

# Sts'ailes Yeqwethet Ten-Year Health & Wellness Plan 2019 - 2029



**Ixel Sq'ooq'otel**  
Paddling Together

## **Sts'ailes Yeqwethet Mission Statement**

Sts'ailes Yeqwethet ma'eméstexw  
hi:kw s'í:wes we'éy ol mekw' sts'o:

Sts'ailes Yeqwethet delivers culturally holistic services by blending Sts'ailes culture, traditions and modern medicine to build strong people from birth to spirit.



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# INTRODUCTION

## Ts'ahéyelh Xwelám to Sq'ép - Opening Prayer

*Ō Chichelh Siyam ts'ithome xwela telo wayel,*

It is with good feelings that we present *Ixel Sq'oq'otel* - Sts'ailes Yeqwethet Ten-Year Health & Wellness Plan. This plan expresses where we come from, who we are, and where we are going in terms of health and wellness for Sts'ailes *Xwelmexw* from birth to spirit life.

We are taught that when we take care of the Spirit, it will take care of us. With this *Si:wes* in mind, we first pray to the Spirit and give thanks for everything we have received. We stand with humility and purpose to bring forth spirit, health and wellness for our people.

Next, we share the energy of our *Sqalh*, who often stand before us to welcome friendly visitors to our territory. They are our most precious resource, and one of our most vulnerable people that we strive to protect and grow. We welcome their presence as a healthy reminder of why we do what we do.

We also make space for the wisdom and guidance of our *Siyólexwe*, who hold a special place in every environment, whether that be in a circle, a longhouse, a meeting room, or dining space. We turn to our *Siyólexwe* for knowledge, encouragement and experience as our living experts. We welcome their guidance.

Finally, there are the adults, parents, aunts and uncles who keep the village functioning. We give thanks for their diligence and hard work. They are the strength upon which we stand on. We welcome their hearts to the table to get the work done.

Enjoy the Sts'ailes Ten-Year Health & Wellness Plan!

*Mexw tel sq'ó*  
**All My Relations**

## Guiding Principles

### Every Door Is the Right Door Principle

Every door is the right door.  
Wherever or whoever you turn to for help, you will be connected to resources.  
We are here to help and no one will be turned away.  
This is our commitment to the people.

### Wellness from Birth to Spirit Life

We recognize that there are life-long benefits when our people are provided a continuum of care and empowerment for their self-reliance and interdependence.

### We also commit to the Seven Laws of Life as our guiding principles:

|   |   |
|---|---|
| <b>Health</b><br><i>Áylexw</i>                  | This refers to being balanced in spiritual, mental, physical and emotional aspects of life. If we take care of ourselves in those four ways we can achieve optimal health. Even in sickness or illness, we can still live a healthy balanced life. It is simply a matter of taking care of oneself. |
| <b>Generations</b><br><i>Tem Ts'elhxwelmexw</i> | We must always keep the seven generations of our past and seven generations of our future in mind when we make decisions on behalf of our communities. We must keep the seven laws of life intact and ensure the sacred agreement is remembered for generations to come.                            |
| <b>Humility</b><br><i>Áxwest</i>                | Humility means that we must remember that we are not bigger or better than anyone or any other being. Humility takes practice and often times patience.   |
| <b>Forgiveness</b><br><i>Kwát</i>               | I struggle the most with this teaching. Forgiveness begins with me and no others. It is an internal experience. Honestly, I am still figuring this one out, and learning how to forgive.  |
| <b>Understanding</b><br><i>Q'e'í:les</i>        | For me this teaching is being okay with how things are or how things turn out. For instance, I may not agree with something, but to reach for understanding is a first step in building healthy relationships.  |
| <b>Generosity</b><br><i>Lexw'éy</i>             | We must give without expecting anything in return. We must help those in need. This is another teaching I struggle with in the sense that sometimes we give too much.   |
| <b>Happiness</b><br><i>Xwoyíwél</i>             | Happiness is a state of mind – it is a healthy place of mind.   |

# Reclaiming Xaselmethox - Self-Determination

We commit to paddling together for the achievement of *Xaselmethox*. We recognize that there are life-long benefits when our people are provided a continuum of care and empowerment for their self-reliance and interdependence.

As Sts'ailes we continually plan with purpose and prepare for growth. This multi-year plan is one more significant, diligent step in Sts'ailes owning a greater role in our own health and wellness. We have practiced planning for future generations for millennia; however, according to our recent history, the first documented health plan started over twenty years ago with a five-year health plan.



Five-Year Health Plan signing 2004.

In 1999, this plan was referred to as “Health Transfer” where Health Canada transferred significant health and fiscal responsibilities over to a Nation that demonstrated a strong foundation for self-administration, accountability and sufficiency. We called this the first “Five-Year Health Plan”. This was a transformative shift in reclaiming our collective responsibility for one another.

In 2004, we signed a second Five-Year Health Plan to carry on the good work. Then in 2009, we signed a Ten-Year Health Plan – the first non-treaty Nation in Canada to sign this milestone document.

Today’s Ten-Year Plan will inform the on-going development of programs and services. This plan also serves to promote our desire for meaningful collaboration and partnership with existing and future stakeholders.

In 2013, the Province of BC transferred health care from the Government, through Health Canada, to First Nations, which resulted in the formation of the First Nations Health Authority (FNHA).

Sts'ailes also engaged in the Comprehensive Community Planning (CCP) process from 2014-2016. The Sts'ailes CCP (*Xwelam te Letsemót Sts'ailes*) was adopted in 2016 as a plan for the community by the community. The information from the CCP informs this plan.

In 2019, Sts'ailes leadership began implementing what we call *I:westeleq*, which we consider Sts'ailes’ mandate letters from the leadership that expresses the political will of Sts'ailes for the current Chief and Council term. Each *I:westeleq* is informed by departmental long-term planning, the CCP, the Sts'ailes Vision 2060, and engagement input.

Download a copy of the *Sts'ailes CCP on the Sts'ailes website at: [stsailles.com/publications](https://stsailles.com/publications)*

We have experienced generations of trauma and tragedy as a result of government policies aimed to take away our rights and disrupt our family systems. The health of our people has been impacted immensely through colonization (the Indian Act) which took away our rights to live in peace.

Where at one time it was against the law to practice our culture and traditions, it is now celebrated as a key part of our healing and wellness.

Where at one time it was illegal to speak our language, today there is government policy and mandates to support language revitalization.

Historically, Sts'ailes village sites were a hub for traditional medicine and spiritual healing, and we still carry this honor today. Governments are beginning to recognize this, which is transformative for our relationship with them.

Through healing, traditional practices, innovation, and assertion of our rights and title, we are rising above. Although the arrival of Euro-Canadians resulted in dramatic impacts and changes to every aspect of life, it did not alter our deeply rooted connections to *Xá Xa Temexw*. By overcoming adversity, we found ourselves standing on the strength of our experiences. We have survived. Now it is time to thrive.

Ten-Year Health Plan signing 2009.



## The Beating Heart – We Are Sts’ailes

We, the Sts’ailes, are an intact tribe and assert our sovereignty. Our name, meaning “heart on the chest” or “laying on the chest”, refers to the beating heart and is derived from an ancient and formative battle between *Xals*, the Transformer, and *Shay*, a powerful *Shxwla:m*. Both this battle and our name are eternal reminders of *Snowoyelh te Xáxa Temexw Te’i*.

We as Sts’ailes people have inherited rights and responsibilities to inhabit and steward *Xa’xa Temexw* from our ancestors who have instilled deeply rooted values about respect for all living things. Our ancient stories relate moral teachings, the origins of well-known cultural landscape markers, and significant historic events in the history of Sts’ailes. For as long as anyone can remember, our traditions have

focused on fish and fishing, water and canoes, longhouses and pit houses, hunting, trapping, and plant gathering. We embrace traditions in cedar, weaving, and a strong spiritual life including *Seowen*, *Sxwoyxwey*, and transformer legends that shape our traditional laws and protocols, which we continue to live by.

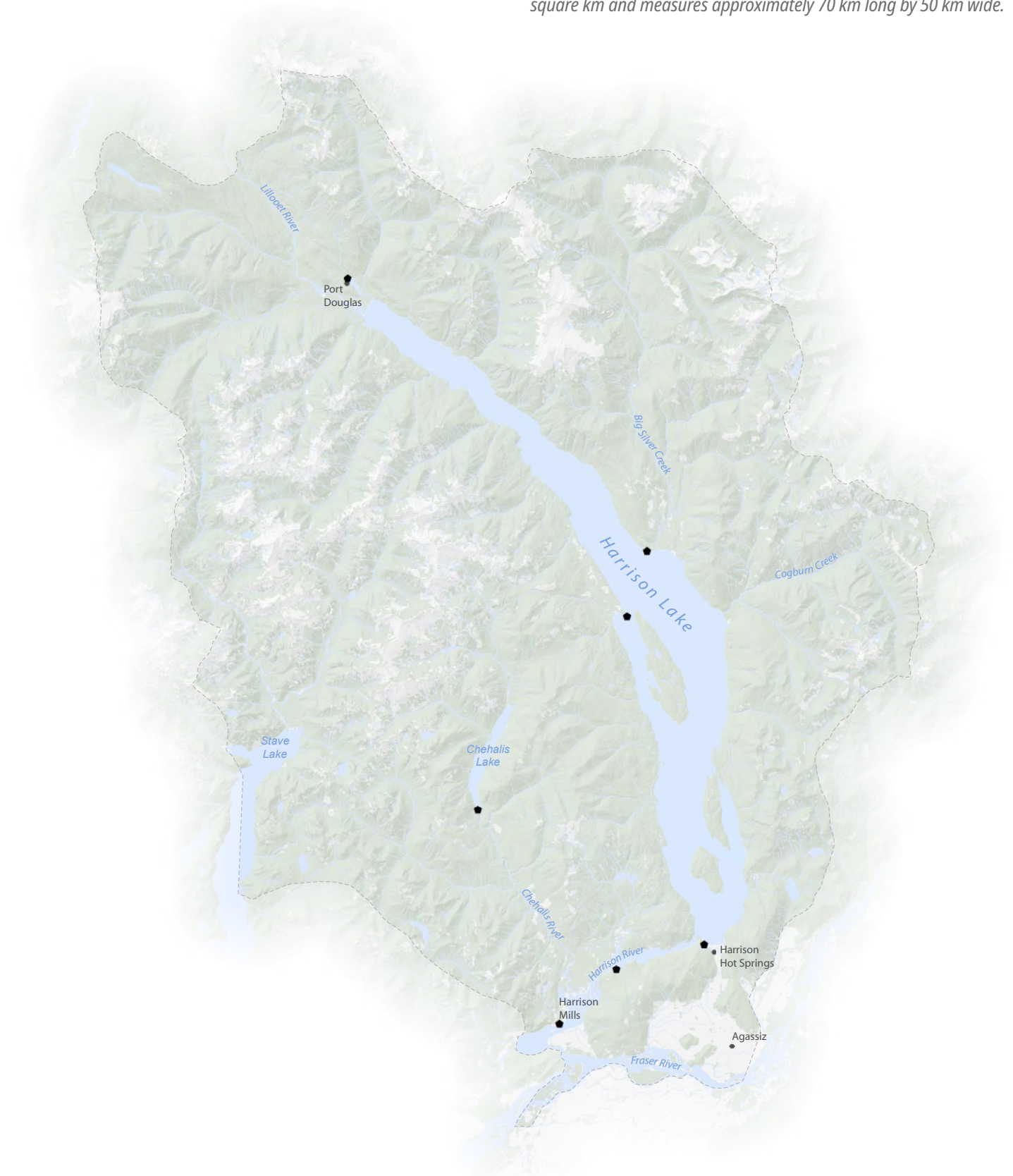
The village we live on today is one of over 30 ancient villages and lookout sites and is surrounded by scenic trees and mountains located about 100 km east of Vancouver, British Columbia on the banks of the Harrison River. We are fortunate to live in this pristine location and to be a progressive community that embraces innovation with our culture and traditions as a foundation for community transformation and nation building.

### Sts’ailes Population Statistic (as of 2021)

|   |              |
|---|--------------|
| Registered Males On Own Reserve             | 253          |
| Registered Females On Own Reserve           | 223          |
| Registered Males On Other Reserves          | 38           |
| Registered Females On Other Reserves        | 42           |
| Registered Males On Own Crown Land          | 0            |
| Registered Females On Own Crown Land        | 0            |
| Registered Males On Other Band Crown Land   | 6            |
| Registered Females On Other Band Crown Land | 2            |
| Registered Males On No Band Crown Land      | 0            |
| Registered Females On No Band Crown Land    | 0            |
| Registered Males Off Reserve                | 262          |
| Registered Females Off Reserve              | 291          |
| <b>Total Registered Population</b>          | <b>1,117</b> |

## Sts’ailes Traditional Territory

*Sts’ailes traditional territory covers a geographical area of 3,500 square km and measures approximately 70 km long by 50 km wide.*



# OUR TEAM AND SERVICES

The Yeqwethet team operates collectively. The main programs under the Yeqwethet umbrella are *Lhá:w*, *Áylexw*, *Sayem*, *Halq'emeylem*, and *Sò:m*.

|                               |   |  |
|-------------------------------|---|--|
| <b>Yeqwethet Lhá:w</b>        | <i>Lhá:w</i> is our Community Health program that administer medical services.  | <i>“Lhá:w” means “to heal”</i>                                     |
| <b>Yeqwethet Áylexw</b>       | <i>Áylexw</i> is our Community Wellness program that is responsible for prevention services, including sports, recreation, and community programs.        | <i>“Áylexw” refers to “wellness”</i>                               |
| <b>Yeqwethet Sáyéem</b>       | <i>Sáyém</i> is our Mental Health program dedicated to raising awareness about mental health and to helping our people navigate the mental health system. | <i>“Sayem” means “to ache or hurt”</i>                             |
| <b>Yeqwethet Halq'eméylem</b> | <i>Halq'eméylem</i> is our language revitalization program.   | <i>“Halq'eméylem” is the Sts'ailes language used today.</i>        |
| <b>Yeqwethet Sò:m</b>         | <i>Sò:m</i> is our management team aka “administration” team.   | <i>“Yeqwethet” means “to straighten out, to make things right”</i> |
|                               | <i>Sò:m</i> provides overall guidance, direction, and support to all Yeqwethet programs.  | <i>“Sò:m” means “promise of good services”</i>                     |

## Yeqwethet Roles + Responsibilities

### YEQWETHET MANAGEMENT & YEQWETHET SAYEM

- Health Director**  
Reports to CAO
- Ensure all policies and procedures are followed
  - Oversee all Yeqwethet programs
  - Staffing – Supervise, ensure involvement and commitment, provide leadership to team, advocate for services and resources, ensure community engagement when necessary
  - Strategic planning (long and short term)
  - Take direction from CAO
  - Reporting to FNHA, Council, DO / DMO, Health Managers, Community and other Funders

- Develop and maintain positive working relationships with outside providers and partners (Networking and lobbying)
- FNHA funding agreement – negotiate, monitor and oversee
- Manage and oversee budget
- Develop and implement language revitalization
- Collaborate with other Sts'ailes Departments
- Play lead role in Letsemot team
- Direct supervision

**Executive Assistant**  
Reports to Yeqwethet Director

- Support to Health Director
  - Scheduling
  - Meetings (prep, host, minutes etc.)
  - Administrative duties: Word processing, copies, material, assist with reports
- Support Health Team
  - Tech support, communications
  - Website and TV screen
  - Financial: Master card, financial reports, process
  - Xyntax lead
  - Other projects as requested

**Mental Health Navigator**

Reports to Yeqwethet Director

- Promote and enhance mental wellness by reducing the stigma around mental health
- Bridge way to communication and help eliminate barriers
- Provide Direct support to Sts'ailes community and front line workers
- Establish network of support services and collaborations to connect people with
  - Fills gaps in services
  - Keep updated on mental health issues
  - Organize training, workshops and events for staff and Community
  - Sts'ailes traditional practices and wellness plan
  - Suicide and prevention and awareness, response
  - Addiction awareness
  - Trauma response plan and awareness
  - Mustimuxw
  - Reporting
  - Treatment enrollment
  - Addictions programs
  - Psychosis support
  - Indian day school
  - Letsemot team (canoe journey / programs supports)

**Language Coordinator**  
Reports to Yeqwethet Director

- Plan, Coordinate, and Implement Language programs
- Administer FPCC Funding as per funding arrangement
- Work in collaboration with other departments to offer Halq'eméylem learning initiatives
- Promote Halq'eméylem in community
- Prepare final and interim reports
- Seek and apply for funding opportunities

**Jordan's Principle Coordinator**  
Reports to Yeqwethet Director

- Administer Jordans Principle program as per ISC Contract
- Support families with applications
- Support communities with applications
- Deliver JP services to Scowlitz, Leqamel, Mission, Matsqui
- Regular reporting to ISC
- Increase awareness about JP program
- Share information about JP program

**YEQWETHET AYLEXW**

**Aylexw Manager**  
Reports to Yeqwethet Director

- Manage Aylexw programs
- Emergency preparedness program
- Coordinate community Aylexw events
- Oversee budgets for Aylexw programs
- Write small proposals for programs
- Maintain partnerships with outside agencies
- Maintain relationships with the community and parents
- Manage Aylexw staff
- Communication; ensure the community is informed of events and programs
- Letsemot team
- Reporting
- Finance

**Health Administration Assistant**  
Reports to Aylexw Manager

- Assist with planning, organizing of community events
- Admin support to health staff
- Assist with EPP
- Provide back up for health reception
- Schedule / arrange meetings, take minutes
- Patient travel
- Purchase supplies for all health programs
- Maintain files
- Ensure financial documents are handed in & completed to set timelines
- Communication & FB posts

**Sports and Recreation Leader (1)**  
Reports to Aylexw Manager

- Plan & lead programs
- Plan/make monthly Aylexw program calendar & posters
- Community outreach
- Make supply & grocery lists
- Grants for A.R.W.J & Fit Nation
- Assist with community event preparations
- Program reporting/stats
- Communication and FB posts
- ISPARC Training

**Sports and Recreation Leader (2)**  
Reports to Aylexw Manager

- Main contact for JOY program
- Assist with program
- Support for Aylexw programs
- Assist in other in the health team
- Community outreach
- Assist with community event preparations
- Plan and make monthly Aylexw calendars/programs
- Plan & Lead programs
- Recording program stats
- ISPARC training
- Communication & FB Posts

**Prevention and Intervention Worker**  
Reports to Aylexw Manager

- Assist Aylexw and Snowoyelh and team to advocate for youth to ensure supports provided are culturally based
- Support Sts'ailes Youth in keeping them safe and ensuring their wellbeing
- Assist in processing referrals
- Networking for other supports services beneficial to our youth
- Being the link between Snowoyelh, Yeqwethet and Sts'ailes School.
- Assist in report writing
- Support youth in care.
- Attend community events and ceremonies
- Attend letsemot meetings

**Youth Cultural Worker (x2 female / male)**  
Reports to Aylexw Manager

- Implementing culture into programs hosted in Aylexw
- Knowledge of Sts'ailes family systems
- Cultural supports for youth
- Promoting healthy lifestyles for youth
- Advocate for youth, individuals, and family members.
- Assist in preparing reports
- Support youth in care
- Attend community events and ceremonies



## YEQWETHET LHA:W

### Footcare Nurse RN

Reports to Yeqwethet  
Director

- Foot Care to Elders and Diabetics
- Provide all diabetics an opportunity to receive foot care on a regular basis
- Provide foot care to elders and diabetics based on their individual needs including assessments and interventions
- Communicate and collaborate regularly with care team
- Reprocess instruments between clients
- Provide teaching as needed
- Monitor high risk clients
- Refer clients as needed
- Assist with complex clients as needed
- Project work as needed
- Yeqwethet Lhaw nursing support

### Medical Office Assistant

Reports to Yeqwethet  
Director

- Greeting patients, community members
- Updating patient files
- Assistance to Nurses/CHR
- Answer phones, call reminders, book appointments
- Working with other providers (Dr, NP, Vision, Hearing, Foot care)
- Communication with pharmacist with patient meds
- Requesting patient lab/x-ray and other providers
- Petty cash, cheque requisitions, purchase orders
- Oversee on call staff
- Medical travel
- Reception information screen
- Mustimuxw – oversee all accounts and info

### Community Health Representative

Reports to Yeqwethet  
Director

- Assist Nurses/Home Support Workers
- Pre and post-natal
- Assist with Immunizations
- Water testing (weekly and annual of band building, residential)
- Home inspections with EHO
- Plan monthly meetings
- Harvesting traditional medicines, cedar
- Attending Elders Trips
- Medical transportation to band office
- Dental kits every 4 months
- Fundraisers
- COHI
- Hearing
- Mammograms
- Mustimuxw

### Public Health Nurse RN

Reports to Yeqwethet  
Director

- Health education & Promotion
- Community program support & Development
- Public health emergency management & support
- Case management
- Acute and chronic illness support and management
- Immunizations
- Pre/post-natal care
- Infant/child/care
- Mental health support
- Home care program support
- Medical clinic support
- Letsemot team support
- Mustimuxw

### Home Care Nurse LPN

Reports to Yeqwethet  
Director

- Acute & Chronic support management
- Supervise/Lead home support care services
- Reporting as required
- Case management
- Community program & support development
- Medical clinic organizing
- Health education
- COHI/Footcare support
- Communication/Administration
- Wound care
- Mustimuxw
- Elders Day Programming (Walks and Sit, Stand, Strengthen)

