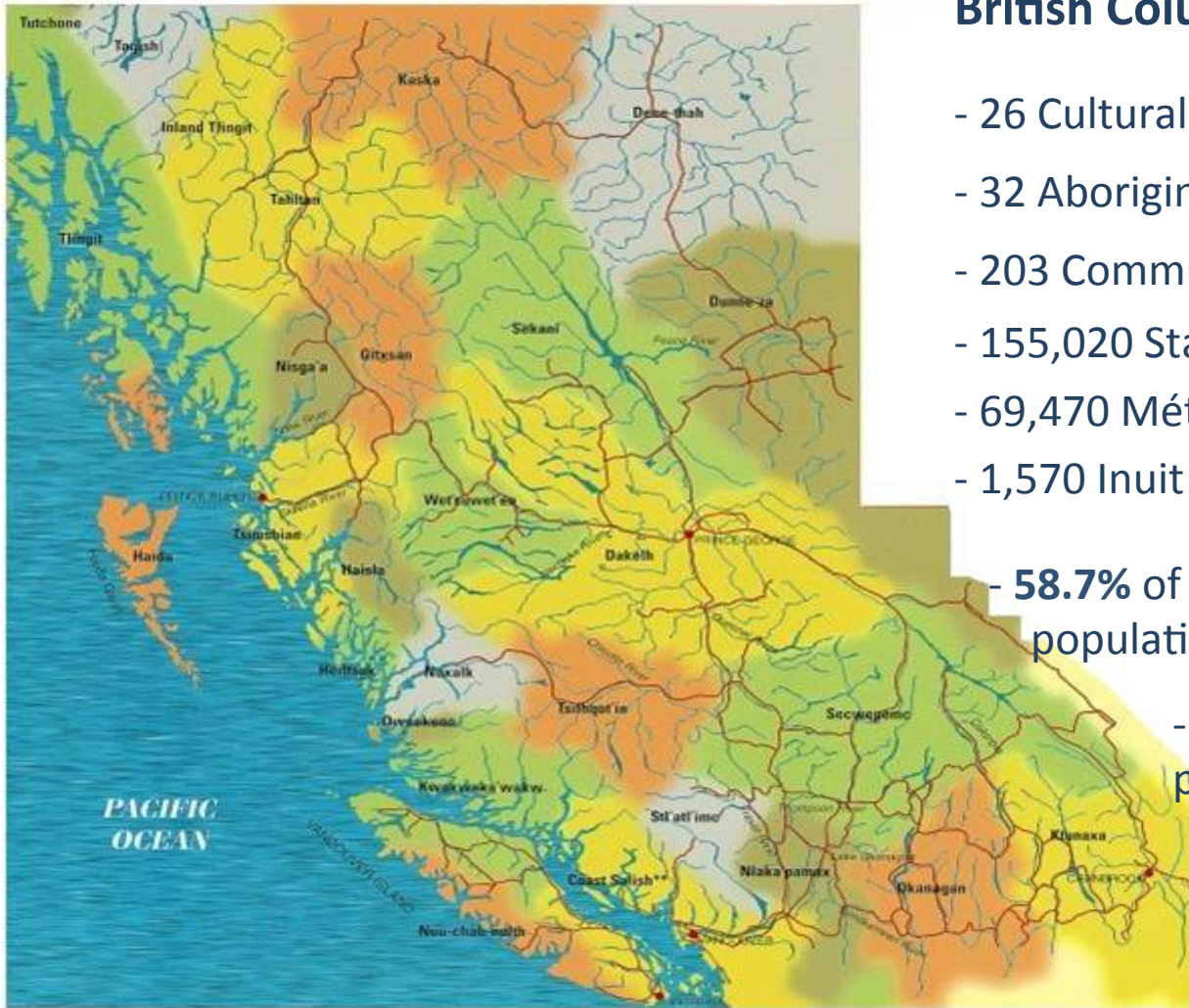




First Nations Health Authority
Health through wellness

Working in Partnership: Developing Brief Action Planning Skills in First Nations Communities

Webinar – CCMI
February 18, 2015
First Nations Health Authority
Patty Ellis, HCN Okanagan Indian Band
Patricia Bell, Homecare Nurse Advisor, FNHA



