

DECEMBER 2021 EDITION

CHIEFS
OF ONTARIO



HEALTH NEWSLETTER

Seasons Greetings!

FROM CHIEFS OF ONTARIO HEALTH STAFF

We extend our warmest wishes to you and your families this holiday season!

We appreciate all of the hard work and care you put in as supports to our communities. Our wish is that you take this time to enjoy the things that bring you joy and to simply be with family; to rest, relax and rejuvenate.

Wishing you Happy Holidays and a New Year filled with health, happiness and prosperity!

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A Message from the Health Director



She:kon/Aaniin/Koolamalsi/Wachiyaa,

My name is Tobi Mitchell and I am the new Director of Health for the Chiefs of Ontario as of July 2021. I come from my home community of Akwesasne finishing up a term as an elected Chief and bring forth years of technical experience in Health Policy with the Independent First Nations, Chiefs of Ontario in Non-Insured Health Benefits and at the Assembly of First Nations. I would like to thank Carmen Jones for all of her hard work and dedication over these last few years. I would also like to acknowledge all of the hard work that is being done on the front lines in all 133 First Nations. Without the dedication of front line staff in coordinating emergency response, our communities would be in a much more critical condition and we want to acknowledge the collective efforts put forth by the communities to keep their members safe.

While I know we are all suffering from ‘pandemic fatigue’ and are feeling the strain of the last 20 months, we are now faced with the Omicron variant. Early data is showing that it is three times more transmissible than the Delta variant, however early reports suggest that it is less virulent in vaccinated individuals. While the pandemic is far from over, I encourage everyone to get their vaccines and booster shots as they are eligible to receive them. As we head in to the holiday season I encourage you to practice all public health measures for the safety of you, your family and community. We will see you all at the Annual Health Forum February 22-24, 2022 and hopefully in person again at the 2023 Health Forum!

Tekonnonhwara:ton tsi Nikaha:wi Wentanoron:shon/Happy Holidays,

Tobi Mitchell - Tobi.Mitchell@coo.org



Save the Date



Chiefs of Ontario

16th Annual Health Forum

"Resiliency and Caring for Each Other Through the Teachings of our Elders and our Ancestors"

February 22, 23, 24, 2022

A Virtual Event

More information to be available soon.

Our Health, Our Future

REGISTRATION IS NOW LIVE!

[CLICK HERE TO REGISTER!](https://pheedloop.com/coohealthforum/site/home/)

[HTTPS://PHEEDLOOP.COM/COOHEALTHFORUM/SITE/HOME/](https://pheedloop.com/coohealthforum/site/home/)

ENTER THE 'EARLYBIRD PRIZE DRAW' FOR ALL REGISTRATIONS
SUBMITTED BY FRIDAY JANUARY 14TH, 2022

Call for Presentations open until Wednesday January 5th 2022!
If you are still interested in presenting but need additional time in
preparing an abstract just send a heads up to Healthforum@coo.org
or Bernadette@coo.org.



PUBLIC HEALTH UPDATES

LINDA OGILVIE



OMICRON VARIANT

In mid-November researchers in South Africa first identified the B.1.1.529 variant now known as the Omicron variant. This variant has now been designated a “variant of concern” by the World Health Organization. Scientists around the world are racing to learn more about this variant including: How transmissible it is, how good it is at evading immunity from vaccines or past COVID-19 illness, and whether it causes more severe illness?

Scientists do know that the Omicron variant contains 30 mutations in the spike protein of the virus. The spike protein is important for providing entry into the cells of the body as well as targets for antibodies that help to control infections. This is the reason that the Omicron variant may be more transmissible than the Delta variant. Research is still being done on how quickly the Omicron Variant can spread and how severe the symptoms of infection can be. The World Health Organization however has stated that there is “no information to suggest that symptoms associated with Omicron are different from those of other variants”. It is still too early to determine how dangerous the Omicron variant however research is underway from some of the early data out of South Africa.