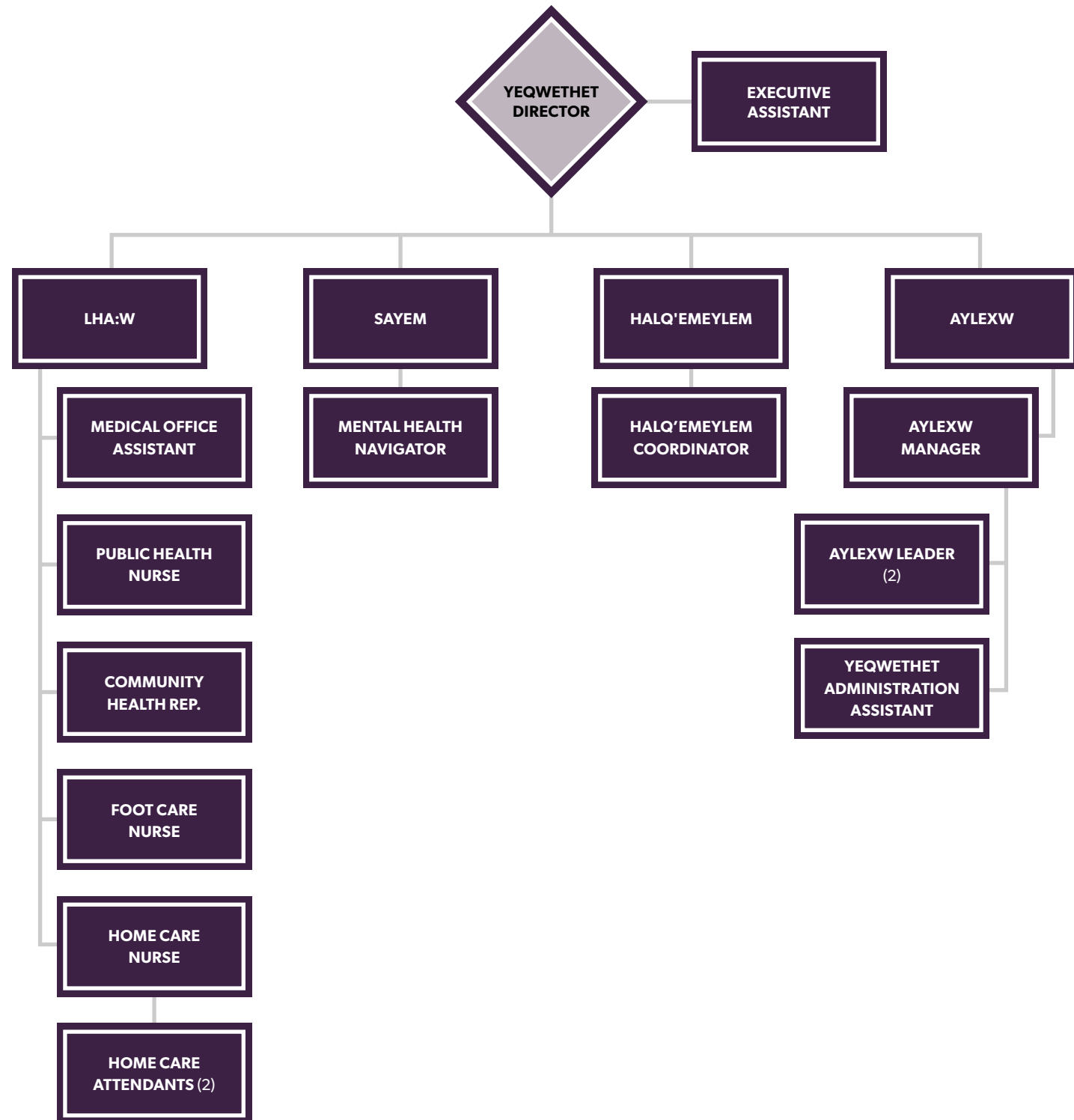
### Home Support Attendant (x2)

Direct Supervisor:  
Eleanor Joe

- Home & community support
- Personal care
- Light housekeeping (as needed)
- Massage
- Therapeutic direct observation if elders are lonely
- Program support
- Mustimuxw
- Delegation of tasks
- Client transportation(as needed)

# Yeqwethet Skw'iytel - Organizational Chart

The Yeqwethet *Skw'iytel* refers to our Org Chart.



# Letsemót Services

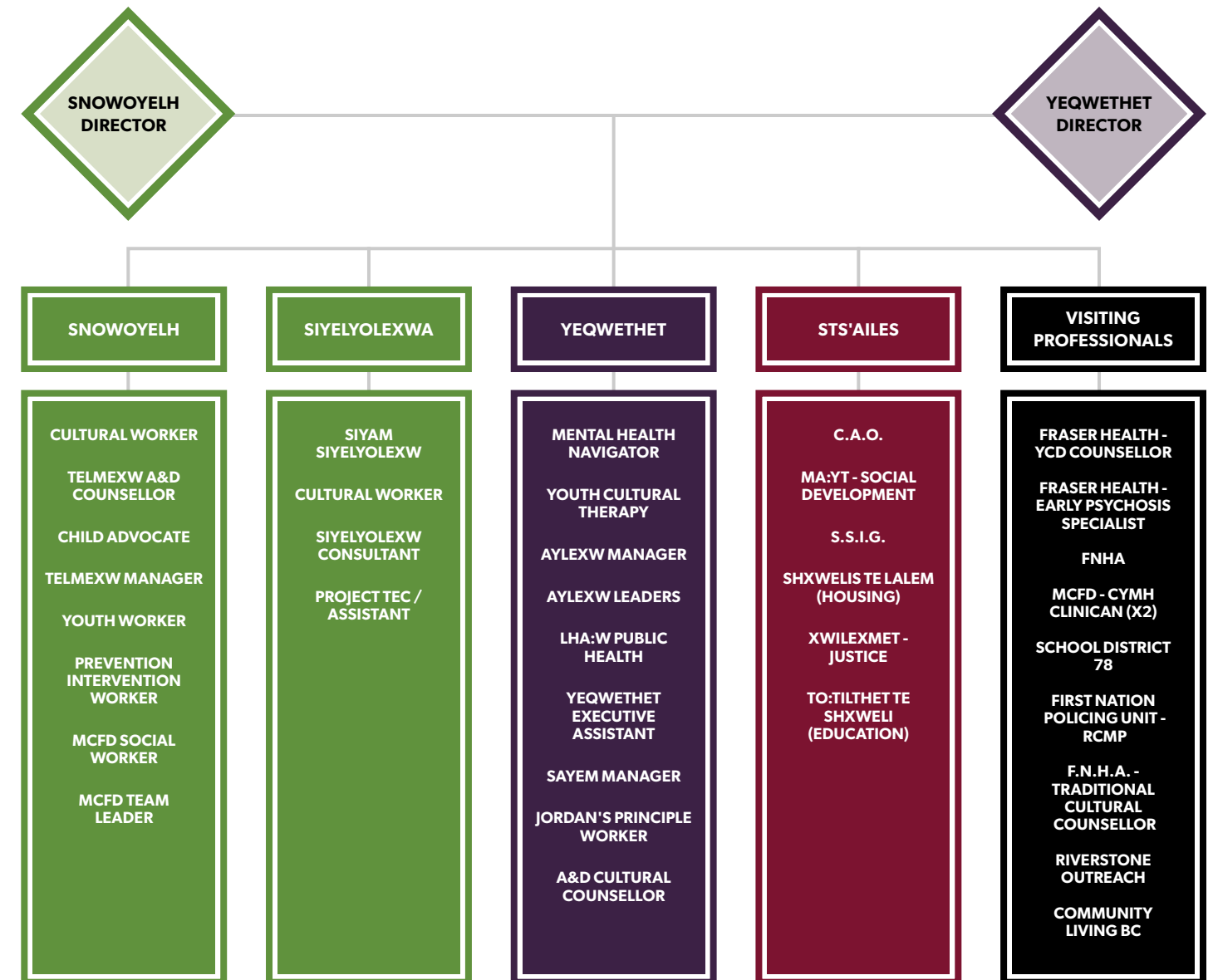
Letsemót Services is the Sts'ailes approach for service teams to work together to provide streamlined services. Letsemot Services was created to ensure that we are not duplicating services and to help ensure a continuum of care in the Sts'ailes way.

## Letsemót Internal partners:

- Snowoyelh
- Yeqwethet
- To:tilthet te Shxweli (Education)
- Shxwelis Te Lalem (Housing)
- Ma:yt
- Xwilexmet - Justice

## External partners:

- Fraser Health Authority (FHA)
- First Nation Health Authority (FNHA)
- Ministry of Children and Family Development (MCFD) Others when needed



# Séqseló:s - Seasonal Calendar

We live by the four seasons, so it makes sense to coordinate our major programs in this fashion. Here is our Séqseló:s.



# Our Partners

One of the Sts'ailes principles is to embrace relationship-building with others. We acknowledge that we are in a place of reclaiming nation-building, and we acknowledge that this takes collaboration with others. Here is the current list of our main partners, including funding agencies. There will be more partners and funders along the way.



First Nations Health Authority  
Health through wellness



Better health. Best in health care.



ISPARC  
Move | Play | Compete



FIRST PEOPLES'  
CULTURAL COUNCIL



Emergency  
ManagementBC

Many other partners and funding agencies.





*Sts'ailes and Musqueam U7's in the 2019 Sts'ailes Youth Soccer Tournament.*

# ENGAGEMENT FOR THIS PLAN

*" The majority of Engagement for this plan was done in 2019. We understand that there has been significant change during this time. "*

*- Nauness, Janice  
George, Yeqwethet  
Director*

The plan was spearheaded by the Yeqwethet Team. The method of creating the plan was community-based and member-driven that involved community members both on and off reserve, including children, youth, elders, staff and the leadership.

- 1 Elders Survey, 15 Participants
- 1 Youth Survey, 17 Participants
- 1 General Survey, 164 Participants
- 1 In-Person Health Fair, est. 200 Participants
- On-going social media engagement
- Community Input at Community Engagement Activities
- Staff Input at Planning Sessions
- Leadership Input



# STS'AILES ÉLIYÁ STS'AILES VISION

There are many guiding documents and approaches to visioning and planning for Sts'ailes health and wellness.

## Sts'ailes Vision 2060

In the 1990s, Chief and Council of the day drafted a Vision 2020 that outline what the community would look like by the year 2020. The Vision 2020 was a living document throughout each Chief and Council term. Recently, Chief and Council drafted a Vision 2060 in the spirit of the Vision 2020. The Sts'ailes Vision 2060 can be found under Appendix 1

## Xwelam te Letsemót Sts'ailes – Sts'ailes CCP

From 2014-2016 Sts'ailes carried out the Comprehensive Community Plan (CCP) process. This is a plan made by the community for the community, and is intended to align with the Community Vision 2060, the Sts'ailes I:westeleqs (Sts'ailes mandates). See Appendix 2 for an excerpt of the Sts'ailes CCP visioning section that pertains to Sts'ailes health and wellness.

## I:westeleq

The general translation for **"Iwesteleq"** is to say "we are living our teachings". The word "iwes" refers to "teachings", which refers to Sts'ailes traditions, beliefs, and principles. The addition of "teleq" adds to the word "iwes" to indicate that we are fulfilling our traditions, beliefs and principles through our actions.

In 2019 Chief and Council drafted mandates for each Sts'ailes team and major initiative. These mandates are informed by:

- Sts'ailes CCP (Comprehensive Community Plan)
- Sts'ailes Vision 2060
- Community engagement activities (i.e. open houses, surveys, etc.)
- Chief and Council strategic planning
- Directors/Mangers/Officers (aka DMOs) strategic planning
- Employee input

The Yeqwethet I:westeleq can be found under Appendix 3.

In 2019 the Yeqwethet Team was asked “What do you see for Sts’ailes health and wellness in the year 2029?”

- Treatment centre
- Health Care Centre/culture centre with office space and kitchen
- Quality improvements and accreditation standards
- Community garden
- Traditional foods and medicine
- Medical services
- Waterpark, bigger skatepark, playground in the community
- Elders complex
- Handicap safe facilities
- Bigger school
- Dental office
- Driver for medical transportation
- Life lab
- Professionals, Sts’ailes Employment
- Connections with everyone in the community (both way outreach)
- Proud
- Home
- Keeping up with technology
- Gym, kitchen, sports, all ages
- Health, wellness and mental health
- Welcoming post
- Pre-natal
- “Building more than just a building”
- Building on ocean canoe
- Letsemót services
- Language revitalization plan
- Community censuses
- Data governance
- Off-reserve services
- Medical transportation
- Year-round youth employment (age gaps)
- Canoe journey
- Traditional medicines
- Pediatrician Services
- Matching services with resources
- Dietician, nutrition
- Quality services that work



Sts'ailes Community garden. (Photo courtesy of Janice George)

# KW’ÓMKW’EMTSET OUR STRENGTHS

*Kw’ómkw’emtset* (our strengths) carry us through the challenging times and bring us to achievement.

## WE ASKED OUR PEOPLE

In your opinion, what are the main strengths in Sts’ailes?

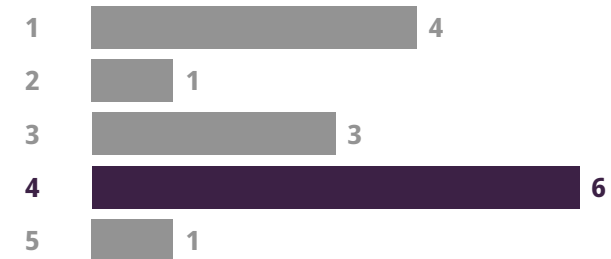
Answered – 135 Skipped – 29

**culture** community family  
health people sports support strong  
know health department gatherings leadership  
cultural one

## WE ASKED OUR ELDERS

How would you rate (out of 5) the services provided under Community Wellness? (known today as Aylexw)

Answered – 15



**Comments:**

- Need more doctor, dentist and home support (3)
- Not enough home support workers (5)

## WE ASKED OUR ELDERS

Overall, how would you rate (out of 5) the Sts’ailes Health & Family Services Department overall?

**Comments:**

- work load too much (1)
- need more space and privacy (4)

## WE ASKED OUR ELDERS

Please tell us what you like the MOST about the HFS Program.

- Need two doctors
- Having a doctor here once a week
- They are right here in Sts’ailes (5 respondents)
- Foot care (2 respondents)
- Marg Hamilton
- Gas vouchers (2 respondents)
- That we have a Indian doctor
- Helping with the traveling
- Appointments easily available
- Nurses are knowledgeable about our needs
- Postings on fb (2 respondents)
- Doctor B and the NP
- Community based
- Phone call reminders
- Another doctor day (2 respondents)
- Twice weekly
- Services are provided to our people are more comfortable in their home
- They have no transportation
- They don’t know what they are eligible for, like dentures, glasses and hearing aids and equipment
- Would like transportation provided for doctor, dentist and special



# XWÉYLEMT TE TÉLMELS OUR CHALLENGES

*Xwéylemt te télmels* reflects our challenges, which will help identify gaps that we need to bridge and areas for growth.

In 2019 the Yeqwethet Team was asked “*What do you see as “anchors” or challenges for achieving health and wellness?*”

- Stigmatism
- Lateral violence
- Space
- Lack of Data
- Age gaps in services
- Lack of training
- Lack of resources (vehicles and drivers)
- Not reaching everyone
- Fear of change (doctors, etc.)
- Service hours
- Insufficient funding for infrastructure (capital, maintenance, etc.)

## WE ASKED OUR ELDERS

**Are you satisfied with the Elders programming from the Health & Family Services?**

**Yes Votes – 4**

**No Votes – 9**

- They don't respect elders in the community
- Not enough
- No apology for no meeting space for ones that want to get together for socializing
- No meeting place, elders building, not enough space for gathering
- Need elders list
- Need regular monthly meetings (2 respondents)
- Not enough communication
- Do more stuff
- Mid-month meetings
- Need more helpers

**Spoiled Votes – 2**

**Please tell us what you like the LEAST about the HFS Program.**

**Doctor Comments**

- Doctor visit at no sufficient time
- Need male doctor (3 respondents)
- Would like to see another doctor and more nurses
- Need doctor more often

**Please tell us what you like the LEAST about the HFS Program.**

*(Continued)*

- Need more doctor
- We need more doctor visits
- Would like doctor two times a week or more doctors
- More time

**Nursing and Home Support Comments**

- No help at home
- The way you can't have a helper for an elder when they are sick
- Need certified home support workers
- I like more nurses
- There is no house calls for the nurse

**Transportation Comments**

- No transportation for elders to appointments
- No transportation here or out to town
- Transportation for doctor visits and shopping

**Other Comments**

- The elders building was taken away
- No space for privacy
- Need confidentiality
- Fraser Health not there for us



*Stelmexw Stlaxwtxw 2019.*

# MOMÍ:YTSET GOALS + OBJECTIVES

There are EIGHT overarching Momí:ytset broken down into program-specific objectives.

1

**Yeqwethet S'ò:m** (Administration) operates efficiently and effectively, providing leadership and direction to the Yeqwethet team.

2

**Sáyém** (Mental Health & Wellness) strives to provide healing through a holistic approach using modern and traditional medicine and Sts'ailes Snowoyelh.

3

**Lhá:w** (Community Health) operates to meet high standards.

4

**Áylexw** (Community Wellness) delivers safe, fun, healthy cultural programs, that create new experiences and healthy lifestyles through prevention for all ages and stages of life.

5

**Má:yt Tloqá:ys** (Emergency Management) engages our community on emergency preparedness, procedures, and risks to ensure community safety and effective response.

6

**Halqe'meylem** endeavors to develop and implement a plan for Halqe'meylem revitalization that will create fluent speakers in Sts'ailes.

7

**Letsemót** Services work collaboratively with one heart, one mind, one spirit to deliver holistic support services, and streamline our approach.

8

**Óyó:lwethet** (Quality and Safety) is an operational standard where we commit to continually evolve and improve health services and standards for Sts'ailes and the Yeqwethet team.

In 2019, Yeqwethet staff were asked "What do we need to achieve our goals and objectives?"

- Culturally holistic services
- Planning (the ten year health plan)
- Professionalism
- Confidentiality
- Blending programs
- Partner with capital and public works
- Training (traditional medicine, finance and budgeting literacy)
- Confidence
- Time, space, equipment
- Teamwork
- Communication
- Clients; full outreach, go above and beyond, more engagement to reach everyone
- Another doctor and another doctor day per week
- New delivery approach
- Increased services
- Adequate funding
- Different hours
- Teen health clinic

1

## S'ò:m - Administration

**GOAL ONE:** S'ò:m (Administration) operates efficiently and effectively, providing leadership and direction to the Yeqwethet team.

### OBJECTIVES:

#### 1. Strategic Planning

- Annual Yeqwethet strategic planning session.
- Ongoing Strategic Planning throughout the year as needed.
- DMO Planning Sessions: Director and Managers participate in bi-annual Directors / Managers / Officers (DMO) Planning sessions and report main outcomes to Yeqwethet staff for their awareness and follow up.
- Regularly review the results of Community engagement, Open Houses, and the Comprehensive Community Plan (CCP), and incorporate feasible goals and objectives into the department strategic planning.

#### 2. Partnerships

- Continue to build and maintain effective working relationships with outside partners and services providers and stakeholders.
- Participate and engage in Fraser Salish Caucus to ensure adequate collaboration in the region.

#### 3. Finance + Budgeting

- Review financial statements at a minimum of a monthly basis and a maximum of a quarterly basis.
- Share budgets and funding formulas with our people.
- Yeqwethet staff to seek at least one training program for finance and budgeting.

#### 4. Data Management

- Maintain data management plans for the various data systems used by Yeqwethet (i.e. Mustimuxw, Xyntax, etc.)



## WE ASKED OUR PEOPLE

### What ideas do you have to help in healing inter-generational traumas and impacts?

Answered – 76 Skipped – 88

- Workshops, Education & Awareness
  - All hours and good notice
  - Awareness for all staff
  - Gaining more skills
  - Relationship building
  - Parenting skills
- Counselling
  - Sexual abuse
  - Meaningful relationships
  - Professionals
  - Empathy
  - Treatment services
  - Counselling in and out of Sts'ailes (don't want to speak to workers who are family)
- Cultural programs
  - Healing on the land, water
  - Holistic services
  - Learning our history
- Recognizing everyone healing is different
  - Being open to the help
  - Time
  - Self care first
  - Public acknowledgement
  - Finding your support system
  - Talk and share
  - Recognizing its inter-generational trauma
  - Having patience
  - Stop the cycle
- Confidentiality & Prompt response
- Physical Health
  - Exercise, sports
  - Positive programs

## 5. Staffing

- a. Support each Yeqwethet staff in their professional development planning, whether through work hours or funding.
- b. Carry out “Wellness Days” for staff.
- c. Cultivate safe and positive working environment for our staff that is informed by staff.
- d. Empower staff to carry out their gifts and learn new things through lateral kindness.
- e. Continue carrying out the following annual responsibilities:
  - Conduct annual evaluations
  - Chart roles and responsibilities
  - Update job descriptions
  - Promote cross-training

## 6. Reporting

- a. Support staff schedules to accommodate report writing
- b. Continue carrying out our scheduled responsibilities in timely reporting:
  - Applicable staff complete quarterly reports to the Director
  - Director completes quarterly reports to Chief and Council
  - Share annual reports to the Community through different mediums and due process
  - Director ensures all reporting requirements are met for funders

# 2 Sáyém - Mental Health + Wellness

**GOAL TWO:** Sáyém (Mental Health & Wellness) strives to provide healing through a holistic approach using modern and traditional medicine and Sts'ailes Snowoyelh.

### OBJECTIVES:

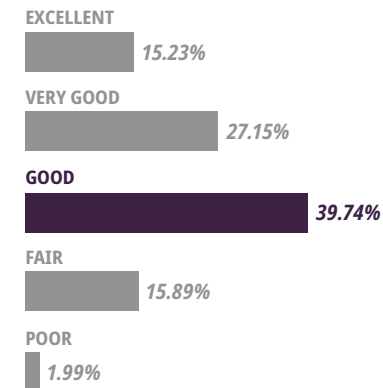
#### 1. Navigation

- a. Build on the existing Navigator position to meet community needs.
- b. Connect out clients with appropriate services that makes sense to them (cultural, spiritual, clinical, etc.)

## WE ASKED OUR PEOPLE

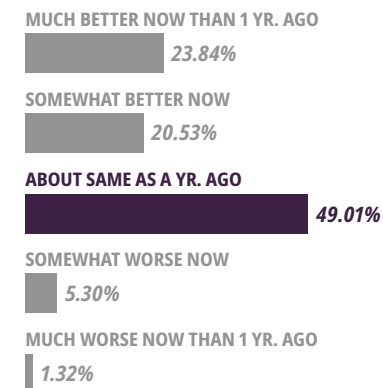
### In general, would you say that your mental health is:

Answered – 151 Skipped – 13



### Compared to one year ago, how would you say your mental health is now?

Answered – 151 Skipped – 13



## 2. Cultural Strengths

- a. Practice creating programs and services according to the traditional seasonal calendar.
- b. Provide spaces and programs for knowledge-keepers to share teachings (hunting, gathering, harvesting, storytelling, drumming and singing, etc.).
- c. Increase knowledge and use of traditional medicines amongst the community.
- d. Draw upon the cultural strengths we each have for our healing and wellness.
- e. Increase spiritual supports for staff and clients.

