

Nanaandawewigamig
First Nations Health and Social Secretariat of Manitoba

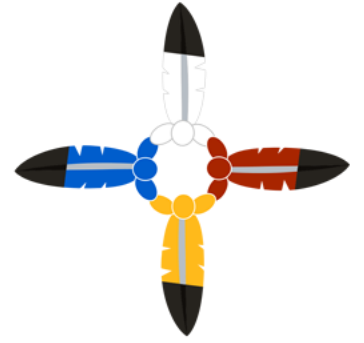
IMAGINE

COACH Conference 2016

Vancouver BC

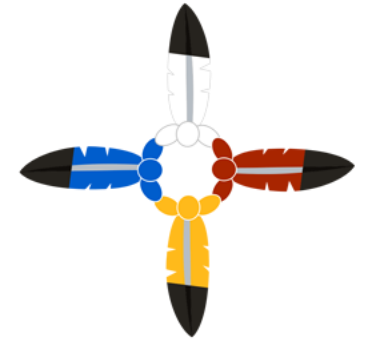
June 8 2016

IMAGINE....



- Imagine.... a system in place where your needs were met with ease, where you were the decision maker
- Imagine....all decisions are made with your input and with your best interest at heart
- Imagine you were in control of all decisions and imagine these were made with your family surrounding you, supporting you.....

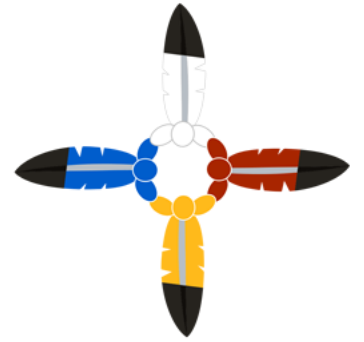
IMAGINE...



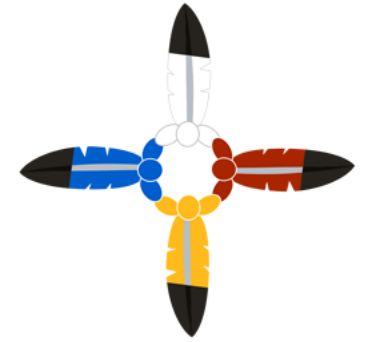
- Now imagine.....a group arrives and wants to HELP ...to make it better and show you the way it needs to be done.
- you are not included in the decisions and you are not asked for your input.
- Instead, you are “the patient”, the “student”, it is “my program”, “ my staff”, my...my...my.
- And you are treated like you are their child, you don’t have a say...they know what is best for you....
- “they” arrive in your community and “they” know what is best and when it does not work or you don’t listen, or you don’t’ get better....

IMAGINE...

- Is anyone at fault?
- Does this sound familiar?
- This could be a First Nations history lesson on colonization
- This could be our Provincial health care system?
- This could be our Federal health care programs?
- Whatever you imaginedwe want to shatter the image and we want to share our story...our Manitoba First Nations story....

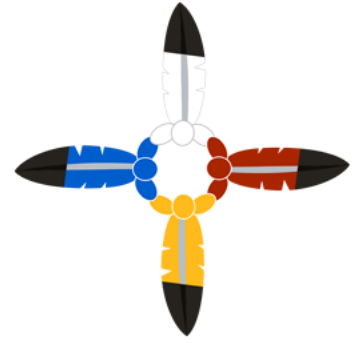


DISPARITY...



- Many incidents - Jordan's Principle, Brian Sinclair Inquiry, Drianna Ross Inquest
- Manitoba First Nation youth suicide crisis
- Manitoba First Nation population increased 29% between 1996 and 2006
- Health care access is limiting, stretched resources
- Manitoba First Nations Regional Health Survey indicates:
 - the leading 3 challenges: [Alcohol & Drug Abuse](#), [Housing](#), [Employment](#)
 - the leading 3 strengths: [Family values](#), [Elders](#), [Language](#)

