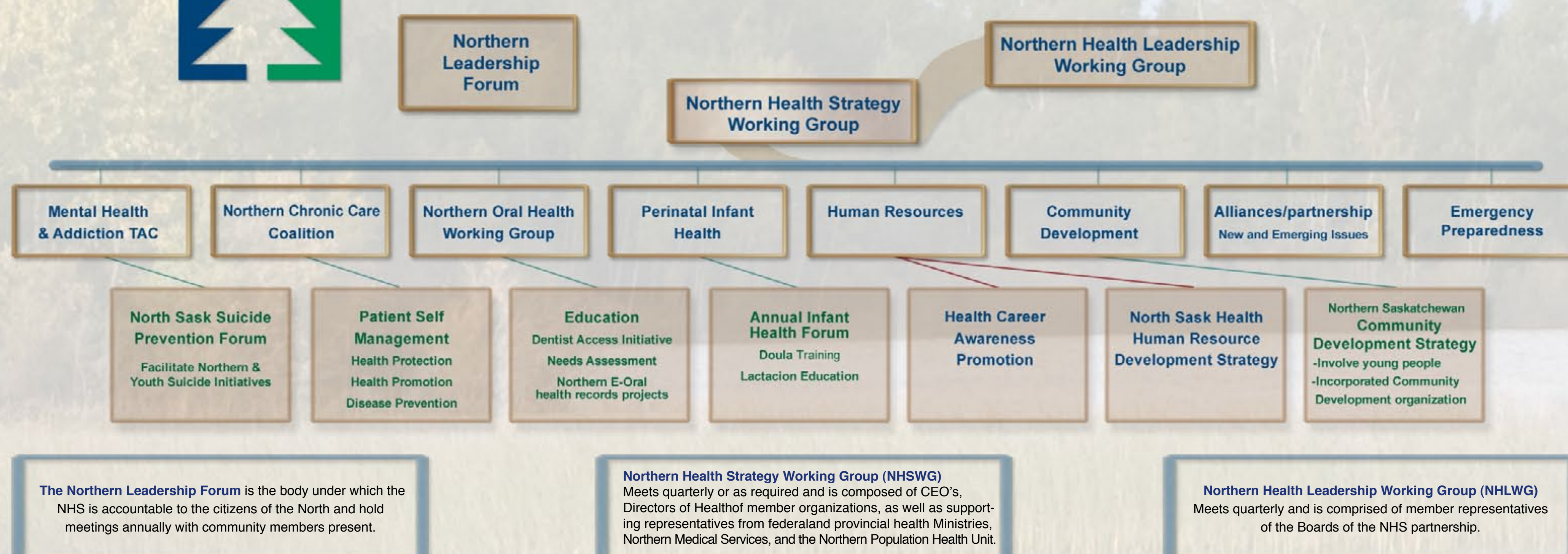




# Northern Health Strategy



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## EMERGENCY PREPAREDNESS

The health sector has significant responsibility in emergency situations. Northern Health Strategy management feels it is important to continue supporting strategies and initiatives that maximize capacity and capability of all stakeholders in emergency planning and response. The NHS responds to requests for face to face gatherings of Emergency Measures partners. As a result of our efforts, over 55 northern people now hold basic emergency management planning certificates.

## OUTCOMES

- NHS facilitated the training of 30 Northern Emergency Coordinators and community leaders as Public Information Officers, specifically how to mobilize information and direct communication during a crisis or emergency.
- Basic Emergency Management Training – August 2008.
- Basic Emergency Training – October 2008.
- Evacuation Contingency Planning – January 2009.
- Public Information Officer Training – December 2009.

## Alliances

Ministry of Corrections and Public Safety and 911 of Regina, Saskatchewan Ministry of Health and Saskatchewan Ministry of the Environment.

## ORAL HEALTH

Oral health means more than just an attractive smile. Poor oral health and untreated oral diseases and conditions can have a significant impact on quality of life. And in many cases, the condition of the mouth mirrors the condition of the body as a whole. Recent reports indicate a relationship between periodontal (gum) disease and stroke, heart and lung disease, and pre-term low-birth-weight babies. Likewise, more than 90 percent of all systemic diseases have oral manifestations, meaning your dentist may be the first health care provider to diagnose a health problem. Diabetes is also a risk factor for gum disease, and having gum disease makes blood sugar control more difficult.