## 3. Addictions

- a. Provide clients with adequate resources for healing to deal with their addictions.
- b. Develop and maintain relationships with outside service providers regarding addictions services so we may effectively connect our clients.
- c. Champion de-stigmatizing addiction, treatment, relapse and recovery.

## 4. Mental Health Support

- a. Gather member and leadership input on what mental health supports look like.
- b. Train staff on mental health supports.
- c. Offer training and coping tools for our clients and their families to navigate the mental health system and to manage the stigma surrounding mental health.
- d. Increase awareness, decrease stigma, and provide adequate services for mental health supports

## 5. Clinical Care

- a. Ensure that Sáyém connects our clients with clinical care for mental health supports.

## 6. Suicide Response and Prevention

- a. Apply the every-door principle.
- b. Reduce barriers for basic needs through Letsemót services.

- c. Continued support and training on suicide response and prevention for Letsemót staff.
- d. Empower families to build on their awareness and education about suicide response and prevention.

### 7. Harm Reduction

- a. Connect our people with harm reduction services and programs.
- b. Explore harm reduction principles and methods in our own programming.

### 8. Trauma-Informed Practices

- a. Fund staff to take trauma-informed training.
- b. Connect our people to trauma-informed services and programs.

### 9. Grief and Loss Support

- a. Fund staff to take grief and loss-informed training.
- b. Connect our people with grief and loss counselling and support programs.
- c. Promote our traditional practices around grief.
- d. Strategize ways to increase understanding about grief and loss (i.e. storytelling, workshops, etc.).

### 10. Healthy Relationships

- a. Promote healthy relationship-building in our programs and services (i.e. life-skills, communications, etc.) collaboratively.

## WE ASKED OUR PEOPLE



### SOCIAL MEDIA ENGAGEMENT

What are some ways a community can support Survivors of Day School and Residential School with their healing?

- Culture
- Quilts for survivors
- Cover, ceremony for survivors. A 'welcome home' celebration
- A supported visit to the school attended
- Providing space for sharing and speaking; sharing circles
- Have fun days (comedy nights, game nights, craft, wellness days)
- Utilizing our neuro-plasticity, somatic therapy
- Mindfulness to help rebuild neural pathways
- Using traditional foods and medicines
- A monument reclaiming the space to help clear the energy and so we do not forget our history
- Respond quickly when people reach out and to keep reaching out and trying
- Employee self-care

## WE ASKED OUR PEOPLE

Do you feel you are eating well enough to stay healthy?

Answered – 136 Skipped – 28



Yes 71.32% No 28.68%

Do you think you could improve your health by changing your eating habits?

Answered – 135 Skipped – 29



Yes 91.85% No 8.15%

# 3

## Lhá:w - Community Health

**GOAL THREE:** Lhá:w (Community Health) operates to meet high standards.

### OBJECTIVES:

#### 1. Nutritional Health

- a. Develop adequate programming to promote and change eating habits to increase quality of life and prevent disease
- b. Support community members with access to external / internal Nutritional Specialists

#### 2. Maternal/Paternal Child Health

- a. Nursing Support
- b. Immunizations
- c. Connection with adequate external services (i.e. mid-wifery, ob gyn, doulas)
- d. Welcoming newcomers culturally
- e. Ongoing developmental care

#### 3. Youth and Young Adults

- a. Youth clinics: clinical, physical, mental, sexual
- b. Collaboration with Áylexw
- c. Promote physical and mental wellbeing

#### 4. Medical Nursing Care

- a. Palliative and Bereavement Support
- b. Wound care
- c. Medication Management
- d. Hospital Discharge planning
- e. Acute and chronic disease support
- f. Elder care

#### 5. Communicable Disease Control

- a. Immunization
- b. Pandemic Planning and Support
- c. Footcare

## WE ASKED OUR PEOPLE

Are you or a member of your family receiving any home care services at the present time from Sts'ailes? (e.g. foot care clinics, home support)

Answered – 144 Skipped – 20



If yes, are you satisfied with the services you and your family member(s) are currently receiving from Sts'ailes?

Answered – 60 Skipped – 104



## 6. Diabetes Initiatives

- Encourage lifestyle change across all programs, departments, events.
- Programming to improve awareness, education, and encourage healthy eating habits and increased physical activity.
- Support Diabetes management

## 7. Tl'eláxw Máyt – Home Support – Home Help

- Provide supportive services in the home for clients experiencing difficulty managing their daily activities
- Meal support for Home Support Clients and Dialysis patients
- Work collaboratively with Nursing team and other service providers

## 8. Elders Programming

- Elders Day program
- Elders luncheon meetings
- Elders Christmas Lunch

## 9. Childrens Oral Health Initiative (COHI)

- Prevent tooth decay
- Promote oral health within the community

## 10. Safe Drinking Water

- Weekly test sampling
- Regular reporting and monitoring

## 11. Traditional Medicines

- Promote and educate use of traditional medicine practices
- Develop programs for community
- Offer options for mental health and physical management (teas, salves, plant medicines)

## 12. Substance Use Support

- Opioid Agonist Therapy (OAT) in the Health Center
- Tobacco and Alcohol reduction support
- Collaborate with Letse'mot Team

## WE ASKED OUR PEOPLE

Did you have any problems in getting these services?

Answered – 111 Skipped – 53



If yes, please explain:

- While trying to access Alcohol and Drug Treatment
- Took too long to get help
- Assistance with getting services with off-reserve agencies
- Budgetary restraints

### Qò: Sts'ailes Drinking Water Initiative

Yeqwethet Lhaw works with FNHAs Environmental Health Officer to ensure safe drinking water within the community. In collaboration with Shxwelis te Lalem, Capital & Public Works, every week our water is tested at multiple sites for any biological contaminants and to monitor chlorine levels. These samples are also sent to the British Columbia Center for Disease Control (BCCDC) for further microbiology testing and reporting. Based on the results, chlorine is added by our Public Works department to maintain safe water to drink and cook with.

## 13. Specialized Medical Services

- Eye clinic
- Hearing Clinic
- Mammograms
- Doctor/Nurse Practitioner clinics
- Footcare
- Mobile Diabetes Unit

# 4 Aylexw - Community Wellness

**GOAL FOUR:** Áylexw (Community Wellness) delivers safe, fun, healthy cultural programs, that create new experiences and healthy lifestyles through prevention for all ages and stages of life.

**OBJECTIVES:**

### 1. Prevention & Intervention

- Develop programs and services centered on wellness, recreation, fun, and culture.
- Collaborate with related programs and services for prevention and intervention.

### 2. Í:yós:sem Sqa:qele – Babies – “Having Fun with Baby”

- Gather member and leadership input on baby programs for feedback and planning.
- Support and collaborate with Lhá:w (Community Health) on pre- and post-natal services.

### 3. Í:yós:sem Sí:yá:ye – Elders – “Friends Having Fun”

- Gather member and leadership input on Elder programs for feedback and planning.
- Continue running the “Just Older Youth” program and consider the new name “Í:yós:sem Sí:yá:ye” – Friends Having Fun.
- Invite the Youth for cross-generational activities.
- Collaborate with Lhá:w on Elder care and recreation.

## WE ASKED OUR ELDERS

How can we improve future Elders gatherings?

Yes Voted – 5

No Votes - 7

- Too many activities and long drive
- Like more elders meeting
- Liked the rooms and transportation
- Who can go?
- More communities
- No young ones
- Don't go
- By not leaving to travel so far
- Have our own gathering locally
- Need two bus drivers
- Elders need an itinerary of times
- Decide who is going on the bus, elders are priority
- No children
- Awesome to have a family member to look after elders
- More personal helpers
- No alcohol or drugs
- Need more communication with organizer
- Who is an elder?

Spoiled Votes - 3

### 4. Ye éyeso:llh – Teens – “Many Young People Having Fun”

- Gather member and leadership input on teen programs for feedback and planning.
- Host an annual Sts’ailes Youth Gathering.
- Invite the Elders for cross-generational activities.

### 5. Timéthet – Sports and Recreation – “Make Effort, Do All With Ones Might”

- Gather member and leadership input on what type of sports and recreation activities they want to see in the community.
- Continue to run the Recreation Sponsorship program (funded by Chief + Council) that supports community members in recreational activities.
- Continue collaborating with outside organizations (i.e. I-SPARC) on sports and recreation activities for our people.
- Acquire adequate space (a dedicated gymnasium, running track, and equipment) to facilitate sports and recreation activities.
- Promote sports and recreation activities in the community.

### 6. Community Events

- Gather member and leadership input on what kinds of events they want to see in the community.
- Incorporate feasible ideas and input from the 2021 Sts’ailes Youth Gathering on what events that the youth would like to see.
- Continue to host / co-host events relating to Yeqwethet programs, such as:
  - Youth Soccer Tournament
  - Family Fun Day
  - Health Fair
  - Youth Gathering
  - Halloween
  - Community parades
  - National Addictions Awareness Week (NAAW)
  - Honoring Elders and Welcoming Newborns
  - Elders Christmas Lunch
- Contribute to and participate in other Sts’ailes events where possible

## STS’AILES YOUTH GATHERING 2021

Traditional Workshop + Feedback with Cody Dool and Roxanne George

Number of youth: 13 Ages: 8 – 11

Questions that were asked about youth programming and the youth's answers:

### What do you want to see in Sts’ailes youth programs?

- Movie room
- Board game nights
- Eating/dinning room
  - Youth would enjoy coming in to a centre with fully loaded fridge and “free” snacks to choose from
- Pizza nights
- Taco Tuesday
- Froyo Friday
- Hot dog Day
- Young child lounge (for ages 7 – 10)
  - A safe place for the younger children to lounge

### What kind of infrastructure do you want to see within the new Sts’ailes youth centre?

- Computer room
- Workout room
- Locking bathroom (bathroom that made for use of one person at a time)
- Indoor park
  - Slides
  - Ladder
  - Fire pole
  - Foam pit
- Pool

### What kind of a youth worker?

- Athletic person (Someone who can play sport/ games)
- Strong person
- A person who can have fun and make jokes
- Feedback/what was learned
  - 8 youth enjoyed and learned about the ice breaker games
  - Keeping calm with music
  - Learned how important it is to send good vibes and energy
  - How it can be unhealthy to stay awake playing games till 3am
  - How helping elders is good medicine

## WE ASKED OUR YOUTH

Please tell us what you think are the most important HEALTH issues for the youth of Sts’ailes.

1. Addictions
2. Depression/mental health
3. Physical, inactive, obesity, nutrition
4. Chronic Health issues – diabetes, asthma, arthritis, allergies
5. Teen pregnancies

## WE ASKED OUR YOUTH:

What would you like to see made better in Sts’ailes Health & Family Services?

RESPONSE:

OUR OWN TEEN PROGRAM!

*" Always building for prosperity. As long as we stay progressive, our land will prosper for generations to come. "*

## 5 Ma:yt Tloqá:ys - Emergency Management

**GOAL FIVE:** Má:yt Tloqá:ys engages our community on emergency preparedness, procedures, and risks to ensure community safety and effective response.

**OBJECTIVES:**

**1. Community Preparedness and Readiness**

- a. Promote emergency preparedness and readiness tips with the community.

**2. Emergency Response**

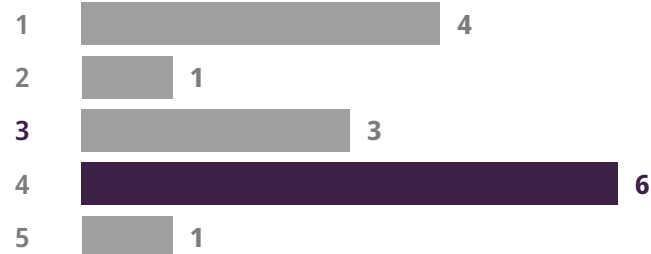
- a. Hire a full-time Emergency Response job position.
- b. Annual review of the Emergency Response Plan.
- c. Seasonal table-top exercises to prepare for potential emergency response.
- d. Advocate for sufficient funding for Emergency Response, which includes (but not limited to) engaging with Indigenous Services Canada (ISC), Crown-Indigenous Relations and Northern Affairs (CIRNAC), and Emergency Management BC (EMBC).
- e. Streamline the appointment and participation of staff volunteers and Sts'ailes Administration responsibilities in the Má:yt Tloqá:ys Emergency Management Plan, including debriefing after an emergency to ensure best response measures possible for future emergencies.

**3. Emergency Training**

- a. Provide / share training opportunities for Emergency Coordinators and Volunteers.

**WE ASKED OUR ELDERS**

How would you rate (out of 5) the services provided under Community Health? (known today as Lhá:w)



**Comments:**

- Need more doctor, dentist and home support (3)
- Not enough home support workers (5)

## 6 Halqe'meylem

**GOAL SIX:** Halqe'meylem endeavors to develop and implement a plan for Halqe'meylem revitalization that will create fluent speakers in Sts'ailes.

**OBJECTIVES:**

**1. Language Revitalization**

- a. Normalize Halq'eméylem in Sts'ailes by renaming programs, departments, and foundational documents or processes.
- b. Address team members and others with Traditional Names.
- c. Promote using the language as much as possible in our conversations, meetings, paperwork, events, signage, etc.

**2. Teaching**

- a. Offer classes to community.
- b. Create a "language nest".
- c. Weave Halqemeylem teaching into existing programs.

## 7 Letse'mot Services

**GOAL SEVEN:** Letsemót Services work collaboratively with one heart, one mind, one spirit to deliver holistic support services, and streamline our approach the Sts'ailes way.

**OBJECTIVES:**

**1. "Every Door Is the Right Door" Principle**

- a. Operationalize and streamline the "Every Door is the Right Door" Principle in our work for Letsemót services.

**2. Communications + Sharing Information**

- a. Streamline our information-sharing and communications in the Sts'ailes way

**What is the "Every Door Is the Right Door" Principle?**

*Every door is the right door.  
Wherever or whoever you turn to for help,  
you will be connected to resources.  
We are here to help and no one will be  
turned away.  
This is our commitment to the people.*

## WE ASKED OUR PEOPLE

Overall, how do you feel about how you have been looked after by the people you have seen from Health or advice, in the last 12 months?

Answered – 151 Skipped – 13

Very Satisfied

16.56%

Satisfied

57.62%

Dissatisfied

5.96%

Very Dissatisfied

1.99%

No Health Care / Advice in last 12 Months

17.88%

### 3. Collaboration

- Case Management for individual and family
- Monthly meetings with entire Leste'mot Team
- Identify areas of opportunity to collaborate
- Joint Event planning

### 4. Inclusivity

- Everyone is welcome
- Services for all ages, individuals and families

### 5. Joint Planning

- Annual Planning Sessions
- Ongoing opportunities

## 8

### Oyo:lwethet - Quality + Safety

**GOAL EIGHT:** Óyó:lwethet is an operational standard where we commit to continually evolve and improve health services and standards for Sts'ailes and the Yeqwethet team.

#### OBJECTIVES:

##### 1. Accreditation

- Continue to maintain and implement high operational standards.
- Maintain Accreditation Certification with Accreditation Canada.

##### 2. Community and Client Feedback

- Continue to be open to community feedback using the following platforms: word of mouth, Social Media, CCP Process, existing programs, 5 year Evaluation process, Council and DMO meetings, Health Fairs.
- Engage with community regularly and provide feedback to Leadership (DMO and Council) appropriately.

#### Tél:exwtset Training and Development

Yeqwethet recognizes that Tél:exwtset is a never ending journey. Therefore, we support one another in professional development training to enhance our skillset when delivering services. Here is a list of the training that the team plans to engage in for the next ten years. Of course, we apply a "grow as go" model, so this list will be adjusted as the times and needs of the community change.

- First Response to Crisis Situation (Crisis Response Training)
- De-escalating volatile situations Communication
- Suicide Response/ASSIST
- Current First Aid and CPR training
- Nurse prescriber course –
- Wound care course
- Immunization certification for home support lead
- Budgets and finance
- Formal proposal writing
- Mustimuxh training
- Minute taking
- College – Traditional medicines
- Class 4
- Mental Health First Aid
- Xyntax
- Conflict Resolution and Dealing with Difficult people
- Level 4 Language
- Beginner Language training
- FNHDA Health Director Certification
- End of Life Doula
- Emotional Competency - September 24th, 2021
- Trauma-informed practices

### 3. Patient Safety (Yeqwethet Committee)

- Yeqwethet Committee of Council will assume the role of Patient Safety Committee and administer a Complaints process in collaboration with the Yeqwethet team.
- Ensure a safe and fair process for accepting and addressing complaints and feedback from clients and families.

### 4. Tél:exwtset – Professional Development

- Equip staff with the most up-to-date, effective, relevant education and training opportunities to ensure adequate capacity to deliver quality services.
- Offer training and educational opportunities to community members as necessary.

### 5. Yeqwethet Team Building

- Maintain a positive, high morale atmosphere for Yeqwethet Team.
- Include Team Building sessions at Planning Sessions, Team Meetings, and other opportunities.
- Address concerns and situations that impact the Team immediately in a culturally appropriate manner.

### 6. Communications Protocol

- Strive for optimal communications at all levels including:
  - How we communicate with the community
  - How we communicate as a team
  - How we communicate with other departments
  - How we communicate with partners and service providers



*Sts'ailes youth harvesting cedar bark for weaving.*

# TOP PRIORITIES

- 1. Nutrition and healthy eating** campaign to promote health lifestyles and raise the quality of life for our people in mind, body and spirit
- 2. Create recreation spaces** for all ages
  - Recreation and wellness centre that includes:
    - weight room
    - gymnasium
    - elders space
    - spaces for traditional gatherings
    - hot tub and sauna
  - Upgrades to the hockey box, including a roof
  - Build a canoe shed
  - Running track with lights
- 3. Prioritize** enhancing mental health services
- 4. Language revitalization**
- 5. Provide adequate support services** to our youth and elders
- 6. Collaborate with external health authorities** to connect our people living away from the community with health services



# LAMTSETCHA - OUR FUTURE

## Putting the Plan Into Action



This plan is an evergreen document that will be put into action through our cultured and comprehensive practices.

### Our People

We work for and report to our members. Our team participates in community engagement activities, such as Open Houses and surveys, where we seek input and feedback from the community and report our achievements. We also report to the community and other stakeholders through the Sts'ailes annual report. Furthermore, we track our progress in achieving goals outlines in the Sts'ailes Comprehensive Community Plan (CCP) that was created in 2016. Yeqwethet will also participate when another Sts'ailes CCP is drafted.

### Leadership

We take guidance and direction from Chief and Council in the form of the Sts'ailes Vision 2060, which sets out the vision of what our community will look like by the year 2060. This vision is described further in the Sts'ailes I:westeleqs ("we are living our teachings"), which are the Sts'ailes version of "mandate letters" from the elected leadership for each Council term.

### Strategic Planning Sessions

Sts'ailes elected leadership, Chief and Council, have two planning sessions per fiscal year, which serve to help set and track our strategic direction. The administrative leadership, also known as the Directors/Managers/Officers (DMO) table also have two planning sessions per fiscal year. And finally, each Dept., including Yeqwethet, have annual planning sessions. This process helps ensure direction and guidance is cohesively communicated.

### Open Houses and Ceremony

We will continue to participate in and gain input from Community Open Houses and community ceremonies.





## Projects on the Horizon

The following are projects that Chief and Council have identified as priority projects. These projects are being carefully carried out through our recently formed project management office “SSIG: Sts’ailes Strategic Initiatives Group”, spearheaded by our Chief Administrative Officer (CAO) and Strategic Initiatives Officer.

### What Is SSIG

- SSIG is designed to support Sts’ailes project planning and long-term implementation of projects
- In November 2017, Sts’ailes Council identified a number of 3-5 year goals, and 2018 strategic priority outcomes. The size and number of projects prompted the mandate to organize ourselves to successfully deliver these projects
- Specific Council priorities will be stewarded to completion by SSIG in collaboration with various work streams and teams within Sts’ailes, and when needed, with outside expertise for consultation and guidance

### Responsibilities of SSIG

- Aligning priority outcomes with projects
- Standardizing project management methods and workplans
- Project oversight and delivery
- Records management
- Project reporting and communications
- Developing capacity by facilitating ongoing coaching, mentoring, and training of Sts’ailes team members
- Augmenting capacity of Sts’ailes team members

### SSIG Projects Relating to Health and Wellness

The following are projects where Yeqwethet is either participating in or preparing to partake in.

### Community Culture & Recreation Centre

Sts’ailes is a large and growing First Nation in a semi-remote area with no access to recreational facilities or large meeting spaces.

For 25 years the Sts’ailes community and its visitors gathered at the former Sts’ailes Community Hall and played indoor sports and other activities. In 2018 the Sts’ailes Community Hall was condemned and torn down after it failed a seismic inspection. It was deemed unsafe and was torn down. The blueprints were signed off by architects and engineers in the private sector and Indian Affairs.

The loss of this important space has necessitated curriculum and programming interruptions at the Community School when the gymnasium is needed for funerals, cultural gatherings and other events and programming. The lack of adequate large space has also hampered the fluidity of the other programs (specifically, Yeqwethet and Letsemót).

The replacement facility includes 9000 sqft of administration space, a 3500 sqft fitness centre. The fitness centre will open to Sts’ailes people and the residents in the local regional area.

### Telmexw Project

Telmexw Awtexw (a place for medicines from the land) is a culturally based substance abuse and wellness healing centre planned for an on-reserve new facility. A first of its kind, Sts’ailes develops a vision for a continuum of care with the understanding of the urgency for the Fraser Salish Region, that is without a Treatment Centre and that has limited detox services.

