



First Nations Health Authority
Health through wellness

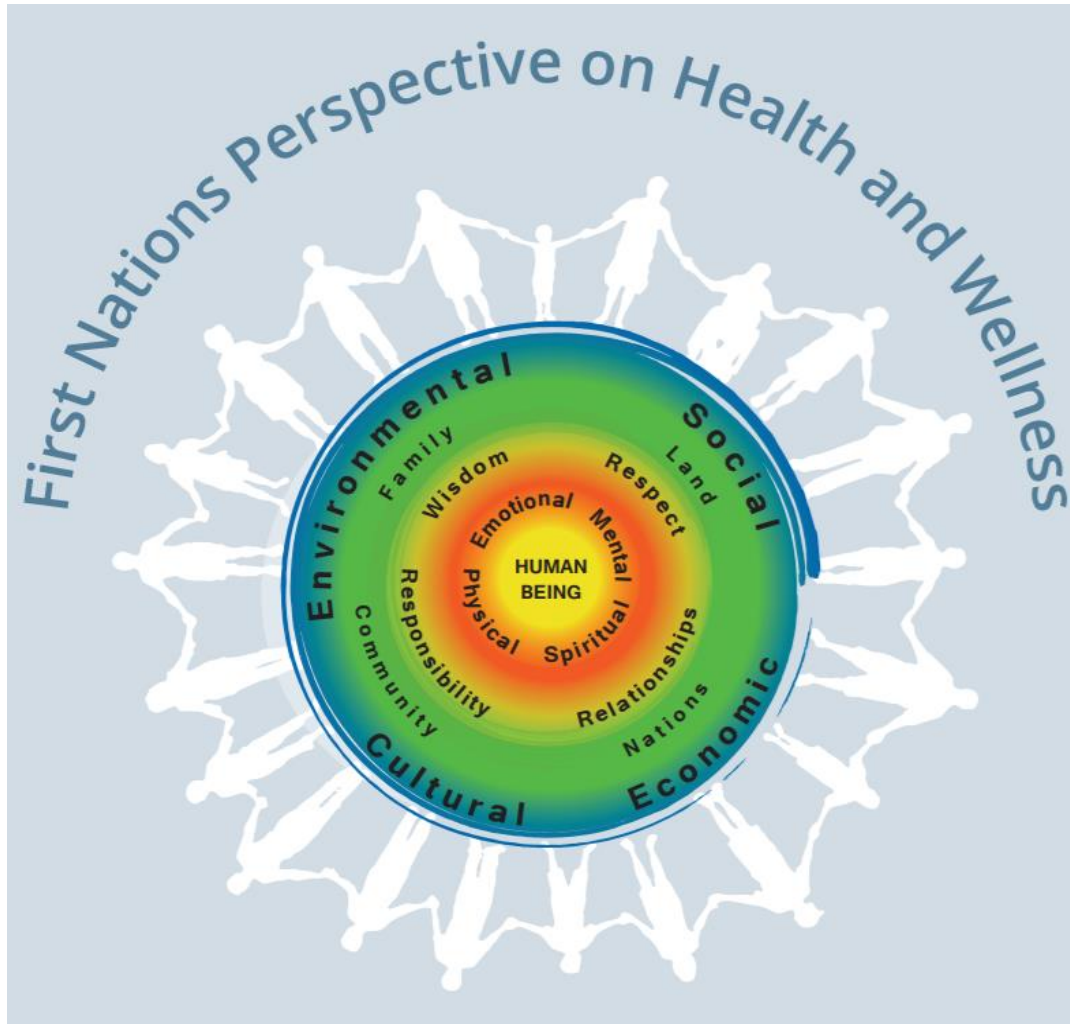
Identifying opportunities for addressing, incorporating, and reflecting Mental Health & Wellness

