



Board Report

Friday May 25, 2018



Medical Officer of Health Report to the Board

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Healthy Communities Conference 2018: *Creating Partnerships for Well-Being*

The Healthy Communities Conference took place May 8 and 9, 2018 at the Bayshore Community Centre in Owen Sound. The theme *Creating Partnerships for Well-Being*, focused specifically on Indigenous Health Equity.

Conference Objectives

The four objectives of the event were to: (1) unpack the root causes of Indigenous health inequity; (2) showcase the strength and resilience of youth and their communities; (3) engage in a reflective learning journey about what well-being for Grey and Bruce could look like; and (4) come together and build respectful relationships and partnerships.

Background

In 2017, the Board of Health passed resolution 2017-19 to endorse Jordan's Principle and thereby ensure that First Nations children do not experience denials, delays, or disruptions of public services that would ordinarily be available to other children due to jurisdictional disputes. This approach is an integral first step in ensuring equitable treatment of First Nations children. With support and encouragement from Indigenous partners, the conference focus was taken up as a next step in understanding and supporting Indigenous health equity locally. Additionally, the Conference supported the fulfillment of the OPHS Foundational Standard: Health Equity (Requirement 3).

Event Summary

- A **pre-conference workshop**, *Getting to the Roots of Tolerance*, held in the afternoon of Tuesday, May 8, introduced the 43 attendees to topics related to common attitudes and stereotypes about Indigenous peoples, and how to move beyond tolerance. Funding for this was provided by the South West LHIN. Participants attended at no cost.
- During the **Tuesday May 8** session, keynote speakers Randall Kahgee and Victoria Grant spoke to community leaders about various roles in building

understanding and partnership. Closing speaker, Kelly Gillis spoke to access to healthcare and the Southwest LHIN priorities related to Indigenous health and health equity. There were 136 people registered to attend this portion of the conference.

- On **Wednesday May 9**, all participants heard from keynote speakers Dr. Michael Anderson (Waakebiness-Bryce Institute), Victoria Grant (Community Foundations of Canada), Elisa Levi, and Cat Criger (University of Toronto). Participants chose to attend one of three concurrent sessions: Trauma-Informed Practice; World Café: Youth, Community, Leadership; or Conversation with Traditional Healers and a Spiritual Healer. There were 276 people registered to attend the full day session of the conference.
- Opportunities for **experiential learning** were integrated into the conference program, and included: hearing Métis fiddler Rudy Couture, guitarist Peter Devlin, and a Saugeen First Nation Women's Drum Circle; seeing and learning about the traditional dance styles of Ian Akiwenzie and Danielle Lanouette; eating traditional-inspired foods served by Chef Shawn Adler; watching the creation of a live painting by conference artist Nyle Johnston; and, optional participation in traditional and spiritual healing sessions.
- More than 50 **students and youth attended** the May 9 conference session, with participants representing Saugeen First Nation, Chippewas of Nawash Unceded First Nation, St. Mary's Catholic High School, Ecole secondaire catholique Saint-Dominique-Savio, and Georgian College.

Sponsorship

No-cost registration was offered to anyone who needed it, and was administered using an honour system on the online registration platform. Paid attendees had the opportunity to make an \$80 donation at the time of registration to support the full cost of Wednesday attendance for a member of the community accessing no-cost registration.

Additional financial support for the event was provided by: County of Grey, Georgian College, Grey Bruce Health Unit, Grey Bruce Integrated Health Coalition, Lerner's LLP, Saugeen First Nation, Southwest Ontario Health Access Centre, South West LHIN, and YMCA of Owen Sound Bruce Grey.

Conference Evaluation

Four strategies were employed to support the conference evaluation:

- Members of the planning committee acted as **Eyes & Ears**, recording what they heard and saw over the course of the conference days
- A **four-quadrant model** poster on which participants collectively reported physical, emotional, spiritual and mental reactions to the event

- **Postcards** on which participants record an action they will take as a result of the conference as well as their address. Postcards will be mailed back to participants in 6 months' time.
- An **electronic survey** distributed to all conference participants immediately following the event.