Telmexw Awtexw Healing Centre is unique as it offers a holistic culturally foundational continuum



3D Rendering of the Sts'ailes Community Centre.

of care to all First Nations people across B.C. When incorporating the 3-phased approach of care into the healing journey, people are able to be met where they're at in their healing from trauma and/or harmful substance use. The spectrum offers prevention and education, culturally based detox at home or in the centre as well as intensive live in treatment that includes fully supportive reintegration housing. The knowledge of elders, First Nation spiritual healers and people with lived or living experience are integrated into the development and implementation of all phases of care.

### Community Health Care Centre Project

Sts'ailes intends for a Community Health Care Centre in the Fraser Region and on Sts'ailes traditional territory. We seek to create a viable, integrated health care continuum within easy reach of Sts'ailes community members. We will determine needed medical services hub that would serve our community and the Fraser Region. This will also

link educational programming for Sts'ailes youth to long-term employment opportunities, and hopefully establish real wealth creation prospects for Sts'ailes members.

The Programming and Facility Pre-Design phase workplan will integrate five tables:

- **Governance** – facility ownership and sponsorship, strategic partnerships, governance and operational management
- **Land** - land acquisition and tenure, securing long term lease and land use approvals to enable capital build.
- **Clinical Programming** – primary care and other health and social services to be provided by the facility, exploration of other commercial medical and non-medical opportunities
- **Facility** – physical form, site layout, design features, capex and opex elements, lifecycle
- **Finance** – project funding, facility financing, operating, business case



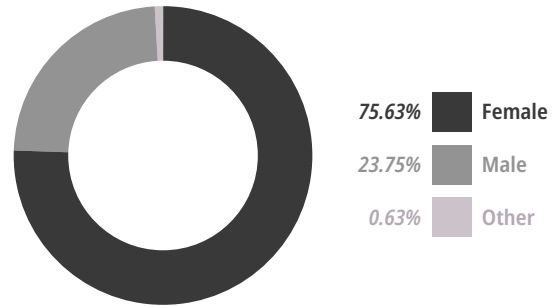
*Harrison River.*

# DEMOGRAPHICS + SURVEY STATS

## General Survey Results

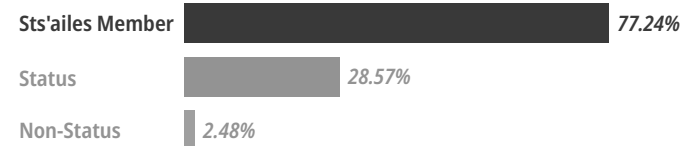
### What is your gender?

Answered - 160 Skipped - 4



### Are You?

Answered - 161 Skipped - 3



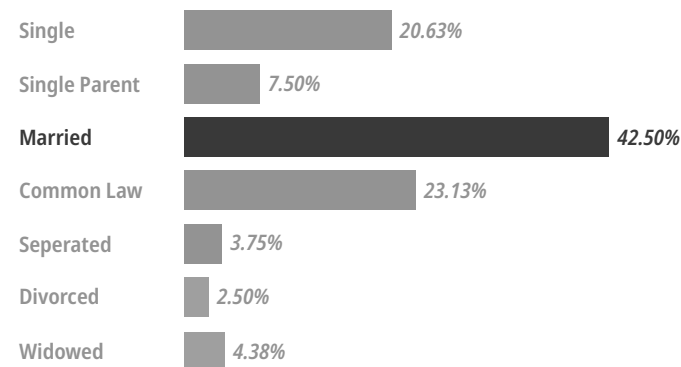
### Do you live On or Off-Reserve?

Answered - 161 Skipped - 3



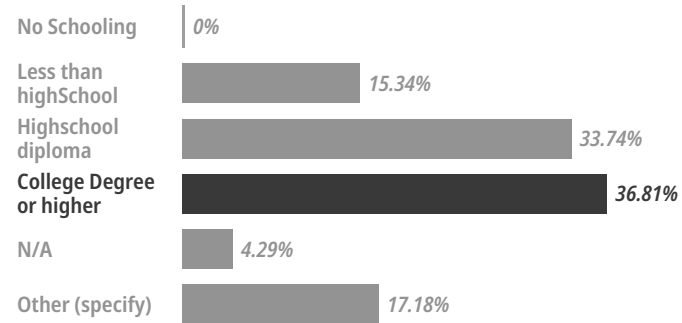
### What is your marital status?

Answered - 161 Skipped - 3



### What is the highest level of education you have ever completed?

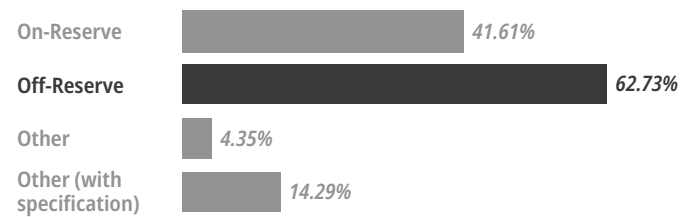
Answered - 163 Skipped - 1



- Other as specified:
- Archeology, Fisheries, Environment Technician
  - Business Development Diploma; Management
  - General Education Development (GED)
  - Auto body
  - Social Work Diploma
  - Culinary Arts
  - Career Development Practitioner Certificate
  - Executive Assistant Certificates
  - Justice Institute
  - Planning
  - Law degree

### Did you attend school?

Answered - 161 Skipped - 3

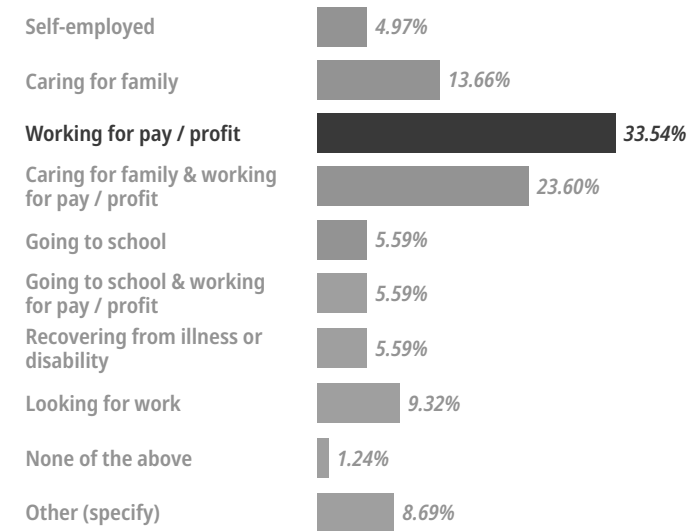


- Other as specified:
- Residential School

*" There should be more transgender awareness / education so we may understand and address the issues they face. "*

### What do you consider to be your current main activity?

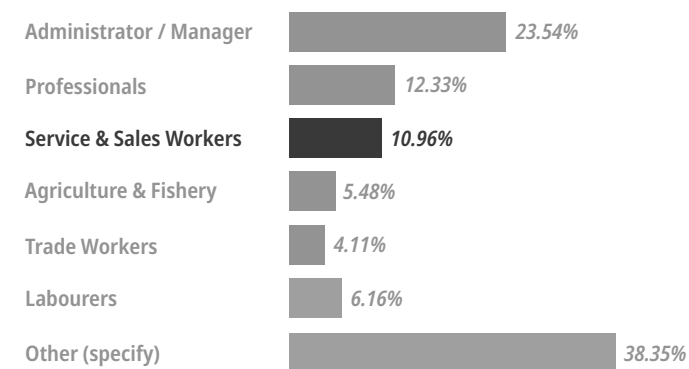
Answered - 161 Skipped - 3



- Other as specified:
- Retired / pension
  - Receiving cancer treatments

### If working, what job sector do you work in?

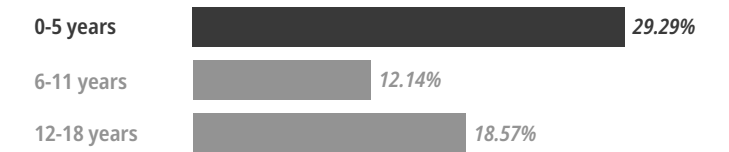
Answered - 146 Skipped - 18



- Other as specified:
- Bus driver
  - Finance
  - Information Technology
  - Front line
  - Caregiver
  - Catering
  - Health Care
  - Artist
  - Education/Youth
  - Rights & Title, Natural Resources

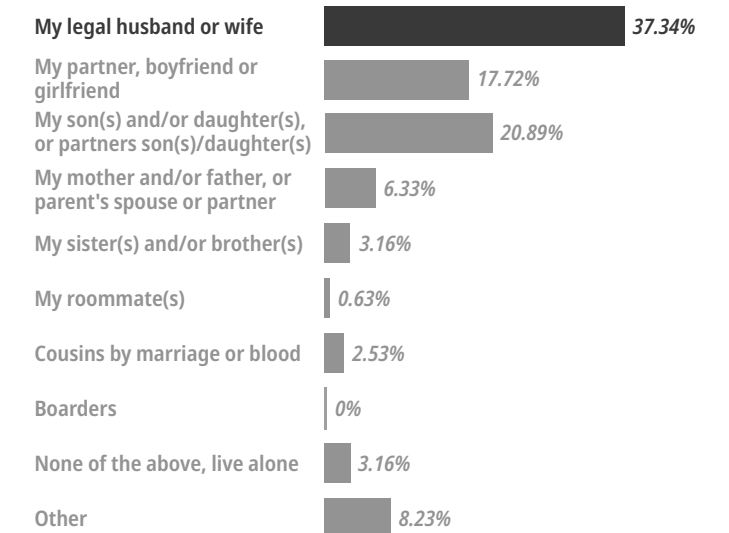
### How many children (0-18 years) live in your household?

Answered - 140 Skipped - 24



### Please say which of these people live in the same household as you?

Answered - 158 Skipped - 6



### Is your primary residence (home):

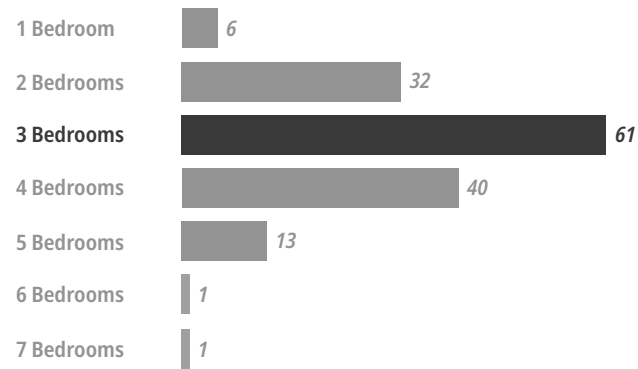
Answered - 160 Skipped - 4



- Other as specified:
- Personal Mortgage
  - Off-reserve
  - Rent to own
  - Apartment

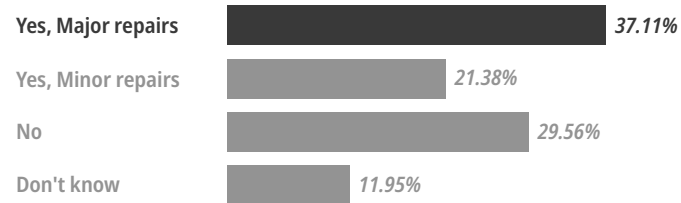
### How many bedrooms are in your house?

Answered - 158 Skipped - 6



### Is this dwelling in need of repairs?

Answered - 159 Skipped - 5



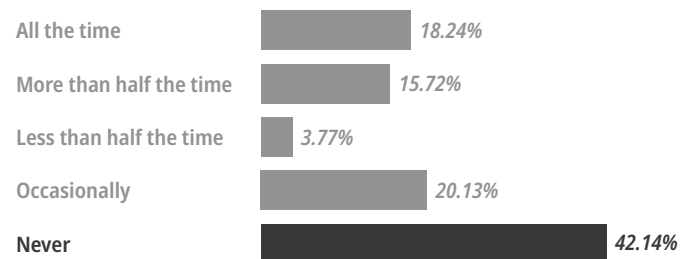
### In the past 12 months has there been mold or mildew in your home?

Answered - 160 Skipped - 4



### Overall, do you feel overcrowded in the house in which you live?

Answered - 158 Skipped - 6



### Do you have a Landline in this home?

Answered - 160 Skipped - 4



### Do you have a cell phone?

Answered - 160 Skipped - 4



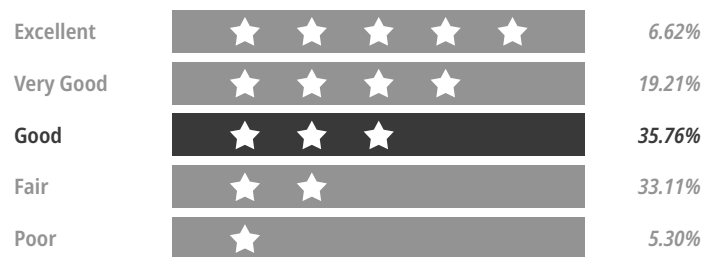
### Do you have access to the internet?

Answered - 160 Skipped - 4



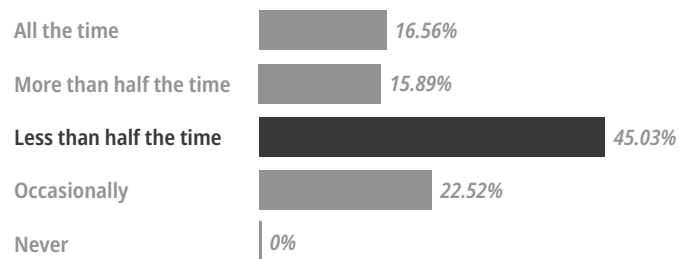
### In general, how would you say your health is?

Answered - 151 Skipped - 13



### Compared to one year ago, how would you say your health is now?

Answered - 151 Skipped - 13



### In the last 12 months, have you ever found it hard to find out who to go to for a health problem or disability?

Answered - 151 Skipped - 13



### In your opinion, what are the greatest health needs in Sts'ailes?

Answered - 136 Skipped - 28

**elders health care need** community mental health access gym facility services home awareness addiction better healthbuilding one youth communityhall sure assist building

### In your opinion, what are the greatest health challenges in Sts'ailes?

Answered - 129 Skipped - 35

**mental health diabetes doctor** nurses sure need transportation lack elders services space addictions enough cancer help available keeping staff housing care drugs arthritis

### Have you been diagnosed by a medial physician with a mental illness?

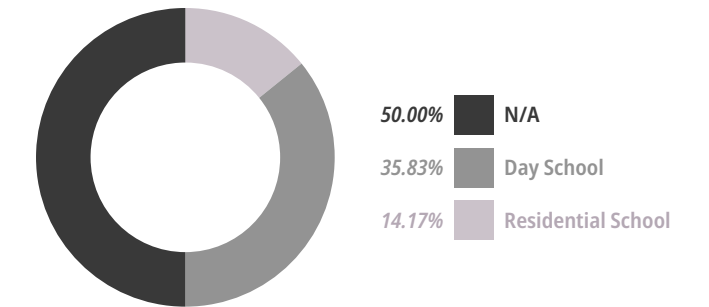
Answered - 150 Skipped - 14



- Yes, with specification:
- Anxiety
  - Depression
  - PTSD
  - Bi-polar

### Have you attended or a part of any of the following:

Answered - 151 Skipped - 13



If yes, for how long:

(# of Responses)

- 1 Year or less (2)
- 2 Years (3)
- 3 Years (4)
- 4 Years (5)
- 5 Years (4)
- 6 Years (13)
- 7 Years (8)
- 8 Years (5)
- 9 Years (1)
- 10 Years (2)
- 11 Years (1)
- 12 + Years (3)
- Unknown / Can't Remember (10)

If yes, what school:

(# of Responses)

- Chehalis Day School (38)
- St. Mary's Residential School (11)
- Kamloops Residential School (4)
- Sechelt Residential School (1)
- Tofino Residential School (1)

### Were you part of the 60s Scoop?

Answered - 110 Skipped - 54



*"Sts'ailes does a wonderful job with the limited means they have."*

### How often have you felt the following ways during the past 12 months?

Answered - 151 Skipped - 13

#### I have been full of pep and energy



#### My health gave me no concern



#### I had no problem handling my feelings



#### Life was rather boring



#### I felt rather low



#### I felt tense, or on edge



#### I felt cheerful and light hearted



#### I feel quite lonely



#### It took some effort to keep my feelings under control



#### I was worried about my health



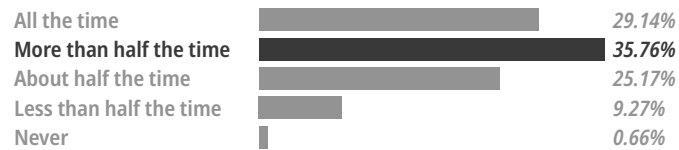
#### I felt exhausted, worn out or at the end of my rope



#### I felt reasonably relaxed



#### I felt quite loved and appreciated

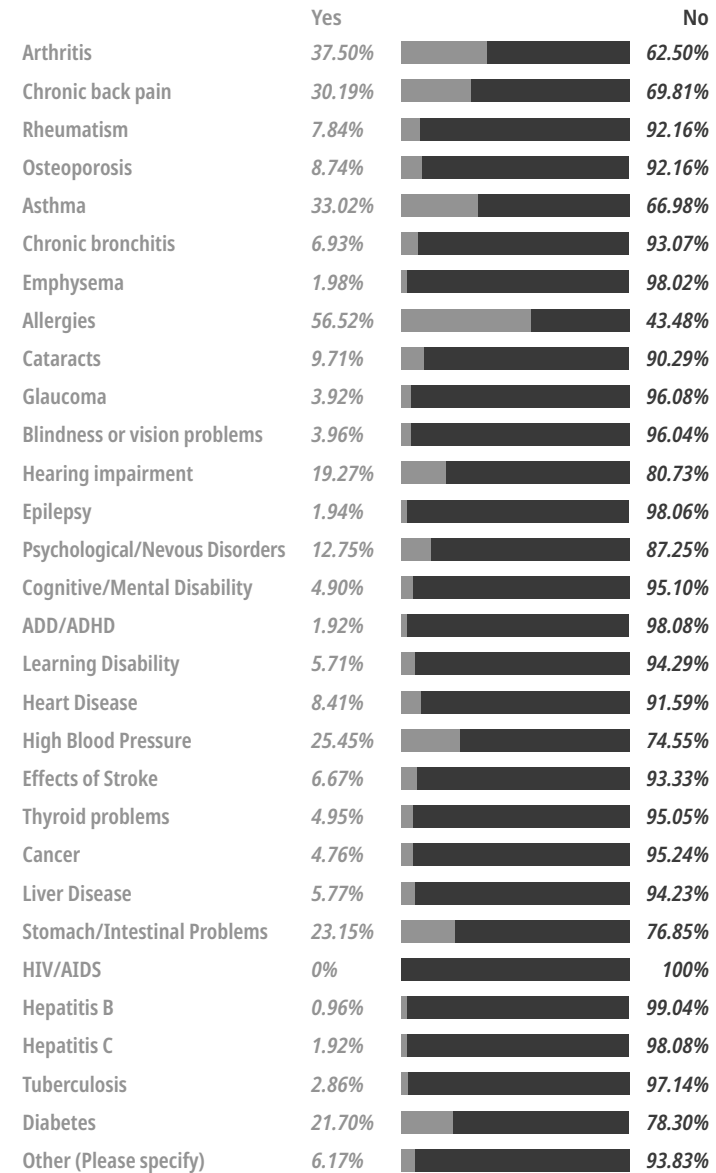


### Have you been told by a health care professional that you have any major health conditions?

Answered - 92 Skipped - 72



If yes, are you currently undergoing treatment(s) or taking medication(s) for these condition(s)?



### Do you have any disability or handicap that is long term, lasting 6 months or more?

Answered - 143 Skipped - 21



- If yes, please specify:
- Thyroid that evolved to other health issues
  - Bercitis
  - Cancer
  - Blindness
  - Hip
  - Hand
  - Various Arthritis
  - Lower back injury
  - Stroke (not the same)
  - Aspburgers
  - Mental disorder
  - Knee
  - Chronic pain

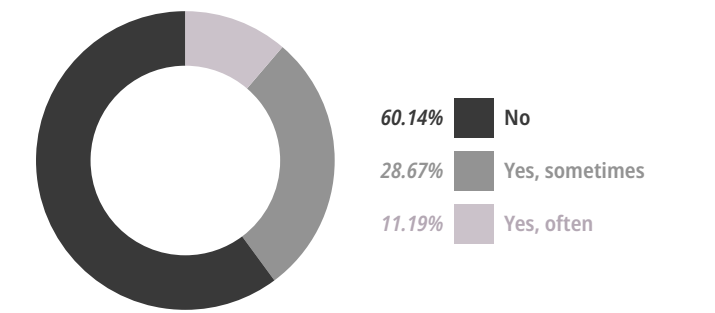
### During the last 12 months, have you been injured? (for example fractures, strains and sprains, cuts, burns, concussion etc)

Answered - 143 Skipped - 21



### Are you limited in the kinds or amount of activity you can do at home, work or otherwise because of a physical or mental condition, injury or a health problem?

