

## ***James Smith Community Health Nursing Program***

*The Nursing Program endeavors to deliver the best quality health care to the Band Membership in a holistic manner, respecting the individual's personality, traditional practices, their honor, dignity and privacy.*

*Our mandate to promote and maintain holistic health, prevent or minimize the occurrence of disease, and to empower the community members the knowledge to manage their health outcomes; is held in the highest trust by members of the health team.*

### ***Mandatory Nursing Programs***

#### ***Immunization Program/Well Baby Clinic***

*The immunization program is delivered every Wednesday. We can not over emphasize the importance of vaccination because to this day, there are still communicable diseases that are re appearing and sometimes the results can be devastating.*

*Our best defense against most of these diseases is immunization. Children are immunized as early as 2 months old because they are the most vulnerable as the immune system is not yet fully developed at this age.*

*During well baby clinic, the Community Health Nurse will also examine the baby for obvious problems and perform a developmental assessment. These are fast and simple but effective screening tools to determine the baby's development so that immediate intervention can be done if necessary.*

*All the Community Health Nurses are qualified and certified to provide immunization. We are happy to mention that the children of James Smith have an average of over 90% immunization rate 3 years in a row and thereby, our Health Program receives a citation from Health Canada in recognition of the staff and community's due diligence and effort. We extend our Congratulations and Thank You to the parents who continue to bring their children to the clinic for the much needed immunization.*

*Our efforts to prevent vaccine preventable disease is evident, we have not seen a child contract any of the disease for a long time now, and with your cooperation, let us keep it that way.*

#### ***Maternal and Child Health Program***

*One of the recognized health indicators are the Maternal and Child Health of a certain place.*

*Our Prenatal Program is actively engaged in the promotion of Maternal and Child Health through, **Education, Healthy Food Choices, Exercise, Regular Medical Check up and Home Visitation.***

*The Program assists our clients in many ways such as;*

*Prenatal Education*

*Well Baby Care*

*Home Visit*

*Good Food Box 2x a month*

*Milk Coupon 4 Liters a week*

*Gift Certificate worth 50.00 every month*

*Breast Feeding Support*

*Breast Feeding incentive to mom and baby after 9 months of breast feeding ( 300.00 Gift Certificate for mom and a heavy duty Stroller for baby)*

*Doula Support during labor and delivery*

*Parenting Support/ Parenting Classes*

### ***Communicable Disease Program***

*The Communicable Disease Program's focus is geared towards Prevention and Control the spread of any Communicable Disease in the community.*

*The most common Communicable Disease seen in the community are Sexually Transmitted Infections like; Chlamydia, Gonorrhea, Syphilis and MRSA.*

*Our role is to Educate the community on how to protect themselves against these Communicable Diseases, surveillance of contacts, information campaign, school presentation and home visit.*

*TB is no longer a threat to the community. James Smith is now considered a Low Risk community when it comes to TB, however, we still routinely test children for TB. It has been over 3 years since we saw a child with positive TB test. That sounds reassuring indeed.*

### ***Environmental Health Program***

*The Environmental Health Program is directly delivered by the Environmental Health Officers from the Prince Albert Grand Council.*

*However, our health staff are actively involved in many different ways; like organizing a yearly community wide clean up as well as the cleanest yard contest, home visits to mold contaminated houses and advocating for clean up and repair, water quality coordination, dog control and garbage collection.*

## ***Home and Community Care Nursing Program***

*The Home and Community Care main goal is to assist our community members to live at home in the community as independently as possible, preserving and encouraging enhancement of the support provided by the family and community.*

*The Home Care Nurse and 4 Home Care Aide delivers the program to its fullest. The Home Care Nurse will assess clients to determine the care needs of an individual which usually will range from personal care, dressing changes, medication assistance, home making and meal preparation to help in the activities of daily living.*

*The Home Care Nurse is also in charge of ordering medical equipments and supplies; from wheel chair, walkers to dressing supplies as well as liaison with the physician and other health care professionals involved in the client's care.*

*The Home and Community Care delivers a weekly Elder's Day Program. The elders participate in several activities. Social interaction between the elders is always a good sight to see, the laughter and exchange of ideas are stimulating and inspiring. The program will not be complete without a good lunch, coffee and of course it culminates into their favorite activity, BINGO. They will also listen to occasional health education presentation with a lot of question of course.*