Presented by: Richard Jock, COO
February 7, 2018



Mental Health and Wellness Summit

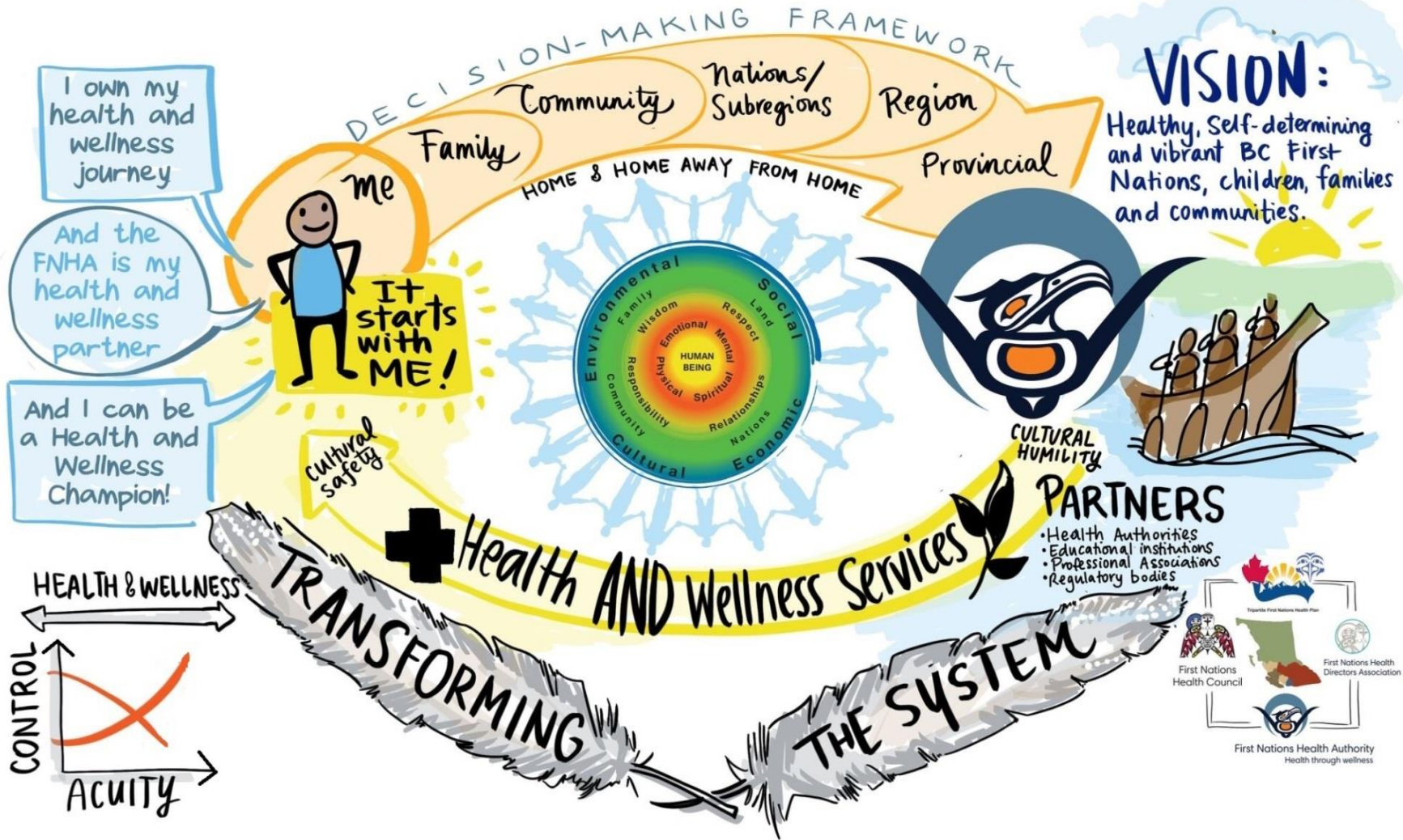
- Opportunity to demonstrate progress and share knowledge on wise and promising practices
- Discuss FNHA Mental Health and Wellness Policy, Framework and key opportunities moving forward



Recognizes health of human beings as inextricably connected to their internal and external contexts (dimensions of wellness, values, broad determinants of well-being, relationship with people and territory).