Answered - 143 Skipped - 21



**Are you or a member of your family receiving any home care services at the present time from Sts'ailles? (e.g. foot care clinics, homr support)**

Answered - 144 Skipped - 20



If yes, are you satisfied with the services you or your family member(s) are currently receiving from Sts'ailles?:

- Yes (24)
- Somewhat / Sometimes (4)
- No (9)
- Not sure (1)
- N/A (69)

(# of Responses)

**Did you have any problems in getting these services?**

Answered - 111 Skipped - 53



If yes, please explain:

- While trying to access Alcohol and Drug Treatment
- Took too long to get help
- Assistance with getting services with off-reserve agencies
- Budgetary restraints

**Would you choose to eat healthier if you had easier access and resources please explain? (Open Ended Question)**

Answered - 136 Skipped - 28

| Yes    | No    | Not sure | I think I already eat healthy |
|--------|-------|----------|-------------------------------|
| 94.23% | 3.85% | 0.96%    | 0.96%                         |

- Time
- Feeding a big family, convenience to buy bulk foods
- Money/affordability (gas, more expensive to purchase fresh food)
- Transportation
- Need to better plan out meals
- More discipline
- Don't want to inherit family illness
- Eating healthy workshops/education/label reading
- Bring back dietician
- Started own garden (takes time and resources)
- Seeing more options at Store, can keep going
- Would like to see more traditional foods

**On average, how often do you eat or drink the following foods?**

Answered - 136 Skipped - 28

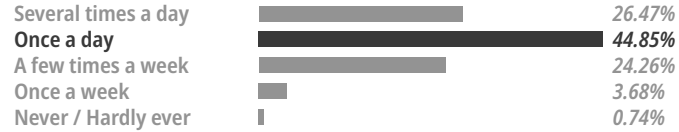
**TRADITIONAL FOODS**



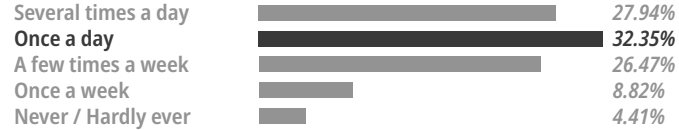
**MILK + MILK PRODUCTS**



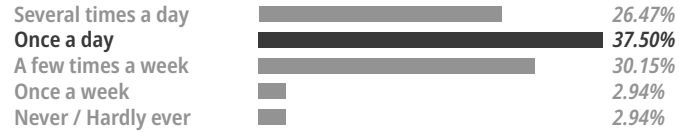
**PROTEIN**



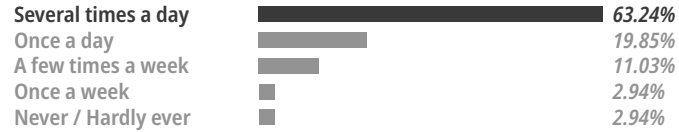
**FRUIT**



**BREADS, PASTA, RICE, OTHER GRAINS**



**WATER**



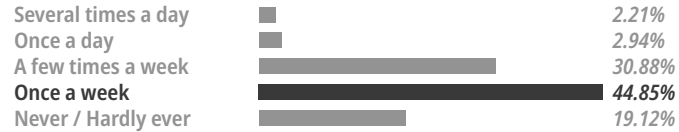
**JUICE**



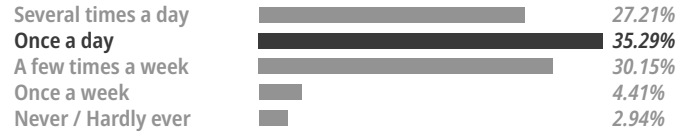
**SOFT DRINKS / POP**



**FAST FOOD**

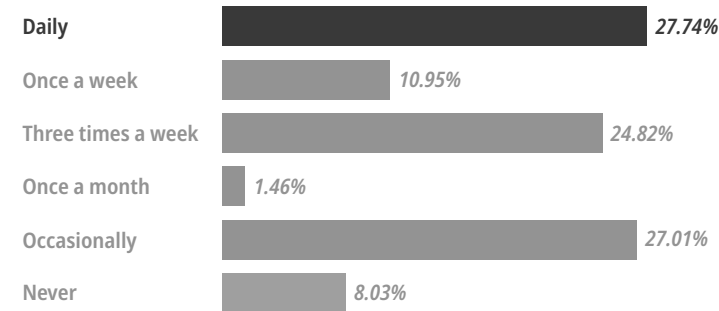


**VEGITABLES**



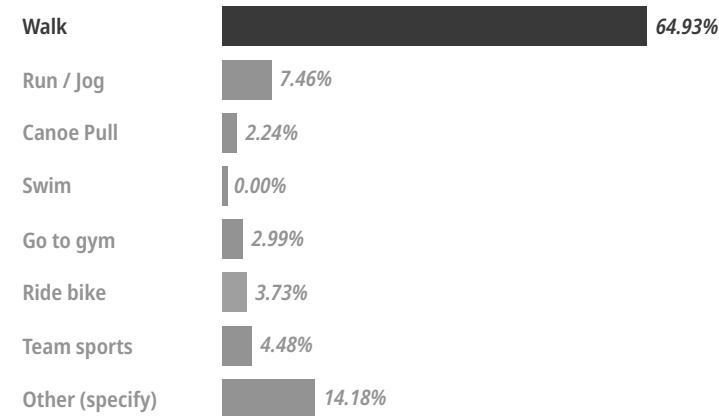
**How often do you participate in physical activity?**

Answered - 137 Skipped - 27



**What do you do for physical exercise?**

Answered - 134 Skipped - 30

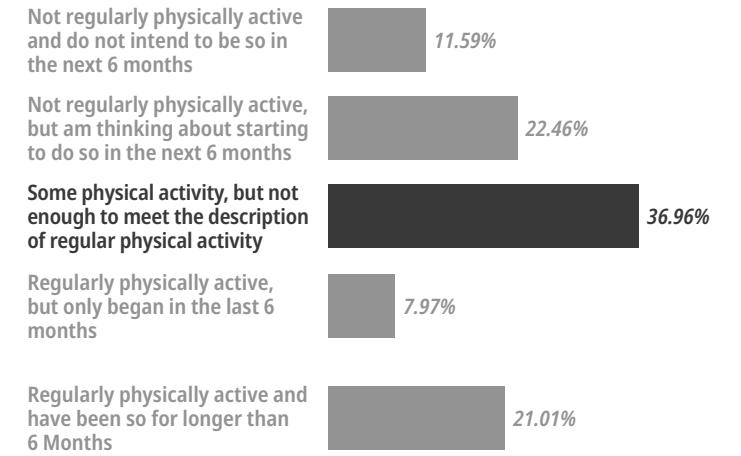


- Other as specified:
- Work
  - Baseball
  - Yoga, Pilates at home
  - Elliptical
  - Taking care of kids
  - Walk
  - Garden and yard work
  - Ride bike
  - Canoe pull
  - Fishing & Hunting

*" Staff are very caring and open. Would be good to have some outreach and also some more open house times with room for discussion on community health needs. "*

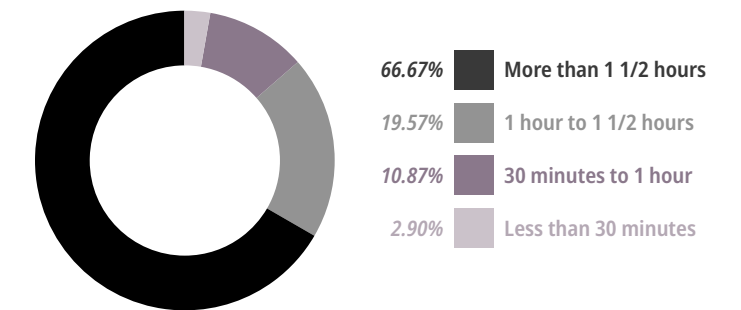
**Describe your physical activity over the last six months. Regular physical activity means at least 15 minutes of vigorous activity or 30 minutes of moderate on each day for 5 or more days each week.**

Answered - 138 Skipped - 26



**During the past week, how much time on average did you spend watching TV, reading, playing bingo/ video games or working at your computer (outside of workday / school day)?**

Answered - 138 Skipped - 26



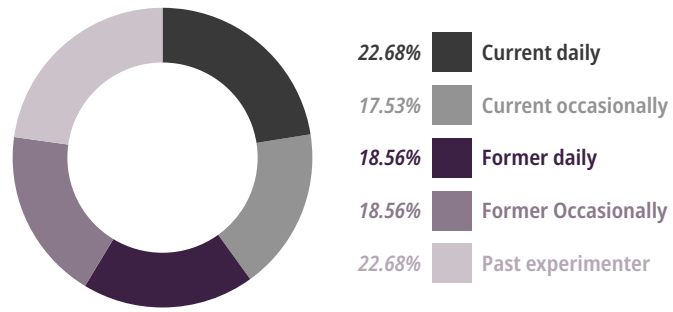
**Have you ever used tobacco, other than for traditional ceremonial purposes including smoking cigarettes, cigars, or cigarillos, or using a pipe, pinch, snuff, or chewing tobacco?**

Answered - 137 Skipped - 27



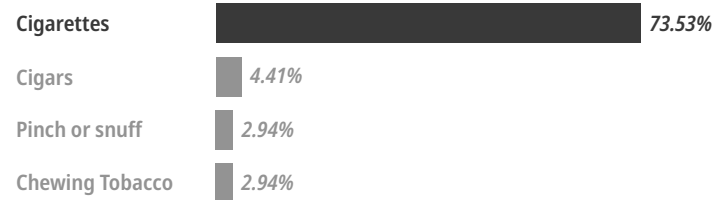
**If yes, how would you describe your tobacco use?**

Answered - 97 Skipped - 67



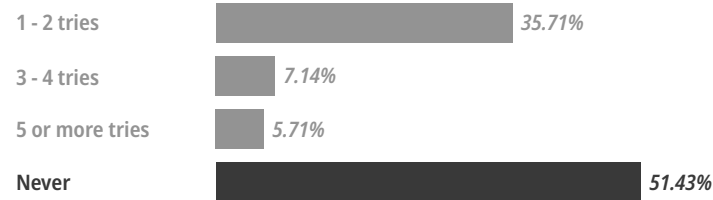
**If you smoke or use daily, what is the type that you use?**

Answered - 68 Skipped - 96



**In the past 12 months, how many times have you tried to quit smoking?**

Answered - 70 Skipped - 94



**Do you have a smoke free home?**

Answered - 135 Skipped - 29



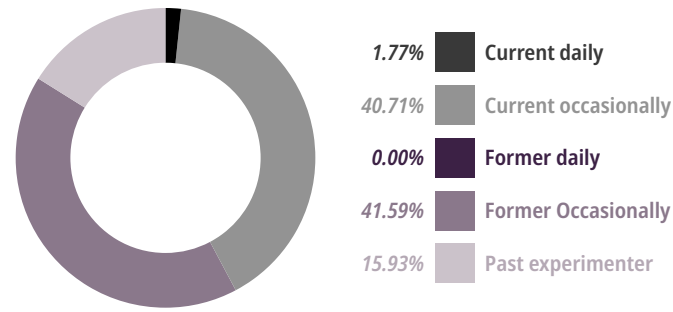
**Have you ever had a drink of beer, wine, liquor or any other alcoholic beverage??**

Answered - 136 Skipped - 28



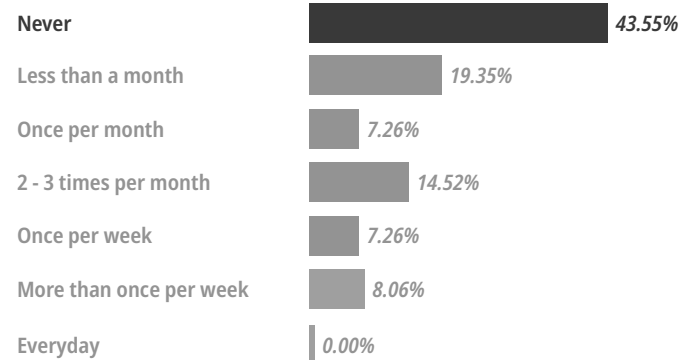
**If yes, how would you describe your drinking?**

Answered - 113 Skipped - 51



**During the past 12 months, how often have you had 5 or more alcoholic drinks on one occasion? One drink includes one beer, one glass of wine, or one shot of hard liquor.**

Answered - 124 Skipped - 40



**In the past 12 months, have you tried to reduce the amount you drink?**

Answered - 96 Skipped - 68



**Have you ever sought treatment or counselling for alcohol abuse?**

Answered - 111 Skipped - 53



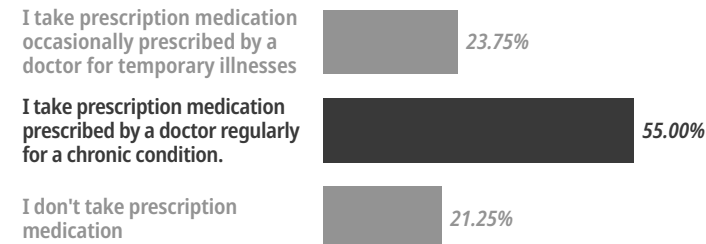
**Do you use prescription medication for any injury or illness?**

Answered - 111 Skipped - 53



**If yes, how often do you take prescription medication?**

Answered - 88 Skipped - 76



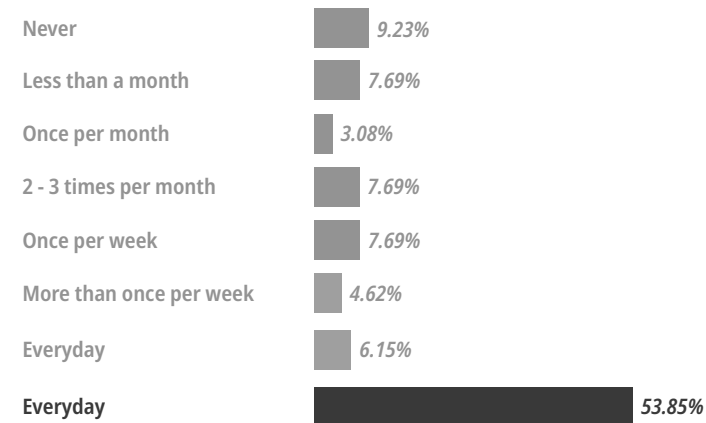
**Have you used illicit drugs or substances before?**

Answered - 127 Skipped - 37



**If yes, how often have you used illicit drugs or substances in the last 12 months (without a prescription)?**

Answered - 65 Skipped - 99



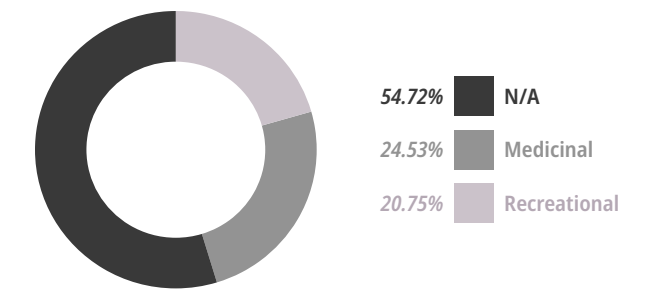
**Have you ever sought treatment or counselling for substance abuse/addiction?**

Answered - 103 Skipped - 61



**Do you ever use Cannabis (any form) for?**

Answered - 106 Skipped - 58



**Do you have a Family doctor - one that you return to and who knows you and your health history?**

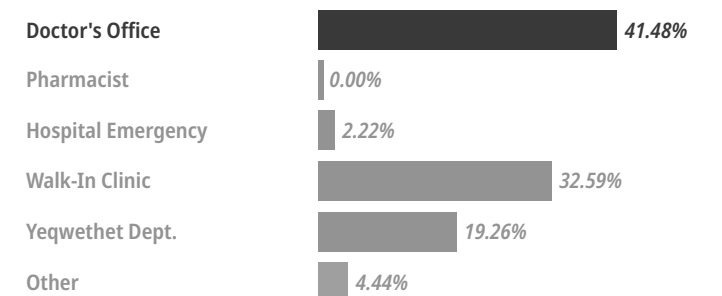
Answered - 138 Skipped - 28



- If yes, specify:
- Dr. Beaulieu
  - Seabird Doctor
  - Walk in Clinic
  - Agassiz Doctor

**Where do you go most often when you are sick or need advice about your health? Please check only one.**

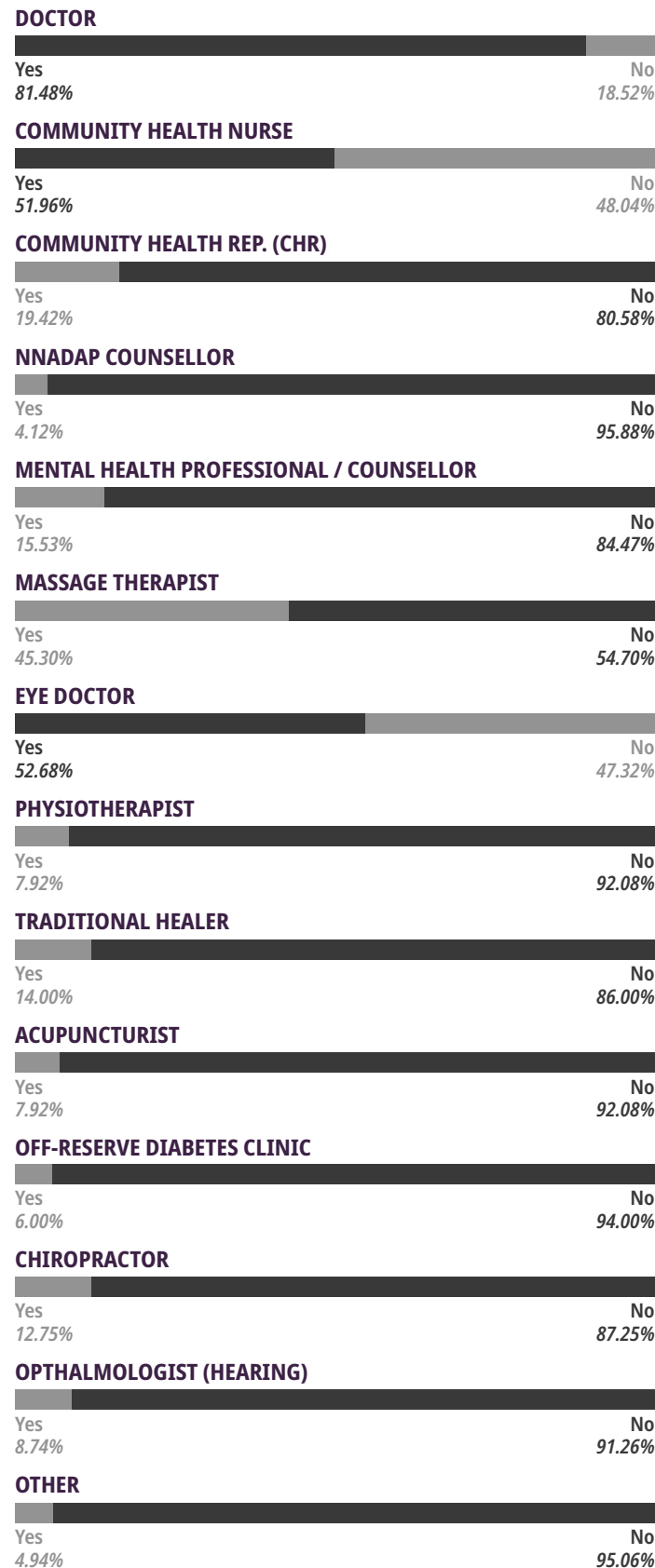
Answered - 135 Skipped - 29



- Other as specified:
- Natural remedies
  - Google
  - Don't see anybody
  - All of the above

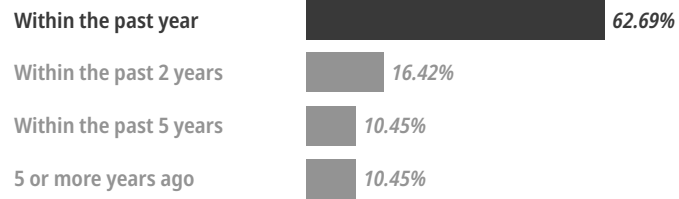
**In the past 12 months have you visited any of the following Sts'ailes Services?**

Answered - 137 Skipped - 27



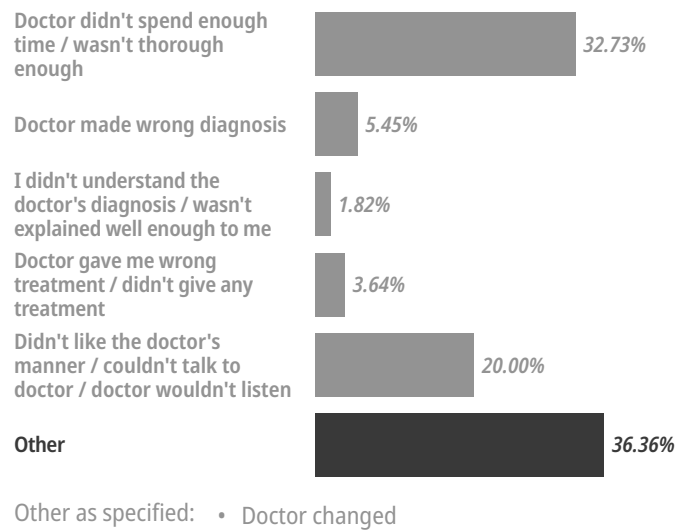
**About how long has it been since you last visited a doctor for a routine checkup? Do not include times you visited the doctor because you were sick.**

Answered - 134 Skipped - 30



**If you felt dissatisfied with the consultation, please explain why?**

Answered - 55 Skipped - 109



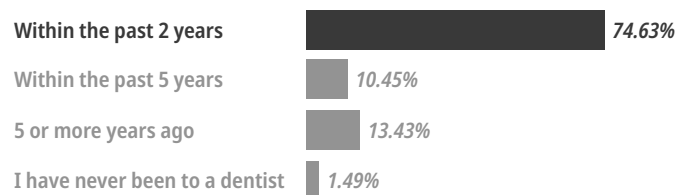
**Have you visited a dental office/dentist in the past 12 months?**

Answered - 136 Skipped - 28



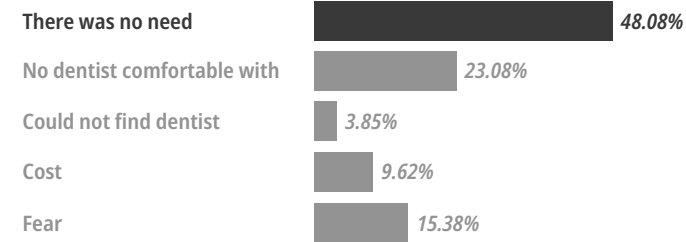
**If no, how long has it been since you last visited a dental office/dentist for any reason?**

Answered - 134 Skipped - 30



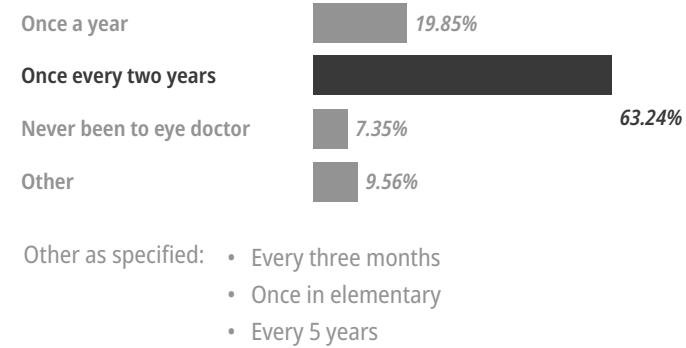
**If you have not visited a dentist in the last 12 months, was it because:**

