescription drugs ☐ Protective recreational ☐ Helmet ☐ Over the counter drugs equipment (e.g. knee pads) ☐ Illicit drugs ☐ Smoke/Fire Alarm ☐ OTHER (please specify) ☐ OTHER (please specify) ☐ Life jacket/Survival suit

**NTENT OF INJURY** 

☐ Intentional (harmed by SELF)

☐ Intentional (harmed by ANOTHER PERSON)

☐ UNINTENTIONAL (i.e. accidental)

☐ UNKNOWN intent



BURN	VEHICLE RELATED	PERSON or OBJECT	POISONING	FALL	EXPOSURE	OTHER CAU
☐ Chemical	☐ ATV	☐ Animal kick	□ Alcohol	☐ Bathtub-Sink-		
☐ Electricity	☐ Bicycle/Tricycle	☐ Bite (animal-	☐ Gas		☐ Cold	☐ Drowni
☐ Explosion	☐ Boat/Canoe	insect-person)	The second secon	Toilet	☐ Heat	☐ Foreign
☐ Flames	☐ Car	☐ Bullet	☐ Household	□ Furniture	Consider the soft	body in
☐ Hot object	☐ Motorcycle	☐ Collision with	cleaner or	☐ Icy or wet	MARKET STREET	natural
or liquid	☐ Snowmobile		chemical	surfaces		opening
or ilquiu	☐ Train	person or object	☐ Illicit drugs	☐ Medical		☐ Hanging
	The same of the sa	(include assault)	☐ Over the	condition		
	☐ Truck/Van	☐ Knife or other	counter drug	☐ Natural terrain		
	DEDCONTINUED	weapon	☐ Plant/Bush	(including roots-		
	PERSON INJURED	□ Power	☐ Prescription	rocks-trees)	*	
	was:	tool/other	drugs	☐ Playground		
	☐ Driver/Rider	household		equipment		
	☐ Passenger	implement		□ Sports		
	☐ Pedestrian	☐ Sexual assault		☐ Stairs or steps		
	(person walking)			= stairs of steps		
) Face ) Neck ) Chest/Abd ) Back Shoulder/A Hip/Leg/Fo Spinal cord Internal org	rm/Hand ot		☐ Burn ☐ Choking, unable t ☐ Concussion ☐ Head injury ☐ Crushing injury ☐ Cut/Laceration ☐ Dental injury ☐ Dislocation ☐ Fracture (broken to the content of	oone)	Office Carik Memor 100 I Hospita Dayc Fire S	ial Hospita Mile House I are Station th Centre
				Lugge to plond Ac33613	-∐ ∐ Scho	ol (please
			Inflammation, swe	elling, pain	The second secon	
Multiple sit			I Inflammation, swe	lling, pain	specify)	
Multiple sit  In your opinion	on, which was the <b>MOST</b>		l Inflammation, swe l Penetrating wound	lling, pain	specify)	
Multiple sit  In your opinion			I Inflammation, swe	lling, pain	specify) □ OTHE	R (please
Multiple sit  In your opinion	on, which was the <b>MOST</b>		l Inflammation, swe l Penetrating wound l Poisoning	lling, pain	specify)	
Multiple sit  In your opinic SERIOUS inju	on, which was the <b>MOST</b>		I Inflammation, swell Penetrating wound Penetrating wound Poisoning Sprain/Strain If YES – I	lling, pain	specify)  OTHE specify)  ured?	
In your opinion SERIOUS inju	on, which was the MOST ry? (please specify) ER PEOPLE INJURED		I Inflammation, swell Penetrating wound Penetrating wound Poisoning Sprain/Strain If YES – I	elling, pain d/Puncture How many were inju	specify)  OTHE specify)  ured?	
In your opinion SERIOUS injute there OTHE YES NO	on, which was the MOST ry? (please specify) ER PEOPLE INJURED ☐ Unknown eck (✓) one only:	in this injury incide	I Inflammation, swell Penetrating wound Penisoning Sprain/Strain  I Sprain/Strain  If YES — I (please in	elling, pain d/Puncture How many were inju	specify)  OTHE specify)  ured?	
In your opinion SERIOUS inju	on, which was the MOST ry? (please specify)  R PEOPLE INJURED  Unknown  eck ( one only: released	in this injury incide	I Inflammation, swell Penetrating wound I Penetrating wound I Poisoning I Sprain/Strain  If YES — I (please in	elling, pain d/Puncture d/Puncture How many were injudicate if number is unkn	specify)  OTHE specify)  ured?	
In your opinic SERIOUS injue there OTHE YES	on, which was the MOST ry? (please specify)  ER PEOPLE INJURED  ☐ Unknown  eck (✓) one only: released ised	in this injury incide	I Inflammation, swell Penetrating wound I Penetrating wound I Poisoning I Sprain/Strain  If YES — I (please in	elling, pain  d/Puncture  How many were injudicate if number is unkn	specify)  OTHE specify)  ured? own)	
In your opinic SERIOUS injue there OTHE YES	on, which was the MOST ry? (please specify)  R PEOPLE INJURED  Unknown  eck ( one only: released	in this injury incider  SELF-treatmer	I Inflammation, swell Penetrating wound I Poisoning I Sprain/Strain  I YES — I (please in the content of the co	elling, pain d/Puncture d/Puncture How many were injudicate if number is unkn	specify)  OTHE specify)  ured? own)	
In your opinion SERIOUS injute there OTHE YES NOTHE The COME The COME To the COME TH	on, which was the MOST ry? (please specify)  ER PEOPLE INJURED  ☐ Unknown  eck (✓) one only: released ised	in this injury incide	I Inflammation, swell Penetrating wound I Poisoning I Sprain/Strain  I YES — I (please in the content of the co	elling, pain  d/Puncture  How many were injudicate if number is unkn	specify)  OTHE specify)  ured? own)	
In your opinion SERIOUS injute there OTHE YES NOTHE The COME The COME To the COME TH	on, which was the MOST ry? (please specify)  ER PEOPLE INJURED  ☐ Unknown  eck (✓) one only: released used used uselth professional	in this injury incider  SELF-treatmer	I Inflammation, swell Penetrating wound I Poisoning I Sprain/Strain  I YES — I (please in the content of the co	elling, pain  d/Puncture  How many were injudicate if number is unkn	specify)  OTHE specify)  ured? own)	

Secwepemc Nation – Injury Surveillance Form – April 2014 Page 2 of 2