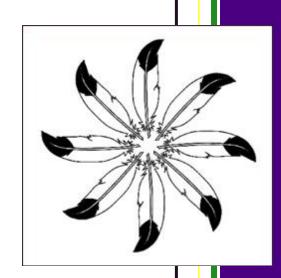
Detailing the Evolution of

Palliative Care in

Naotkamegwanning First

Nation: Creating a Timeline

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Historical Provision of End-of-Life Care

Before the Home and Community Care program was established in Naotkamegwanning family members provided support for their loved ones, who were sick. If family were unable to care for their loved ones due to various reasons, the patients were sent to Kenora Lake of the Woods District Hospital where they were put on a long waiting list. Once a bed opened in a Long Term Care facility they were then sent to Kenora, Dryden, and Thunder Bay.

In detailing the development of the home and community care program, the first service that was implemented in the community, was the Long Term Care program which is First Nation run. This program provides home support for Elders and members of community who were sick. In 2007, the integration of the Long Term Care and the Home and the Federal government Community Care (HCC) program was developed into the Community Care program. This was a significant highlight for Naotkamegwanning because this integrated a model of care that had one coordinator, one point of access, sharing of resources, minimized gaps in service and developed customized care plans. On June 8th, 2009, Naotkamegwanning First Nation had a grand opening of the Mino' Giizhigad Elders Centre, which is a 10-unit senior's residence. Naotkamegwanning First Nation received a loan from the Canada Mortgage Housing Corporation of \$1,064,000. From June, 2009 until July, 2011, Naotkamegwanning First Nation provided financial resources to provide 24/7 care for their community members who were Elderly and sick.

Naotkamegwanning First Nation received administrative, education, and training support from the Kenora Chiefs Advisory (KCA) in the development of the LTC program. Several leaders in palliative and end=of-life care emerged in the history of health care services in Naotkamegwanning. Vicky Barnes developed the integrated program of the Long Term Care facility and the Home Community Care program in 2007. In 2009, the opening of the Mino' Giizhigad Elders Centre key stakeholders were Warren White, Alan White, Joe Barnes and Darlene Paypompee. Maxine Ranville is the current the Coordinator of the Naotkamegwanning Long Term Care and HCC program. Vicky Barnes also developed a Health Care Professionals Network that hired nurses. These nurses are sent to Naotkamegwanning two days a week to assist with patient care. Elders are a vital source of information and guidance on the end-of-life care program and on many other programs and services with Naotkamegwanning First Nation. The Centre for Education & Research on Aging and Health (CERAH) at Lakehead University is focused on assisting Naotkamegwanning with the Participatory Action Research process of improving EOL care in the community.

A number of partnerships exist in the community in the provision of care.

- KCA and Naotkamegwanning First Nation with the Long Term Care program.
- CERAH and the community in the development of a palliative care program with the Chief, Council, and Elders supported.

- The Kenora Lake of the Woods Hospital discharge planner works closely with
 Naotkamegwanning health care staff in regards to discharge of their community members.
- The health care services that are provided from organizations outside of the community that go
 into the community are Health Care Professionals Network, Dr. Peterson, and Community Care
 Access Centre (CCAC).
- In regards to equipment and medication there is a partnership with Johnson's, Shoppers Home Health, and Kayak pharmacies.

Current Status of Palliative Care in the Community

The only program that is currently available in the community to provide support to very sick community members is the integrated program of the Long Term Care and the HCC program that runs Monday to Friday during regular office hours of 9:00 a.m. to 5:00 p.m. These services of this integrated program include personal support workers, home makers, transportation, equipment, supplies, prescription delivery, and home maintenance. There is limited respite care for 2 hours a day for patients and their families. There are outside services that assist with the Naotkamegwanning First Nation with the delivery of health care support services which is the Health Care Professionals Network, CCAC and Dr. Peterson.

In 1994 or 1995 the KCA received money from the federal government for the Long Term Care program. They currently offer administrative support and flow money to Naotkamegwanning First Nation. In 2000, Naotkamegwanning received funding from First Nation Inuit Health Branch (FNIHB) in sharing of regards to HCC program, where they stated nursing was not needed for FN community. The benefits of having an integration of two programs results in sharing of money to each program to ensure services continue for the patients. Naotkamegwanning First Nation funded the Mino' Giizhigad Elders Centre from June 2009 until July 2011. Naotkamegwanning assisted with funding services in regards to equipment, transportation, supplies, human resources and LTC and HCC program deficit.

