

Minutes
MANITOBA FIRST NATIONS ADDICTIONS COMMITTEE
March 23 - 25, 2009
Clarion Hotel,
Winnipeg, Manitoba

1. Members in Attendance:

Susan Thomas (Sagkeeng)
Nora McLeod (North Independent Rep)
Gloria Rach (DOTC)
Eli Beardy (KTC)
Linda Grieve (SERDC)
Peter Constant (day 2 pm and day 3)

Bertha Fontaine (NACM)
Oliver Bear (Peguis Treatment Centre)
Renita Paul (WRTC Health)
Ed Azure (Nelson House Medicine Lodge)
Derek Harper (day 2 pm and day 3)

Regrets: Roxanne Kozak (Whiskyjack) & Peter Constant-day 1 (CNTH)

2. Opening Prayer was offered by Bertha

3. Review of Agenda

Motion # 1: Agenda as amended be approved. Eli/Mari – carried

4. Review and Approval of Previous Minutes – tabled to next quarterly meeting as minutes are not available

5. FNIH Announcements

- a. Marcy is program manager for NNADAP and Accreditation and Acting Team leader for addiction and mental health cluster – creating overload, as a result the minutes for the last meeting are unavailable.
- b. Peguis Al-care is shutdown as of March 25 09. The centre will be shut down for 4 months. The clients that would be normally sent there will have to be referred to other centres.
 - i. There is a board in place, that will begin to oversee their own CA with FNIH, prior to this the treatment centre agreement was overseen by C & C.
 - ii. Accountability is looking at the file.
 - iii. Funding will continue to flow status quo
 - iv. Training, governance review, board training and will be offered and staffing will be addressed during the shut down time
 - v. The Chief and Council appoints the board

- vi. Media fall-out? Don't know. The other Treatment Centres may be contacted – can we have something prepared? Decided to offer no comment.

There will be an independent contractor to evaluate the process.

The next projected intake date is August 3 09.

- c. MFNAC Workplan is to be updated tomorrow
 - i. Info on commitment is to be included in 09 10 workplan. NADS is to be excluded
 - ii. Enhancement and CDS (3rd and final year) is to be included
 - d. Regional Needs Assessment is on agenda for Mar 25th – to be finalized and tabled by end of March.
 - i. To accommodate the regions that had not yet started, the date to complete the national Needs Assessment was extended to June 09
6. FNIH update
- a. SASSI – just completed the four training sessions as per our work plan. Marcy is recommending that we contract with same trainer another four training sessions for next fiscal year. North, South, Peguis and conference will be the four training sessions. There is a continual need to training. The fee is 250/day for the trainer. The cost of travel/accom/ meals needs to be included. North there were 27 registered, but only 10 people showed up, South there were 21 registered but only 8 showed up. Certificates are being sent out by FNIH.

At the Treatment Centre meeting it was decided to purchase SASSI forms for the NNADAP prevention workers. The forms will be sent out to the NNADAP prevention workers (25 sheets) as there is additional funding remaining from the Clinical Support to Treatment Centre funding pot.

The cost analysis works out to \$1.10 per sheet if 75 packs are purchased. There is a Type 1 for computer pack where worker inputs the answer the client provides. Type 2 is client answered directly onto the paper and then the worker completes the decision sheet.

SASSI is required as part of the referral package to NNADAP funded Treatment Centres.

Recommendation: when SASSI forms are distributed a letter be written from FNIH that SASSI is required as part of the referral process. Treatment Centres will update their referral forms to indicate that the SASSI decision sheet information is required.

It is very useful to screen all clients when they first come to NNADAP workers – regardless if they go to treatment.

b. FNWACCB

- i. Contract is prepared for this fiscal year to cover the cost of the workers application to FNWACCB for certification. There are workers who were not on the list from the Sept Quarterly mtg.

Motion #2: That MFNAC recognizes Gloria Rach as our representative on the BCFNWACCB to receive generalized (non-personalized) updates on and to address any MFNAC concerns of our affiliation with the organization. Linda/Nora carried (one abstention)

CCTP Update: at the Jan meeting there was a report that there are still 15 of 15 in the group. There was a motion to approve \$5k from 08 09 for grad and \$5k from next fiscal year. Since that time there has been one drop out – possible 2 drop outs. This will be the first NNADAP funded grad class of CCTP. There are grad plans in place. The issue is that the funds were approved because of no drop outs. Was this in workplan? No. NADS initiative made some of our workplan redundant, so it was allocated to this f/y workplan.