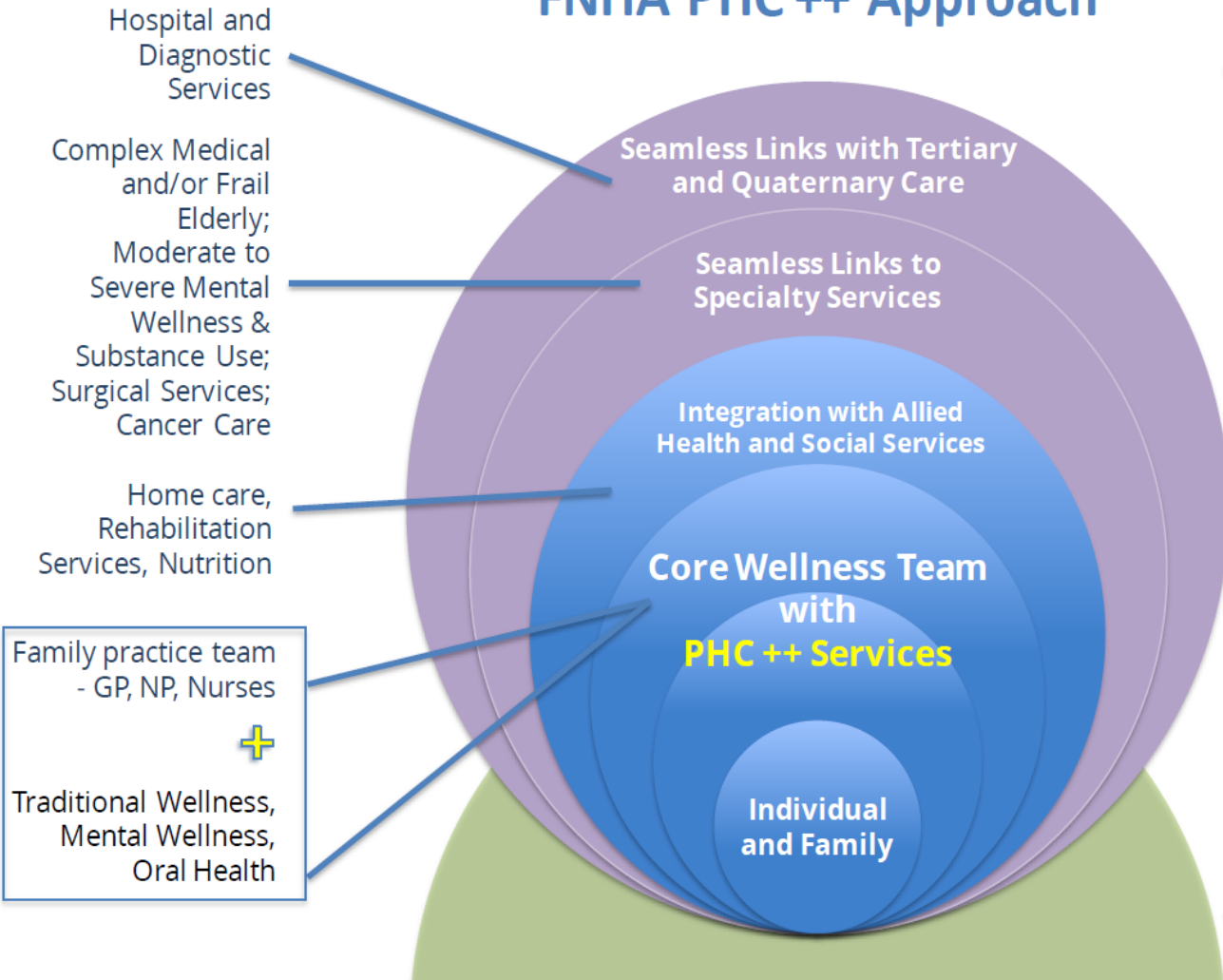


Ecosystem of Health and Wellness





FNHA PHC ++ Approach



Common Threads:

- Every conversation is a **wellness** conversation
- **Cultural safety & humility**
- Only Possible through **Partnerships**
- Transitions enabled through **IM/IT and MT**
- **Service model "match"** to population
- **Health Human Resources**
- Appropriate **compensation** models
- Quality enabled by **policy, data, research**



Policy Statement on Mental Health and Wellness

*The FNHA through its relationships and partnerships will assure that all First Nations people have access to a culturally-safe, comprehensive, coordinated **continuum of mental health and wellness approaches** that affirms, enables and restores the mental health and wellness of our people, and which contributes to Reconciliation and Nation rebuilding.*