On Monday, Dec. 13th, Dr Theresa Tam, Canada’s chief public health officer, said that there is evidence of community spread of the omicron variant and that cases are expected to “rapidly escalate” in the coming days. The Ontario COVID-19 science advisory table also stated that the omicron variant will replace the currently dominant delta variant as the main strain in the province by Christmas and that early data suggests that omicron is three times more transmissible. It is anticipated that given the spread of the Omicron variant and the potential for greater transmissibility these larger numbers could impact health care capacity.

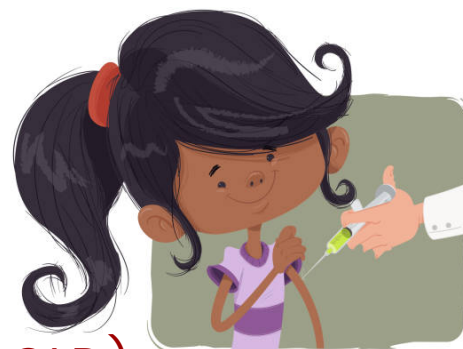
It is extremely important to continue to use all public health measures to protect yourselves, your family and your community members from COVID-19 and Variants including:

- **Vaccinations including Booster (when eligible)**
- **Strengthening Public Health and Workplace Safety Measures including limiting social gatherings- and the number of gatherings especially over the holidays**
- **Wear a face covering and physical distance if individuals in attendance are unvaccinated, partially vaccinated or their vaccination status is unknown.**



PUBLIC HEALTH UPDATES

LINDA OGILVIE



PEDIATRIC VACCINES (5-11 YEARS OLD)

On Friday, November 19th, 2021 Health Canada approved the use of the pediatric Pfizer COVID-19 vaccine for children aged 5-11. While Health Canada has a very rigorous scientific review system for the approval of any vaccine it is important to address some of the key questions that leadership, parents and community members have been asking.

Why should children (5-11 years) get the COVID-19 vaccine? Is it safe?

Vaccinating children and youth will provide a strong level of protection against COVID-19 and the Delta variant. Having children vaccinated will also support a safer school environment. Children receiving the vaccine will also help protect others in the family (those under five and more vulnerable elderly family members).

Vaccination is a very personal choice and it is important to make informed decisions. Experts including those at Health Canada have indicated that the pediatric vaccine is safe, works, and meets the highest manufacturing and quality standards. There is no evidence that any vaccines, including COVID-19, affect your ability to have children in the future.

Will children receive the same dosage of the COVID-19 vaccine? What is the dose interval?

Children aged 5-11 will receive a distinct pediatric Pfizer formulation. This is a lower dose vaccine of one-third the amount given to individuals aged 12 and over, in a two dose series. A smaller needle will be used.

On Nov. 19, the Public Health Agency of Canada released guidance from the National Advisory Committee on Immunization (NACI) recommending a dosing interval of eight weeks.



PUBLIC HEALTH UPDATES

LINDA OGILVIE

PEDIATRIC VACCINES (5-11 YEARS OLD)

Are there enough doses for every child?

Ontario is expected to receive 1,076,000 doses of the pediatric Pfizer vaccine in the first shipment from the federal government, which will be enough to provide a first dose to every eligible child.

Where will children be able to get the vaccine?

Pediatric COVID-19 booking appointments have already begun through the Ontario COVID-19 vaccination portal or by calling the Provincial Vaccine Contact Centre at 1-833-943-3900.

Families can also book directly through public health units that use their own booking systems, First Nation-led vaccination clinics and participating pharmacies.

Indigenous Affairs Ontario has recommended that First Nation Communities work through the Public Health Units in their area to determine readiness for pediatric administration.

Will children receive proof that they are vaccinated?

Yes. Vaccine certificates with QR codes will be available for children aged 5-11 if information is entered into the provincial booking system. At this time there are no requirements for children to show proof of vaccination in Ontario.