Motion #3: That MFNAC maintain our commitments. If there is fundraising that ends in a surplus, they allocate their surplus to the CCTP Group 2. defeated (no mover & no seconder)

DUPPWG is in fifth year of the 5 year funding. Funding will be reduced to 110k from 160k in the final year. It will run till Aug 09 (education and prevention summer camps in Swan Lake) and then a RFP will be done to contract someone to evaluate. Info will come from HQ for details on the evaluation. It seems that the project may become a best practice (NIHB Drug formulary). When prescriptions are written in the surrounding communities of Swan Lake that contain narcotics, the prescription is changed by Dr Fortier to a generic non- narcotic. The objective is to reduce the number of prescription drugs becoming abused. A brochure has been created regarding storage and disposal of un-used prescription.

Gloria: The RHA has been key in addressing this issue.
NAYSPS will be evaluated from HQ without any regional input.

6.7 Anti-gas update: Just prior to Jan mtg, the committee of funders met in Dec. Debra Dell shared information on Opal fuel proving not to be successful (Opal fuel does not work in cold conditions is yet to be determined). The decision was made to remove ourselves from the U of M. and partner with British petroleum. They will appoint a rep on the . CDC MB found out about it and requested information, Pilot site is Shamattawa – Feb 5 conference call (Eli, director of KTC health, and Chief of Shamattawa). They agreed to be the pilot site focussing on the summer months to reduce the solvent effect in the Opal fuel. Time did not allow for the fuel to be transported on the winter road. There was a motion passed at the Sept meeting to request FNIH to reimburse NNADAP by BF/BHC for these funds. The funds are sitting with the working group.

- c. NADS Updates – NACM & Sagkeeng moving full speed ahead. Sagkeeng has the funds. NACM is working on zoning for the Tx. Centre. There has to be a municipal zoning public meeting. Sue and Ed will sit with Bertha to review the process and develop a support plan.

At the end of Jan, HQ had funding surplus, so Marcy requested this funding for Nelson House Medicine Lodge. Ed identified programming to increase his outpatient youth/elder prgm. (Tx Center modernization) Ed will forward a program description to the committee

Mental Wellness Team: Sylvia Myer will oversee the team. She is going to Sask (money is being divided). Using data from NIHB, nursing centre directorate and prgm cluster staff will identify the host community site. Marcy will forward written info for further detail

- d. Other business

7. Workplan

- a. Move to approve 09 -10/10 -11 MFNAC Workplan and related budget(s) and further the workplan/budget be reviewed and updated on a quarterly basis. Bertha/Nora carried

8. NNAPF

- a. From Jan meeting there was a motion to withdraw from NNAPF, Ed wanted to bounce off the motion to Linda. After speaking with her, it was determined that some information was not relayed regarding the follow-up from our last correspondence with NNAPF. Ed decided not to follow up (with apologies to the group) on the Jan. motion as a result. (More constructive to fix something rather than throw it out).
- b. The NNAPF review / survey was carried out, our concerns were identified in the survey. The items of concerns are now being addressed in the review. The interim report speaks to the issue of the multi role of the CEO/Chair.

Recommendation: sub-committee (Ed, Sue, Eli, Gloria, Linda) review the original concerns, review the report, review the correspondence to NNAPF to determine and assure all our concerns are being positively addressed.

Q: what was the response at the NNAPF table when the issues were raised? A: the specific issues were not raised at the table, but became part of the correspondence that resulted in the review.

Ed is part of the governance review sub committee. The reps from NWT, Nunavut, and Quebec are also on the committee. It is these very people that cause concern about the organization (do not have NNADAP funds in NWT and Nunavut) and Quebec is not a recognized rep.

It is difficult to criticize something, but not attempt to fix it. The NNAPF is following-up on the issues we are raising. There is still determination to address the issue.

Motion #4: To re-open MFNAC motion # 6 (Jan 09), referencing MFNAC withdrawal from NNAPF. Eli/Susan carried (one abstention)

Motion #5: That MFNAC motion # 6 (Jan. 09) is rescinded, and the previous MFNAC – NNAPF relationship continue as guided by an organization/governance review acceptable to MFNAC. Bertha/Nora carried

- 9. Regional Needs Assessment
 - a. Debbie Grimes and Mel McKinney facilitated a process to fill in matrix for needs assessment
- 10. MFNAC Workplan
 - a. Workplan draft was developed and forwarded to Marcy
 - b.

The following items were tabled to next quarterly meetings

- 11. AMC FASD working Group
- 12. MAAW Update
- 13. Tobacco Program
- 14. Casino Fund AMC board
- 15. Web Master Contact – Eli
- 16. Committee Lists - Eli
- 17. Certified Training Evaluation Summary
- 18. Domestic Violence & Sexual Assault Conference
- 19. Wait time survey
- 20. Next Meeting May 4 – NNADAP Needs Assessment conference call. May 26 – 28 Quarterly meeting.
 - a. Note: dates were subsequently changed to June 4 -5 to coincide to CCTP Grad.