## Objectives

- Improve access to dentist services for Northern residents.
- Integrate oral health into primary health care initiatives.
- Promote oral health through development of communications strategy and resource material.

## OUTCOMES

- Expanded oral health services through Athabasca Health Authority, Keewatin Yatthe Regional Health Authority, Prince Albert Grand Council and Mamawetan Churchill River Regional Health Authority through partnerships with The Centre for Community Oral Health of the Faculty of Dentistry, University of Manitoba.
- Contract dentist teams regularly visit various communities within these jurisdictions for designated periods of time to provide comprehensive dental services to local residents. Regular and consistent services in Black Lake, Fond du Lac, La Loche, Ile a la Crosse, Hatcher Lake, Shoal Lake, Red Earth, Cumberland House, La Ronge and all surrounding areas.
- Partnership with the University of Saskatchewan, Dean of the College of Dentistry and the University of Manitoba in providing continuing education and province-wide tele-health sessions on various topics including diabetes and oral health.
- Oral Health Risk Assessment Tool developed and disseminated to dental teams.
- Fluoride Varnish Instructor and Oral Health Aide Training Manuals adapted and disseminated as part of Knowledge Transfer and communications to community of dental service initiatives.
- Standardized health promotion messaging to be shared with interdisciplinary programs.
- Exploration project for new e-dental chart system.

## Alliances

Aboriginal Health Transition Fund, Athabasca Health Authority, Chief Dental Officer - Health Canada, College of Dental Surgeons of Saskatchewan First Nations University, Health Canada: First Nations and Inuit Health, Northern Healthy Communities Partnership, Stanley Mission, Saskatoon Health Region, Prince Albert Parkland Health Region, University of Manitoba (COH), University of Saskatchewan College of Dentistry.

## COMMUNITY DEVELOPMENT

Health is more than services. Health or ill health is defined through and by a number of determinants as identified by health care providers, the community and the individual. We must engage the community to achieve the highest possible health conditions in our communities together. We can do this through shared understanding, collective support and proper care. We must remember we are responsible to our own health first before we can help others.

## Objectives

- Develop a Northern Saskatchewan Community Development Action Plan through the newly established Northern Saskatchewan Community Network Inc.
- Establish regular scheduled meetings of interested northern groups, leaders and individuals to ensure consistency and sustainability of knowledge transfer.
- Create and maintain an updated list of community leaders, health champions and youth representatives in areas of Northern health care issues for communications and participations purposes.
- Improve communication of health determinants, holistic health and community development principles with health providers and community members through stakeholder alliances, networks, workshops and seminars.

## OUTCOMES

- Engaged the North community by community.
- Improved cultural competence in health care research, surveillance and health care delivery, through Northern Health Strategy Working Group.
- Northern Leadership Forum held in partnership with New North attended by 150 community leaders, health care officials and community members.
- 2009 Saskatchewan Community Development Conference held in partnership with Northern Lights School Division.
- NHS hosted a Youth Suicide Prevention Forum – June 2009 with over 300 participants.
- Increased knowledge of health determinants in communities through workshops and seminars.
- Increased level of trust of health care activities in communities.

## Alliances

Health Quality Council, New North.

## PERINATAL AND INFANT HEALTH

To ensure a healthy child, Northern Health Strategy aims to improve Perinatal Health by promoting breast feeding and establishing a Perinatal forum to promote healthy lifestyle pathways for Northern mothers. The PNATC first met in November of 2004 under the "Shared Paths Project".

## Objectives

- To provide a forum for collective discussion, information sharing, strategizing and action planning concerning all matters related to Perinatal and infant health such as Perinatal education and care, pre-delivery issues, breastfeeding and sexual health.
- Develop and implement plans and recommendations to improve the Perinatal and infant health for residents living in communities represented by the members of the Northern Health Strategy Working Group.