Will parents or caregivers need to provide consent?

Parents or substitute decision makers will usually have to provide consent on behalf of their child at the time of the appointment or fill out a paper consent form for their child.





Public Health Reminder

To prevent the spread of COVID-19:



Clean your hands often. Use soap and water, or an alcohol-based hand rub



Maintain a safe distance from anyone who is coughing or sneezing



Wear a mask when physical distancing is not possible



Don't touch your eyes, nose or mouth



Cover your nose and mouth with your bent elbow or a tissue when you cough or sneeze.
Stay home if you feel unwell.



If you have a fever, cough and difficulty breathing, seek medical attention.



MENTAL WELLNESS UPDATES

BERNADETTE DEGONZAGUE

FIRST NATIONS OPIOID USE HARMS AND TREATMENT REPORT

Opioid-related harms are a leading public health issue in Canada. While the opioid crisis impacts communities across the country, research suggests that First Nations communities are at a higher risk of experiencing opioid-related morbidity and mortality due to the intergenerational impacts of colonialism and residential schools, the historical erosion of First Nations culture, and the ongoing barriers to accessing health care services. However, there is little published research examining prescription opioid use, access to treatment, and opioid-related harms among First Nations people at a provincial or national level. As a result, First Nations communities and policymakers in Ontario have not had access to the data needed to generate evidence-based and culturally informed responses to the opioid crisis.

Over the past several years, the Chiefs of Ontario (COO), ICES, and the Ontario Drug Policy Research Network (ODPRN) have been collaborating to study opioid prescribing and opioid-related harms among First Nations people in Ontario. In 2013, the Chiefs in Assembly passed Prescription Opioid Surveillance Resolution 13/10 which mandated COO to begin this work and saw the establishment of the Opioid Surveillance Steering Committee, guided by an Elder and comprised of First Nations representatives from the Political Territorial Organizations, Independent First Nations, Six Nations of the Grand River, and the Ontario First Nations Young Peoples' Council. This Steering Committee continues to guide the current research, mandated by Resolution 18/20, on the questions, approaches, and interpretations of the data, ensuring that the research meets the needs of the community and is culturally relevant.

On Friday, November 26, 2021, Chiefs of Ontario, in collaboration with the Ontario Drug Policy Research Network, released two new reports entitled "Opioid Use, Related Harms, and Access to Treatment among First Nations in Ontario" and "Impacts of the COVID-19 pandemic on opioid-related poisoning among First Nations in Ontario", along with accompanying infographics. These reports highlight the increasing need for support to address the opioid crisis affecting First Nations in Ontario and the impact of the COVID-19 pandemic on this crisis. Links to these reports are provided on the following page.

Links are also provided for the newly released Interim Report on "First Nations Mental Health and Addictions System Use", completed in collaboration with ICES. Additional report(s) on Mental Health Systems Use will follow in spring of 2022.



FIRST NATIONS OPIOID USE HARMS AND TREATMENT REPORTS (CLICK LINKS)

[DOWNLOAD THE MENTAL HEALTH AND ADDICTIONS SYSTEM
PERFORMANCE IN ONTARIO FIRST NATIONS \(2009-2019\),
INTERIM REPORT](#)

[DOWNLOAD THE FIRST NATIONS COVID OPIOID-RELATED
POISONING REPORT](#)

[DOWNLOAD THE FIRST NATIONS COVID OPIOID-RELATED
POISONING INFOGRAPHIC](#)

[DOWNLOAD THE FIRST NATIONS OPIOID USE HARMS AND
TREATMENT REPORT](#)

[DOWNLOAD THE FIRST NATIONS OPIOID USE HARMS AND
TREATMENT INFOGRAPHIC](#)

For more information please contact:
Bernadette@coo.org



STRESS/ANXIETY/WORRY DURING COVID-19

COVID-19 has had a big impact on how we feel and has caused an increase in stress, anxiety and worry. Here are some things you can do right now to reduce anxiety, stress and worry, related to COVID-19:



Only read, watch or listen to news when you want to.