*This regular get together of our elders provide a forum to voice their concerns to the community leaders. Healthy discussion of issues stimulates our Elders to share their experience, guidance and vision for the community.*

*We also have a Meals on Wheels Program that supports clients in need. Organized Elders Annual Trip is always anticipated with excitement by the Elders. We are able to organize this trips through fund raising and fund solicitation from patrons.*

## ***Other Programs:***

### ***Community Health Representative Program***

*The Community Health Representative plays a vital role in the Health Program, they serve as a link between the community members and the health services.*

*Their role has evolved over the years, with additional training and education they are able to check blood pressure, temperature, blood sugar and even perform simple dressing. They do home visit and assess the individual or family's need, from the children's hair or skin to the whole family's social or medical need and expect that they will act on your behalf to access those services.*

*Our CHRs will even deliver your prescription meds on a regular basis.*

*The CHR also will provide basic health education to the school children and the community members, like proper hand washing, prevention and control of infection, smoking cessation, FASD, HIV/AIDS.*

*The CHR are actively involved in many program delivery, they assist the Nurses and other health providers in immunization clinic, prenatal program, home visit, organizing Cancer Awareness, Eye Exam for our Children, Dental Care and many other activities.*

### ***Maternal and Child Health Home Visiting Program***

*The long term goal of the MCH Program is to support pregnant First Nation women and families with infants and young children who live on reserve to reach their fullest developmental and lifetime potential. This will be achieved by providing access to a local, integrated and effective MCH Program grounded in First Nations culture that responds to individual, family and community needs.*

*The period from conception to age 6 is the most important time for brain development and has a crucial impact on behavior and health. The effects of maternal health during pregnancy and of childhood experiences during the first 6 years, last a lifetime. Improving knowledge of preconception and reproductive health among young adults also helps to promote a healthy start to pregnancy.*

### ***MCH PROGRAM ACTIVITIES***

#### ***Individual/ Family Focus***

*Home Visiting by Family Home Visitor and Community Health Nurses to all families during pregnancy and early childhood.*

*Access to screening and assessment services during pregnancy, at birth, and anytime during child's development from birth to age 6 as needed.*

#### ***Case Management***

*Reproductive Health and pre conception information for First Nations Youth and young couples.*

#### ***Community Level Focus***

*Improved coordination of existing services for pregnant women and families with young infants or young children, to support seamless delivery and reduce gaps.*

#### ***Roles of a MCH Family Home Visitor***

*The role of Family Home Visitor includes a focus on culture, role modeling, mentoring, health teaching and linking with community resources. The FHV provides practical assistance with parenting and demonstrates skills such as basic infant care, infant*

*stimulation, fostering healthy child development, and self care and coping mechanism for parents. The frequency of home visiting is agreed upon with the family.*

### ***Some of our MCH Program Activities***

*Pre Natal Cooking Class*

*Pre Natal/Post Natal Home visit, Education*

*Breast Feeding Support*

*Hospital Labor and Delivery Tour*

*Doula Support During Labor and Delivery*

*Sewing Classes, Includes Star Blanket, Moss Bag, Mocassin*

*Parenting Classes*

*Family Fun Day Activities*

*Elder Assistance*

### ***Diabetes Program***

*The goal of the Diabetes Program is to reduce the incidence and prevalence of diabetes among aboriginal people and to improve the health status of First Nations and Inuit individuals, families and communities. To reduce the prevalence of Type 2 Diabetes and its complications in Aboriginal People, the ADI supports a range of Health Promotion, Prevention, Screening and Care activities that are community based and culturally appropriate. The Aboriginal Diabetes Initiative aims to;*

*Increase physical Activity and healthy eating habits to decrease the prevalence of risk factors [ e.g. obesity ];*

*Increase access to screening and improve detection of diabetes;*

*Improve quality of life of those living with diabetes and fewer complications [ improve diabetes management ];*

*Improve collaboration and partnership;*

*Increase awareness and knowledge of diabetes, risk factors, complications and prevention strategies;*

*Increase participation in the delivery of programs and supports; and*

*Improve community supports to prevent diabetes.*

*Our approach is to look at diabetes holistically while providing education through hands on learning, individual, group and family sessions.*

***Services:***

***One on one Diabetes Education***

***Group/ School education Classes***

***Clinic drop in sessions at your request***

***Family sessions***

***Healthy Eating Education***

***Good food choices Education***

***Physical Activity Education***

***Referrals to appropriate health agency; e.g. Foot Dr., Eye Clinic.***