## OUTCOMES

- NHS provided administrative support to a Northern Breastfeeding Committee to develop a northern strategy to promote breastfeeding.
- NHS assists broad and active participation in Perinatal care by involving elders in Perinatal programming and education, using the northern media in showing videos and delivering appropriate Perinatal messages, and distributing resources related to Perinatal and midwifery subjects.
- NHS hosted two "Celebration of Birth" Perinatal Forums, October 2008 and February 2010.
- INFACFT training was held in Prince Albert, March 2009, hosted by the NHS. Twenty-five health care professionals were certified in a five day course.
- NHS, in collaboration with the First Nations and Inuit Health Regina office, hosted the Labour/DOULA Training which took place August 2009. Fifteen health care professionals from across Northern Saskatchewan received certificates through the CAPPA Canada (Childbirth and Postpartum Professional Association).

## Alliances

Victoria Hospital Maternal Child Team, Breastfeeding Implementation Committee of Saskatchewan, Midwifery meetings with the Prince Albert Grand Council.

## MENTAL HEALTH AND ADDICTIONS

Issues surrounding mental health and addictions in the North are vast, from dealing with a wide array of symptoms from the legacy of Residential Schools and other historical oppressions, to development of appropriate services and qualified staff in a region dotted with remote communities. According to the Saskatchewan Comprehensive Injury Surveillance Report, 1995-2006, Northern Saskatchewan has the highest suicide rate per capita in all of North America with a suicide rate of approximately 400 suicide deaths per 100,000.

## Objectives

- Create sustainable cross jurisdictional relationships through Mental Health and Addictions Technical Advisory Committee
- Create cross jurisdictional Services Road Map in areas of Mental Health and Addictions health services in Northern Saskatchewan
- Improve access through tele-health, cross jurisdictional teamwork and mobile teams.
- Educate the public of Mental Health and Addictions issues and services

## OUTCOMES

- Meetings with Northern Regional Health Authorities through Mental Health and Addictions Technical Advisory Committee
- NHS hosted Youth Suicide Prevention Forum, June 2009

## Alliances

Canadian Mental Health Association

## NORTHERN HEALTH STRATEGY

The Northern Health Strategy works cooperatively with thirteen health care industry partners who provide services to 56,000 residents residing over 137,000 square kilometers in over 102 communities in Northern Saskatchewan.

Eighty-five percent of the population in Northern Saskatchewan is First Nations and Metis, with 37% of the population under the age of 15. Canada's fastest growing population.

NHS guiding principles are cooperation, coordination, collaboration and communication and works from a Memorandum of Understanding between all its partners.

By respecting the autonomy of individual Health Regions and First Nations Health Authorities, NHS builds on current strengths and creates new relationships towards fostering better health care for all Northern Saskatchewan residents.

Until the gap closes and more First Nations and Metis become directly involved in health care delivery services in Northern Saskatchewan, NHS is a vital voice of the people as it works to facilitate increased capacity, knowledge transfer, wholistic health care approaches and an aboriginal perspective to ensure quality of care for a growing and diverse aboriginal community.

## Northern Health Strategy Working Group

Through the NHS Working Group, and its strategic sub committees, Northern Health Strategy seeks to find common solutions to shared health problems.

By sharing community principles and integrating community philosophy with partners, we advance an understanding of the determinants of health and how it affects individuals in a wholistic expression. NHS improves cultural competency through collaborative efforts that move beyond the health sector. We all learn together.

## OUR PARTNERS

Health Canada, Saskatchewan Health, Keewatin Yatthe Regional Health Authority, Mamawetan Churchill Regional Health Authority, Kelsey Trail Regional Health Authority, Athabasca Health Authority, Meadow Lake Tribal Council, Lac La Poudre Indian Band, Peter Ballantyne Cree Nation, Prince Albert Grand Council, Northern Saskatchewan Population Health Unit, Northern Medical Services.

## NORTHERN HEALTH HUMAN RESOURCES AND HEALTH CARE PROMOTION

Northern Saskatchewan has been experiencing a chronic shortage of health care providers, lengthy wait times for many services and increasing costs. The situation is particularly acute in First Nation and Metis communities. Many Northerners prefer to work and live in their own communities and are seeking increasing education opportunities in the area of healthcare.