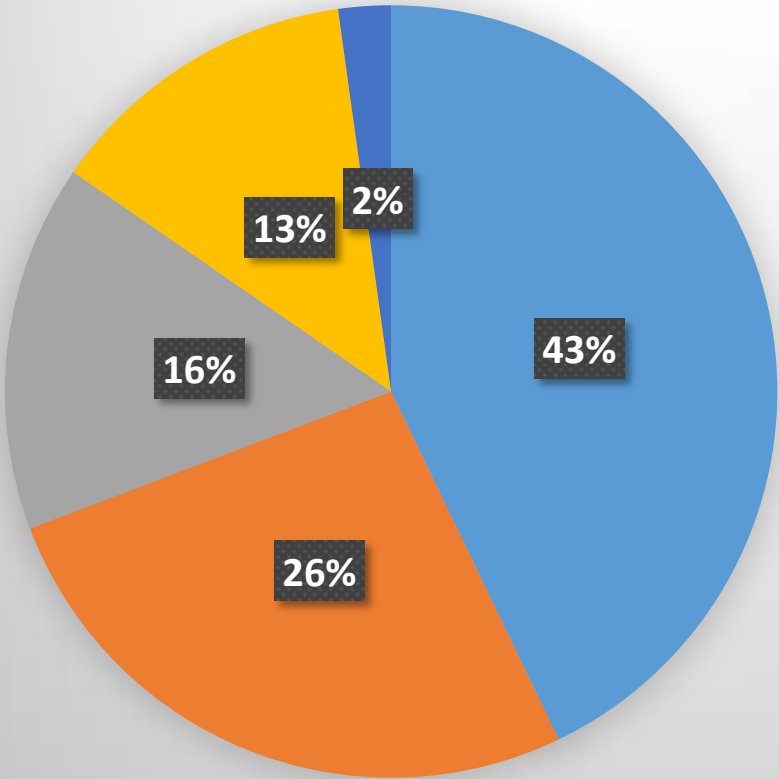
When services are needed, a full continuum is equitably available and includes:

- culture and traditional healing;
- promotion, prevention, capacity-building, education;
- early identification and intervention;
- wrap-around supports, including aftercare;
- harm reduction;
- crisis response;
- trauma-specific services;
- withdrawal management/detox;
- trauma-informed **in-patient** and out-patient treatment/services;
- coordination of care and care planning



What we heard?

Priority Mental Health and Wellness Direction (n= 91, all regions)



- Increased access to and quality of services
- Traditional healing and wellness approaches as foundation
- Community ownership through nation-based and Nation rebuilding approaches
- Facilitate wellness across the continuum, center the needs of children and youth, and move upstream



Areas of Focus for Caucus Engagement

1. Increased access to and quality of services
2. Traditional healing and wellness approaches as foundation
3. Facilitate wellness across the continuum, and focus on supportive environments and addressing root causes
4. Community ownership through nation-based and nation rebuilding approaches
5. Integrative system design and service delivery



Preliminary Grouping of 597 Recommendations

Programs & Services	Governance	System-Level Health Care	Cultural Safety	HR Development	Information Management	Populations
<ul style="list-style-type: none"> • Services engaging land in traditional ways • Addiction services • Trauma informed care • Prevention, intervention, postvention • Support families affected by FASD • Home-based supports for people with complex needs 	<ul style="list-style-type: none"> • Alignment with MYHP • Regional governance structures and p’ships • Develop community capacity to design, deliver, and evaluate services • Provincial and regional reporting standards on funding 	<ul style="list-style-type: none"> • Rural, remote and isolated Nations • Address current silo based funding arrangements • Remove barriers that impede cultural integration • Developing cross-jurisdictional agreements • Strategies for mental wellness and substance use away from home 	<ul style="list-style-type: none"> • Cultural knowledge exchange between Elders and youth • Holistic wellness throughout the life cycle • Support accountability to local First Nation communities • Inclusion of traditional healers, cultural workers, and elders as health professionals 	<ul style="list-style-type: none"> • Determine training gaps and support staff to gain qualifications • Address burn-out and attrition by supporting workers’ • Pool professional dvpt. resources to provide centralized skills-training • Supporting the hiring of more First Nation employees 	<ul style="list-style-type: none"> • Evaluation • Focus on wellness and social determinants of health data • Aboriginal Patient Experience information • Integrated case management system 	<ul style="list-style-type: none"> • Children/ youth and elders affected by violence, trauma, and neglect • Women and their families • Elders • Two-spirit/ LGBTTQIA



