



Kanesatake Health Center Inc

The Aboriginal Health Transition Fund Project Team Presents

Addressing the Gaps in Health Services in the Community of Kanesatake

A Summary of the Implementation Plan Beyond 2011

Based on the recommendations from the Gaps Assessment Report September 2010 (to download, visit
www.kanesatakehealthcenter.ca/ahtf)

October 2010

Goal	That there be a concerted effort by the Steering Committee and the healthy communities committee to hire a physician in order to increase community access to urgent and chronic care.
Strategy	Obtaining an establishment number and a PREM is the only way to ensure that there is a position for a doctor in Kanesatake. Whether the PREM be associated with Riverside or KHC, the doctor could see clients at both locations. This would ensure that the community's health is followed.
Responsibilities and Partnerships	<p><u>AHTF Steering Committee</u></p> <ul style="list-style-type: none"> • All partners must work together to meet this goal. <p><u>Healthy Communities Committee</u></p> <ul style="list-style-type: none"> • Follows up with Steering Committee on progress of this goal.
Training Required and Timeline	
Measurable Outcomes	
Budget	

Goal

That a chronic care facility offering extended services, such as those available in provincial chronic care facilities, be created to meet the needs of Elders in Kanesatake. That palliative care beds and services be added to existing services for Elders in Kanesatake.

Strategy

The elderly have to be transferred out of their community once they need more care than 2.5 hours of care because there is no local chronic care facility in Kanesatake. These provincial facilities often do not meet their cultural and language requirements, in addition to being geographically far away from their family and their community.

A partnership with provincial partners to address this issue should be formed. Since these elders are being transferred to the provincial system, the cost for these elders is paid by the province. Transfer of the funds normally allocated for these elders in provincial chronic care facilities should be transferred to Kanesatake so that services at Riverside can be enhanced to meet the needs of these elders. A similar agreement can be made to provide provincially funded palliative care beds.

Responsibilities and Partnerships

Joyce Bonspiel-Nelson, Executive Director, KHC

- Addresses this issue with the Steering Committee

Barbara Webster, AHTF Nurse Consultant, KHC

- Drafts agreement between province and Kanesatake

AHTF Steering Committee

- Intermittently visits agreement to evaluate.

Goal	That a data gathering system for measuring health indicators be developed for the Kanestate Health Center (KHC) to assist in program planning, monitoring and evaluation, as per the principles of Ownership, Control, Access and Possession (OCAP).
Strategy	Information about this process should be provided to the community and consultation with the community should occur before this recommendation is implemented. It is important to have accurate information in order to create a health promotion plan that best meets the need of the community. However, it is more important that the community agree to such a step. The initial consultation would happen before the end of the AHTF project and would continue under the direction of the clinical supervisor after the project ends.
Responsibilities and Partnerships	<p><u>Joyce Bonspiel-Nelson, Executive Director</u></p> <ul style="list-style-type: none"> ✓ Follows up with commission (FNQLHSSC) on new I-CLSC ✓ Assigns staff member to lead this initiative at KHC
Partnerships	<p><u>Susan Oke, Communications Technician, KHC</u></p> <ul style="list-style-type: none"> ✓ Informs community of new system for data gathering through Karihwios and on website.
Training Required and	Training will be determined, and given, by the commission.
Timeline	
Measurable Outcomes	<ul style="list-style-type: none"> ✓ Data will be available to facilitate programming, reporting and funding. ✓ All staff using the system will be trained.
Budget	<ul style="list-style-type: none"> • Cost to be determined.

Goal	That the Kanestate Health Center Inc become accredited.
Strategy	Health Canada is encouraging First Nations Health Centers to obtain accreditation. This process will ensure that basic standards of care are applied and will ultimately lead to improved health in the community. The provincial centers compared through this gaps analysis were accredited.
Responsibilities and Partnerships	<p><u>Joyce Bonspiel-Nelson, Executive Director, KHC</u> Begins this process with the support of Health Canada.</p>
Training Required and Timeline	<u>Training will be determined as process unfolds.</u>
Measurable Outcomes	
Budget	

Goal

That specific funds (a Therapeutic Services Fund) be allocated to create a pool of Anglophone professionals (such as a dietician, occupational therapist, respiratory therapist, physical therapist, speech therapist) that can be hired as needed.

Strategy

The lack of health professionals is a provincial problem. Waiting lists in the province average two to three years, depending on the type of service needed and the level of priority. However, it is not the provincial government's responsibility to ensure that these health professionals are made available to the community; the responsibility lies with the federal government. As such, two facets of this strategy must be explored before March 2011.

1. Discussions with Health Canada and INAC to ensure continuous funding for these types of professionals within the community.
2. Until such discussions produce results, the possibility of accessing these professionals through provincial partners for a per diem rate must be explored.

Responsibilities and Partnerships

Mohawk Council of Kanesatake

- Initiates talks with federal funding agencies to discuss issue.
- Creates committee to oversee these talks and move forward on the issue.
- Informs community of actions taken.

Joyce Bonspiel-Nelson, Executive Director, KHC

- Follows up on talks initiated by MCK to ensure follow through.
- Addresses issue with Steering Committee to determine possibility of MOU.
- Designates KHC staff member to liaise with province to follow through on MOU.

Rola Helou, AHTF Project Manager, KHC

- Drafts MOU between KHC and provincial partners.

AHTF Steering Committee

- Discusses possibility of MOU for lending out professionals for per diem rate.
- Revisits MOU intermittently and revises it once talks with federal government reach a conclusion.