## Objectives

- To increase the participation rate of Northerners in health prevention, promotion and care services.
- Educate young people in 12 - K in Northern Saskatchewan about health career options.
- Develop Northern Health Human Resource Development Plan.
- Implement Human Resource Multi Party Training Agreement.

## OUTCOMES

- NHS Coordinator is Co-Chair of Northern Labour Market Committee - Health Sub-Committee.
- Working with institutes such as Gabriel Dumont Institute to design Northern Health Human Resource Strategy.
- Increased promotion of intersectoral approach to human resource strategies for recruitment, retention and training.
- Engaged a Health Career Promotion Officer who visits Northern schools, career fairs and on line through www.healthcareers.ca.
- Increased promotion and access to health care provider education for Northerners.
- Incorporating Cultural Competency into all aspects of activity.

## Alliances

Northern Labour Market Committee Health Sector Training Sub Committee, Gabriel Dumont Institute, Northern School Boards, Royal University Hospital, Keewatin Yatthe Regional Health Authority, Kelsey Trail Regional Health Authority, Mamawetan Churchill River Regional Health Authority, Athabasca Health Authority, SAHO

## CHRONIC DISEASE - NORTHERN CHRONIC CARE COALITION

Chronic diseases such as type 2 diabetes, heart disease and stroke, are increasing in northern Saskatchewan. According to the 2004 Northern Saskatchewan Health Indicators Report, the prevalence of type 2 diabetes is the highest in the province. Northern Health Strategy, through the Northern Chronic Care Coalition, is working towards improving the quality of life for northerners with Chronic Disease to ensure a strong population health, through health promotion, health protection and disease prevention.