Priority items from engagement

- Culture as key in mental health and wellness and associated programming
- Taking an integrated (de-siloed), wellness-based and culturally grounded approach
- Integration within primary health care
- Need to address suicide and ideation
- Substance use, including opioid overdose crisis
- Sexual abuse and family violence
- Trauma—underlying condition for above



Mental Health and Wellness Framework

- The MHW Service Framework project aims to support the implementation of the FNHA Policy on Mental Health and Wellness.
- Based on previous engagement and priority setting by Nations, communities, families and regions, co-create a Mental Health and Wellness Service Framework, as well as an Implementation Manual and Communications Plan.
- Designed to guide the implementation of a phased approach to develop and strengthen regional mental health and wellness infrastructure.



Where are we coming from?

NNADAP

IRS RHSP

Brighter Futures

Health actions
investments

Building Healthy
Communities

NAYSPS
(7 ASCIRT
teams)

Counselling via
Health Benefits



Where are we today?

Jordan's Principle	KUU-US Crisis Line	Joint Project Board Investments	Roots of Trauma Training
Regional Crisis Response Protocols	Provincial Opioid Action Plan	Compassion, Inclusion Engagement	HR Investment (Addictions, Crisis)
Mandatory Cultural Safety Training	NNADAP	IRS RHSP	Brighter Futures
Health actions investments	Building Healthy Communities	NAYSPS (7 ASCIRT teams)	Counselling via Health Benefits



Where are we going?

Support for sexual trauma	Comprehensive Provincial Crisis Response	Prevention and early intervention initiatives	Trauma Treatment	Training Centre of Excellence
Withdrawal Management and After Care	Expand land-based healing approaches	E-mental health Enhancements	Jordan's Principle	KUU-US Crisis Line
Joint Project Board Investments	Roots of Trauma Training	Regional Crisis Response Protocols	Provincial Opioid Action Plan	Compassion, Inclusion Engagement
HR Investment (Addictions, Crisis)	Mandatory Cultural Safety Training	NNADAP	IRS RHSP	Brighter Futures
Health actions investments	Building Healthy Communities	NAYSPS (7 ASCIRT teams)	Counselling via Health Benefits	



Mental Health and Wellness Action Plan Priority Initiatives

Provincial
Services

**ENGAGING THE
BROADER SYSTEM AND
ADVOCATING FOR FIRST
NATIONS INTERESTS
TO RECEIVE CULTURALLY
SAFE SERVICES**

FNHA Services

**ENSURING FIRST
NATIONS PEOPLE
RECEIVE CULTURALLY
SAFE AND QUALITY CARE
FROM FNHA-DELIVERED
SERVICES**

FNHA-Funded
Services

**PROMOTING QUALITY
AND CULTURAL
SAFETY THROUGH
FNHA-FUNDED AND
SUPPORTED
COMMUNITY
SERVICES**



Targeted Investments Joint Project Board

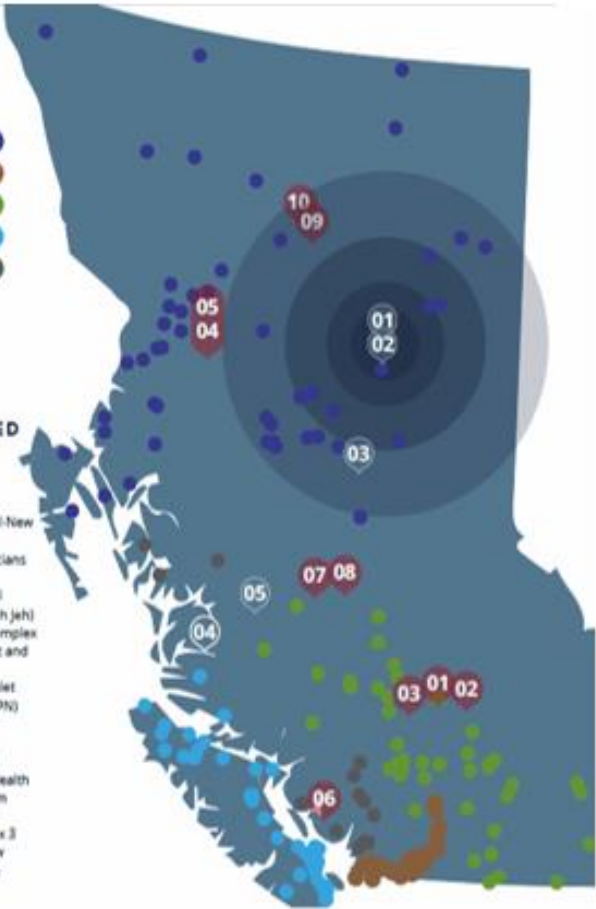
Next Steps:

- Policy support
- Service model development
- Operational alignment
- End to End Integration



Regional Projects

- North
- Fraser Salish
- Interior
- Vancouver Island
- Vancouver Coastal



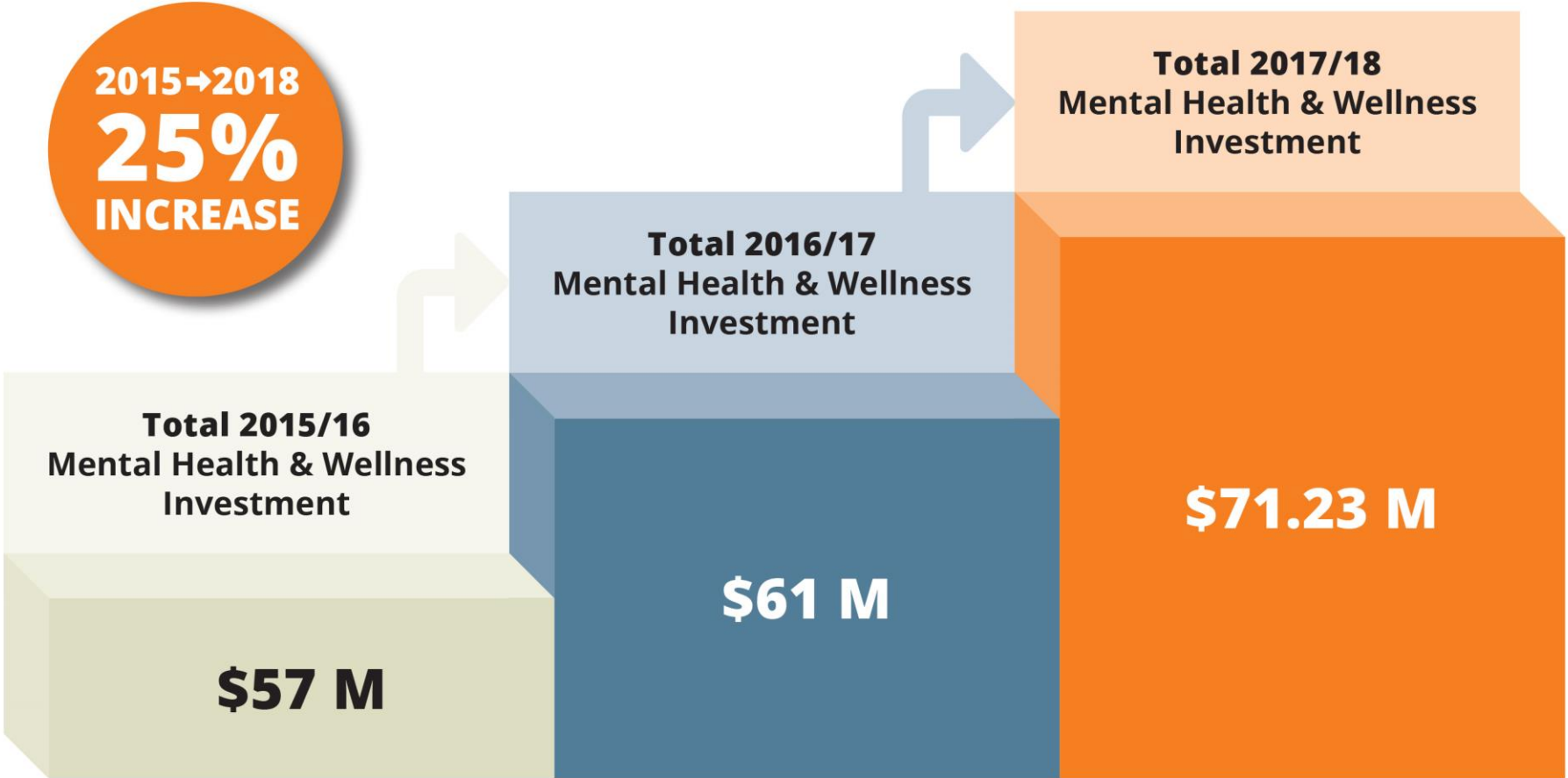
27

NUMBER OF NEW PROJECTS FUNDED

- Carrier Sekani Family Services Primary Care Expansion Project
- Northern Nurse Practitioner Project
- Northern Primary Health Care Teamlet
- Northern MWSU Mobile Support Teams
- Primary Health Care at Soóóó Nation Health
- Primary Health Care at Seabird Island
- Fraser Salish Wellness System Navigators
- Fraser Salish Youth Suicide RPP Coordinator
- Fraser Salish Riverstone Home/Mobile Detox and Daytox Expansion
- Shuswap Carrier Chilcotin Community Mobile Treatment Program
- Interior Nations Mental Health Clinicians and Nurse Practitioners
- Vancouver Coastal-New Regional MWSU Services and Clinicians
- Vancouver Coastal We are Related (Jeh Jeh) Circle of Care - Complex Care Management and
- Coast Salish Teamlet (Hul'qum'num LPN)
- Kwakwaka'wakw Primary Maternal, Child and Family Health Collaborative Team
- Nurse Navigators x 3
 1. Kwakwaka'wakw
 2. Nuu-chah-nulth
 3. Coast Salish



Mental Health and Wellness Investments 2015-2018





A FRAMEWORK FOR ACTION

SUPPORT PEOPLE ON THEIR HEALING JOURNEY

- Focus on aftercare by: increasing consistency of services that support healing from trauma; proactively removing impediments to access; and supporting consistent pathways and linkages across service providers. Examine gaps in treatment centres in Fraser and Vancouver Coastal regions.
- Develop and resource comprehensive pain management approaches which include non-pharmaceutical options.