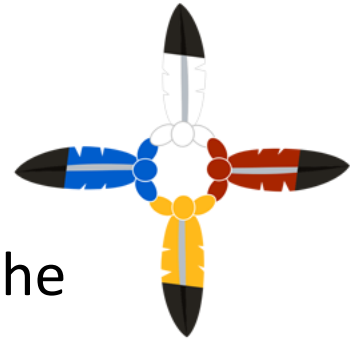
CONNECTING THE DOTS



- Community needs assessments.....communities know what they need.....know what is missing.....
- Major lack of resources and supports within our communities
- eHealth technologies are improving getting more expansive and easier to use
- As First Nations, we realize we can benefit from these applications

OUR STORY

- The Manitoba First Nations ehealth story began in early 2004 with the deployment of telehealth to the north.
- The intent was to improve services currently existing & to reduce the burden of transportation to reach medical expertise & advice.
- Deployed & supported through partnerships between Manitoba First Nation Organizations, FNIHB, MB eHealth and MB Health



eHEALTH APPLICATIONS USED IN MFNs

POINT OF SERVICE SYSTEMS

- Electronic Patient Record
- Detailed Record of each hospital encounter
- *Not yet used on MFNs but used in the tertiary centres where clients receive care.*

ePR

- Electronic Medical Record
- Detailed record of each visit with primary care or physician clinic
- **2 FNs using Accuro**
- **1 FN using Jonoke CodeMed**
- **2 Fed NSs to use Accuro**

eMR

- Community Electronic Medical Record
- Detailed record of each contact with a community health program
- **Mustimuhw in 11 Sites**
- **Interoperability = KEY**

cEMR

- Public health surveillance tool; manage info for immunizations, vaccine inventory & communicable disease & outbreaks
- **24 MFN Phase 1 Sites**

Panorama

SUMMARIZED RECORD

- Provincial electronic health record with view-only access for authorized health care providers in Manitoba
- Summarized record of key clinical history such as diagnoses, Rx, labs, etc
- Does not replace Point of Service Systems
- **>50 Sites**

eCHART

- Two-way/multi-site secure videoconferencing used for patient care (with attachments like digital stethoscopes), staff and patient health education, health service administration and televisitation
- **>50 Sites; >5000 events annually**

Telehealth

COMMUNICATION BETWEEN DIFFERENT LOCATIONS AT ONE TIME

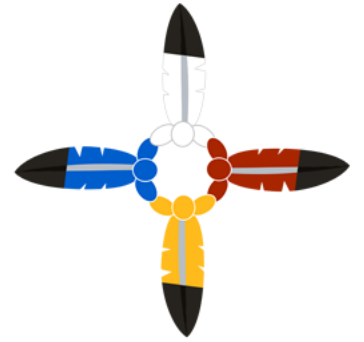




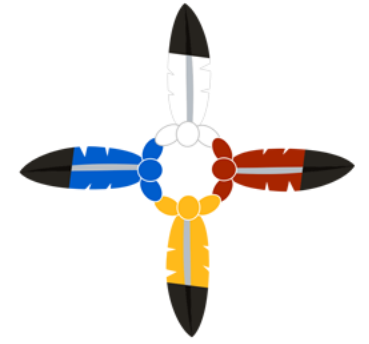
PANORAMA

• Deployment Status

- Connectivity
- Interoperability
- FN Identifiers
- Information Sharing Agreement