## Objectives

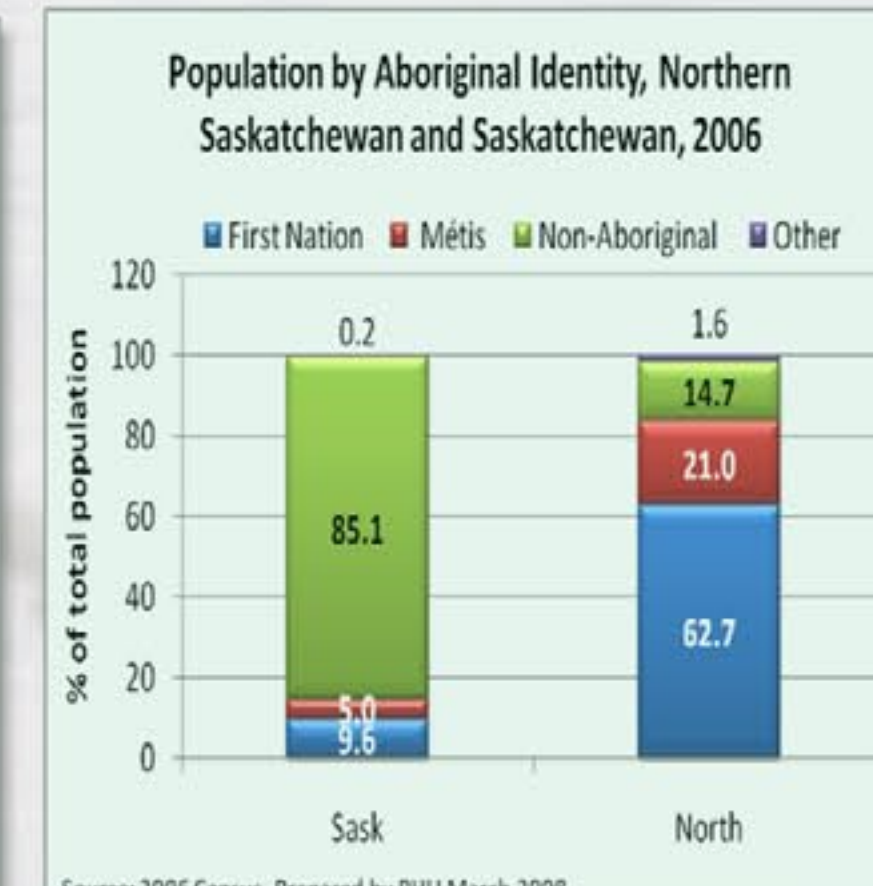
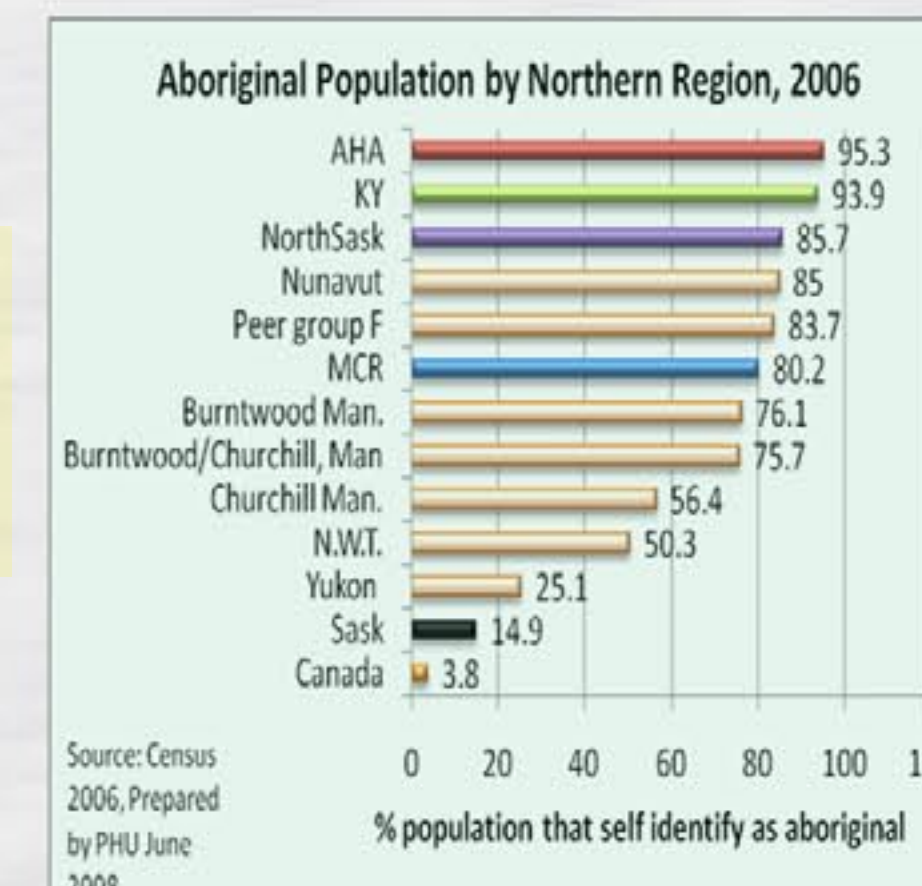
- Facilitate common approaches to Chronic Disease Management across Northern Saskatchewan.
- Support the implementation of a Patient Self-Management Program.
- Create Chronic Disease Communications Strategy with direct communication of Chronic Disease Management to members and alliance groups.
- Improve communication through strategic alliances with stakeholders.

## OUTCOMES

- Increased communication and knowledge gathering of common approaches to Chronic Disease Management through stakeholder meetings, alliances and networks established through the Northern Chronic Care Coalition (NCCC).
- Collaborative decision making with knowledge transfer and translation.
- Assisted in the development of a "Clinical Guidelines Framework for Chronic Disease Management" in partnership with Prince Albert Grand Council Chronic Disease Network and Access Program.
- Supported the implementation of a six week Chronic Disease Self Management Program, by training Peer Leaders resulting in approximately 34 facilitators from 17 communities confidently delivering the program in their community.
- Improving healthy lifestyle choices for youth in collaboration with Northern Lights School Division with age appropriate knowledge transfer tools such as posters, videos and website references.
- Improved care and quality of life for Northern residents with chronic disease through culturally relevant education and direct participation of residents.

## Alliances

CO NAPS, Northern Lights School Division, Health Quality Council, Northern Healthy Communities Partnership.



2010 Northern Health Strategy

Northern Saskatchewan Community Development Conference in partnership with Northern Lights School Division

Northern Saskatchewan Suicide Prevention Forum

Northern Leadership Forum

'ENGAGING THE STRENGTHS OF OUR COMMUNITIES'