



CENTRAL INTERIOR  
NATIVE HEALTH SOCIETY

# ANNUAL REPORT

2023 - 2024



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Central Interior Native Health  
& Natsoolyis-Cultural-Centre-CINHS



CENTRAL INTERIOR  
NATIVE HEALTH SOCIETY

## TERRITORIAL ACKNOWLEDGEMENT & CEREMONIAL BLESSING



**Ts'uhoot'i unjan Lheidli T'enneh bu keyoh tse tsu** We are happy to be living on the traditional territory of Lheidli T'enneh, **whut'i, utsut'en, nuwhu tsulye, inkez ne Dakelh** To live, to work, to play and **'kuna 'utsinhi. Tubeh nenachailya.** Be who we are. Ever so grateful.

**Yakusda, chaza ilhodzin neghananint'ai.** The One who sits above the clouds, given us another day **Et hukwa tubeh musu nyu tsut ni** For that we say an enormous thank you **Andit dzin undai lha uz'ti'tilh nelha' ont'en.** Today, we ask for your help in whatever work needs to be done **Neghuni be inkez nedzi be 'alhgho 'utsot'en.** We will work together with one mind and heart.

**Mbe nela bulha' uzti'nil soo tsihun una bula' tsut'en.** Direct our work in the right way to help whoever needs help. **Adin'ai ne, nduda ne, datsai ne, inkez yoh lhuhit'i' ne,** People incarcerated, the sick, the dying and people with no homes. **socho bughonle' Wheni cha, soocho neghonle'.** Watch over them in a good way. Watch over us too **Ndohoneh.** All my relations

-- Written by Elder, Lucy Duncan

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## MISSION

Central Interior Native Health Society strives to recognize the unique health care needs of Indigenous Peoples and people who live on, or close to, the street. Our goal is to provide culturally safe and proactive health care that promotes physical, mental, emotional, and spiritual harmony.

## VISION

To be a leader in creating an environment that nurtures health and healing for all.

## CORE VALUES

### RESPECT

We acknowledge people and are engaged at every interaction. We value what each person brings to our work. We challenge each other to learn and grow. We are client-centred and client-driven.

### HONESTY

We are authentic and genuine: with each other and with our clients. We value honesty that is tempered with compassion. We are conscious of our intent and take responsibility for the impact of our words and actions.

### TRUST

We value trust, knowing that it needs to be developed over time; that it arises when we do what we say we will do and that; once lost it is very hard to recover. We respect the confidentiality of our clients and each other. We trust that the feedback we give and the feedback we get is given in a spirit of support and growth.

### HUMOUR

We know that humour and healing are connected; that humour is a great equalizer and that with humour, we can build positive relationships. We take time to laugh!

### COMPASSION (EMPATHY)

It is by connecting the head and the heart that we are best able to understand one another.

# A MESSAGE FROM OUR BOARD OF DIRECTORS

*Erin Anderlini (Chair) and Bruce  
Allan (Vice Chair)*

Hadih from the Board!

We want to express our appreciation to everyone who works, volunteers and contracts with us, community partners who support us; and clients who put their trust in us to care for them and their families. It is an honour to be involved with Central Interior Native Health Society (CINHS) and the invaluable service they provide in our community. We recognize that this year has been challenging with pandemic restrictions, opioid crisis continuing and our homelessness crisis; and that the future will also bring known and unknown challenges. Indigenous organizations have a critical role to play in community support, sharing teachings with other interested organizations and keeping culture at the forefront. It is so important that we bring flexibility, creativity, commitment and passion to the work, and our organization does express the necessary Respect, Relevance, Reciprocity and Responsibility (The Four Rs of Education\*) to our community.

We are so proud to be a small part of CINHS.  
Snachaliya!

*\* The "Four R's" of Education; Verna J. Kirkness and Ray  
Barnhardt, 2001*



## *Board Members*

Erin Anderlini (Chair)  
Bruce Allan (Vice Chair)  
Joan Brett (Secretatary)  
Justin Foster (Financial Chair)  
Jean Baptiste (Knowledge Holder)  
Brandi Macaulay (Member)  
Tamara Seymour (Member)



# BOARD MEMBER'S BIOGRAPHIES

## **Erin Anderlini**

Erin Anderlini is the Operations Manager for Rotary Hospice House and Home Hospice at the Prince George Hospice Palliative Care Society. She was born in Prince George, and is raising her family with her life partner. She comes with 20 years of experience working for Indigenous social service agencies. Erin has a passion for working with/for Elders and is committed to being involved in the non-profit sector.

## **Jean Baptiste**

Jean Baptiste, Kihew Mahihkan Atayohkan Iskwew, is a member of the Wet'suwet'en nation in the Laksilyu clan. Currently located on the unceded territory of the Lheidli T'enneh nation, they work at Northern Health with the Indigenous Health team as their Quality Care lead. They have served on the Board for Central Interior Native Health Society since 2016 in various positions but have maintained the position of Knowledge Keeper since it's inception. When not working on equitable access to health care for disenfranchised communities, they own and operate an art business called Kihew Designs. While completing their Master of Business Administration in early 2022, they worked as a project lead with Trans Care BC as well as a cultural advisory member of the Canadian Professional Association for Transgender Health. Previously, Jean has worked with Trans Care BC as their Regional Community Network Coordinator, the Canadian Institutes of Health Research as an advisory committee member, and BC Culture Days as a provincial ambassador. They have a varied background in surgical and primary care programming, peer & community support, project management, arts & culture all focused on better serving their community for future trans, Two-Spirit and gender diverse people.

## **Bruce Allan**

Ts'umusyoo Clan (Beaver)

Stellat'en First Nation

I would like to thank the Lheidli T'enneh for allowing me to live and work in their traditional territory.

I currently sit on the Central Interior Native Health Society (CINHS) as an elder.

I work at the College of New Caledonia (CNC) as an Aboriginal Studies Instructor for the past 26 years. I have learned from the many Elders who participated in our classes.

I am a survivor and intergenerational survivor of the Lejac genocide institution. I have worked in support of the many survivors of residential schools.

I have five sons, 4 daughters (step) and 5 grandchildren.

## **Joan Brett**

Hadih,

Joan Brett (Schram) le soozii' (my name is Joan Brett). Joan is the Victoria Primary Care Network Manager and Lead for Indigenous Health and she is honoured to be living, working and playing on the traditional and unceded territory of the Lek'wungen speaking people which includes the Songhees and Esquimalt Nations.

Joan is a proud member of Nak'azdli Whut'en from her maternal lineage. Joan's paternal lineage is German; however, her dad was accepted by many Nak'azdli members as their own family. Joan lived in Fort St James until she was five years old then moved to Prince George where she had been a guest of the Lheidli T'enneh First Nation for most of her life. Joan is the mother of four amazing children and the grandma to two wonderful grandchildren. Joan's oldest child has followed in her mother's footsteps and is pursuing her undergraduate degree. Fun fact about Joan she has six brothers and is the youngest sibling.

Joan was the first in her family to obtain an undergraduate degree in 2000 and in 2010 Joan was only one of five Dakelh people to have earned a Master's degree.

For the past 25 years Joan has been working with Indigenous people across the province, concentrating on the Northern Region with work in Education, Social Services, Health and the BC Court System. Joan is a strong believer in knowledge sharing and is a strong advocate for Indigenous people. Professionally Joan has worked as a program coordinator within the post-secondary environment, public legal education, Northern Health and First Nations Health Authority. A segment of being a program coordinator is facilitation of workshops and learning sessions. These sessions included learning with health care professionals, knowledge holders of Fetal Alcohol Spectrum Disorder (FASD), court system professionals, teachers, and Indigenous students (elementary, secondary and post-secondary). Joan has enjoyed meeting and working with the communities throughout Northern BC.

Joan is excited to be a part of the team and will be available virtually or in person when she can.

Nanyoost'en la (I will see you again)

### **Justin Foster**

Located on the traditional and unceded territory of the Lheidli T'enneh, Justin Foster works to create a truly outstanding and transformative experience as the Director, Student Success at the University of Northern BC. Before starting his current role, Justin was the Manager, Housing and Residence Life. Justin's first role at UNBC was as the Aboriginal Student Life Navigator in the First Nations Centre – providing support to Indigenous students by removing barriers, assisting with access to funding opportunities, helping to ease their transition into post-secondary and supporting their continued success. It was also during this time where he became heavily involved with the Moose Hide Campaign – a grassroots movement committed to ending violence towards women and children. Prior to joining UNBC in a professional capacity, Justin worked for an Indigenous focused organization that supported men as they transitioned from incarceration back into the community. Justin received a BA in English and Political Science and MA in Creative Writing, both from UNBC.

### **Brandi Macaulay**

Brandi is a member of the Tahltan nation and is Cree from her paternal side. Currently located on the unceded territory of the Lheidli T'enneh nation, she works as the Health Director at Prince George Native Friendship Centre. Brandi and her husband also own a residential home building and renovation company called MAK Quality Construction. Prior to working at PGNFC, she worked for 10+ years as a Logistician in the Canadian Forces, she served her time in CFB Comox, CFB Trenton, 39 ASU Chilliwack, and CANSOFCOM Ottawa. She has completed her BA in Psychology and is currently completing her EMBA (grad 2025). She is passionate about leadership, solving tough challenges, and working to build community members up in all capacities. She is also a mother to three children, 2 of which are on the Autism Spectrum so she also remains an advocate for the special needs community.