Eligibility of receiving the services would be based on discharge papers from the Lake of the Woods Hospital or the assessment done by KCA. All members of Naotkamegwanning First Nation that are status and non-status are entitled to this service. There are times when agencies, Naotkamegwanning health care staff, and members of community can also make referral for clients for Nursing, CCAC, for their loved ones.

Key Stakeholders in advancing the palliative care agenda within the Naotkamegwanning First Nation are:

- The stakeholders who assisted in the development of the Mino' Giizhigad Elders Centre
- Chief and Council in regards to their support towards the goal of providing a cultural respectful supportive centre for people who are Elderly and are sick.
- CERAH Lakehead University is working closely by providing research and support with Naotkamegwanning Advisory committee members in the development of EOL care program

- Maxine Ranville, Home and Community Care Coordinator
- Home Health Care Professional Network
- The Kenora Chiefs Advisory
- Lake of the Hospital Lynn Miclishen
- CCAC
- Dr. Peterson
- Home and Community Care Staff
- Elders and community members.

There was limited awareness in the community on the term palliative care and end of life care. There was a strong interest in caring for the sick and elderly prior to the research with CERAH on the development of Mino' Giizhigad Elders Centre. With the new partnership established with CERAH and the EOLFN research project, there has been the development of the Advisory and Leadership committee, to develop a program to support people who are very sick. Increased community knowledge of accessing services on and off the First Nation, discharge plan, wills and estates, and do not resuscitate form.

The sick and elderly needing care contact the HCC program to arrange transportation to the hospital and at times family have to transport loved ones to hospital during weekends. Before discharge of patients Maxine Ranville is contacted by the Discharge planner in order to accommodate needs of patient in order to be discharged. During weekend discharges families would have to arrange services and equipment in order to accommodate their loved one. The process is for community members to contact Maxine and they will work with clients to ensure needs are met, which is coordination of services. The staff does their best and relies heavily on family to provide palliative care services and is incorporated with the home care program even though it is not part of their funding mandate.

In regards to the HCC the Naotkamegwanning First Nation were encouraged to develop Memoranda of Understanding with various organizations, including the CCAC, Comcare, and the regional hospital, to assist community in caring for the sick and Elderly. KAHAC provides Nurse Practitioners. Another partner is the Local Health Integrated Network (LHIN) in regards to assistance with the Naotkamegwanning.

The Future of Palliative Care

The goal is to develop EOL care program and long term care facility that is culturally relevant to care for our Elderly and members who are sick 24/7. The goal is to attain palliative care funding support to provide resources that are not covered under the current integrated program from the government of FNHIB such as Nurses and Respite Care. The goal is to have community members any age stay longer at home and to minimize patients being sent to a hospital or long term care facility. Various funding for services would be required through government such as Nursing, Pain Control, Equipment, Physician visits and 24/7 respite care.

Methodology

The information used to create the historical timeline was supplied by interviews with several key informants. Key informants were interviewed to provide insight into the history and current status of Palliative/End-of-Life care in Naotkamegwanning First Nation. In order to assist the Community Facilitator in ensuring key questions were asked, a historical timeline interview guide tool was created by the research team and implemented in community interviews. Key informants supplied valuable information regarding the history of health care services in Naotkamegwanning; evolution and current status of Naotkamegwanning Home and Community Care; palliative care education, training, and access to medical supplies and equipment; staff training and educational needs; and important documentation, resources, literature and websites.

Key Interviews are as follows: Maxine Ranville was the main participant in providing insight on the time line as she was contacted three times and provided constructive information on every aspect of the time line questions. Vikki Barnes was interviewed once in regards to providing information on the historical development of the Home and Community Care. Daphne Armstrong, from the Health Care Professionals and Jocelyne Goretzki, Kenora Chiefs Advisory Health Director were also interviewed together and provided insight on the long-term care program and health service delivery in Naotkamegwanning.

Resources:

Canada Mortgage and Housing Corporation Website

http://www.cmhc-schl.gc.ca/en/corp/nero/nere/2009/2009-06-08-0945.cfm