- Long-term: Build and enhance social and emotional resilience and connection with culture (i.e. access to counseling, Elders and cultural activities, health promotion activities).

CREATE AN ACCESSIBLE RANGE OF TREATMENT OPTIONS

- Access to injectable opioid agonist therapy (hydromorphone).
- Indigenous specific treatment beds.
- Ensure wrap-around support (cultural, counselling, other) for all treatment options.
- Expand mobile treatment/detox options.
- Improve follow-up after overdose and discharge.
- Expand telehealth options.
- Increase OAT services in community and rural settings.
- Expand substance use and pain management supports in primary care settings.
- Expand cultural based (including on-the-land) treatment options.

KEEP PEOPLE SAFER WHEN USING

- Prevent diversion from prescribed opioids to tainted street drugs.
- Increase number of and usage of Safe Consumption Sites.
- Implement drug checking opportunities.
- Public Education about risk.

PREVENT PEOPLE WHO OVERDOSE FROM DYING

- Access to naloxone & knowledge of how to administer.
- Reduce stigma and mitigate risk for people using alone.
- Improve community-911 linkage.
- Increase awareness of Good Samaritan Drug Overdose Act.
- Ensure services are culturally safe and trauma-informed.





Immediate Actions

- Harm reduction grants for First Nations and Indigenous organizations
- Expansion of naloxone training for First Nations communities;
- Information campaigns on risks to target populations
- Peer engagement, coordination and navigation supports;
- Increasing access to Opioid Agonist Therapy in rural and remote communities;
- Intensive case management teams; integrated First Nations addictions care coordination; and
- Clinical telehealth pharmacy services to support healthy medication use in First Nations communities, among others.