### **Tamara Seymour**

Tamara Seymour is a proud member of the Lheidli T'enneh First Nation located in Prince George. She has held the position of Health Director over the last two years gaining vast knowledge within the Indigenous health sector. She has worked closely with medical professionals and the First Nation Health Authority in providing direct medical care for her Nation and heightening the medical presence in her community. Through her passion for improving and supporting the overall health and wellness of both her communities on and off-reserve Tamara has demonstrated a talent for building strong partnerships with both Indigenous and non-Indigenous entities and resources within the Prince George region. Truth and reconciliation have become an important aspect of the work Tamara performs due to the observable impacts of intergenerational trauma within her community. Her paramount goal is to see both her own and neighbouring Nations succeed in creating self-sustainable and flourishing communities for future generations. Throughout her professional career Tamara has chosen and will continue to dedicate her efforts to the creation of a healthy, positive, and self-sufficient future for her community and future generations. Her biggest achievement has been becoming a mother and welcoming her two children into the world. They are the ones who drive her to succeed in realizing both her professional and educational goals and aspirations.



CENTRAL INTERIOR  
NATIVE HEALTH SOCIETY

## A MESSAGE FROM OUR ELDER

*Lucy Duncan*

Hadih, Dzin hoonzoo.

Si, sooji Lucille (Lucy) Duncan, si Elder usli.  
Andit dzin tubeh hoonusti'.

As a Dakelh Elder, Wellness Worker and Educator, it is with great honor to hold this position and to be able to create a safe space and share cultural knowledge, traditional practices and balhats governance system (Potlatch) within the work place and with other community organizations. The purpose of the work is to educate health providers, social workers, practicum students, family practice residents, and employees on the impacts of government policies on Indigenous people. I work with them to implement Indigenous worldview within the organization, to decolonize colonial practices and gain knowledge of Indigenous ways of being.

The CINHS team are eager to learn and have an open mind about what could be done better to fill that huge gap in providing culturally safe space, inclusiveness & equity in health care for Indigenous people and for the down town population. Especially for those that are living close to or on the streets, and persons living with mental health and/or substance use challenges.

One of the many initiatives that has been implemented is to learn the Dakelh language (Carrier) and that is teaching greeting words such as "Hadih / Hello, "soo int'oh? / How are you doing?" Learning the local language creates trust and cultural safety & humility within the health care system.



These teachings happen at a weekly team meeting that I facilitate. The team meeting begins with a water brushing ceremony. Water brushing is a practice done by the Dakelh Elders and ancestors. This ceremony is to brush off negative energy that attaches itself when working with people on a daily basis. Afterwards each member introduces themselves in the Dakelh language. Example: "Hadih, Bundada hoonzoo (Hello, Good morning). Si sooji' \_\_\_(name), si \_\_\_(position) usli. Andit dzin (Today I feel)\_\_\_".

I assist Indigenous clients and Elders that are connected to CINHS to ensure that communication is understood. This can be accomplished through interpreting in the Dakelh language. I also do hospital visits with Elders and follow-up visits at home. I support, advocate and perform ceremonies with clients that are at the end of their life. This is at the request of clients, family members or their medical team. Other ceremonies performed are adoption ceremony, baby welcoming and blanket wrapping ceremony for the grieving. CINHS ensures the health and well-being of team members - as frontline workers are exposed to secondary trauma, loss & grief due to death of clients and the inequity clients face daily.



It is crucial that team members feelings are acknowledged and validated through ceremonies such as Letting Go, sharing circles, water brushing and smudge ceremonies. CINHS holds an annual Letting Go Ceremony for the team. This is to acknowledge their vulnerability to grief, and respecting all of the clients that have passed away over the year. Sharing circles are hosted once a month at our team meeting where team members share their life/work experiences that may impact their well-being.

CINHS has an Indigenous committee called Dakelh Bughuni (Indigenous wisdom/knowledge) that helps to lead, guide, and infuse Indigenous practices in the organization and provide terms of reference for CINHS policy. Also, Dakelh Bughuni work with the CINHS team to decolonize colonial or western health practices and this begins with an Indigenous cultural orientation.

Cultural safety and humility are important aspects that usually happen through cultural orientation. I sit with new team members to help them understand the importance of client relationships with health care providers, the various complex trauma Indigenous people face, and to reflect on personal biases.

The orientation helps new team members improve their understanding of the impacts of residential schools, Sixties Scoop, Indian hospitals, and most of all the discrimination Indigenous clients face through the healthcare system. It's about building relationships between clients and the CINHS team for better health outcomes. It changes personal beliefs and biases that society has portrayed towards Indigenous people and individuals living with mental health & substance use challenges.

The goal is to enhance the health care system's relations with Indigenous people and the most vulnerable populations who do not trust the system for their health needs. It's about learning the Indigenous ways of being, stepping away from the western colonial practices and treating people with respect and dignity.

Soo 'una oongle'  
'Awetza,  
Elder Lucy





CENTRAL INTERIOR  
NATIVE HEALTH SOCIETY

## A MESSAGE FROM OUR EXECUTIVE DIRECTOR

*Shobha K Sharma*

CINHS has maintained and sustained services in our community since 1991. In our founding years, our Indigenous leaders asked for attention to be given to the unacknowledged trauma of individuals and whole communities that were unwell from the devastation, oppression and violence of colonization. Our services became immediately relevant to urban and away from home Indigenous individuals and families that grappled with the lack of access to food and nutrition to resist disease and chronic illness, connection to home and land to follow the seasonal patterns that kept the mind and body strong, and cultural practices and traditions that strengthened the interconnectedness of all living things to ensure moral and ethical stewardship of lands and peoples.

***Within the last 5 years, CINHS has also grown exponentially to respond to the needs of our clients and our community through COVID, the Toxic Drug Crisis, and the triggering incidents of the Affirmation of Unmarked Graves.***

In 2020, the largest pandemic in modern times, known as COVID-19, overwhelmed our local and global community. Supported by Leadership within the Northern Health Authority, CINHS overcame obstacles and barriers, committed to continuing to ensure access to health care for those we serve. From maintaining itself as the only low barrier COVID testing site in Prince George, a fierce advocate for isolation spaces for those precariously housed, CINHS was a leader



in cultural safety and humility amidst protocols that were isolating and discriminative. We continuously assessed our approach to supporting our clients, whose growing complexity became apparent in the void of other essential services and community support. Not only did CINHS sustain services during COVID, we utilized new funding streams to enhance our services to meet the compounding challenges impacting those we serve. Even our High Acuity Support Team supported Public Health contact tracing of those that had been exposed to the virus but were difficult to locate. Without access to normal service delivery, inpatient care revealed greater complexity in those seeking urgent and emergent care resulting in eventual hospitalization.

During the pandemic, the toxic drug crisis reached greater heights. In 2016, the government declared a public health emergency due to the toxic drug crisis. The BC Coroners Reports and First Nations Health Authority reflect on the disproportionate of Indigenous peoples being impacted by the unregulated drug supply. FNHA shares that

***“First Nations People make up just over three per cent of the population of BC but 17.7 per cent of toxic drug deaths in the first six months of 2023. As of November 2023, 2,052 First Nations people have died from toxic drug poisoning since this public health emergency was declared in April 2016”. - FNHA, April 16th, 2024***

While the community of Prince George remains unaligned on the best approach to tackling the unregulated drug supply, the number of those seeking services, supports, and safer supply of drugs has increased. The downtown core has a larger number of even younger people who use substances than ever perceived in the past. Since 2022 CINHS continues to host the Community Action Team (CAT) which has effectively brought Peers to the table to share their experiences and influence our community's understanding, response, and engagement to the unregulated drug poisoning crisis. CINHS also offers Opioid Agonist Therapy and Safer Supply. And we continue to prioritize the role of our integrated health team in responding to the unmet needs of those seeking these services.

The connection between trauma, mental health and substance use remains very clear and distinct within client encounters at CINHS. In 2021, the affirmation of unmarked graves of Indigenous children across Turtle Island, sent a wave of consciousness to settlers across North America and the world. However, to First Nations, Inuit and Metis families and individuals who were victims of Residential Schools, the Sixties Scoop, TB Hospitals and Missing and Murdered Indigenous Peoples, those who knew this truth and were denied recognition, it continues to send waves of grief and ongoing trauma. The grief that continues reflects the ongoing impacts of colonization on all Indigenous individuals in the colonial constraints of Canada. The number of missing and murdered Indigenous peoples continues. Discrimination and Stigma continues to impact Indigenous peoples in daily activities, not excluding their experiences in accessing health care. To respond to the need to address trauma and work with our clients to connect to self and their identity, CINHS worked with various partners such as the Prince George Nechako Aboriginal Employment and Training Association (PGNAETA) and Indigenous Services Canada, to begin Natsoolyis'. In Dakelh Natsoolyis' means 'Let us Rest'. Natsoolyis' is a place where clients of CINHS and the larger community are welcome to approach their health care needs and reduce barriers they experience through the social determinants of health by Indigenous approaches to health and wellness.

This incredible team is building connection between clients, reinvigorating Indigenous knowledge, and reclaiming respect and strength in Indigenous teachings. Although this work was required and visioned at the onset of CINHS' inception, the colonial mindset persisted, and health care dollars and support did not fund Cultural Knowledge Holders and Practitioners. However now in place since 2021, Natsoolyis' is inspiring this approach across other health care settings.

