



Health
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Services

First Nations & Inuit
Home and Community
Care Program



Home Care In Nunavut



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Background

First Nations & Inuit Home and Community Care Program



- In the fiscal year 1999-2000, Health Canada introduced the First Nation and Inuit Home and Community Care program to Nunavut
- It was introduced as a community based and community paced program
- Throughout 2000/01, many communities began the application process and struggled to comply with complex Home Care documentation and procedures
- In January 2001, the GN realized that communities were struggling and that program money would lapse in the existing and upcoming fiscal year



Background

- A territorial Home & Community Care Coordinator was hired to get this program back on track.
- Issues and concerns that all of partners were experiencing were identified :
 - The first two years were lost in introducing the program to Nunavut
 - Have to work around the community's schedules
 - The H&CC program framework and criteria was developed and designed for the south



Background

- Other issues included:
 - Most communities had not completed the Home & Community Care needs assessments
 - To change, modify, or alter the Health Canada FNIHB programs was a time consuming process
 - Health Canada had almost impossible timelines for establishing service delivery in 2001
 - In Nunavut there is a narrow window each year for ordering and shipping supplies



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Taking Direction from the Communities

- Nunavut Health and Social Services, with funding from Health Canada, hosted a Home Care Conference in Rankin Inlet March 24 - 27, 2001
- Home Care representatives from communities across Nunavut attended as well as Health Canada Nunavut Social Development Council, Nunavut Regional Inuit Associations, Nunavut Arctic College and guests from the Yukon.
- The conference addressed the outstanding issues and challenges with Home Care in Nunavut.



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Taking Direction from the Communities





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Taking Direction from the Communities





Taking Direction from the Communities

- Community Representatives and Inuit organizations made the following decisions to have Nunavut Health & Social Services:
 - Co-ordinate Home Care in Nunavut
 - Identify home care needs, capital requirements, training requirements and service delivery for each community
 - Provide service delivery of Home Care
 - Work on budgets with Inuit Partners and Health Canada to meet the increased needs of Nunavut



Conduct Needs Assessments

- Twenty five communities in Nunavut participated
- Assessments included home visits, focus groups, one-to-one interviews, survey questionnaires, and public meetings with community feasts
- Surveyed persons with key knowledge
- Technical information concerning demographics and existing services was collected
- Used a Microsoft Access relational database and provided statistically valid data



What We Found

- Training was wanted and needed in all communities
- Almost all communities expressed the need for suitable transport of elderly and disabled
- The next largest need was for in-home personal and respite care
- Another significant area of need was that of medical equipment
- Being the most remote region in Canada, acquiring vehicles and equipment would be priority items for the Capital Budget



Capital Plans

- Specific capital funds of \$1.5m allocated to Nunavut for fiscal year 2001 04 01 – 2002 03 31
- Priorities are vehicles to enable service delivery and medical equipment and supplies to provide personal care - \$ 975,000.00 to purchase and deliver vehicles and \$ 525,000.00 to purchase and deliver medical equipment and supplies
- Vehicles will be delivered to communities on the first available sealift in summer 2002
- In future fiscal years, monies would be allocated to capital for maintenance, upgrading and replacement of equipment



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Training

- Training provided in three regions
- Eighty five Home Care Workers trained and certified
- Regional & Community Home Care coordinators will be trained on using computers and data bases
- Phase II training planning underway
- Home Care Workers will receive training to qualify them to take on greater home care and personal care responsibilities



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Training





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Training





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Training





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**We are now ready for
Service Delivery !**



Service Delivery

- Service delivery underway in all regions
- Administrative structure, processes and procedures are now in place:
 - Client Referral
 - Assessment
 - Appeal Process
 - Service Delivery
 - Service Design and Evaluation
 - Health Statistics



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Program Vision

The Program will be integral to the health and social well being in each community. It will result in greater self-reliance of communities by supporting the needs of their members, promoting independence, enabling people to remain as close to home as possible, evolving to meet more of the existing and future needs and building support for the Program in each community.



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Program Mission

The Nunavut Home and Community Care Program provides culturally appropriate home care services that are holistic, and meet the needs of Nunavummiat individuals, families and communities. Care is accessible effective, equitable and responsive to individual needs and priorities within the communities. The Program builds self-reliance by strengthening family involvement in care delivery, developing and training staff, and planning and allocating resources wisely.