Emerging Opportunities



**Overdose Data and
First Nations in BC**
Preliminary Findings

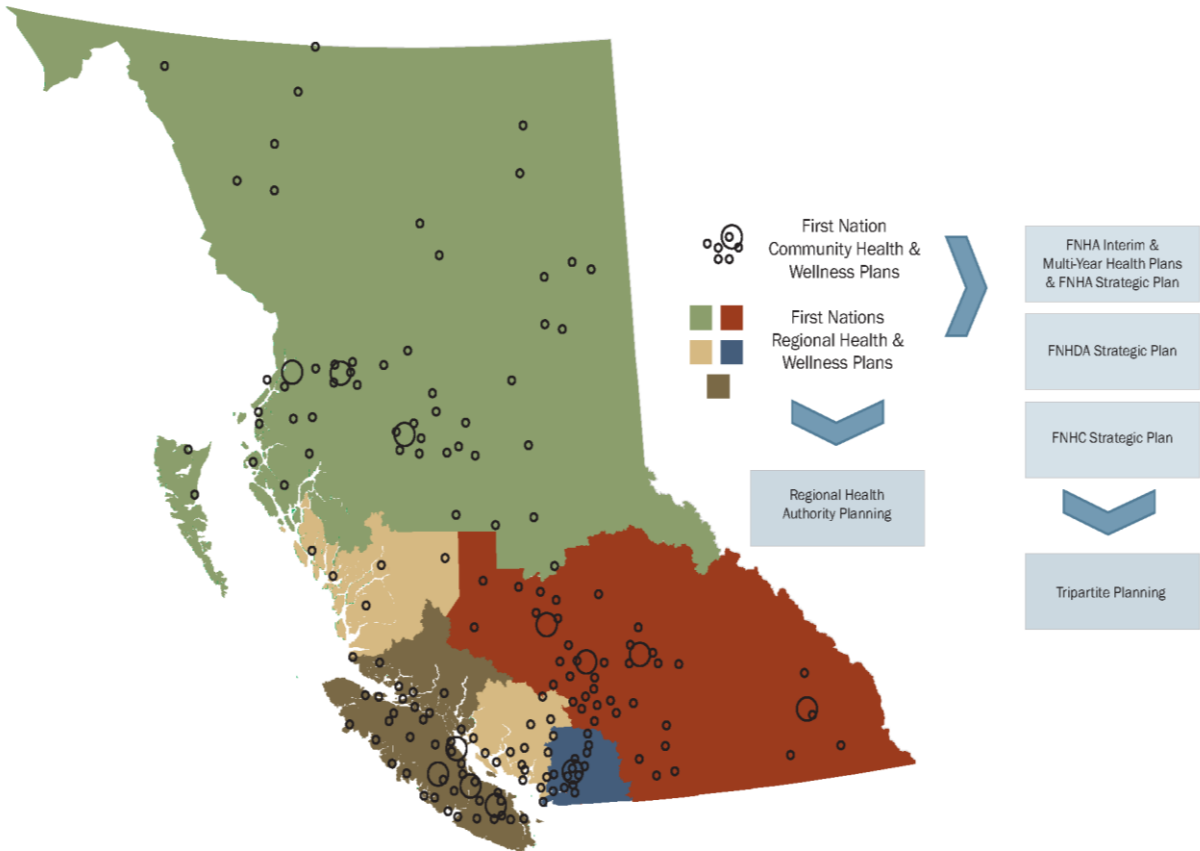


First Nations Health Authority
Health through wellness



First Nations Planning Approach

A comprehensive planning model, grounded in community and regional plans and priorities



- FNHA Multi-Year Health Plan Goals:*
1. *Enhance First Nation Health Governance*
 2. *Champion the BC First Nations Perspective on Health & Wellness*
 3. *Advance Excellence in Programs & Services*
 4. *Operate as an Efficient, Effective, and Excellent First Nations Health Organization*



Today

Long waitlists and substandard service

Western biomedical model

Crisis response and focus on deficits and disease

Decisions made about and without First Nations

Fragmented and siloed systems and services

**Transforming the System:
Our work together**

Tomorrow

Improved quality of services

Best of western and traditional healing and wellness approaches

Mental health and wellness promotion across the continuum

Community ownership through Nation-based and Nation rebuilding approaches

Integrated system design and service delivery



In Summary

- Introduction of Policy Statement and Program Framework
- Describe the context for action
- Highlighted the opportunities for system change
- Emphasis on the First Nations planning model going forward



Thank you

Gayaxsixa (Hailhzaqvla)

Huy tseep q'u
(Stz'uminus)

Haa'wa (Haida)

Gila'kasla (Kwakwaka'wakw)

Kleco (Nuu-Chah-Nulth)

kwukwstéyp (Nlaka'pamux)

Snachailya (Carrier)

Mussi Cho (Kaska Dena)

Tooyksim niin (Nisga'a)

Kukwstsétsemc

(Secwepemc)

č̣əč̣əhaθəč̣ (Ayajuthem)

Sechanalyagh (Tsilhqot'in)

kw'as ho:y (Halq'eméylem)

T'oyaxsim nisim (Gitxsan)