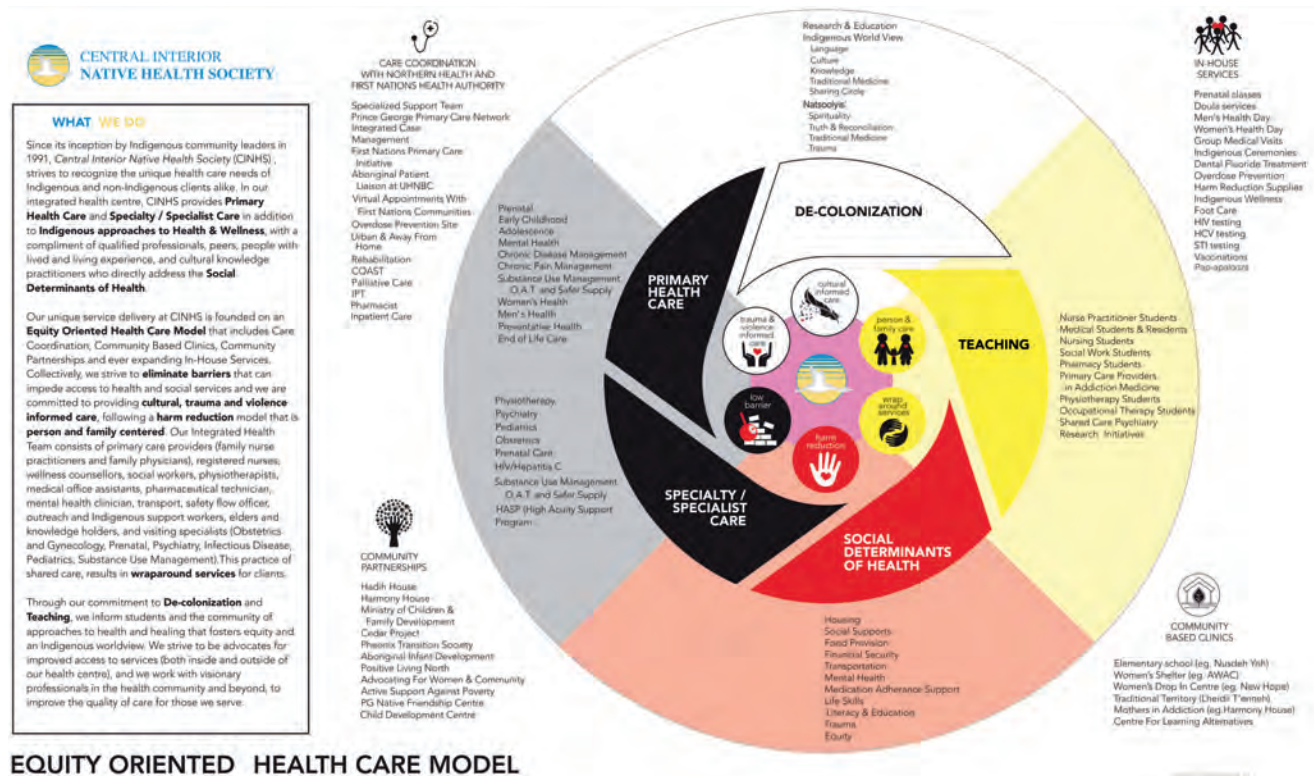
***Our grassroots society has evolved from offering primary care services to becoming a primary care home, and now expanding into a health center to include a diverse, highly effective and celebrated integrated health team. Today in our community, CINHS is an honored partner in health service delivery.***

CINHS provides **Primary Health Care** and **Specialty/Specialist Care** in addition to **Indigenous approaches to Health & Wellness**, with a compliment of qualified professionals, peers, people with lived and living experience, and cultural knowledge practitioners who directly address the **Social Determinants of Health**.

Our unique service delivery at CINHS is founded on an **Equity Oriented Health Care Model** that includes Care Coordination, Community Based Clinics, Community Partnerships and ever-expanding in-house services. Collectively, we strive to **eliminate barriers** that can impede access to health and social services and we are committed to providing **cultural, trauma and violence responsive care**, following a **harm reduction** model that is **person and family centered**. Our Integrated Health Team consists of primary care providers (family nurse practitioners and family physicians), registered nurses, wellness counsellors, social workers, physiotherapists, medical office assistants, pharmaceutical technician, mental health clinician, transport, safety flow officer, outreach and Indigenous support workers, Elders and knowledge holders, and visiting specialists (Obstetrics and Gynecology, Prenatal, Psychiatry, Infectious Disease, Pediatrics, Substance Use Management). This practice of shared care, results in wrap around services for clients.

Through our commitment to De-colonization and Teaching, we inform students and the community of approaches to health and healing that fosters equity and an Indigenous worldview.

We strive to be advocates for improved access to services (both inside and outside of our health centre), and we work with visionary professionals in the health community and beyond, to improve the quality of care for those we serve.



CINHS has been working actively to engage Indigenous governance structures and serve our team in a less hierarchical manner. The ends do not justify the means, and our process of engaging with our team reflects the strength of our organization.

This model generates a culture at CINHS that reflects our core values and commitment to fostering a supportive and empowering environment for all individuals and teams within our organization.

Our Governance at CINHS continues to boast the less colonial approach of servitude in leadership. To adequately serve our team at CINHS, we acknowledge that our interconnectedness makes us whole. We have been using less hierarchical decision making and honoring all of the impacts of our decisions from operational impact to risk to response. This shift to embrace a less hierarchal decision-making model is to cultivate transparency, collaboration, humility, and inclusivity in our decision-making processes.

CINHS has also been extending our approach to our engagement with our community, as we serve our clients in coordination with our partners. This year, the creation of our Strategic Planning emphasized collaboration, as the Board in collaboration with clients, community partners and our team were engaged to set the future direction for our organization.

- ADMINISTRATIVE COORDINATOR
- HR COORDINATOR
- FINANCIAL CONTROLLER
- DEVELOPMENT & RESEARCH COORDINATOR
- CLIENT SAFETY & COMMUNITY ENGAGEMENT COORDINATOR
- PROGRAM COORDINATOR
- CLINICAL DEVELOPMENT COORDINATOR

These coordinators create and sustain processes and activities for the continuous support of operations within our Integrated Health Centre and Society at large.

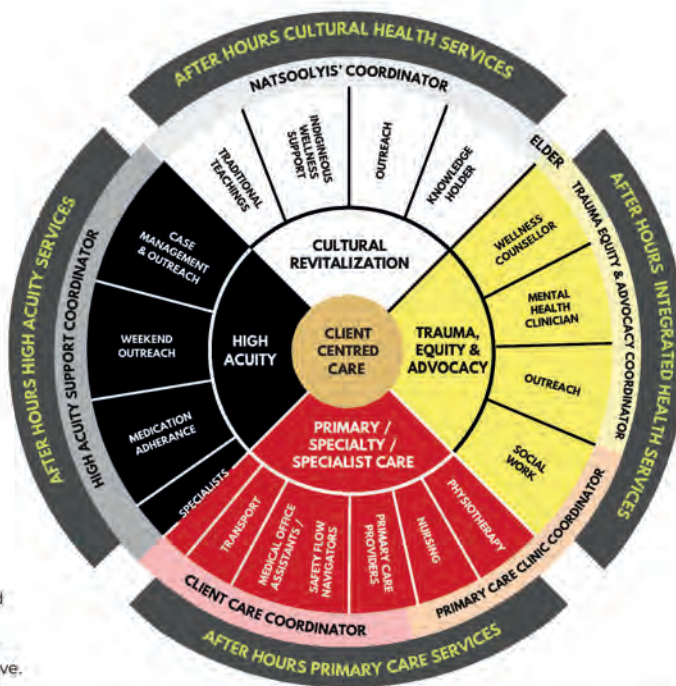
- BOARD OF DIRECTORS
- EXECUTIVE DIRECTOR

The Governance Board develops the Strategic Plan for the Society and the Executive Director implements this vision.

- ELDER
- MEDICAL DIRECTOR & NURSE PRACTITIONER LEAD
- DAKELH BUGHUNI (INDIGENOUS ADVISORY)

These advisors guide the Integrated Health Centre with their unique perspective and approaches to the health and wellness of those we serve. An Indigenous worldview fosters the interface of knowledge systems.

## CINHS GOVERNANCE STRUCTURE



## CENTRAL INTERIOR NATIVE HEALTH SOCIETY

**After over 30 years of service delivery, CINHS is expanding to meet a need that is left unmet within our health care system.**

As a result of CINHS' engagement with our clients, team and community health partners, CINHS has been advocating for measures to relieve the gaps and challenges that perplex our clients and community.

CINHS has secured additional funding through the Ministry of Health with the support of the Northern Health Authority and British Columbia Association of Community Health Centers (BCACHC). Expanded services will facilitate a larger team at CINHS, to serve extended hours with increased capacity to serve additional clients.



# STRATEGIC PLAN

*Juan Miguel Reyes*  
*Executive Summary*



CINHS is a non-profit organization dedicated to providing culturally appropriate health care services to self-identifying Indigenous Peoples residing in the central interior region of British Columbia. We are grateful to support our clients with a broad range of health and wellness services, including specialty services such as prenatal care, mental health and substance use supports, HIV/Hep C care, and more.

During the latter half of 2022, CINHS staff and Board began examining the organization's operations and community perception. The purpose was to look for service gaps and internal redundancies, and identify key priorities and opportunities for growth. This resulted in the creation of a strategic framework to help guide decision-making and inform resource allocation in 2024 and beyond.

This was achieved through a survey, in-depth interviews, an open roundtable discussion, and a series of strategic planning sessions that took place between December 2022 and March 2023. It was paramount to engage with clients, Elders, community partners and members, and CINHS team members to gain insight and feedback.

A community survey was completed by Board Members and both community partners and partners in health. The reliance many have on CINHS services and the need for an equity-oriented healthcare model in the region was made very clear by the outcome of the survey.

During a roundtable discussion with thirty six integrated health care team members, the group discussed the organization's key strengths and areas for improvement. The group spoke overwhelmingly about the dedication of staff, and quality of services as being strengths, while also citing internal communication and opportunities for training and support as areas for growth.