Answered - 134 Skipped - 30



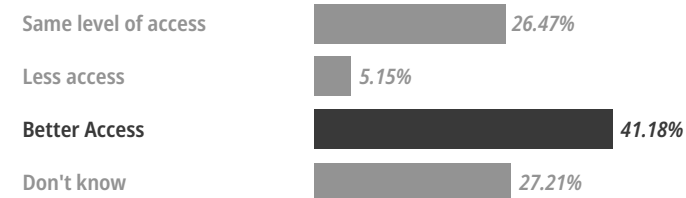
**Where do you go most often when you are sick or need advice about your health? (Check only one)**

Answered - 135 Skipped - 29



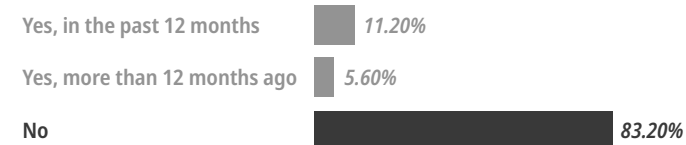
**How would you rate the level of access to Sts'ailes Health and Family Services compared to 5 years ago?**

Answered - 136 Skipped - 28



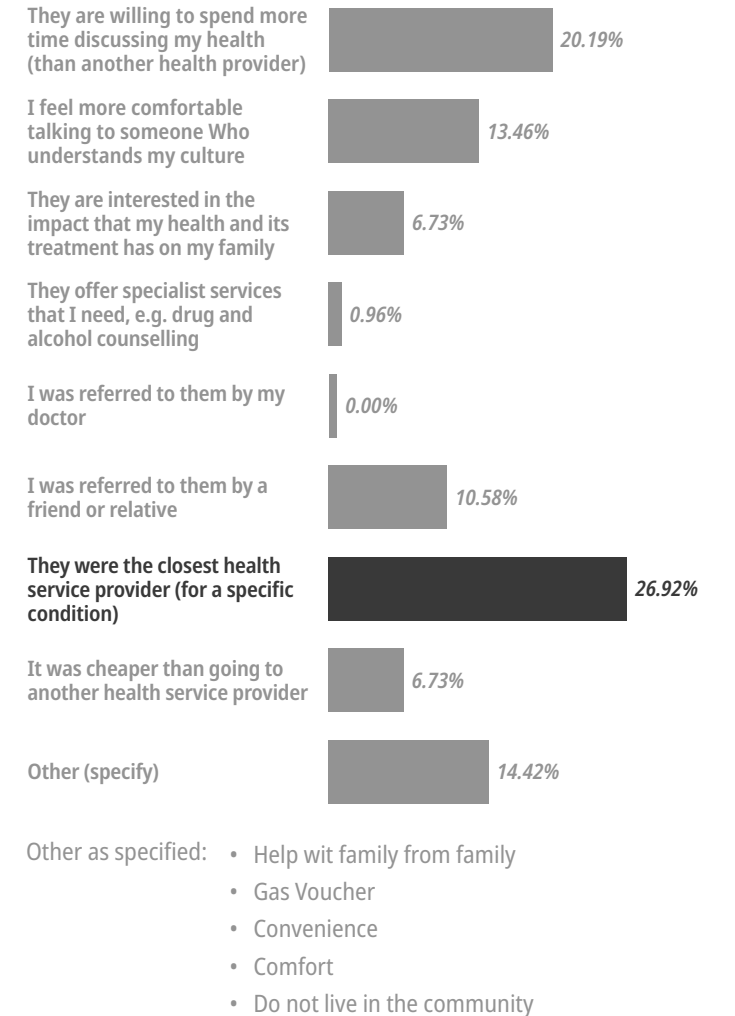
**Have you ever felt like you have been treated unfairly (e.g. treated differently, kept waiting) when using Sts'ailes Health and Family Services?**

Answered - 125 Skipped - 39



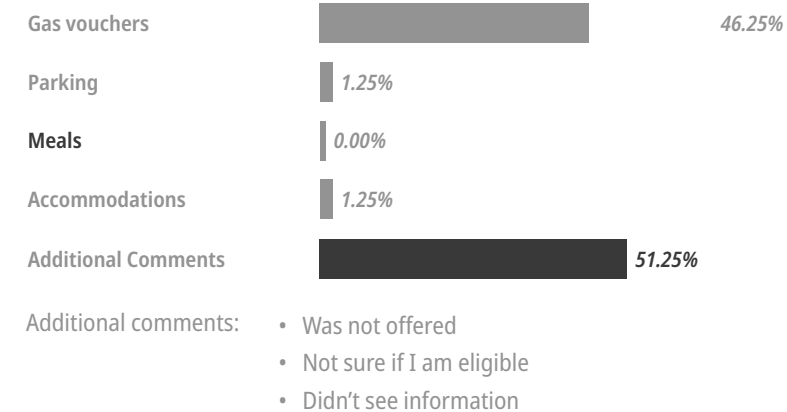
**In general, over the last 12 months, what are the reasons that you chose to visit Sts'ailes Health and Family Services Department? (Tick as many as you wish)**

Answered - 55 Skipped - 109



**Do you access the medical transportation program?**

Answered - 136 Skipped - 28





### How often have you felt the following ways during the past 12 months?

Answered – 130 Skipped – 34

#### Doctor or nurse not available



#### Health facility not available (e.g. nursing station or hospital)



#### Waiting list is too long



#### Unable to arrange transportation



#### Difficulty getting traditional/alternative care (e.g. healer/elder)



#### Not covered by non-insured Health Benefits (NIHB)



#### Prior approval of NIHB was denied



#### Could not afford direct cost of care/services



#### Could not afford transportation costs



#### Could not afford childcare costs



#### Felt health care provided was inadequate



#### Felt service was not culturally appropriate



#### Chose no to see health care professional



#### Service was not available in my area



### Have you had any difficulties accessing any of the health services provided through the Non-Insured Health Benefits Program (NIHB) provided to status First Nations through Health Canada? (Tick all applicable boxes)

Answered – 134 Skipped – 30

There was no need 61.21%

No dentist comfortable with 1.72%

Could not find dentist 10.34%

Cost 1.72%

Fear 9.48%

No dentist comfortable with 3.45%

Could not find dentist 0.86%

Cost 2.59%

Fear 8.62%

- Other as specified:
- Dentures
  - Mamogram
  - Medication
  - Application for new health card

### In the last 12 months, have you or any of your family participated in the Community Wellness Programs?

Answered – 137 Skipped – 27

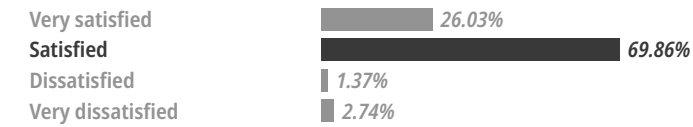


If yes, explain your experience:

- Good variety
- Satisfied
- Great programs

### In general, over the last 12 months, when participated in the Community Wellness programs please rate your overall experience?

Answered – 73 Skipped – 91



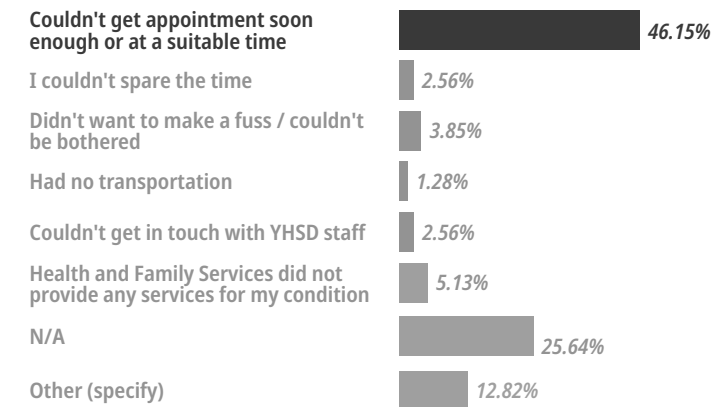
### In the last 12 months, has there been any time when you wanted or needed to see a Sts'ailes Health and Family Services Dept. worker, but you weren't able to?

Answered – 119 Skipped – 45



### The last time that happened, what was the reason?

Answered – 137 Skipped – 27

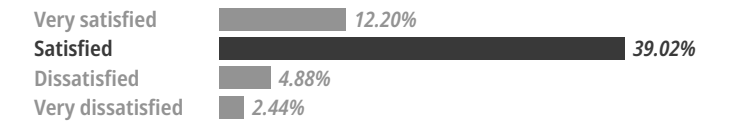


- Other (specify):
- Living off-reserve
  - Fully booked
  - Misunderstanding
  - Not open

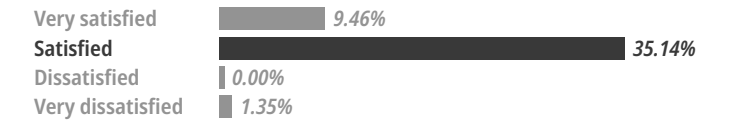
### Please rate level of satisfaction with each Program:

Answered – 111 Skipped – 53

#### S.P.A.R.K.



#### J.O.Y.



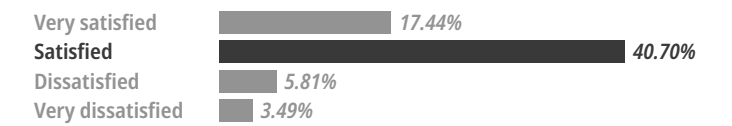
#### Someone So Small



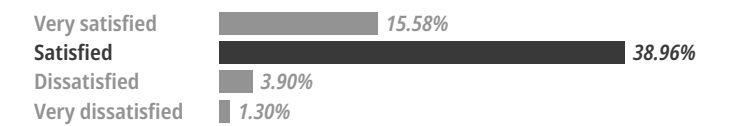
#### Run Walk Jog



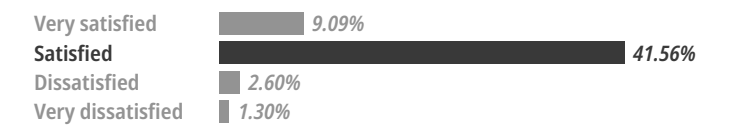
#### Summer Program



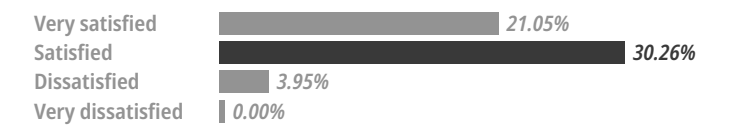
#### Workouts



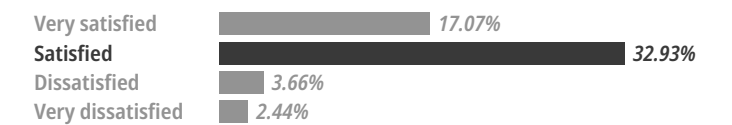
#### ISPARC Sports Camps



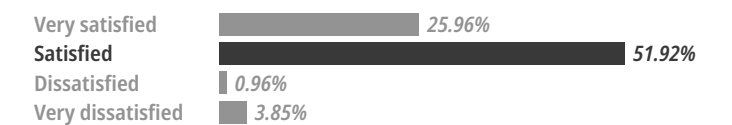
#### Sponsorship Program



#### Family Nights



#### Community Events



## Elder's Health Evaluation Survey

### Staffing: Are you comfortable approaching Health staff for your needs?

#### Yes Votes – 11

- Yes, they are sensitive
- Yes, consistency on outings, need more reminders

#### No Votes – 1

- No, because I think they don't have the time
- No, Sure when you can get ahold of them

### Visiting Professionals: Are you satisfied with the services provided by our Doctor, Nurse Practitioner, Eye Doctor, etc.?

#### Yes Votes – 9

- Somewhat
- Doctor. B needs hospital privileges
- Like to get more nurses
- Could be more doctor days

#### No Votes – 5

- Not satisfied with the eye doctor, would not help with chipped glasses repair
- Different doctor
- Eye doctor give wrong prescription
- Infrequent use of walk-in clinics

### Communications: Do you feel adequately informed about the programs and services provided by your Health team?

#### Yes Votes – 8

- Confirm elders phone numbers
- Door to door is great
- Grateful for reminders on appointments
- Phone tree

#### No Votes – 7

- Information is received too late, better use of notice board
- Have once a month meetings
- Need more consistent plan

### Health Benefits: Have you experienced difficulty in getting prescriptions filled under the new Pharmacare system? If yes, did someone help you? Please explain.

#### Yes Votes – 2

- Love the delivery system
- Need to know if meds are covered or not
- It's not the prescription, it's the doctor wanting the newest that is on the market which is not covered

#### No Votes – 12

#### Spoiled Votes – 1

### Please share your thoughts about how we can improve the next 10 Year Health Plan for Sts'ailes. Comments are in five main topic areas.

- Space Comments
- Health care center
  - Extended care facility
  - Elders place
  - Need our own residential care – we don't want our elders to leave home
  - A good building for the doctor and nurses not for everything else.

- Doctor Comments
- Get a new doctor
  - A good doctor

- Nursing and Home Support Comments
- More help for elders
  - More nurses (2 respondents)
  - Fully qualified staff with credentials
  - Aides for nurses
  - Home support workers – need more
  - Need their job descriptions
  - More nurses so Marg can rest

- Transportations Comments
- More money to help members to get out to town
  - People that don't have their own vehicle
  - Like to see drives to doctor and dentist

- Health Careers Comments
- Training, schooling for the people to get jobs on reserve
  - We need doctor, nurses and mechanics
  - Any kind of medical training, ambulance driver, paramedics' first responders, dentist, eye doctor, ear doctor, midwife, health care aides, x-ray, and bigger medical building
  - A good dentist and eye doctor

- Other Comments
- Don't have information on services
  - Have up-to-date community functions

### What do you like about Sts'ailes Health & Family Services?

- It's free
- Useful
- Don't have to go off reserve
- They give good food
- You can find out what is happening

### What would you like to see made better in Sts'ailes Health & Family Services?

- Our own teen program

### Do you attend Cultural events in Sts'ailes? (Ceremonies, Community Events, etc.) Why or why not? Can you speak Halq'emeylem? Are you interested in learning to speak Halq'emeylem fluently? Why or why not?

Attend – 14  
N/A - 3

### Are you interested in a career in Health? (Recreation, Nursing, Doctor, Management, etc.)

Yes – 4/17  
Recreation – 3  
Nurse – 1

## Youth Survey

17 Respondents

Age Range: 14 – 19 years

Females: 10 Males: 6 Gender Neutral: 1

(All respondents are part of the community regardless of where they live)

On-Reserve: 12 Off-Reserve: 4 Both: 1

### Do you feel comfortable using the Services of Sts'ailes Health & Family Services?

Satisfied – 11  
N/A - 6

### 1994 Health Transfer Agreement

Chief Alex Paul and the Leadership of the time signed this pivotal agreement which began our journey towards a healthier and stronger Sts'ailes.





*The re-introduced elk seen grazing along the Harrison Flats.*

# KWASHOYLEP

*This living document has been years in the making and everyone's involvement has brought us here. We would like to raise our hands in thanks to everyone who contributed to the growth of this document.*

- Kaltez (Kandice Charlie)
- Ne'omot (Sherylynn Crispin)
- Mese'sel (Mikhail Crispin)
- Teqwotenot (Roxanne George)
- First Nations Health Authority
- Sts'ailes Elders
- Sts'ailes Youth
- Sts'ailes Yeqwethet team
- Sts'ailes Leadership - Chief & Council, Directors, Managers, and Officers
- First Peoples Cultural Council





*Two crows keep an eye on a stranger while foraging by 20 mile Bay.*

# GLOSSARY

| Halq'emeylem Word or Phrase                 | Translation + Meaning  |
|---|--|
| Áxwest                                      | Sharing; intended meaning: humility  |
| Áylexw                                      | Health, wellness   |
| Éliyá                                       | Vision   |
| Í:yós:sem Sí:yá:ye                          | Friends having fun; also the name of the Elders program  |
| Í:yós:sem Sqa:qele                          | Having fun with baby; also the name of the Babies program  |
| Ixel Sq'oq'otel                             | Paddling together  |
| I:westeleq                                  | Intended meaning: we are living our teachings; what Sts'ailes titles as "mandate" – the will of the Sts'ailes political body |
| Kwát  | Release; intended meaning: forgiveness   |
| Kw'ómkw'emtset                              | Our strengths  |
| Lamtsetcha                                  | Our future   |
| Lexw'éy                                     | Always good/doing good; intended meaning: generosity   |
| Lhí:lt Hí::kw                               | Weaving it importantly; also the name for our Communications Strategy  |
| Má:yt Tloqá:ys                              | Help s/o right now; also what we call our "Emergency Management" services  |
| Mexw tel sq'o                               | All My Relations   |
| Momí:ytset                                  | To aim at; also what we refer to as our goals and objectives   |
| Õ Chichelh Siyam ts'ithome xwela telo wayel | Oh Great Creator, thank you for today  |
| Óyó:lwethet                                 | Doing the best one can; also the name we use to refer to "quality and safety"  |
| Q'e'í:les                                   | Sensible/wise; intended meaning: understanding   |

|                               |  |
|-------------------------------|--|
| Seowen                        | Spirit dancing   |
| Séqseló:s                     | Cycle of the moon; also the name of the Yeqwethet season calendar  |
| Shxwlá:m                      | Indian doctor, traditional healer  |
| Si:wes                        | Teaching   |
| Siyolexwe                     | Elder, knowledge-keeper  |
| Skw'íytel                     | Ladder; intended meaning: organizational chart   |
| Snowoyelh te Xáxa Temexw Te'i | Intended meaning: The traditional law of our sacred land   |
| S'ò:m                         | Promise of good services; also name of the Yeqwethet Administration team                                 |
| Sqalh                         | Children/youth   |
| Sxwoyxwey                     | Mask dancing   |
| Tél:exwtset                   | To understand and learn; also what we refer to as "professional development"                             |
| Tem Ts'elhxwelmexw            | Intended meaning: generations  |
| Timéthet                      | Make effort, do with all ones might; also our name for Sports and Recreation                             |
| Tl'eláxw Máyt                 | Home help; also the name of the Home Support program   |
| Ts'ahéyelh xwelám to sq'ep    | Opening prayer   |
| Xaselmethox                   | Self-determination   |
| Xá Xa Temexw                  | Our sacred land; also used here as "traditional territory"   |
| Xwoyíwél                      | Happy  |
| Xwelam te Letsemot Sts'ailes  | We are here as one spirit, one mind, one heart as Sts'ailes; also the title for the Sts'ailes CCP (2016) |
| Xwelmexw                      | People of the land   |
| Xwéylemt te télmels           | Measure test/measure knowledge; also what we refer to as "our challenges"                                |
| Ye éyeso:llh                  | Many young people having fun; also the name of the Teens Program   |

# APPENDICES

## Appendix 1

*Excerpt from the Sts'ailes Vision 2060 pertaining to / relating to Yeqwethet Team efforts:*

### Health & Family Services

Members live longer and have better health, while taking responsibility for their own health needs. Living a healthy lifestyle and a good home life, Sts'ailes members are drug and alcohol free. The community has zero tolerance towards drug dealers and drunk drivers. Members of all ages are very active and "participation" is high. A full-time dietician has contributed to the prevention of diabetes and reduction of obesity. Families are empowered to work with health services and family values look after themselves.

The community has a high awareness and prevention of AIDS and other chronic diseases. The Elders' facility for assisted living is fully staffed and works for the health and well being of Elders. Foot care and physiotherapy are two of the services provided. Elders are supported and respected and there is no abuse in the community.

A primary care health clinic and medical centre is fully staffed and resourced and provides doctor, pharmacy, emergency, optometrist and dental services along with a mental health program and a lab testing facility. The doctor, nurse and dentist are Sts'ailes members. The Health Board has a majority of Sts'ailes members and there is partnering with other communities for enhanced programs and services.

The Telmexw Awtextw year-round healing program is recognized and certified for residential treatment with its fifteen beds. A wilderness detox program

and facility focus on the teachings and self-care. Te Emimelh provides child and family services, with no children being removed from the community. Sts'ailes has emergency, crisis homes available for children and the family. Te Lalem continues to support families staying together in a safe and healthy way.

All staff members are Sts'ailes members with cultural credentials and there are comprehensive, coordinated mental health services. Family leaders and elders pass on the teachings and families are empowered for looking after families.

### Culture & Spirituality

Culture and spirituality is kept strong and children and families celebrate their identity. All members respect each other and many community members speak and understand Halq'eméylem whose place names are regularly used. The teachings are understood and bring individuals and families together. Cultural, spiritual and traditional roles are recognized and "all are equal" and respected for their own spiritual beliefs. There is a balance of responsibility and the different worlds. Sts'ailes continues to maintain and promote our traditional practices while increasing cross-cultural learning. This has been essential for helping our children build their identity.

The cultural centre is a central place for community cultural activities such as weddings, family gatherings, youth & community gatherings and multi-cultural functions. Qualified trainers teach



*Aylexw Team and Summer Students 2022.*

Halq'eméylem, basket making, weaving, drum making, drumming, singing and canning. Fish camp is organized for Elders and disabled. An attached art gallery celebrates the work of Sts'ailes and other Aboriginal artists. Cultural interpretative trails are world renowned and enjoyed by many visitors. Many years ago, a Community longhouse was built similar to the frog building in Lummi. A cultural multi-purpose arbor and mini longhouse at Lhawathet and the school are well used. Cemeteries have been enlarged and fenced, graves marked and family plots planned. The KeKwili house is also in place and used. Ceremonies are an important part of community life.

### Recreation, Youth & Elder Services

Community members are highly involved in recreation that includes a diversified program and sports activity. Organized sports teams participate provincially and nationally. A professional recreation director works with a team of recreation workers in planning and coordinating services for all the community. Many facilities have been built over the years, including a recreation complex centre, track,

playing fields, swimming pool, exercise equipment and walking and bike trails. There are properly equipped facilities of bathrooms, change rooms and concessions. The hockey box is equipped with lights and a roof. The beachfront is suitable for large groups such as canoe races and picnics. Youth activity center is equipped and staffed for supporting needs of all youth. Elders have enjoyed their full recreation programming over the years.