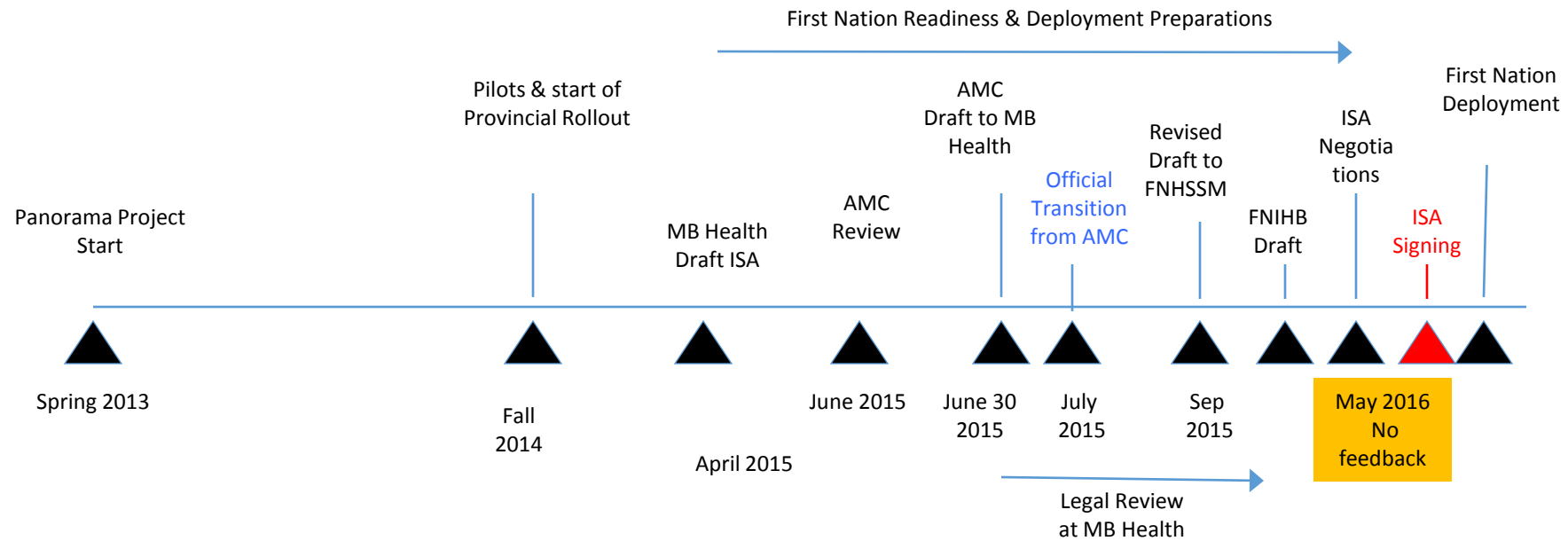
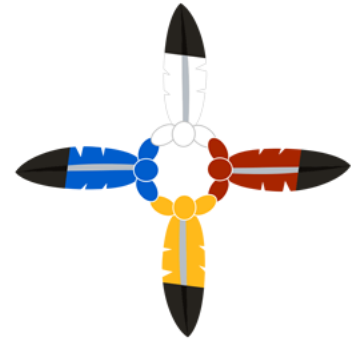


FIRST NATION IDENTIFIERS

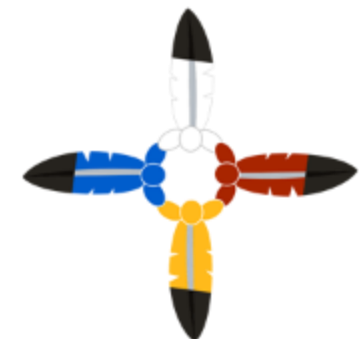


- Important for understanding who Public Health serve as clients & how First Nations are represented
 - Client identifies as First Nations, Inuit or Métis
 - Status or non status
- For reporting purposes for immunization, communicable disease outbreaks, etc.

ISA PROGRESS TO DATE



Panorama will not be deployed until an OCAP Compliant ISA is signed!



First Nation Communities
Tribal Councils
Provincial Territorial Organizations
eHealth Partners / Organizations
Chiefs Committees

Reports +
Feedback from
First Nations &
eHealth Partners
on moving
forward with
eHealth & ICT

MANITOBA FIRST NATIONS eHEALTH LONG TERM STRATEGY

A 10 YEAR PLAN FOR ACTION 2012-2022

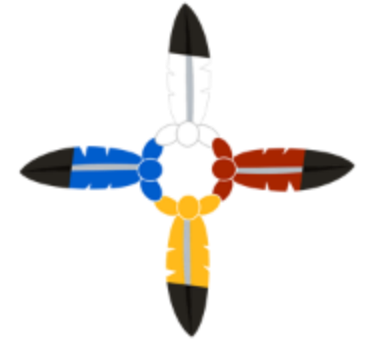
2006 – 2012 Workshops:

Goals: Develop a

1. First Nations Governance Model for eHealth
2. Long Term Strategy for eHealth
3. Technology Council



KEY COMPONENTS OF RESOLUTION PASSED AT AMC/FNHSSM JOINT CHIEFS ASSEMBLY MARCH 2016 [MARCH-16.05]