The new strategic plan is a living document, fluid and flexible, and most importantly, actionable, with the opportunity to pivot and prioritize based on needs, yet grounded in a direction that is both practical yet aspirational. It is relevant, achievable and has the commitment of a motivated and talented staff and Board to ensure its success.

## *CINHS 2023 Strategic Goals and Priorities*

### **PILLAR 1: Build Interconnectedness Through Knowledge Exchange**

Improving the internal and external communications that will ensure connection to the CINHS vision, provide direction and support through the change and growth of our centre, as well as promotion of our services and partnerships.

### **GOALS**

1. Raise public and community awareness of CINHS's programs and resources
2. Develop consistent and transparent internal communication systems

## **PILLAR 2: Team Sustainability and Supports For Staff**

Focussing on recruitment, retention, training, onboarding, equitable wages and benefits.

### **GOALS**

1. Retain exceptional staff within the organization
2. Ensure staff safety through increased training opportunities
3. Develop a recruitment strategy to expand and diversify the organization

## **PILLAR 3: Work Culture: Build a Culture of Equity and Engagement For Employees**

Building an engaging and welcoming culture that celebrates successes, recognizes contributions, and supports one another through heart-centred work.

### **GOALS**

1. Maintain a healthy work-life balance to reduce staff burnout
2. Develop clear expectations and strategies for staff collaboration
3. Recognize and celebrate staff successes
4. Sustain a safe work culture through increased cultural training, organizational onboarding and knowledge sharing

## **PILLAR 4: New and Existing Services**

Ensuring our existing and new services are client-centered and include our grassroots intent. Regular fine-tuning and reviewing are required to ensure our values are represented in the care we provide.

### **GOALS**

1. Increase staff capacity to increase outreach and offsite services
2. Develop regular check-ins to ensure client satisfaction
3. Identify and fill gaps in services and streamline referral processes

## **PILLAR 5: Infrastructure, Client Resources & Capital Funding**

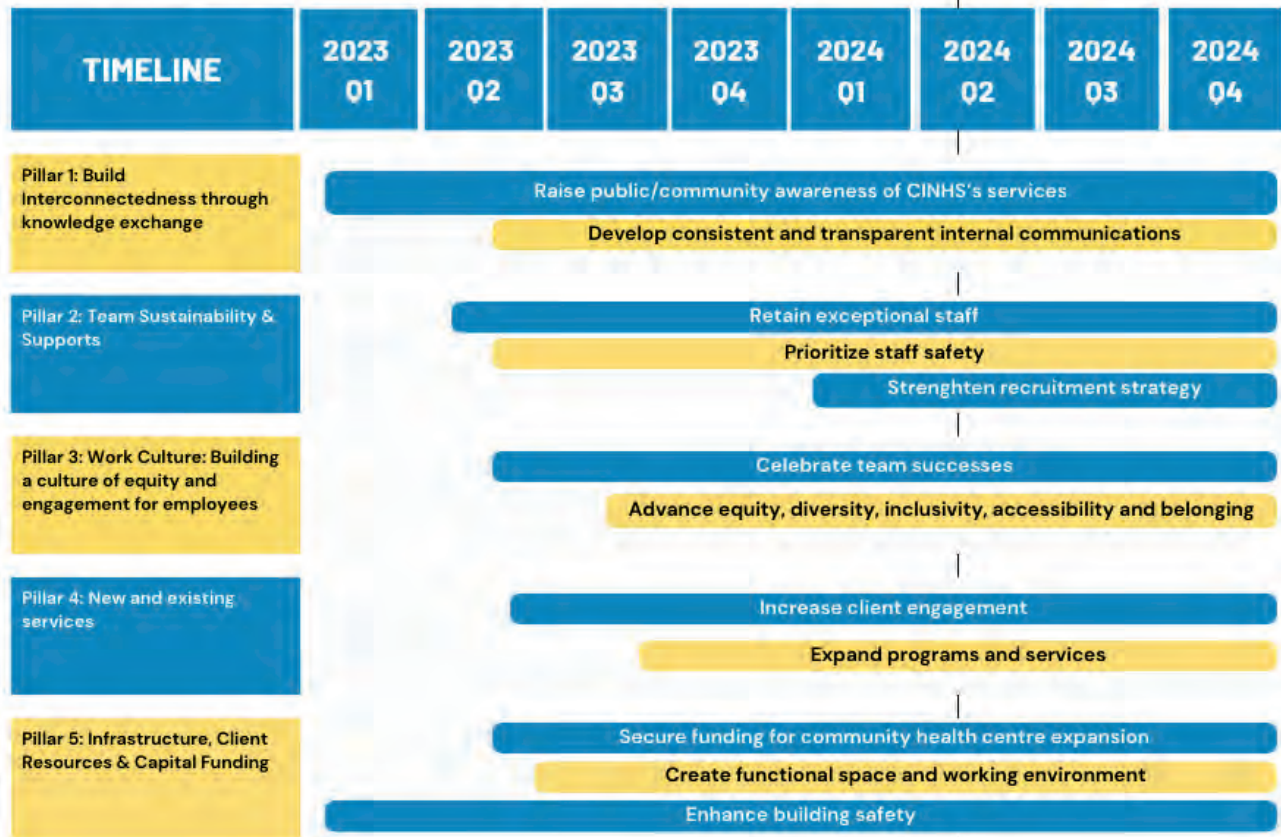
Ensuring the organization has the stable funding to offer physical infrastructure and resources for clients and the team to meet the needs of the organization as it grows.

### **GOALS**

1. Identify long-term funding opportunities and grow community partnerships.
2. Seek or build a functional space to ensure an efficient working environment for staff and clients
3. Schedule regular maintenance of organizational tools and equipment
4. Audit organizational processes to identify overlaps and inefficiencies
5. Ensure there is a plan in place for regular office maintenance

# Strategic Plan Progress

Where we are right now



Where we are right now



**Increase Online Presence and Community Engagement:** Established Natsoolyis' Cultural Centre Facebook page to promote cultural events, increase community participation and awareness

**Increase Community Awareness:** Community Action Team's (CAT) engagement with peers in raising awareness about the risks associated with our community's unregulated drug supply

**Expanded Visibility in Community Events:** Strengthened community connections and outreach efforts by attending PGNFC Health Fair, Overdose Prevention Fair, and Youth Land-based Cultural events

**Improve Communication Channels:** Utilize Slack and various team meetings (i.e., JOHS, Leadership, Dakelh Buguni, etc.) resulting in increased transparency, better collaboration and more effective decision-making processes

**Strategic Vision and Planning:** Initiate the re- envisioning process to align with our strategic direction and emerging client needs, involving the community and clients in this process

**Enhanced Online Presence and Accessibility:** Started to develop website to provide timely information and resources to interest groups



Where we are right now

TIMELINE	2023 01	2023 02	2023 03	2023 04	2024 01	2024 02	2024 03	2024 04
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Pillar 2: Team Sustainability and Supports

**Enhance Employee Feedback Process:** Implement exit interviews for departing team members, providing valuable insights for retention strategies

**Improve Employee Well-Being Monitoring:** Incorporate periodic employee well-being surveys into Bamboo HR platform, facilitating ongoing assessment and improvement of employee satisfaction and welfare

**Augment Employee Benefits:** Implement a health care spending account for team members to better support health and well-being

**Promote Work-Life Balance:** Create paid time off policies to prioritize the work-life balance of our team members

**Ensure Competitive Compensation:** Conduct annual reviews of staff salaries to reflect the cost of living, ensuring our compensation remains competitive and aligned with market standards

**Empower Workplace Culture:** Held bystander training session to empower employees to intervene in problematic situations

**Enhance Workplace Safety Training:** Implement an online BC violence and harassment course as part of new employee training with annual refreshers

**Expand Recruitment Efforts:** Attend UNBC and CNC Career Fairs and utilized platforms such as Healthmatch BC and FNHA to post job vacancies

Where we are right now

TIMELINE	2023 01	2023 02	2023 03	2023 04	2024 01	2024 02	2024 03	2024 04
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Pillar 3: Work Culture: Building a culture of equity and engagement for employees

**Team Recognition:** Conduct long-term service recognition in luncheons and recognize staff accomplishments, including going the extra mile to support team members, fostering a culture of appreciation and teamwork within the organization

**Improve Onboarding Experience:** Develop onboarding material highlighting the history and founding principles of CINHS, ensuring new hires are well-informed and aligned with the organization's mission, vision and values

**Cultural Enrichment through Elder Talks:** Invite Elders to team meetings to give talks, enriching team member's cultural understanding and strengthening their connection to mission vision and values of CINHS

**Indigenous Workforce Prioritization:** Prioritize fostering a less colonial work environment, creating a culturally safe and trauma-responsive space for Indigenous members, ensuring greater inclusivity, respect, and well-being within the organization

**Enhance Efficiency in Client Care:** Expand responsibilities of Medical Office Assistants (MOA) to include taking vitals enhancing efficiency in client care and allowing providers to focus on diagnosis and treatment

Where we are right now

TIMELINE	2023 01	2023 02	2023 03	2023 04	2024 01	2024 02	2024 03	2024 04
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Pillar 4: New and existing services

**Enhance Client Feedback System:** Develop a client feedback/grievance form for clients to access, facilitating client satisfaction monitoring and improving service quality based on feedback

**Improve Client Grievance Process:** Create a Patient Liaison position to oversee and manage the process. Establish a dedicated phone line and form for client grievances to go directly to Patient Liaison, ensuring timely resolution of issues and enhancing client satisfaction and trust

**Cultural Program Implementation:** Implement several programs including: women's cultural programming on Mondays, and men's cultural programming on Fridays and Perinatal & Family Program fostering cultural engagement and well-being among clients