Elders and Youth enjoy together some activities. Workers' wellness plans are an important component of a healthy lifestyle. Money is available to host and facilitate many programs. The Youth and Elder Councils have an important role in drafting policy and developing the recreation programming. House leagues in hockey, soccer, baseball and basketball have high levels of participation. For several years, an elite athletics training facility in Sts'ailes has contributed to several youth excelling on the national stage. Long-term funds have been secured and staff provides the necessary support for such on-going activity and special events. Sts'ailes manages recreational activities as a gateway to Harrison Lake.

## Appendix 2

Excerpt from the *Sts'ailes Xwelma te Letsemóte Sts'ailes (aka Sts'ailes CCP) pertaining to / relating to Yeqwethet Team efforts:*

### Culture & Language

In order to know where we are going, we have to know where we come from. Our culture makes us proud of who we are and where we come from as Sts'ailes.

*What we envision:*

Culture and spirituality are kept strong and maintained. All members respect each other and traditional roles are recognized. To have many fluent halq'eméylem speakers and storytellers. The teachings are understood and bring individuals and families together.



Community member Doug being asked to witness.

### Youth & Elders

Sts'ailes recognizes the importance of our youth and elders. Programs, activities and recreation services are available to engage youth and elders to participate in.

*What we envision:*

Community members are highly involved in recreation and leisure that includes a diversified program, planning and coordinated services for leisure, extracurricular and sports activity. Organized sports teams participate provincially and nationally. Elders and youth enjoy outings and activities together and have an important role in drafting policy and developing the programs.

### Community Services

Sts'ailes Health and Family Services team works with the community to build a foundation of wellness through the provision of culturally appropriate programs and services.

*What we envision:*

Members live longer and have better health by living a healthy lifestyle with a good home life. To have healthy individuals and families with no children at risk; they remain home and safe.

### Communications

*What we envision:*

Sts'ailes members are engaged in their governing, informed of the services and participate in achieving the community goals and priorities

## Appendix 3

### Sts'ailes Pandemic Influenza Response Plan

This Plan is a response system supporting the activities occurring as a result of Pre-Pandemic, Pandemic and Post Pandemic phases of an Influenza outbreak.

This Pandemic Plan is an addendum to Sts'ailes Emergency Preparedness Plan and is intended to flow naturally from activation of Sts'ailes Emergency Preparedness Plan in the event of any emergency or disaster.

#### PANDEMIC INFLUENZA: WHAT IT IS AND HOW CAN WE PREPARE

Historically, influenza pandemics strike about three times every 100 years and last up to two years. Usually these worldwide epidemics - known as pandemics - are not too severe, as was the case in 1968 and 1957. Occasionally, however, a pandemic can be devastation, as it was in 1918 when wide-spread sickness caused extensive social and economic disruption- as well as many deaths.

Experts at the World Health Organization are currently monitoring an avian influenza virus- H5N1- that has killed millions of birds in Asia, Africa, and Europe. They are warning us that this virus could change into a virus capable of infection and spreading among people - causing worldwide influenza epidemic.

It is that ability to change that makes influenza viruses such a formidable foe. They change constantly, always trying to stay one step ahead of our immune system. That is why we have to deal with flu season each year after year.

For an influenza virus to cause a pandemic, it must be dramatically different from any virus we've

encountered before - a virus for which people have no immunity. That's why a virus that originates in birds or animals is such a concern. People would have no immunity to this new virus and it could spread rapidly.

For a virus to cause a pandemic, it must be:

- New to people so no one has immunity to it
- Able to infect people and make them very sick
- Able to spread easily from person to person

The avian influenza virus that the World Health Organization is currently concerned about- H5N1- has already met the first two conditions. Some people have been infected with this virus when they were in close contact with diseased birds. And, when the virus infects people, it makes them very sick. In fact, more than half have died. But, so far, this H5N1 virus hasn't developed the ability to spread easily from person-to-person.

We can't predict exactly when a pandemic will hit or how serious it will be. But we have to be prepared- and be prepared for the worst.

#### PREPARING FOR PANDEMIC INFLUENZA

##### Why prepare for a pandemic?

Pandemics are unpredictable, but inevitable over the long term. Planning ahead for a pandemic or any other major health emergency in the community will minimize illness and death. Planning will also help the community to manage the stress and disruption and later to heal.

*Estimated impact of pandemic influenza on First Nations:*



The potential impact of Pandemic Influenza on First Nations People in BC is estimated at:

- More than 2500 will be clinically ill.
- More than 500 will require hospital care.
- As many as 150 could die.

Our infrastructure of helping services will be under severe strain; particularly affected will be health workers, emergency services and other essential services. Alternate sites may be required for the delivery of services; there will likely be closures of public places and many resources will become scarce.

**BC PANDEMIC INFLUENZA PREPAREDNESS PLAN FROM THE BC CENTRE FOR DISEASE CONTROL [OCTOBER 2005]**

**Planning Assumptions**

- Based on the last two pandemics, it is estimated that the next pandemic virus will arrive in Canada within 3 months of its emerging in another part of the world.
- The first peak of illness in Canada will occur within two to four months after the virus arrives in Canada.
- The first peak in mortality will be one month after the peak in illness.
- If the pandemic virus arrives close to the usual annual flu season, the time interval between emergence, arrival and / or peak illness and mortality will be shortened.
- A pandemic usually has two or more waves, either in the same year or in successive flu seasons.
- A second wave will occur 3 to 9 months of the initial outbreak wave and may cause more

serious illnesses and deaths than the first.

- Each wave of illness will last 6 to 8 weeks.
- Vaccine will be the primary means of pandemic influenza prevention. The supply will be limited during the early stages of the pandemic; therefore, plans for the first wave should assume lack of influenza vaccine and priorities for vaccination will need to be established.
- A substantial proportion of the workforce will not be able to work for some period of time due to illness in themselves or in their family members.
- Health care workers are likely to be at higher risk of illness due to their exposures.
- Effective preventive and therapeutic resources will be in short supply.
- Essential community services are likely to be disrupted.

**Goals and Objectives**

- To have in place a plan that ensures readiness to respond appropriately to an influenza pandemic.
- To have in place a plan that is integrated with the planning of Fraser Health, Health Canada/FNIHB and the Province of British Columbia.
- To have in place a plan that will enable cooperation with our neighboring communities and First Nations.
- To minimize serious illness, death, and suffering during an influenza pandemic.
- To raise awareness throughout our community of the need to prepare for a pandemic.



*Community Health Nurse Johan helping bandage a cut.*

**PUBLIC HEALTH AND PREVENTION**

**Management of Sick Individuals**

Recommendations include the need for basic hygienic practices such as frequent hand washing, covering the mouth when coughing, and disinfection of surfaces. Also, they include advising ill individuals when and where to seek medical attention, and how to minimize potential exposures when doing so.

*FNIHB specifically recommends the following regarding personal hygiene:*

- Use disposal tissues for nose
- Cover nose/mouth when sneezing or coughing
- Wash hands/use sanitizer after sneezing or coughing
- Keep hands away from eyes and nose
- Remain home with influenza-like illness until symptoms resolve
- Individuals who are sick with Flu symptoms should be isolated.

*Community- based disease control strategies:*

Traditional public health control measures alone will probably not be effective at controlling spread of pandemic influenza in the community. Control will likely require availability and use of an effective vaccine. The following are recommendations for community- based strategies:

- Self-isolation: is strongly recommended.
- There may be a need to advise against public gatherings at specific locations.
- Hand sanitizing stations will be strongly advised and monitored during places for community gathering such as Longhouse season for example.
- General large groups gathering together will be cancelled until after the emergency has passed.

The Pandemic Response Plan is integrated with the Sts'ailes Community Emergency Plan with its clear command structure for the operational management of emergency response regardless of cause.

The goal of the Sts'ailes Emergency Response Plan and the Pandemic plan is to link with provincial and federal agencies in the event of a disaster, outbreak, of illness with links which are pandemic in origin, or any other situation deemed by the community leaders necessary to implement the Emergency Response Plan.

The Emergency Operations Centre (EOC) is designated as the Sts'ailes Governance Building with a backup location identified as the Sts'ailes Community School.

In the event of a Pandemic Influenza outbreak, mass immunization clinics will be held in the "Red Building"

**Sts'ailes Command Structure:**

- Incident Commander
- Community Spokesperson
- Health Director
- Senior Nurse / Manager for Health
- Operations
- Planning: Emergency Response Planning Committee
- Logistics
- Finance / Admin



*The designated Emergency Operations Centre (EOC).*

**Note** - Each key person should train at least one other person to act as a backup if the key person is ill or in transit to the community. The backup person will be required to share the workload during the emergency.

**POPULATION PROFILE**

Population of Sts'ailes by age groups and high risk groups is recommended. This allows rapid identification of those who will receive the first doses of the vaccine as it becomes available.

- 0-23 months:
- 2-19 years:
- 20-65 years:
- 65 years +:

At risk frail and disabled:

*Total population of Community:*

Non-Resident Personnel:

Health Workers:

School and Daycare Employees:

Band Staff:

*Total Non-Resident Personnel:*

- To best plan for this potential health emergency, this Pandemic Plan will be shared, reviewed and revisited in partnership with Fraser Health Authority.
- Operational procedures for essential community functions will proceed in accordance with Sts'ailes Emergency Response Plan

Responsible Person: Operations / Logistics: Name of designate

- As a way to remain consistent with the community Emergency Management planning and approach, the Pandemic Plan is closely coordinated with Sts'ailes Emergency Response (all hazards) Plan.

Responsible Person: Emergency & Pandemic planning committee members

To ensure best response from a potential limited number of essential service providers for the community during a pandemic, a list of essential service personnel is available.

Responsible Person: Operation/Planning Senior Nurse Manager.

- Follow Community Emergency Plan for Essential Community Functions.

**STS'AILES ESSENTIAL SERVICE PROVIDERS**

Health Care Team consisting of RN's, Health Clerk, Home Support Staff, Counsellors and Social and Family Assistance Staff.

**First Aid**

The Health Team, Sts'ailes First Responders Team

**Community Health Staff**

Registered Nurses, CHR, Home Support Staff

**Water Maintenance**

Public Works

**Repairs**

Public Works

**Power**

**Transportation**

**First Responder**

**Fire**

*Volunteer Fire Fighting Team*

Responsible Person: Health Director and the Senior Nurse Manager for Health Services

**TEST THE PLAN**

Fraser Health and Health Canada/ FNIH, off-reserve neighbors and municipal planners in pandemic planning will be invited to actively participate in Plan testing. This Plan will go through the motions of review at the same time as the Sts'ailes Emergency Response Plan.

There are three phases to this Pandemic Plan:

1. Pre-Pandemic (preparation)
2. Pandemic (response)
3. Post- Pandemic (recovery)

**1. Pre-Pandemic phase**

This is the critical preparation stage. There are three important goals:

- To establish an effective, planned response in the event of a Pandemic
- To build co-operation among those having specific responsibilities in the plan.
- To build communication networks to support both planning and response.

**2. Pandemic phase**

The Provincial Health Office (PHO) will declare a pandemic and initiate activation of provincial, regional and local pandemic response plans. Following this lead the Fraser Health Chief Medical Health Office (CMHO) will contact the appropriate agencies and local community governments

- To minimize death.
- To minimize illness.
- To minimize suffering.

### 3. Post- Pandemic phase

The post-pandemic recovery period begins when the Provincial Health Officer (PHO) declares that the influenza pandemic is over. The key goals are:

- To de-activate pandemic response activities.
- To assess impact and document the lessons learned.
- To use review to revise and update plan.

The Plan is divided into sections for each of the three phases and each section covers six essential components of pandemic planning:

1. Emergency Response
2. Vaccine
3. Antiviral
4. Clinical Health Services
5. Surveillance
6. Communication

Responsible Person: Health Director in consultation with the Incident Commander, Chief of Sts'ailes and members of the Planning Committee.

#### PHASE I. PRE-PANDEMIC

##### 1. Emergency Response

Recognized in this plan is the necessity for a clear command structure in all health emergencies and it should be consistent with provincial and Federal agencies linked to this plan. A location, with alternative sites, must be designated to be the Emergency Operations Centre (EOC).

##### 2. Vaccine

The supply of vaccine available to each region will probably be limited during the early stages of the pandemic; eventually there should be enough vaccine for everyone.

- As immunization is the single most effective way to reduce the impact of influenza, it is extremely important for the Health Team to promote annual influenza vaccination of community members. The goal is to achieve as close to a 100% annual vaccination rate as possible.
- Plan for mass pandemic influenza vaccination clinics. Communities who are within one hour of a Health Authorities mass immunization clinic will be required to attend that clinic. Communities outside of that range will have vaccine arranged for them, this will require a clinic to be held in the community.
- Security needs of clinics, crowd control, and the need to give two doses of the vaccine one month apart require organization, planning. A review of the client files and generation community lists for vaccine administration and tracking of volume of vaccine/antiviral utilization.

Responsible Person: Planning Committee and Senior Nurse Manager as Advisor

##### Plan

- Sts'ailes has been identified as the Health Authorities mass immunization clinic for the area bounded by Hemlock Valley and the Lougheed Highway and between Agassiz and Mission on the north side of the Fraser River.
- The "Red Building" has been identified as the location for the mass immunization clinic during the pandemic to provide vaccinations to the community.
- Maintain facilities and procedures for vaccine supply, transportation, and storage.

Responsible Person: Senior Nurse Manager and Home Care Nurse

##### Plan

- Because of the number of community members a clinic will be required for two days. The Sts'ailes Health Centre will act as the storage site for supplies remaining in the community.
- Vaccine security much be addressed, with the vaccine locked in safe location under the direction of the Registered Nurses.
- Appropriate refrigeration and good security measures will be provided for vaccine at all times.

### 3. Antivirals

Antiviral drugs are used to treat influenza illness and to prevent it through prophylaxis. These drugs could be used in conjunction with vaccination for the management of pandemic influenza. Given the delay anticipated between the arrival of a pandemic influenza strain and adequate vaccine supply, antivirals may be the only virus specific intervention available during the initial pandemic response.

##### Types of antiviral drugs:

Tamiflu is the brand name of the antiviral drug that will be utilized by most Health Authorities.

Antiviral are drugs used for the prevention (prophylaxis) and early treatment of influenza. If taken soon (less than 48hours) after the onset of illness, than can lessen influenza symptoms, shorten the length of illness, and potentially reduce the serious complications of influenza. Antivirals work by decreasing the ability of the virus to reproduce. They do not however provide immunity against the virus.

Originally, it was assumed that 10 doses of Tamiflu would be adequate to provide prophylaxis to one person following a single exposure to influenza

virus. It was all assumed that 10 doses would provide a course of treatment to a person ill with influenza.

As the use of antiviral may be foreign to many people, there will be a need to educate community member about antiviral use. As well, there will be a requirement for the Health Team to keep themselves up to date on the latest information regarding the antiviral which their Health Authority will be providing.

##### Plan

- Each year during regular flu vaccinations, the Health Team will provide the most recent information regarding antiviral.
- Health Authorities will provide guidelines for the use of antivirals particularly if they are short supply. At it stand now, it is not expected to be a large enough supply to allow widespread use. There will be provincial guidelines for the ethical, consistent and appropriate use of antivirals in all jurisdictions.
- Health Team (Nurses) will need to ensure they are up to date with any changes and/or recommendations regarding provincial guidelines.
- Develop strategies for dealing with cases where antivirals are refused or contraindicated.

##### Plan

- The Health Team Supports the use of antivirals during a pandemic, and will promote its importance in protecting individuals and the community. Refusal to use antivirals may result in that person being quarantined, in order to reduce the possibility of spreading the pandemic influenza virus.

#### 4. Clinical Health Services

Estimate needs during a pandemic.

##### Plan

- Assess clinical capacity (Are we able to take care of the sick?)
- The Health Team will assess clinical capacity (for both home care and in case and interim treatment center is required). Plan for a high volume of health care needs.
- Devise appropriate infection control measures.

##### Plan

- When infection control measures are required, the use of respiratory precautions (gloves, masks) will be sufficient. It is recommended that if possible, once used they be placed into a Hazardous Material container, and then disposed. However it is reasonable for gloves/masks/tissues etc. to be thrown into the garbage i.e. plastic bags that can be tied off. The route of transmission will be droplet spread so as long as the gloves/masks/tissues are in the garbage and not disturbed they will not pose a risk. Once the droplets dry they will not pose any risk at all.
- Identify strategies to ensure adequate human and material resources. Identify alternate pool of health care workers.

##### Plan

- The Health Team will review staffing levels and report any deficiencies to the appropriate agency (Health Authority, FNIHB etc). Utilizing the list of essential service workers, all persons with first aid qualifications will be identified to assist in the event more persons are needed to care for

the sick. FNESS is available to provide additional First Aid training for persons in the community. For material resources, the community will be receiving supplies from FNIHB. Upon receipt these supplies will be reviewed, expiry dates documented, and replenished as required. An area will be identified in which to safely and securely house items.

- Develop plans for triage, including phone triage.

##### Plan

- As keeping individuals away from others in the event of a pandemic is key to slowing the transmission of the virus, individual community members will contact the Health Team/Clinic by telephone advising they are sick. They will then determine if phone triage or individual home triage is required. If large numbers of community members become sick, then the Health Team may determine to open a “temporary triage site” within the community. This site could be opened during determined hours as a place where community members can attend for initial treatment.

- Identify additional and alternate care sites for clinical service delivery to limit exposure to the flu.

##### Plan

- In the event that community members become too ill to care for themselves and it is determined that an alternative care site is required.
- Classrooms and other areas of Sts’ailes School as well as the Sts’ailes Community Hall are potential sites. These sites have running water, washroom facilities, and a place to cook, large sinks, heat, and enough room to have patients separated by three feet.

- Suggested supplies: beds, bedding, buckets, lights, thermometers, gloves, masks, wash cloths, sponges, paper towels, scissors, water, soap, oxygen, patient record keeping material.
- Identify alternate mean of patient transportation.
- Responsible Person: Health Team/ Logistics

##### Plan

- If community members become too sick to be cared for in the community, and if alternate transportation for patients is required, the logistics person will have a list of all persons in the community who own vans, or other large covered vehicles and will conduct a face out if and when required.
- Vans offer protection from the elements, and patients can either sit or lay down.
- Recognize the need for management of a loved one in case of death.

##### Plan

- The most current information regarding dealing with persons who have died as a result of the flu indicates, respiratory precautions (mask, gloves) will be sufficient for handling of the deceased. This will be monitored closely by FNIHB/ Health Canada and if information changes regarding handling of the deceased during the pandemic, then infection control measures may need to be altered.
- When the number of deaths as a result of the pandemic is so overwhelming that the Hospital, Coroner’s Office, or Funerals Home cannot receive a deceased person immediately, they may be required to stay in the community. This period of time may be for hours, days, or in

extreme cases the community may be advised to keep the body onsite and to make direct funeral arrangements.

- A place in the community (cool & dry) will be identified at the time in order to any deceased remaining in the community.
- As long as the death was a direct result of the Flu, there may not be a need for the Coroner’s Office or the Family Physician to view the deceased is remaining in the community, then the CHR/CHN needs to complete a Registration of Death (form number HLTH 406 REV 92/12) Province of British Columbia- Ministry of Health Et al.
- Discuss funeral arrangement issues.

##### Plan

- If the deceased person follows “usual” protocol and is sent to the Hospital, Coroner’s Office, or Funeral Home then returns to the community, normal traditions will be followed. For any person(s) who come into contact with the deceased, there is currently no evidence to support the need for those persons who are sitting with the deceased (no contact) to wear any protective equipment. This will be monitored by the MHO/ Health Canada and if information changes communities will be notified to make applicable changes.
- If the deceased remain in the community from death to funeral, mask and gloves may be required for all persons attending the funeral. The community will also make every effort to bury the deceased as soon as appropriate and possible.

Note: A Death Certificate must be issued before the deceased can be buried.



Yeqwethet Medical Office Assistant Rica always with a smile.

## 5. Surveillance

Establishing local surveillance (monitoring ill people).

### Plan

- All community residents must report their illness to the Health Team during a pandemic
- The Health Team will, at every opportunity inform community members of their responsibility to inform the Health Team when they are ill.
- Note: It is recommended that community members begin this practice during the Pre-Pandemic phase.
- Establish reporting of absenteeism for on-reserve schools.
- Endure timely reporting of influenza activity to the Medical Health Officer and FNIHB.

Note: The school administrator will be responsible for keeping the Health Team informed for school

absenteeism rates, and reporting specifically children who have miss more than one day.

### Plan

- When a community member is suspected as having the flu, they will be triaged and all pertinent information related to the appropriate agency (Health Authority, FNIHB etc.)

## 6. Communication

The best way to prepare the community is to provide information.

### Plan

- Hold a community meeting and discuss the following information.
  - What a pandemic influenza is.
  - Getting Vaccinated (this is very important to community members who do not live in the community full time, especially if you decided to limit travel into your community).

- Antiviral information.
- Self-monitoring (if a community member becomes ill, they must inform the Health Team of their illness to get quick and proper treatment).
- Personal Hygiene (importance of hand washing).
- Travel restrictions (ill people returning to the community).
- Infection control measures (the use of gloves and masks).
- Seek help from others (Health Authority, FNIHB or Consultants) as necessary and available.
- Develop and test regional/local communication networks. (i.e. who are the key people and how to contact them during the pandemic?)
- Responsible Person: Operations/Logistics and Senior Nurse Manager as advisor.

## PHASE II. PANDEMIC

### 1. Emergency Response

After a pandemic has been declared by the PHO, activate this plan.

The Sts'ailes Incident Command team shall meet at the Emergency Operations Centre (EOC) as soon as possible and activate this plan, and any local control measures. The Fire Hall Boardroom has been identified as the location of the EOC. Each local control measure will need to be discussed, and decided upon separately, before being implemented.

The Health Director will work with the Senior Nurse Manager and/or Fraser Health to co-ordinate the

regional and community emergency response to the pandemic outbreak.