British Columbia- Quick Facts

- 26 Cultural Groups
- 32 Aboriginal Languages
- 203 Communities (or First Nations)
- 155,020 Status First Nations
- 69,470 Métis
- 1,570 Inuit
- **58.7%** of BC's status First Nations population live **off-reserve**
- First Nations are **5.4%** of BC's population of 4,400,057
- Almost **45%** of our population is **<25 years old**

- Approx. **60%** of the **First Nations languages** of Canada are spoken in BC



Building the FNHA

Our Vision

Healthy, self-determining and vibrant, BC First Nations children, families and communities

Our Values

Respect, Discipline, Relationships, Culture, Excellence & Fairness

Our Directives

1. Community Driven, Nation Based
2. Increase First Nations Decision-Making
3. Improve Services
4. Foster Meaningful Collaboration and Partnerships
5. Develop Human and Economic Capacity
6. Be without Prejudice to First Nations Interests
7. Function at a High Operational Standard



Every community looks different

- The Community-Driven, Nation-Based principle is overarching and foundational to the entire health governance arrangement.
- Program, service and policy development must be informed and driven by the grassroots level.
- Home and Community Care programs based on community need and capacity
- Health Care Workers are employed at community level
- Communities develop policies and procedures based on own needs



Developing Partnerships for BAP Training

- Clinical Nurse Specialist for Healthy Living/Chronic Disease
- 4 Trainers within FNHA
- Use of BAP in HCNA Practice
- Outreach to communities
- Regional Workshops – 19 Bands participated
- Word of mouth advertising
- Community-Based Hosting of Workshops
- Program Coordinator - CNS Mental health



BAP Training for FN Communities

2013/14

- 3 Regional Training programs
 - Kamloops
 - Nanaimo
 - Vancouver
- 2 Training Programs held for remote communities
 - Nuuchahnulth
 - Haida Gwaii
- All Senior Nurses trained – working towards certification
- Total staff trained = 72

2015

- 6 Training programs planned for Spring in regional locations (24 spaces in each)
 - Respecting Tobacco Framework
- 2 programs planned by communities for their HC staff



Role of HCN in FN Communities

- Assessment of clients
- Supervision of home support workers and PCWs
- Direct Nursing Care
- Case Management
- Chronic Disease Management
- Wellness Education to client and family
- Case Conferencing
- Other – mentor, driver, counsellor, advisor, program planner,



Role Of HCNA

- Provide support to HCNs
- Provide communication and linkages
- Provide training opportunities
- Provide resources as necessary



Using BAP with HCNs

- Resolving HC nursing issues
- Resolving conflicts
- Encouraging QI initiatives





HCN role in BAP Training

- Helpful to have HCN trained
- Some communities are choosing to train all health workers
- How available is the training?
- Timing for community



HCN role in BAP training with other health workers

- Are they willing to use the skill with clients?
- Are they buying into the skill?
- Are they willing to practice with peers and clients?
- What are the obstacles to them using the skills learned?



Feedback from Care Aides at OKIB

- Don't take the time to practice
- Don't want to upset clients or families with questions
- First Nations people are suspicious of those asking questions
- Often clients are family members
- HCN has challenges encouraging CAs to use the skills



Blocks to Certification for OKIB Care Aides

- Lack confidence in their ability
- Feel insecure using the skills
- +++ Encouragement by HCN to practice skills with peers or family members
- Skills are unfamiliar to most Care Aides



Keys to Success

- Working alongside other staff – CHR or Youth Worker
- Linking the health issue to use of traditional foods
- Encouraging use of traditional foods
- Supporting cultural practices
- Helping client come to the point where they realize “I need to do something for me”
- Takes a lot of work and lots of time with clients and family members



Examples

- What does the community want to do with their health and the health of their members?
- Community Driven activities
- Supporting Community Feasts
- Offering programs to Youth – archery, camping, canoe building
- Encouraging cultural activities – beading, drumming, singing,



Other Variables

- Require HD support:
 - of approach,
 - of workers,
 - of making community Wellness changes
- Require funding to support wellness programs – eg Grants for youth, Elder programs
- Celebrate who they are and where they've come from
- Supporting health literacy (traditional ways)



Establish Partnerships with Clients & within Community

- Support positive actions
- Realize it takes a long time to change
- Give no advice
- Develop understanding
- No one can take away what you're doing for your health
- Clients need support of family
- Family members need support to not give up on clients
- Family often helps clients to understand that they need to change
- Learning about traditional ways
- Provide +++ information
- Be creative



QUESTIONS?