**Cultural Enrichment Activities:** Natsoolyis' drum-making sessions promote cultural engagement and wellness among team members, community partners and clients

**Increase Service Capacity:** Expand CINHS capacity for trauma, equity and advocacy services, walk-ins, and cultural accessibility, ensuring better access to healthcare services and culturally appropriate care for clients

**Enhance Clinic Hours:** Implement plans of expanding clinic hours, aiming to improve accessibility and accommodate the needs of clients

Where we are right now

TIMELINE	2023 01	2023 02	2023 03	2023 04	2024 01	2024 02	2024 03	2024 04
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Pillar 5: Infrastructure, Client Resources & Capital Funding

**Enhance Funding Collaboration:** Secure stable funding streams from the Ministry of Health for CHC expansion and extend multi-year funding streams through other funding agencies to ensure the continued growth and stability of our programs and services

**Extend Security services:** Extend the contract of security guard services, enhancing safety and security measures within the centre

**Improve Safety Measures:** The Joint Occupational Health & Safety (JOHS) committee's efforts have led to improved safety measures in the workplace, ensuring a safe environment

**Enhance Emergency Preparedness:** Implement regular checks for the functionality of panic buttons, ensuring readiness for emergency situations and enhancing staff and client safety

**Improve Fire Safety Measures:** Conduct a thorough check of the building by the fire safety department, ensuring compliance with fire safety regulations

**Enhance Winter Safety Measures:** Timely snow clearance for the safety of staff and clients, reducing the risk of accidents and ensuring safe access

# A MESSAGE FROM THE CLINICAL DEVELOPMENT COORDINATOR: COMMUNITY HEALTH CENTRE EXPANSION

*Cassy Mitchell*



## *Planning For The Future*

The team at CINHS has been investing time and energy into a number of activities and projects to build a strong foundation as we focus on the future. This includes the delivery of a new strategic plan and implementing the expansion of Community Health Centre (CHC) services.

In alignment with the strategic plan and in continuing to meet the mission, vision and values of the organization the CHC expansion is focused on:

- Attaching new clients to the clinic
- Extending CHC hours of operation
- Growing our team

In preparing for growth CINHS is undergoing change management processes focused on improving current clinic operations, strengthening HR and financial processes, expanding recruitment strategies, refreshing the CINHS website and re-envisioning the visual identity of our organization. In holding space for Indigenous and non-Indigenous worldviews we are moving forward with all of this work with humility, great attention and care, and have been engaging with clients, the team and community partners for their valuable insights and understanding.

## *Change Management*

**Quality improvement:** Part of laying a strong foundation for the future has involved looking at how we can strengthen our current clinic operations and making sure that any changes implemented are resulting in an improvement for both clients and the team. Some examples of the quality improvement work we've undertaken includes:

- Medical Office assistants (MOAs) taking measurements e.g., blood pressure, pulse, height and weight when clients check in for their appointments
- Data clean up in MOIS (Medical Office Information System) related to the clinic wait list, recalls and identifying inactive clients. Reliable data in MOIS is an integral part of clinic operations and helps us plan for future services/programs
- Working with an external consultant to look at workflow/processes during weekly OAT clinics, with a goal to having clinics running smoothly and more efficiently
- Implementing a "same day appointment" clinic, creating an additional 8 same day appointments each week. We continue to track the number of same day appointment requests, so we can monitor the demand for same day appointments (who wants to be seen vs. who actually gets seen) throughout the week

- As we focus on reducing provider wait times and looking at how to staff our expanded CHC hours we are currently in the process of undertaking an analysis of provider daybooks. Trying to put into context no-show rates, squeeze ins and administrative tasks – to gain a better understanding of the workload and capacity of providers and how we can make changes to our current appointment system to reduce provider burn out and increase accessibility of appointments to clients. Part of this work has involved connecting with other CHC's around the province to see how they manage their appointments. For example, the balance of pre-booked, same day and walk in appointments being offered
- Listening to feedback from the team, we collaborated with Doctors of BC in planning a client/ team mapping session. This is specifically to address:
  - Role clarity: identifying different roles in the client's journey of care and identifying where other members of the team fit in
  - To identify processes to draw out expertise & collaboration
  - To strengthen team culture e.g., our connections & the way we communicate with one another
  - To spark ideas & identify opportunities for improvement (giving everyone a voice and a chance to be heard/contribute to change at the clinic)

#### **Systems for Financial and Human Resources:**

As we focus on growing our team, CINHS is transitioning to a responsible, risk adverse and efficient financial management system and is undertaking a review of its HR policies. This work is:

- Empowering the team and building accountability into financial practice
- Transitioning HR and financial software to allow more automation in processes
- Strengthening what information team members can access from their employment records
- Providing up-to-date information on budgets when needed

In relation to HR policies, it's imperative that they are not only legally compliant but also inclusive and respectful of diverse cultural backgrounds. By incorporating decolonization principles, 2 eyed seeing, equity, diversity, inclusivity and accessibility, alignment with CINHS mission, vision and values and supporting unionized and excluded staff as well as contractors, we aim to challenge colonial legacies and foster an environment where all employees feel valued and respected. This work has involved updating our existing HR policies, including revisions to language and a review of our organizational governance structure.

**Growing our team:** We continue to focus on the recruitment of staff, to support both current clinic operations and to have team members trained and oriented to their positions ahead of expanding our hours. As well as featuring job postings through the usual channels, we have expanded our recruitment efforts to include:

- Attending Careers Fairs at both the University of Northern British Columbia (UNBC) and the College of New Caledonia (CNC). This provided an opportunity to raise awareness of our organization and promote open job postings amongst students and alumni at these post-secondary institutions
- Increasing engagement with Family Practice residents at the University of UNBC by creating opportunities to attend Academic Half Days e.g., giving an orientation to CINHS and introducing Team-Based Care and all of the wrap around services we provide as well as promoting electives within our organization during the second year of the program
- Completing an application for a return to service program for internationally educated physicians
- Word of mouth recommendations

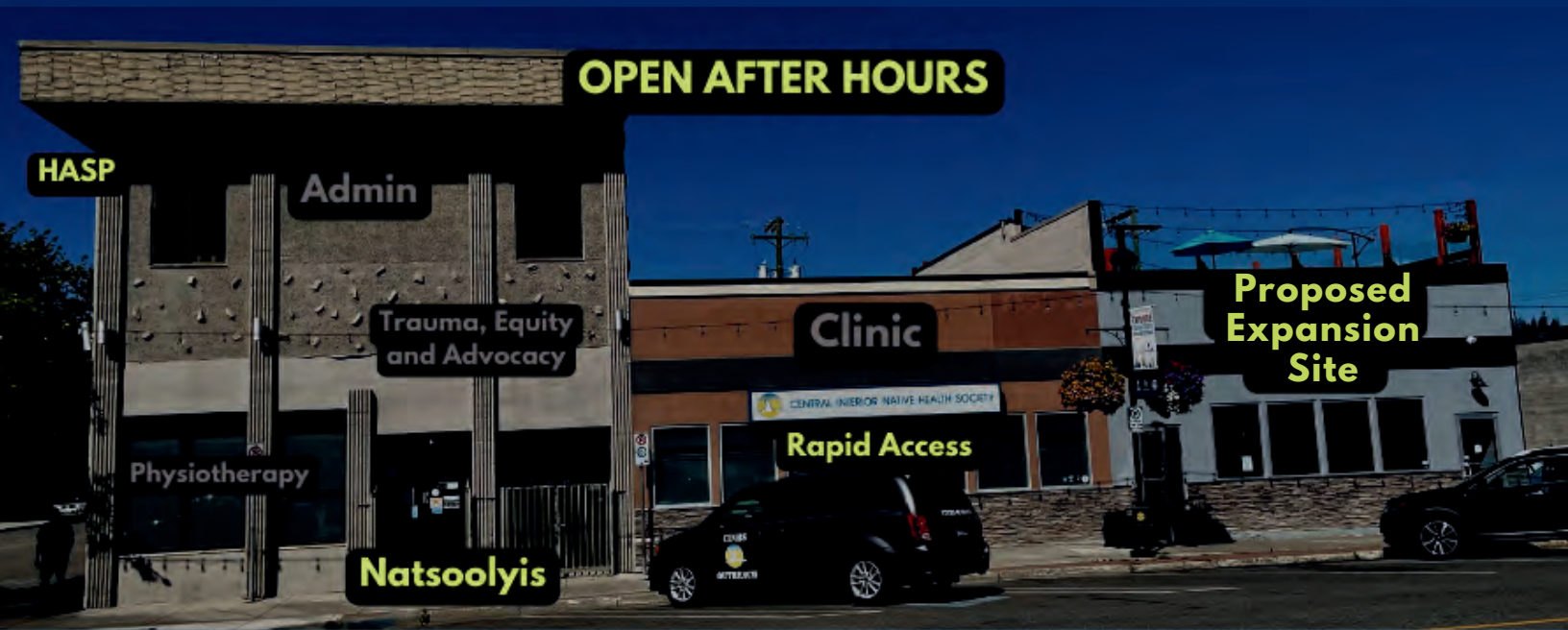
As we have started to recruit new staff, we have been monitoring the impact this is making for our clients. In one month alone, our new hires provided an additional 228 encounters at the clinic!

As well as serving clients attached to the clinic, we also provide services/programming to the wider community. Examples of this include flu clinics, Natsoolyis' opening its doors as a warming centre, the Perinatal & Family Drop-in Program and a Papa Palooza (women's health clinic) lead by Medical Students.

**Final Comment**

A lot of great work is happening across the organization and we want to take a moment to be able to recognize and celebrate all of these successes!