### 2. Vaccine

Provide as much information as possible about the vaccine, and possible side effects to the persons being vaccinated.

Attend mass immunization clinic when advised by your Health Authority.

### Plan

Sts'ailes Community is within a one hour drive from a Health Authorities mass immunization clinic; however this is a semi-isolated community and on reserve vaccination may be recommended by Fraser Health Authority.

Agassiz, a small town may be the location of the mass clinic.

Once conformed, a Health Team member will ensure all persons who are planned to attend the clinic will be notified in person of the date, time and location of the clinic.

Confirm each person's ability to attend the clinic, and arrange for transportation for those who cannot.

Contact everyone who was scheduled to attend the clinic to ensure they attended.

- Hold a mass immunization clinic if directed by Fraser Health Authority of FNIH.

### Plan

Once confirmed vaccine is available, a meeting with Health Team, the incident Commander, and Logistics shall occur to confirm dates, times, location

and the best way to advise community members/ Currently the “Red” building has been identified as the location of the clinic. Logistics will ensure the building is open with sufficient, security, tables, chairs, and create a list of all attendees who will require transportation. Logistics will also arrange for pick up of these community members.

The Health Team will ensure it has sufficient staffing, Contact your Health Authority if more staff is needed.

The Health Team will ensure that the Health Authority and Incident Commander are kept up to date on numbers of persons’ immunized/remaining. If for special reasons, logistics cannot get a community member to the clinic, the Health Team will do their best to attend the residence to vaccinate that person.

- Administer vaccine to community members as per priority groups.

Note: As there may be a chance that not all community members will receive the vaccine, it is the responsibility of the Health Team to ensure those who do not receive the vaccine are told the reasons why. It is recommended that community members be advised about who will receive the vaccine in the first instance at a meeting held in the pre-pandemic communication part of this plan.

It is the responsibility of the Health Team Nurses to monitor vaccine coverage and adverse effects. It is also their responsibility to report to both their Health Authority and FNIHB.

### 3. Antivirals

Antivirals left in the community must be locked and properly stored. When antivirals are delivered to the community, follow the directions provided by the Health Authority on proper storage.

Provide information to the community members about the use of antiviral medications. As information is passed onto the Health Team, they will ensure to keep the community member informed. If they are for specific community members, the Health Team will advise those individuals about medication use.

Administer antivirals to priority group(s) or individuals. As supplies of these drugs will be limited the Health Authority will provide information as to priority groups and distribution.

Monitor uses of antivirals maintaining records on us and adverse events/effects. If there are any adverse reactions, inform the Health Authority/ Medical Health Officer immediately.

### 4. Clinical Health Services

Implement infection control measures.

#### Plan

At this time, caregivers of those who are sick will be using respiratory precautions (gloves, masks). However, it will be the responsibility of the Health Team in consultation with the Health Authority to ensure that these precautions are appropriate for the particular flu virus.

- Provide health care services on a priority basis.

Note: When infection control measure is in place, the use of respiratory precautions is sufficient. It is recommended that if possible, once used they be placed into a Hazardous Material container, and then burned. However it is reasonable for gloves/masks/ tissues etc. to be thrown into a garbage i.e. plastic bag that can be tied off. The route of transmission will be droplet spread, so as long as the gloves/ masks/tissues are in the garbage and not disturbed they will not pose a risk once the droplets dry.

#### Plan

Once notified by a community member of an illness, a member of the Health Team will then either attend their residence, or have them attend the Health Centre, to triage the level of illness.

This community member’s illness will be followed up as determined through the initial triage as other members of the community become ill, the Health Team will establish a priority list indication who requires what level of care (e.g. at home, alternative care site or hospitalization).

- Asses the staffing, and mobilize additional personnel as needed.

#### Plan

The Health Team will review staffing levels and report any deficiencies to the Health Authority/ FNIHB. Utilizing the list of essential service workers, all persons’ with first aid qualifications will be identified to assist in the event more persons are need to care for the sick.

- Establish alternate sites for providing medical care.

#### Plan

The Health Team will identify alternate care sites. The identified location will be the Sts’ailes Community Hall or the Sts’ailes Community School.

Note: See pre-pandemic section for specifics. Arrange for transportation of ill cases.

#### Plan

If a member of the community has been identified as being too ill to be cared for within the community, the Health Team will arrange for transportation to

area hospitals in response to recommendations of the attending physician and/or Medical Health Office. The means of transportation will depend upon availability of the BC Ambulance Service (road or air transport)

Arrange for Transportation of deceased community member, or storage if advised to keep the deceased in the community.

#### Plan

If a community member dies as a result of the illness, then attempt to send the deceased to the Hospital, Coroner’s office, or Funeral Home as you would normally do when a community member passes away.

If advised to keep the deceased in the community, then the Senior Nurse Manager will make every effort to contact a family practice physician, MHO or other medical practitioner to complete a Registration of Death (form number HLTH 406 REV 92/12) Province of British Columbia. This will be a delegated function from medical to nursing practice.

Chief and Council will confirm a place to store the decease until burial (cool and dry if possible). Bury the deceased as soon practical and appropriate for the community.

Note: A Death Certificate must be issued before the deceased can be buried.

- Monitor and maintain material supply inventory. Ensure that you check regularly for inventory, if you require additional supplies order them immediately. Remember that your supplies may not be able to be dropped off the next day, plan at least 30 days ahead.

## 5. Surveillance

- Track impact of influenza at the community level.

Note: The impact refers to, number of ill community members, economic loss to the community, physical and emotional impact to the community.

- Disseminate surveillance information to FNIHB and your Health Authority.

### Plan

While the pandemic plan has been activated, it will be important to have community members informed of the most up to date surveillance information, especially those who live in the community full time. They should be advised when family members become ill.

## 6. Communication

Hold a community meeting as soon as possible after the pandemic has been announced to provide information to community members. Encourage community member who do not live in the community full time to attend. Provide the following information again:

- What a pandemic influenza is.
- Getting Vaccinated (this is very important to community members who do not live in the community full time, especially if you decided to limit travel into your community).
- Antiviral information.
- Self-monitoring (if a community member becomes ill, they must inform the Health Team of their illness to get quick and proper treatment).
- Personal Hygiene (importance of hand washing).

- Travel restrictions (ill people returning to the community).
- Infection control measures (the use of gloves and masks).
- Seek help from others (Health Authority, FNIHB or Consultants) as necessary and available.

Identify central spokesperson who will be in consultation with the Health Director and/or Senior Nurse Manager.

### Plan

The Chief of Sts'ailes will conduct any media interviews, or communications required on behalf of the community. The exception is if he is not available, then someone will be delegated on behalf of the community.

- Activate your communications plan to gather and disseminate information. Liaise with your Health Authorities, Aboriginal Health Liaison person, FNIHB and any local Emergency Service Providers.

## PHASE III. POST PANDEMIC

### 1. Emergency Response

The Sts'ailes Incident Command team members will meet once advised that the pandemic outbreak is no longer a threat.

The team meeting will:

- Assess the effectiveness of the emergency response, and this plan.
- Revisions will be designated and coordinated with the existing Plan, recommended changes to

the Plan and concurrent integration with Sts'ailes Emergency Response Plan.

- Document lessons learned by the community. There are only a few times in history where we have the opportunity to possibly save our community from future pandemics. It is important to write down and pass along how Sts'ailes did during the outbreak, what worked and what didn't.
- If the community was financially impacted by the health emergency, then seek financial redress.

### 2. Vaccine

- Dispose of excess vaccine as directed by Fraser Health Authority.
- Evaluate impact of vaccines. Did they make a difference?

### 3. Antivirals

- Dispose of any excess antivirals as directed by the Health Authority.
- Evaluate impact of antiviral use. Did they make a difference?

### 4. Clinical Health Services

- Determine when any facilities affected by the outbreak can resume normal operations and inform the community.
- Arrange for the return of any community member who may be out of the community in hospital or at other care sites.
- Provide grief counselling to the community as needed.

- Evaluate and revise the plan as needed.

## 5. Surveillance

Complete the surveillance report. The information required for the report will be directed by FNIHB.

### Plan

The Health Team will disseminate the surveillance report to FNIHB and to Fraser Health Authority. Resume regular surveillance activities.

Note: Regular surveillance for illness in the community will continue for some time to ensure that if community members become ill, that it is reported to the Health Team. The affects of a pandemic influenza can and will be felt for a long time in the community once a pandemic is over.

## 6. Communication

- Inform the community members of the pandemic being over, and discuss how it affected the community. It would be best to do this in a community gathering, as this would be a good time to support each other as well. As there will be very few persons affected by the pandemic influenza outbreak, many community members may feel the need for support and counselling.
- Evaluate and revise plan as needed. Evaluation the current plan is needed for best results in preparation for the next pandemic influenza outbreak. History has shown us that they do occur and will continue to occur long after we are gone, however if information about the effectiveness of the current plan is passed on, it could save lives of the future community members.
- The pandemic plan will be reviewed annually and/or at the same as the Sts'ailes Emergency Response Plan is tested and reviewed within 2 yrs.

# Appendix 4

## Sts'ailes Home and Community Care Manual

A handbook and Guide for Use in the Client's Home. This manual is intended to provide clients and their families with information about Sts'ailes Yeqwethet Home Care Services.

### WELCOME TO STS'AILES YEQWETHET HOME CARE SERVICES

The Sts'ailes Yeqwethet Home Care Services Handbook is provided to support your understanding of the services provided in your home and of some of the policies which guide home care nursing and home support services.

### WHO PROVIDES THIS IMPORTANT SERVICE TO YOU IN YOUR HOME?

Home Care Services is a support service within the Sts'ailes Yeqwethet Health Services. It is funded by First Nation and Inuit Home and Community Care Program, First Nations Health Authority and Adult in Home Care.

Home Support staff are certified Home Support Attendants, Resident Care Aides and/or Licensed Practical Nurses. Nursing staff are licensed to practice in B.C. and carry a wide range of experience in both Home Care and in general nursing practice. Licensed to practice is a mandatory requirement for nurses and is renewed annually. Home Support Staff are supervised by a Nurse in the performance of tasks and care provided for you.

Home and Community Care services office is located within the Health Department of the Sts'ailes Administration Building.

### HOW TO CONTACT US

Yeqwethet Office Number: 604-796-9601  
Jessie Cell:  
Loretta Cell:  
Fax Number: 604-796-2122

Our service hours are Monday - Friday 8am-4pm After hours, the voicemail system will record a message from you. Messages are checked by staff by 8:30am and periodically throughout the day.

At present, the Sts'ailes Home Care Services is unable to provide evening and weekend Home Support Service however, Home Care Nursing services can be arranged through Agassiz Home Health if services are needed during these times. The Home Care Nurse can help arrange these visits if necessary.

### WHAT WE BELIEVE ABOUT PROVIDING HOME CARE SERVICES

We believe community residents have a right to receive quality and appropriate health care. Each person is unique and requires individual support and service as stated in the following:

- Clients are assessed for care so that the best (and most appropriate) care is provided. Care and services are based on current needs.
- Each client has a Care Plan which is based on the client assessment provided by the Home Care Nurse and details the type and amount of service required by each client. Home Support staff are then assigned to provide service in your home according to the care plan. The tasks of the Care Plan are those which provided regularly on the

days and times agreed to at the time of the initial assessment of services.

- Services are reviewed and evaluated as necessary. For example, when there are changes in health condition, prior to discontinuing services and/or every six months when clients have longer term services needed.
- The role of Sts'ailes Home and Community Care Service is to assist and support families in caring for their family member.
- Home Care staff are well informed and up to date with the latest trends and methods in providing services to the clients. We recognize the importance of care partnerships and connect and/or communicate with off reserve service providers (Fraser Health, First Nation Health Authority) who may be able to supplement services needed at peak periods of care in our community.
- We will continue to share learning about self-care, self-management and handling challenges and stress often created by changes in health status.
- Sts'ailes Home Care Service seek staff who are highly committed, qualified, conscientious and caring individuals. These values are a mandatory requirement for employment as home care service providers.
- Staff provide high quality, safe and trustworthy service to clients.
- Individual issues, concerns or requests are important to us and will be addressed by face-to-face contact with you within 48 hours of receiving notice of concern.
- Or staff will have zero tolerance for disrespect,

including verbal and otherwise abusive behavior of clients. This will result in immediate termination of service.

### WHAT YOUR HOME SUPPORT SERVICE PROVIDER CAN DO FOR YOU

#### Personal Care

- Assistance with showering, tub bath or bed bath.
- Dressing, grooming, toileting, wheelchair assistance.
- Medication Reminders.
- Nail Cutting. Footcare is done by a Certified Footcare Nurse.

#### Meal Preparation

- Meal and/or snack preparation according to the Care Plan. Clean up after your meal.
- Food preparers carry Food Safe Certification. Reminder: providing a meal is a family responsibility and all efforts by the family should be made to meet this need of their family member. The family provides appropriate groceries for their family member.

#### Household Management

A safe and healthy environment is maintained for you as a part of our service. Based on assessed need homemaking services during illness may include:

- Bathroom - clean fixtures, tub, toilet, counters and mirror. Mop the floor, change the towels if you wish
- Kitchen - wash dishes, clean kitchen surfaces



such as stove top, counter tops, and outside of microwave and fridge. Vacuum or sweep the floor and wash with a mop. Empty garbage pail and re-line

- Bedroom - Change linen on bed as necessary, vacuum and clean mirrors. Dusting will be done only if you have a respiratory condition and/or you are unable to do so
- Living Room - Vacuum or wash floors. Only clients with respiratory conditions (COPD, Asthma, Pneumonia for example) will have additional dusting or cleaning added
- Laundry - Sheets/towels only if washer and dryer available. No ironing services are provided

**Reminder:** All of the above tasks are provided only if this is an assessed need and is noted on the individual Care Plan

### Special Circumstances

Grocery shopping/banking assistance, escort to medical appointments for example cannot be accommodated with the current level of staffing. We will make every effort to assist the family to find a reliable person to support this need, however, it is not considered a responsibility of the service provider at this time.

### WHAT HOME SUPPORT STAFF MAY NOT DO

- Wash walls or ceilings
- Shampoo rugs/carpets
- Clean drapes
- Bake, can or preserve food
- Gardening or outside chores
- Cook or clean for guests or boarders
- Clean up after pets
- Wash outside windows or decks
- Ironing

- Pick up medications
- Clean ornaments
- Clean up after parties, purchase alcoholic beverages/gambling tickets
- Move heavy appliances or furniture

Home Care Staff must be able to work in a safe environment and without risk of injury. Staff must follow Workers Compensation Board regulations; she/he is required to wear supportive, safe footwear in your home at all times.

Staff will not accept gifts or loans of money or enter any private pay arrangements. Staff will not smoke inside or outside your home.

### THE HOME CARE NURSE CAN DO

- Assessment for services; acute or chronic care
- Health Teaching
- Monitor Health Condition
- Medication administration
- Therapeutic Care
- Wound Care
- Nursing procedures ordered medically
- Hospital discharge follow up and assessment
- Consulting physicians
- Consulting families
- Attend Case Conference
- Establish linkages with off reserve service providers
- File management
- Reporting to necessary governing bodies

### RIGHTS

#### Client Rights

- All staff will treat you with dignity, respect and courtesy
- The Home Support program is committed to ensuring our clients will be informed about all

aspects of care being provided by staff and to be involved with the development of your care plan

- You may consent or refuse to have any of the services offered
- All matters associated with care is held in strict confidence. Access to client files and information is strictly controlled to protect your personal information relating to your health concerns
- All clients will be given respect and privacy for personal belongings and/or private space
- Freely express concern regarding care without fear of reprisal, discrimination or interruption of service. Concerns are treated with respect and investigated promptly
- Expect that the Care Plan will be reviewed and updated at regular intervals. This is done with your full knowledge and participation
- Home Support Staff will arrive on time, neat in appearance, pleasant and polite and are responsible for their own meals

### Client Responsibilities

- You are expected to treat staff with dignity and respect
- Respectfully following the approved Care Plan
- Provide appropriate cleaning supplies and equipment
- Protect your personal property
- Maintain a safe working environment for Home Support and other staff
- Maintain a smoke free environment

- Provide 24 hours' notice if you will be away from your home to provide time to adjust service and better use the available staff time

### Home Support Staff Rights

- Be treated with courtesy and respect by each client receiving service and by family members
- Leave the clients home if there is any alcohol and/or drug use in the household during a scheduled visit
- Leave home if any threat, unsafe situation or conflict should occur
- Work with the client in privacy without several family members/friends present

### Home Support Staff Responsibilities

- Provide service according to the client Care Plan
- Participate with the Home Care Nurse and/or Health Service Manage in updating Care Plans
- Report to Home Care Nurse if there are any changes to the clients' needs or health status
- Record a brief, concise summary of each visit in the clients' file
- Home Support Staff are not to enter the home if the client is not home

### GENERAL PROGRAM AND SERVICE INFORMATION

#### Confidentiality

Information concerning our clients is privileged and confidential. Staff have signed an Oath of Confidentiality pledge as an employee of the Sts'ailes Band and will not discuss you or your

personal information with anyone except those who are authorized (Immediate supervisor, Manager or other professions involved with the clients care as needed).

A community Health Staff member is asked to report any changes in your condition to the Home Care Nurse or the Health Program Manager, so the best possible care is provided to you or your family member. The staff member may not discuss other clients with you.

### **Scheduling and Supervision**

The Home Care Nurse, Home Support Staff work closely with you to provide a team approach to your home support service needs.

The Home Care Nurse provides the initial health assessment so that all the needs are known. Health needs provide the basis for development of a suitable Care Plan which the Home Support Staff must follow. The Care Plan included day of the week, hours of service and the type of service to be provided.

This is an ideal opportunity for you to discuss questions and concerns that you/or your family may have.

The Home Care Nurse will visit your home periodically to ensure that you are receiving the services required and to review your health status. Every effort is made to assign the most suitable Home Support Staff member to each client's home however, there is no guarantee that the worker requested will be available to provide the services.

### **Statutory Holiday Service and Cultural Events**

The Band Administration Building is closed on all Statutory holidays and for cultural events. With exceptions, generally no service is provided.

Exceptions are for clients who are receiving Palliative Care, and this is assessed by the Home Care Nurse. Service may be adjusted due to community Cultural Days; however, every effort is made to continue essential services. Interruptions in service delivery will occur when staff meetings, planning or training sessions are necessary. You will be advised in advance should your service be affected.

### **Statutory Holidays are**

New Year's Day, Family Day, Good Friday, Easter Monday, Victoria Day, Aboriginal Day, Canada Day, Labor Day, Thanksgiving, Remembrance Day, Christmas Day, Boxing Day

### **Away from Home**

Please advise the Home Support Staff and/or Home Care Nurse if you plan to be out of the home during your scheduled visit, especially if you live alone. If you are not at home and for safety reasons, your Home Support caregiver will:

Report to the Home Care Nurse who will then phone your home. Your safety and well-being in the home is our primary concern.

Attempt entry at the door. Clients must be home in order to receive service.

### **Service Time**

Your Home Support service provider is expected to arrive and leave at their scheduled time. Please note that 10-15 minutes of your allotted care time is allowed for staff travel time. Please contact the Home Care Nurse if you have any concerns.

At the time of assessment for service you will be provided with a Care Plan and a copy of the scheduling of your service hours. You will not be able to see a list of other clients that the Home

Support caregiver provides service to.

Should your Home Support caregiver work more than 4.0 hours in your home at one time, he/she is entitled to one 15-minute break. You are not required to provide coffee/tea or snacks to staff

### **Damage to Property**

Sts'ailes Yeqwethet Home and Community Care Program is not responsible for damage to your property unless it was caused by negligence of an employee. We encourage you to put items of value in a safe place.

### **Handling of Client Funds**

Home Support staff will not handle money or finances for any clients.

### **Communication Book**

A book may be used for vital communication between Home Care staff and you and your family members. It will remain in your home in a visible easy to access place for as long as you receive Home Care Services.

### **Equipment, Supplies and Maintaining a Safe Working Environment**

The client and family are responsible to provide appropriate cleaning supplies and equipment for the maintenance of your home.

Suggested supplies list:

Vacuum cleaner, mop bucket, broom, dustpan  
Toilet brush, cloth/rags  
Task appropriate detergents  
Cleaners of your personal preference

Please let the Home Care Nurse know if there are any special instructions for use of any appliances

or equipment. Home Support staff and the Sts'ailes Yeqwethet Health Services are not responsible for breakages, wear and tear on household equipment items.

Please maintain a safe working environment for the protection of both the Home Support staff and the client. The Home Care Nurse can provide a home safety assessment at the same time as your service assessment.

Home Support Staff are required by the Worker's Compensation Act to wear proper indoor working footwear and are not permitted to work in slippers or stocking feet.

### **Health Benefits Program/Red Cross Loan Cupboard**

Clients often require home health aides such as tub rails, bath chairs and raised toilet seats for example and some will need canes, walkers and other medical equipment. When necessary, the Home Care Nurse and Physiotherapists/Occupational Therapists work together to ensure that the appropriate equipment, adjusted for safe, individual use is provided.

Health Benefits Program is a First Nations program available to First Nations clients who have demonstrated and medically authorized need for the home health equipment. Clients must have a status number and a prescription stating diagnosis and demonstrating client needs for this program to offer support when purchasing medical equipment.

### **The Right to Appeal**

Every effort is made to resolve service issues. When resolution is not possible, the client is advised of the formal process of appeal that may be started for successful resolution to occur.

Clients have the right to Appeal any decision (in writing) made by the representative of Sts'ailes Yeqwethet Health with regards to:

- Eligibility to receive services
- The level of service assessed to be provided
- The type of service the client is assessed to receive
- The urgency of the need of service
- Client ineligibility to receive services or to discontinue services

Your written concern may be addressed to:

- Health Director
- Health Portfolio Holder
- Member of Council

#### **OUR STAFF**

##### **Health Director**

Janice George

##### **Home Care Nurse**

Eleanor Joe

##### **Home Support**

Loretta Felix

Jessie Joe

##### **Community Health Representative**

Claudette Leon

##### **Public Health Nurse**

Johan Bergenhenegouwen

##### **Foot Care Nurse**

Connie Meskas



*Devil's Club - one of the many traditional plants we harvest within the Sts'ailes territory.*