A full evaluation report will be available in fall 2018.

Planning Team

This event was made possible by support from the members of the Grey Bruce Healthy Communities Partnership and the significant contributions of 12 organizations engaged as the event's core planning and advisory committee:

- *Cancer Care Ontario - Bluewater Unit*
- *Chippewas of Nawash Unceded First Nation*
- *County of Bruce*
- *County of Grey*
- *Grey Bruce Health Unit*
- *HopeGreyBruce Mental Health & Addiction Services*
- *Métis Nation of Ontario*
- *M'WIKWEDONG Cultural Resource Centre*
- *Saugeen First Nation*
- *Southwest Ontario Aboriginal Health Access Centre*
- *South West Local Health Integration Network*
- *United Way Bruce Grey*

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PROGRAM REPORT MAY 2018

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Working with the Grey Bruce communities to protect and promote health

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Naloxone and Harm Reduction Training

Harm reduction and naloxone training was developed to meet an identified need by community partners. In 2017, 36 education and training sessions were delivered to community partners and groups, reaching over 380 participants.

Harm reduction, overdose prevention and naloxone training sessions provide information about the current opioid crisis and an overview of harm reduction principles. The training is based on a respectful, non-judgmental and evidence-based approach to reducing health harms. Participants are trained to recognize signs and symptoms of an opioid overdose, learn about naloxone and how to use a naloxone kit in an overdose situation. Naloxone can temporarily reverse an opioid overdose.

Naloxone kits and related training is available free from public health for those who may be at risk of an opioid overdose, as well as their family, friends or others who may be able to help. Results from feedback show that the training sessions are well received by participants. The majority indicated that the goal of taking the training was to be able to save a life. Naloxone is also available through many local pharmacies and some community organizations. Visit Ontario.ca/overdose to learn more.

In 2018, we will continue to work with eligible community organizations to support their participation in the enhanced naloxone program. These organizations will be able to provide training and naloxone directly to their clients. Public health will also have a role in distributing naloxone to eligible police and fire services, hospital emergency departments and St. John Ambulance.

Role of Neighbours in Emergency Management

Neighbours can play an important role during an emergency. Just as it is important for individuals and families to prepare for emergencies, it is also important for neighbourhoods to be ready to respond to a disaster. A communities-based disaster management approach involves communities evaluating their local situation to assess risks and develop plans to mitigate the impact of emergencies.

Depending on the extent of the demand during an emergency, there may be delays in getting first responder assistance to communities. It may also take time for emergency

responders to arrive in remote, isolated and rural areas, particularly if weather or other hazards limit access. These situations make it essential residents work together to support one another.

The Grey Bruce Health Unit is rolling out a Know Your Neighbour campaign to assist community preparedness. However, before a neighbourhood emergency plan can be developed, people first need to get to know their neighbours ahead of time.

The campaign toolkit outlining strategies to support community-based preparedness includes a four step guide to creating a neighborhood emergency plan:

- 1) Define the area covered in the plan
- 2) Develop a team of leaders
- 3) Scout the area to assess risks and neighborhood assets
- 4) Develop a written emergency plan.

The campaign and toolkit was shared at the Grey County Community Emergency Management Coordinator meeting in March. Support for the campaign rolled out through the health unit social media platforms and was shared by community partners during Emergency Preparedness Week, May 6-12.

Neighbourhood Emergency Plan

- 1. Define your area**
 - What streets are you covering
 - How many households
 - Where are community facilities
- 2. Develop a team**
 - Recruit leaders
 - Find out who has CPR or other certification
 - Recruit those who are doctors, nurses & veterinarians
 - Recruit members through local organization & churches
- 3. Scout your area**
 - Assess risks & their likeliness
 - Neighbourhood assets: anyone or anything that is helpful in an emergency
- 4. Develop emergency plan**
 - Have a meeting area
 - Know who has special needs
 - Share resources like transportation, generators & food
 - Put plan in writing & distribute plan to neighbourhood
 - Have teams of 3-7 for specific responsibilities and a lead for each team