We are building a stronger foundation for our team, the clients that we serve and the wider community both now and into the future.



# A MESSAGE FROM THE MEDICAL LEADS: PHYSICIANS AND NURSE PRACTITIONERS

*Dr. Heather Smith & Lauren Irving, NP(F)*

Our Provider team of Physicians and Nurse Practitioners (NPs) play a key role in CINHS's ability to provide wrap around services for our clients. CINHS hosts a cohort of Physicians ranging from Family Medicine Doctors and Specialists, to Resident Doctors learning important elements of what it means to provide equitable, trauma-informed care to clients. Our NPs provide primary care services and ensure that clients receive care and access to wrap around services. We are grateful for the opportunity to host NP students on a yearly basis, offering a unique perspective and approach to health and wellness for students to learn. These robust teams support a number of provider positions, working either directly with CINHS, or offering contracted services that ensure our clients are provided with the best access to care possible. This team includes:

- 4 part-time Nurse Practitioners, with a job posting for a 5th position (Health Match BC)
- 3 part-time Family Medicine Doctors
- 1 Physician providing locum inpatient coverage
- 1 OB/GYN providing prenatal care and 1 in-house clinic per month of gynecological care
- 1 Pediatrician providing 1 in-house clinic approximately every 2 weeks.
- 1 Psychiatrist providing 1 virtual clinic approximately every 2 weeks
- 1 Infectious Disease Specialist providing 1 virtual clinic per month
- All family medicine residents in the Northern/Prince George cohort rotate through CINHS spending 2-4 weeks in our clinic during their 1st year
- 2nd year family medicine residents are invited/request to do an elective here – generally 2 weeks

- Northern Medical Program (NMP) students do their 1st and 2nd year family medicine placements here – the number is variable and based on provider availability
- All first-year psychiatry residents in the Northern program rotate through CINHS – they spend 4 weeks in our clinic
- Preceptorship for 1 UNBC NP student per year

The Provider care team at CINHS offers a unique way for clients to access additional health care referrals without having to attend meetings at other offices, medical clinics, or hospitals. By building relationships with local Specialists and care teams, CINHS is grateful to be able to offer the following list of Physician and NP services:

- Newborn and pediatric care (including routine wellness checks)
- Longitudinal care for adults and seniors including chronic illnesses, episodic illness, routine health screening, etc
- Prenatal/Postnatal care
- Comprehensive sexual and reproductive health care
- 2SLBGTQIA+ friendly care
- Palliative care
- Home visits
- Nursing home care
- Substance use management
- Inpatient care
- Access to specialty clinics such as Psychiatry, Obstetrics/gynecology, Pediatrics, and Infectious Diseases
- Community based clinic at Nusdeh Yoh Elementary School
- And more!

## Team Highlights

Our provider team works hard to ensure that our clients are provided with the most equitable, culturally safe, and trauma-informed care possible. Through tri-pandemics, provider shortages, and a plethora of other challenges that our organization, and community, have faced over the past number of years, our providers have had many notable successes, including but not limited to:

- Having a stable team of Physicians – our physicians have been with us between 2 and 13 years (our Medical Lead!)
- Our NP Lead has been working with our organization for 11 years!
- QI projects with prenatal team to increase quality of care and increase efficiencies while modernizing prenatal delivery.
- QI projects with NP team to create an orientation package for new NP hires
- Recent addition of a doula to the prenatal team to increase support and advocacy for our clients as they deliver babies in the hospital setting
- Physicians and NPs worked together to streamline substance use management policies, ensuring clients had clear understanding of the care they could/would receive, minimizing risk and empowering clients to have a better understanding of their healthcare journey



CINHS Physicians and NPs held a community wide “Papapalooza” in conjunction with the Northern Medical Program – paps were offered to all community members and we did 69 paps in an afternoon!

Purchase of a new hand-held ultrasound machine for prenatal care as well as primary care services – meaning that clients can access some ultrasound services right in house, without a referral to another service site.

Our NP Lead continued outreach clinic to Nusdeh Yoh Elementary School one morning a week (ongoing since 2015). This program has seen many pediatric clients and their families, helped to increase connections, and create healthier relationships with clients throughout their health journey

### **Addressing Challenges**

For Physicians and Nurse Practitioners working at CINHS, and in the health care field as a whole, there have been a number of challenges to face over the past few years. There were a couple of specific challenges faced by our Physician team in that past year. For example, the unforeseen departure of Physicians for matters outside of our control, led to the need to outsource physicians to oversee inpatient care at UHNBC, and our long-term care clients.

The CINHS Nurse Practitioners were busy this past year addressing challenges using a quality improvement approach. The NPs have been working with our QI coach to create an NP orientation guide for all new NPs who join CINHS as well as working with our current NPs to actively retain them to our team. We are working to recruit new NPs through offering a comprehensive NP orientation, a supportive team environment, dedicated admin time, and dedicated support from our NP Lead. We commend our CINHS Providers for their ability to provide high standards of care to those whom we serve, even in the face of challenges brought on by forces outside of their control.

We are grateful for each member’s ability to problem-solve to maintain our services with minimal impact to how we are providing care. While systems may shift and availability of care providers may ebb and flow, our Physicians and Nurse Practitioners continuously go above and beyond to create a healthcare experience that exceeds expectations.

### **Goals**

CINHS recognizes the critical importance of having NPs and Physicians continue to work with our clinic. We aim to support the ideas and goals of our physician and NP teams. To expand our provider pool so that we can expand services (both timing and actual services offered) Physicians and NPs aim to:

- be able to offer longer hours of operation
- be able to offer IV therapy services
- be able to offer rapid initiation and titration of opiate agonist therapies
- be able to offer more same day appointments
- continue to attach patients to the CINHS roster in a timely way
- be able to offer group medical visits that have relevance to the people we serve
- be able to offer more comprehensive adolescent services with clinic hours after school and into the evening and in a setting where adolescents feel comfortable accessing care
- improve and modernize our website and utilize online booking services to help increase accessibility of care to adolescents and people who prefer to book services online rather than calling our front desk

CINHS would like to thank the Family Doctors, Nurse Practitioners, and Physician Specialists for their continued support and desire to work with our clients to promote health and wellness. We would also like to thank the Resident physicians, and NP practicum students who come to our clinic to learn a different way of client care and the unique services we offer. Tubeh Musi! Tubeh Snachailya!



# A MESSAGE FROM THE CLINICAL COORDINATOR: REGISTERED NURSES & PHYSIOTHERAPISTS

*Tammy Rogers*

Our Clinical Team boasts 2 full-time, 1 part-time and 2 casual Registered Nurses (RNs), and 1 Physiotherapist who work alongside our Doctors, Nurse Practitioners, and Medical Office Assistants. With the Nursing Team previously holding upwards of 3 positions in the past, this team has grown exponentially, with intent for continued expansion. With this growth, CINHS is now able to begin increasing RN scope of practice and work towards goals, finalizing processes for more efficient client care.

## **Purpose:**

At CINHS, our clinical team serves clients through opportunistic encounters (Same-day appointments or squeeze-ins/walk-ins) and prebooked appointments. RN and physio services are flexible in that they are able to work with their clients to provide services both on- and off-site, such as outreach appointments and satellite clinics. Our team is dedicated to providing client-centered, trauma-informed care that promotes autonomy and holistic approaches to care. Supporting and building strong, trusting relationships with their clients to connect with other resources they may be in search of, is the primary goal of the clinical team. Over the past couple of years, CINHS has been able to purchase equipment to better serve our clients, by providing inhouse services such as phlebotomy (bloodwork), ECGs, and medication administration that would otherwise need to be completed at an off-site lab or clinic. We are grateful that we are able to provide a culturally safe and familiar space where clients can access these types of medical services without having to locate another office to access care. We are meeting people where they are at. The same can be said of our overdose response framework, where CINHS



is a host site for Harm Reduction supplies and access to Naloxone training on how to attend to a Toxic Drug Poisoning event. The RNs provide updated trainings for the broader CINHS team, to clients, and to community members and partners, ensuring that our community has access to lifesaving knowledge.

The physio position, historically, has engaged with clients and the broader community. With in-house and outreach physio services, physio offers referrals for mobility aids and equipment, hosting physio clinics at the Lheidli T'enneh Health Center, facilitating a Walk and Stretch program with clients, aquatic session at the UHNBC rehabilitation unit pool and many other community and client engagement events, programs and services.

## **Scope of Practice:**

With acquirement of Sexually Transmitted Infection (STI) certification, the Clinical team has been successful in reinstating the STI clinic held as a satellite clinic in partnership with New Hope, offering a safe space for STI testing for women who may not be connected to CINHS or another health clinic. Thanks to the availability of STI certifications that help us to increase the services we offer and provide culturally safe space and care to our clients and community members both in-house and via satellite clinics. RNs were also engaged in certification of contraceptive management, increasing accessibility for our client's needs. Our RNs have also increased accessibility for female clients, meaning shorter wait-times for PAPs.

Wound-care and frostbite can be assessed by our RNs and in less extreme cases, our RNs are able to follow up with clients who require wound care/dressing changes. This piece of care has been particularly important to our team, who work together to navigate the best path to take to ensure that our client is comfortable with their healing journey. Our Clinical team has so much drive and passion to care for our community and those whom we serve, and their skills and abilities don't stop here. Our team is driven to connect with and advocate for their clients with needs ranging from food insecurity and nutrition to communicable diseases such as TB, and diabetes management.

It is also important to acknowledge the immense amount of learning and teaching that happens in the clinic through our fantastic partnerships with UNBC and CNC. We are grateful to host numerous RN and LPN students for their practicum placements over the years. Being able to engage with learners and teach about our mission to provide person-centered, culturally safe, and trauma and equity informed care is a key piece in what makes CINHS a leader in building future pathways to health and wellness.