Stay socially connected with friends & family by phone, text or video applications.



FaceTime, Skype or Zoom



Check on your elderly neighbours, see if they need help picking up important household items.



Consider getting up at your usual time. Routines can help reduce mental fatigue.



Stay connected with the outdoors. Go for a walk, or bike ride to enjoy the scenery and fresh air.



Eating healthy, drinking water and getting plenty of sleep are also important factors.



NON-INSURED HEALTH BENEFITS HIGHLIGHTS

ZACHARIAH GENERAL

New coverage for continuous glucose monitoring system for children

- The continuous glucose monitoring (CGM) system Dexcom G6® is now covered by NIHB as a limited use benefit. Prior approval is required
- This device is covered for children 2 to 19 years of age on intensive insulin (short-acting insulin 3 or more times per day)

New Suboxone product coverage

Suboxone is a medication used to treat opioid dependence

- In addition to tablets, Suboxone is now available as sublingual film (a small, dissolvable strip that is placed under the tongue)
- NIHB covers all strengths of this product as a limited use benefit for the treatment of opioid dependence. Prior approval is not required
- Clients who receive coverage for Suboxone will be enrolled into the NIHB Client Safety Program
- Check the NIHB drug benefit list for complete listings and coverage criteria for Suboxone products

For full list of NIBH program updates, please visit <https://www.sac-isc.gc.ca/eng/1578079214611/1578079236012#s21-12-a3> for regular program update.

If you would like to subscribe to Non-Insured Health Benefits (NIHB) Program updates, please visit the link below <https://www.sac-isc.gc.ca/eng/1583175473241/1583175525178>.

A link to the new updates will be emailed to you when posted on the web, about every 3 months.



ENDING OF ONTARIO OPTOMETRIST JOB ACTION

ZACHARIAH GENERAL

On Sunday November 22, 2021, Minister Christine Elliot, Ministry of Health, announced that the province and the Ontario Association of Optometrists will resume negotiations on OHIP Optometrist fees. As a result of this agreement to resume negotiations, the Ontario Association of Optometrists advised the province that any OHIP eye care services that were impacted by the Ontario Optometrists' job action will be resumed effective Monday November 23, 2021.

As of Monday November 23, 2021, optometry services resume for individuals who are:

-19 years old or younger and 65 years old and older, they can now receive a major eye examination through their local Ontario optometrist;

-20 years old to 64 years old and have a specific medical condition that affects their eyes/vision and requires regular monitoring (major eye exam), they can now visit their local Ontario optometrist for this service; And

-Any individuals who have outstanding medical referrals for major eye examinations, these medical referrals will now be observed by local Ontario optometrists.

Should you have any further questions on the services that are being resumed by Ontario optometrists, we encourage you to contact your local optometrists for detailed responses.





At the Registered Nurses' Association of Ontario (RNAO) the Best Practice Spotlight Organization (BPSO®) designation is a strategy that supports best practice guideline (BPG) implementation and sustainability at the organizational level to enable practice excellence and positive health outcomes. It was established in 2003, is internationally renowned, and has been successful in driving clinical, organizational and health system improvements in over 1000 health and academic organizations locally, nationally, and internationally. The program's strategic approach has served to promote the development of evidence-based cultures, improve care, and enrich the professional practice of nurses and other health-care providers. The overall goal is to optimize nursing care, client, and organizational outcomes using RNAO BPGs by promoting a culture of evidence-based nursing practice and management decision-making.