1. Amendments to eHealth Long Term Strategy

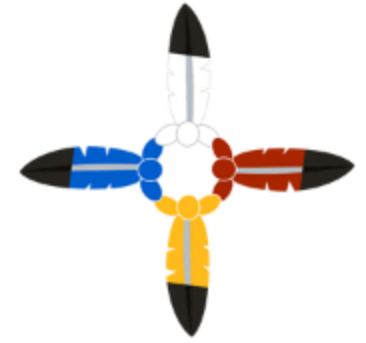
- i. Technical Readiness Needs Assessments
- ii. Interoperability of eHealth Applications
- iii. Establish a new Governance Plan:
 - a. Formation of eANISKOPITAK
“Tying together the clusters through eHealth systems”
 - b. Transition Plan of FNIHB eHealth Solutions Unit – MB Resources and Supports

BUILDING THE MANITOBA FIRST NATIONS NETWORK OF THE FUTURE



- **Technical Requirements for some eHealth applications:**
 - Panorama (60ms, 256kb Up, 1.5Mb Down)
 - eChart (Internet Explorer 9)
 - TeleHealth (512kb up and down)
- **Improved Educational Opportunities:**
 - able to obtain Degrees, Diploma and Certification in home community.
- **Better Access to Economic Development ventures**
 - eCommerce, Online buy and sell, etc
- **Benefits to service providers in Northern Communities**
 - MPI, Lotteries, RCMP, etc

PROJECT PHASES



Phase 0: Information gathering

- Current State & technology needs
- Roadmap w/recommendations to get to Desired State

Phase 1A:

Feasibility Study

- Terrain / labour / other costs associated with rural & remote locations; develop a valid estimate of real costs
- MFNs choose their own ISPs based on recommendations

Phase 1B:

Road Map Development

- Develop Roadmap, Business Case, Legal Structure and Market Sounding
- Identify needed steps to get to Phase 2 and commencement of service.

Phase 2A:

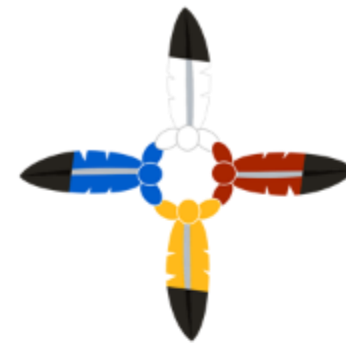
Design and Planning

- Implement the Roadmap components
- A Comprehensive Engineering Plan that will provide a clear and actual pathway to The Build Phase.

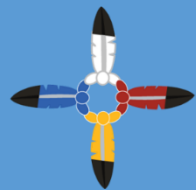
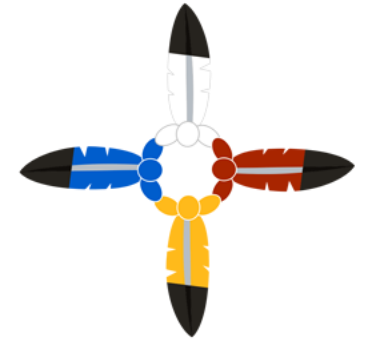
Phase 2B:

The Build

- Triple A network that is Adequate, Accessible and Affordable will become a foundation for Education, Healthcare, Government and Consumers in MFNs communities
- **Ownership & control by MFNs for MFNs**



Ekosani – Wopida - Miigwech – Ekosi - Mahsi –Thank You!!



**eHealth Unit
Nanaandawewigamig
First Nations Health and Social
Secretariat of Manitoba
17th Floor Kensington Building
Room 1700 – 275 Portage Avenue
Winnipeg, MB | R3B 2B3**

www.fnhssm.com

**Lisa Clarke
Brenda Sanderson
Tatenda Bwawa
Gwen Gillan
Bill Murdoch
Jonathan Fleury
Doug Thomas
Tracy Thomas**

**eHealth Director
Panorama-eHealth Coordinator
First Nations Panorama Project Coordinator
First Nations Panorama Trainer
ICT Network Liaison
Manitoba First Nations Technology Council Project Manager
Communications Liaison
eHealth Program Assistant**