### **Highlights and Goals:**

Over the last couple of years, the RNs have focused hard on increasing their scope of practice to help address the needs of those whom they serve. Our OAT (Opioid Agonist Therapy) Nurse worked tirelessly on learning the details and regulations surrounding OAT prescribing and became the first RN in the North to practice full-scope prescribing, meaning she is able to fully prescribe and initiate Suboxone, Kadian, and Methadone as forms of OAT for those meeting the qualifications to be prescribed these therapies. This has allowed for increased accessibility for OAT prescribing, leaving more space for the family doctors to attend to the other medical needs of our clients. Our other incredible RNs are looking forward to taking this course in the near future to further their scope of practice and increase access to OAT services for clients.

Additionally, the members of the RN team were able to attend training to increase their knowledge and application of Two-Eyed seeing approaches to further build wholesome, trusting relationship between them and those whom they serve. Future trainings will include: Trauma Nursing Care, and Emergency Nursing for Pediatrics. The RNs have been working closely with the Natsooyis' cultural team to facilitate group sessions for peri-natal clients, and are looking to start a diabetes education and management group. Their goals for the future include working closely with the Trauma, Equity, and Advocacy team to further assist their clients with building healthy connections to services that meets the client's needs in a holistic manner. As well, it has been duly noted for many years, the expressed interest from clients and community members for increased outreach services. The team is hopeful that they will be able to find ways of increasing outreach and community-based services in the future.

The possibilities are endless when it comes to building and creating a space and service that are informed by the people who access these services. The Clinical team at CINHS is looking forward to continuing this journey of learning and working with their community to ensure that services are meeting the needs of our clients, physically, mentally, emotionally, and spiritually.

### **Words from Team Members:**

"Our team meets people where they are. [We] show and feel empathy, kindness, and legitimate compassion. That is why they show up here and they allow us to help them".

"Our team does not look like other institutions. Our wins can look like our patients showing up to their appointments no matter what. Or making sure our patient is advocated for so they do not end up in sepsis, or making sure we visit their homes to ensure they get the help they need".

"Our team strives to build trusting and lasting relationships with our clients by creating a safe environment, practicing culturally safe, trauma-informed and a holistic approach to care."

# A MESSAGE FROM THE CLIENT CARE COORDINATOR

*Karen Melanson*

As integral members of an interdisciplinary team, the client care team members provide support to both clients and healthcare providers. Client care plays a vital role in creating a welcoming environment for clients and helps them to navigate the healthcare system and connect with resources for their well-being. We recognize the many barriers and challenges our clients face accessing healthcare and we aim to help mitigate these by organizing transportation to and from appointments as well as conducting appointment reminder calls, among many other tasks. Each team member has a unique role to help support clients and the CINHS health and wellness teams.

These roles include:

- Client Care Coordinator
- Provider Support Medical Office Assistant
- Administration Medical Office Assistants
- Reception Medical Office Assistant
- Data Entry Medical Office Assistant
- Two Outreach Drivers

As the first line of contact for clients accessing services at CINHS, the client care team has always played a vital role in our community health centre. By ensuring that our client's needs are being met and that many typical healthcare barriers are lowered or non-existent, without this team, our centre cannot operate at the level in which it is able to.



CINHS is grateful for the compassion displayed by this team, and are so proud of the level of trauma-informed, culturally safe care they are providing to our beloved clients and community members.

## **Team Highlights:**

With the recent acquisition of another outreach vehicle and driver we have been able to expand our transportation capabilities to include food security supports, such as food hampers. Being able to offer outreach as an option for clients to get to and from their appointments, means that there are fewer missed appointments, and more opportunity for building connections. Another highlight that our client care team would like to share is that we are currently expanding our MOA team to support the expansion of our centre hours to include evenings and weekends. This would be an incredible opportunity for our clients to access health services during hours that would be better suited to their lifestyle and schedule.

**Team Specific Learnings:**

CINHS Admin and the Coordinators have been working hard to bring more focused trainings and learning opportunities to each of the unique teams within CINHS. The MOA team has been fortunate to have participated in professional development sessions hosted by the Primary Care Network. These sessions reviewed de-escalation training and highlighted communication resources and networking.

**Challenges and Successes:**

One of our biggest challenges is the shortage of family physicians and nurse practitioners. Our clients are faced with longer wait times for appointments and as a result, are at times required to access the hospital emergency room or walk-in clinics for care. This provider shortage is also affecting the centres capability of expanding our services and accepting new clients. We have been fortunate with the retention of our MOA team with staff members celebrating two – six years service. These milestones represent our team’s dedication and commitment to client care and the importance of forging positive working relationships.



# A MESSAGE FROM THE HIGH ACUITY SUPPORT PROGRAM (HASP) COORDINATOR

*Jennifer Hoy*

HASP is designed to provide wrap around supports to those living with HIV and/or acute Hepatitis C Virus (HCV). This program was developed with input from the very people we serve, ensuring it is a safe space for all members, and meets clients where they are at. A two-eyed approach to health and wellness is used, combining the teachings of the medicine wheel, as well as local and Indigenous practices, and western medicine to support Sexually Transmitted & Blood Borne Infections (STBBI) care are used, balancing the many needs of our clients. Individualized client centered care plans are designed, ensuring supports are in place to provide the following services:

- Full wrap around supports and case management of HIV care and psychosocial supports, including the management of antiretrovirals (ARV's), bloodwork, specialist care, and primary care
- Daily medication dispensing of ARV's and other supportive medications
- Housing support/homelessness prevention
- Outreach and Advocacy with healthcare, Ministry of Children and Family Development (MCFD), Ministry of Social Development & Poverty Reduction (MSDPR), landlords and other community partners
- Food provision in the form of home cooked meals daily
- Food security-setting up hampers and other forms of ongoing food provision
- Medical care, mental health, and substance use support. Designated weekly nursing time for low barrier bloodwork and other preventative healthcare such as vaccines, TB skin tests, and wound care



- Safe space/drop in space with access to laundry, showers, clothing, storage bins, food and support staff
- Bi-weekly women's art group, building community and safe spaces for indigenous women living with or at risk of HIV/HCV
- Education around STBBI prevention, transmission, treatment, and more
- STBBI testing-Dry Blood Spot Testing, Self testing, Point-of-Care (POC) testing, and traditional blood draw testing
- Any other supports needed as identified by client and staff

HASP provides services 7 days per week, while also providing harm reduction supply outreach, overdose prevention education and supplies, and provision of food and warm weather gear for those living on or near the streets.

We are staffed by a team of four full time service providers: 1 coordinator/Pharmacy Technician/support worker; 1 support worker; 1 Auntie support worker; 1 harm reduction outreach worker. Our team is also supported by Peer health navigators and weekend Peer workers supporting harm reduction work. We also work closely with many community partners to ensure best supports possible are provided. Partners include Positive Living North (PLN), Cedar project, BC Housing, Connective, Canadian Mental Health Association (CMHA), all local shelters and food banks, MCFD, and the MSD.

HASP participates in a lot of provincial and national research in HIV/HCV, as well as capacity building for People with lived experience of HIV

In 2023 we were key partners in the Making It Work study, the BCC3 study, we developed resources and training guides for hiring people with lived experience, and supported 2 northern folks in accessing training and mentorship through the Peer Leadership Development Institute by the Pacific AIDS Network (PAN). We successfully connected over 40 people to various empowering research opportunities.



### Highlights for 2023

- Participating in the BCC3 women's retreat at Loon Lake with clients (Indigenous women living with/affected by HIV)
- Developing Peer employment resources and hiring peers for harm reduction and health navigation work
- Hosted the overdose prevention community health fair which had over 240 people engage in education, harm reduction, STBBI testing, and connection to resources in a fun filled community event
- Successfully achieved 94.7 % viral suppression for HIV, and 99% SVR (cure) for HCV for all clients supported
- trained staff and successfully hosted multiple Dry Blood Spot Testing events, connecting folks with care and treatment for HIV/HCV and syphilis
- had over 3000 harm reduction encounters, provided education on HIV/STBBI health and testing to over 190 unique individuals, delivered over 12000 doses of HIV/HCV medications, provided over 5000 home cooked meals, and many emergencies food hampers



### Provincial Capacity Building/Research/Program Development Projects

HASP has a long history of knowledge exchange with various partners throughout our province, and as such, have been invited to be involved in various projects to ensure our philosophies can benefit the entire province and not just our clients. These include working with the Collective Impact Network (CIN) to develop resources (hiring standards, policies, and handbook) around hiring people with lived or living experience of HIV/HCV, and/or substance use.



This project is nearing completion with the upcoming rollout of these resources following 1.5 years of research, literature reviews, and collective advocacy. We also sit on the BCC3 Community Advisory Board, ensuring the north is represented in HIV research, alongside some amazing researchers through the BC women and children's hospital, UBC, and University of Toronto. This work has extended into supporting further provincial and national research through the Canadian Institutes of Health Research (CIHR). Finally, the HASP Coordinator has been participating in a project aimed at improving the lives of folks living with HCV by being a part of the advisory board and Indigenous working group for the development of the British Columbia Viral Hepatitis Roadmap.