The RNAO is partnering with Indigenous communities and organizations to tailor RNAO's successful BPSO® program described above. The BPSO® adaptation for Indigenous communities is occurring collaboratively with local BPSO® sites to ensure that Indigenous values, beliefs, and needs drive the program. Through a tailored approach for Indigenous communities, the RNAO is partnering with six Indigenous communities in this first BPSO® cohort. They are: Anishnawbe Mushkiki, Chigamik Community Health Centre, Mamaway Wiidokdaadwin Indigenous Interprofessional Primary Care Team, Ontario Native Women's Association, Sandy Lake First Nation and Seventh Generation Midwives Toronto. In this article, Mamaway Wiidokdaadwin Indigenous Interprofessional Primary Care Team provides a first-hand narrative of their experiences with the Indigenous-focused BPSO® program.

Barrie Area Native Advisory Circle (BANAC) is a regional social services and health planning body and service delivery organization since 1989. BANAC is comprised of First Nation, Metis and urban Indigenous communities across Simcoe, Muskoka, and York region. BANAC developed and manages Mamaway Wiidokdaadwin Indigenous Interprofessional Primary Care Team (MWIIPCT) which officially opened in June 2019. MWIIPCT clinics are collaboratively led by Nurse Practitioners (NP), a Physician, Traditional Healers, and allied health professionals.

We partnered with RNAO to enable practice excellence and positive client outcomes. We have developed a dynamic, mutually beneficial venture to co-create, implement, and evaluate tailored guideline(s) towards achievement of a Best Practice Spotlight Organization® designation while supporting health interventions in Indigenous communities.

In the context of the opioid crisis, we have implemented the Best Practice Guideline "Engaging Individuals Who Use Substances". We consulted on this guideline revision to incorporate Indigenous knowledge, language, and ways of knowing into the comprehensive assessment. The ability to incorporate Indigenous epistemologies that are distinct from academic health sciences enhanced our interconnected efforts and will raise awareness and hopefully cultural sensitivity within mainstream settings who will use this revised guideline.

MWIIPCT offers, Anishinaabe Miikan - Red Road to Recovery 10-week program that uses the Medicine Wheel teachings and truth to guide individuals and/or their families along a good path. Red Road to Recovery is grounded in Indigenous healing practices to address the physical, emotional, mental, and spiritual aspects of addictions and mental health recovery. The Red Road Team provided valuable input on our guideline adaptations. COVID-19 stimulated a pivot to virtual platforms, which has been met with favourable engagement, feedback, and successes. As a new organization or service this speaks to our ability to continue to meet the needs of our community members in new and creative ways, despite the uncertainties and challenges the pandemic presented. We are in the evaluative stage of our guideline implementation and can proudly say we have been responsive to the needs of our community members and have been able to reduce emergency room visits and safely managed relapses. We value our partnership with RNAO as well as the Indigenous BPSO cohort partners in navigating through these unprecedented times.

Miigwetch, Janet Greaves, Nurse Practitioner- Mamaway Wiidokdaadwin

Chiefs of Ontario Health Coordination Unit

The Health Co-ordination Unit (HCU) is the technical advisory body operating under the umbrella of the Chiefs of Ontario. It is comprised of the Health Directors of the PTOs, Six Nations of the Grand River and one representative from the Independent First Nations. The Unit is supported by the coordinating capacity of the Chiefs of Ontario office. The Health Coordination Unit is accountable to the Ontario Chiefs Committee on Health (OCCOH), the Leadership Council and the Ontario Chiefs in Assembly. The Health Coordination Unit identifies health issues, prepares briefing papers and develops and recommends health strategies that require political support and action.

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Ontario Chiefs Committee on Health

The Ontario Chiefs Committee on Health (OCCOH) is comprised of Political Leadership from the PTOs, Six Nations of the Grand River and one representative from the Independent First Nations. The OCCOH is supported by the coordinating capacity of the Chiefs of Ontario office. The Ontario Chiefs Committee on Health works with the Health Coordination Unit to identify health issues from the communities they represent and provide political support to advocate to all levels of Government. The OCCOH members are accountable to and provide direct updates to the Chiefs-in-Assembly

Membership:

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<http://chiefs-of-ontario.org/priorities/health/>