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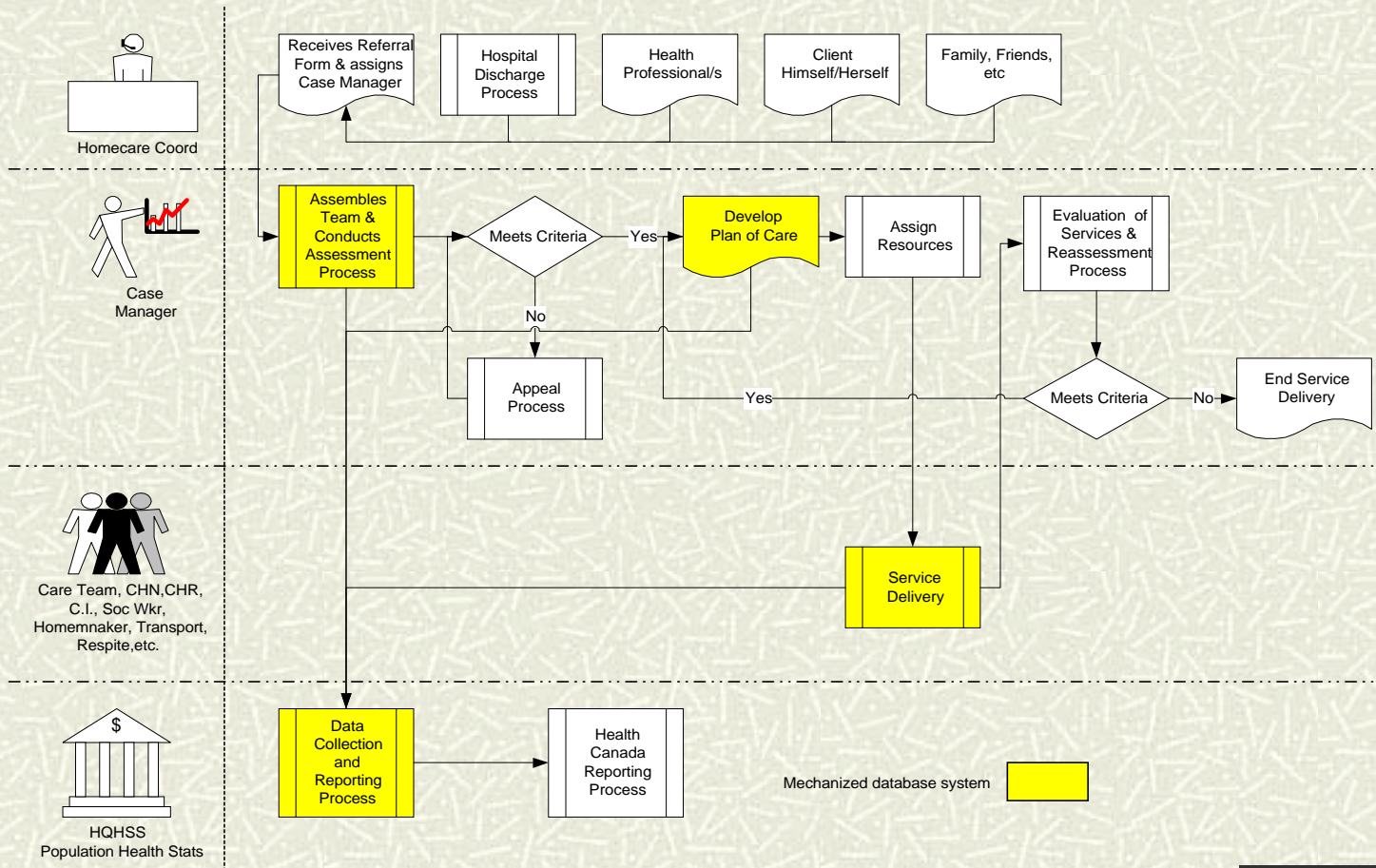


Essential Home Care Services

- Client Assessment
- Managed Care
- Home Nursingg
- Home Support
- Medical Supplies and Equipment
- Program Management and Supervision
- Information and Data Collection



Service Delivery Process Map





Referrals

Who can refer a community member for Home Care Services

- The person himself/herself
- Health and social work professionals
- Family members or friends - anybody

How ?

- The public should call or visit the Health and Social Services Centre and say that they want to make a home care referral.
- Health care professionals can do the same, but can also send or fax a written referral to the attention of the Home Care Coordinator at the Health & Social Services Centre



What Happens Next

- First, a health or social service professional does an assessment in the home. Without this, client needs may be missed, or unnecessary or unwanted service provided.
- A care plan is then negotiated with the client and their family / caregivers
- If resources are available, service delivery starts in the client's home
- The client will be re-assessed periodically in order to ensure an optimal level of care.



Challenges

- Limited funding will mean that some people may have to wait for services
- Like most new programs, there may be some disconnects and more to do to make administrative processes work better
- Foster greater community and Home Care Committee involvement
- Develop policies and procedures that are appropriate for Nunavut
- Continued negotiations with Health Canada for adequate funding



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Work Underway

- Negotiating with Health Canada for continued funding
- Into the planning process for the next fiscal year
- Transfer of operational aspects of program to the regions
- Working with National Home Care Co-ordinators and Health Canada on national issues
- Support for communications & community meetings
- Training Phase I I
- Program Evaluation and Data Collection Model
- Reporting



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A Success Story !

- The Home and Community Care Program is an excellent example of how working in partnership can overcome seemingly insurmountable obstacles.
- A great deal has been accomplished in a short time.
- The goal of all of our efforts is to have service delivery in place for those who need it most ...

Our elderly and disabled People



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Thank You

Your Name