MIDDLESEX-LONDON HEALTH UNIT



REPORT NO. 61-15

- TO: Chair and Members of the Board of Health
- FROM: Christopher Mackie, Medical Officer of Health

DATE: 2015 October 15

INTERNAL SCAN OF PROGRAMS AND SERVICES OFFERED TO LOCAL FIRST NATIONS COMMUNITIES

Recommendation

It is recommended that Report No. 61-15 re Internal Scan of Programs and Services Offered to Local First Nations Communities" and attached Appendix be received for information.

Key Points

- Working with our local First Nations communities to address health issues and improve social determinants of health is an important Public Health strategy.
- Forty-nine services were provided to local First Nations communities and sixteen partnerships were created over the past three years.
- Currently, MLHU does not have an official memorandum of agreement with any of the local band councils, but will be exploring this and other options in the future.

Purpose

The attached report provides a summary of programs that were offered to local First Nations communities from Middlesex London Health Unit program teams. Additional information is available upon request.

Background

Overall, First Nations communities have limited access to resources due to multiple factors including limited funding, jurisdictional complexities, and lack of transportation. Determinants of health are a key challenge to the health status of the population.

In addition to those who live off reserves, there are three local First Nations communities within Middlesex County: the Oneida Nation of the Thames, the Chippewa of the Thames, and the Munsee-Delaware Nation.

The Ontario Health Promotion and Protection Act allows health units to develop an "Agreement with council of band" with local First Nations communities, including representation on the Board of Health. Currently, MLHU does not have an official memorandum of agreement.

Report Highlights

An internal environmental scan was completed to determine the nature of MLHU programs and services to local First Nations communities (see Appendix for the full report). In total, eighteen teams were surveyed to obtain information.

Forty-nine services were provided to the local First Nations communities such as dental screening and education at schools; support to health care professionals working with children under the age of six; cold chain inspections; publically-funded vaccines; health fairs; and injury prevention education and booster seat

distribution. Staff work in collaborative partnerships with First Nations agencies in the areas of increasing access to healthy foods, fluoride varnish application training, and promotion of literacy and breastfeeding.

Two teams are in the process of enhancing the services they offer the local First Nations communities; three teams would like to enhance their services; and five teams will maintain their current level of service. The majority of staff feel an enhanced understanding of necessary processes for cross-jurisdictional collaboration is important, as well as better internal coordination.

Conclusion

Middlesex London Health Unit provides public health programs to local First Nations communities to address identified health needs. MLHU employees are interested in providing ongoing support to local First Nations communities as a measure to address health inequities. The Health Unit will be exploring options for greater collaboration with both on- and off-reserve representatives of our local indigenous communities.

This report was prepared by Ms. Brooke Clark, Public Health Nurse, Early Years Team; and Ms. Brenda Marchuk, Acting Chief Nursing Officer.

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