### Goals as we move to 2024

- Find ways to support our clients not on HIV treatment in the best way possible to make informed choices for their health and wellness
- Find stable housing for all of our HASP clients
- Find space to operate and support our full client roster and programming, we are bursting at the seams
- Offer 100% of our clinic clients accessing services testing for HIV and HCV
- Procure funding for monthly harm reduction/STBBI testing events (Harm reduction breakfasts)

### What Our Clients Have to Say About Us:

"I don't know where I'd be without them, probably dead"

"They are a safe haven in the warzone of the streets"

"They built us a community that we belong in"

"They saved my life"



# A MESSAGE FROM THE TRAUMA, EQUITY, AND ADVOCACY TEAM (TEA) COORDINATOR

*James Olsen*

Working as part of the interdisciplinary team, the Trauma, Equity, and Advocacy Team (TEA) strives to build relationships with clients, that are based on overcoming past traumas that resulted from colonization. Some of those traumas include disconnection, lack of trust in systems, inequitable access to services and the inherent barriers that were created externally and internally that have impacted their mental, emotional, spiritual and physical health.

The TEA team consists of:

- The TEA Coordinator
- 3 Social Workers (2 full-time, 1 part-time)
- 1 Mental Health and Substance Use Counsellor
- 1 Wellness Counsellor
- 1 Indigenous Support Worker
- 1 Mental Health and Addictions Clinician (Northern Health placement with IPT-7)

Our team is focussed on delivering trauma-informed care and a client centered approach with the goal of helping clients to overcome barriers to achieve a healthier and higher quality of life. Working within the CINHS team and with community partners (MSDPR, BC Housing, Aboriginal Housing, Northern Health, CMHA, First Nations Health Authority (FNHA), Jordan's Principal, E-Fry, Phoenix Transition Society and Harmony House, Northern John Howard Society, Advocating for Women and Children (AWAC), Active Support Against Poverty (ASAP), PG Native Friendship Center, Salvation Army, St. Vincent DePaul Society, and many others) to connect clients with the services and supports needed.



All team members perform assessments and analyze under their particular scope of practice what issues are affecting the clients' social determinants of health.

Our Social Workers work diligently to support our clients in advocacy towards them achieving equitable treatment from governmental assistance programs and other local non-profit agencies. We have a Masters in Social Work, a Registered Social Worker and a Bachelors of Social Work thus ensuring that standards of practice are met and surpassed in their approach to supporting our vulnerable sector clients to ensure that their rights are respected and honoured. Our Social Workers support all clients from a trauma-informed, culturally sensitive, Indigenous worldview to build trust and connection. The team works with and is familiar with processes and advocacy with the MSDPR, FNHA, Jordan's Principle and other local programs to support client's financial stability and optimize the benefits they are entitled to receive and may require to meet their needs. They also continue to upgrade their skills through professional development courses to help coach and motivate clients to achieve changes in their lives.



The Indigenous Support Worker assists our clients to ensure that their needs are met through a culturally safe approach, building and maintaining the clients' relationships with the integrated health team and outside specialists. Focus is on strengthening an Indigenous worldview to build relationships and to collaboratively network with other agencies, service providers and professionals to best serve and meet the clients needs through the intentional practice of Two-Eyed Seeing thus breaking down barriers of a colonial system.

Engagement with UNHBC and discharge planning to ensure that clients are connected to appropriate supports and services, is among the many roles the Indigenous Support Worker navigates. Delivery of medications, transporting clients to appointments, and supporting clients to build trusting relationships with service providers that they are connected with, also fall under the scope of practice of our Indigenous Support Worker. Our support worker is also a part of our pre-natal program and supports our clients that face multiple barriers to care and is focused on building connection.

Our counselling team members, 1 Mental Health and Substance Use Counsellor, 1 Wellness Counsellor and 1 Mental Health and Addictions Clinician (NH – IPT-7). All of our counselling team are responsible, through counselling strategies and varied modalities for building professional, secure, and trusting relationships with CINHS clients.

Priority is to infuse Indigenous culture and practices within the counselling setting to address the client's full range of needs: Emotional, Mental, Physical and Spiritual. This is done through a client centered and complete holistic approach that assesses, addresses and understands that healing is on a continuum of care, and each client may be at different stages of change. Examples of this practice can be seen and felt in the Wellbriety groups facilitated weekly, both on- and off-site. Wellbriety at CINHS has been running since 2017, and has assisted multiple clients with building connections and improving pathways to health and wellness. We counsel clients on everything from Harm Reduction strategies through to Maintenance State of Change and promoting overall wellness. Both individual and group therapy are made available for our clients to find pathways to healing. The team is knowledgeable of services available in Prince George that include income assistance, advocacy, housing, food security, employment and travel needs along with referrals to other agencies and or treatment centers to address each individuals' specific goals. Working as part of CINHS's interdisciplinary team we aim to facilitate and support individuals accessing health care for their physical health and mental health, identifying root causes for their substance use and equip them with the tools and supports to move towards wellness.



# A MESSAGE FROM THE NATSOOLYIS' CULTURAL WELLNESS AND HEALING PROGRAM COORDINATOR

*Oliveth Orjiocha*

The Natsoolyis' team is working tirelessly to help CINHS promote Indigenous ways of being and create a culturally safe space for clients and non-clients of CINHS who are willing to learn and practice Indigenous ways of being. Their efforts have had a real impact on the lives of many people. This team comprises exceptional team members with amazing experiences in program management, cultural support, cultural wellness and Indigenous teachings and ways of being.

The Natsoolyis' cultural center is one of the CINHS's Integrated health care services that demonstrates our commitment to decolonization and Indigenous cultural teachings. Through Natsoolyis', CINHS helps to address cultural determinants of health and provides life skills, cultural teachings and trainings that help clients navigate through the impacts of colonization and intergenerational trauma caused by residential/day school experiences, substance use, mental health challenges, homelessness and identity crisis. We do this in collaboration with Indigenous Elders and Knowledge Holders that help our Natsoolyis' team to develop and facilitate land-based healings, language classes, healing circles, cultural teachings, cultural crafting, foraging, drumming circles, and Indigenous wellness workshops (including Indigenous family systems, traditional medicine and Indigenous ways of being).

Testimonies from our clients affirms the transformative impact of the cultural space. One of our clients from the Women's Wellness group expressed how the group helped her overcome feelings of isolation and depression which were caused by numerous deaths in her family.



In her words "if not for this group, I would be at home crying all day." Similarly, a client from our Men's Wellness group also attested to its role in helping him surmount substance use challenges and embrace Indigenous cultural teachings and land-based healing practices.

Additional testimonials illustrate the profound impact of our program:

**"The drumming circle holds immense significance for me. It's bestowed upon me a sense of family and community. I depart feeling uplifted and rooted. The rhythm resonates within me until our next gathering. My children are now immersed in our culture, experiencing what I couldn't in my youth. They may just be playing now, but they carry our songs into our home!"**

**"Natsoolyis' cultural group programs provide me with grounding and connection; it's been instrumental in my spiritual and physical healing."**

Over the years, the Natsoolyis' team has worked with clients, community partners, Indigenous Knowledge Holders and Elders to develop land-based and cultural wellness programs that help to promote cultural revitalization and reinforce the Canadian government's commitment to Truth and Reconciliation.

## Initiatives and Sessions Open to Clients and Non-Clients of CINHS:

- **Men's Cultural Wellness Group:** This group is established to create a safe space where self-identifying men can spend quality time together and share knowledge in a healthy, affirming, respectful way without competition of any kind. This session helps to bring men together and enables each man on his own terms, explore for himself his own path to wellness. It involves sharing circles, land-based activities, cultural teachings, community services and outreach activities, health talk and wellness check workshops.
- **Women's Cultural Wellness Group:** This session facilitates the development of a social support system that allows individuals who identify as female to share and learn from one another's healing journeys. It usually starts with a healing circle and ends with Indigenous cultural crafts.
- **Drumming Circle:** This session provides the cultural tools necessary to cope with trauma, mental health challenges, depression and isolation. It provides our clients the opportunity to learn and practice their Indigenous songs.
- **Indigenous Cultural Teachings and Wellness Workshops:** This session is open to everyone. It is deeply rooted in Indigenous approaches to wellness and involves nature walks for exercise and foraging which connects clients to the land, plants, trees and the Indigenous ways of being. Through this program we are able to organize group and individual family sessions and provide them with workshops on grief and loss, Indigenous food systems (including food preparation and preservation such as canning and smoking), family systems, communication, healthy dispute resolution and other life skills.
- **Supporting Spirit Project:** Last year our team partnered with Foundry and the University of Northern British Columbia's First Nation Department to offer a Youth Summer Land-based program to young people in our community. The program offered the participants the opportunity to learn drum making and painting, sage processing, medicine bag making, paddling, hiking and foraging, trout fishing, salmon processing and canning.



- **Cooling and Warming Centers:** Over the years, our cultural center has offered a safe space to our precariously housed clients and other individuals and families struggling with shelter during extreme weather conditions. During these periods our team usually recruit volunteers and peer support workers that support our clients with healthy meals, indoor games and activities including painting, crafting and movies. We have also offered extended hour services and weekend sessions. This initiative has been supported through funding from FNHA, Ministry of Emergency Management and Climate Readiness through the City of Prince George.
- **Perinatal and Family Cultural Program:** We are currently working with our Doula, Physicians, Nurses, and the Psychosocial team to provide wraparound support for our perinatal clients. This program incorporates cultural and clinical teachings, crafts and wellness activities.

- Launched our Men's Cultural Wellness group
- Delivered over 200 group wellness programs and had over 2,000 encounters
- Launched our Perinatal and family support program in collaboration with our Nursing and Trauma Equity and Advocacy team
- Organized a Youth Land-based session with Foundry, UNBC's Frist Nations Department and delivered 10 sessions on Land-based teachings and activities
- Renovated and upgraded our program space – creating room for program space, kitchen area and office space
- Secured more funding through BCACHC, the Community Action Initiative (CAI) and PGNAETA
- Successfully integrated drumming circle and healing circle into our wellness program
- Started walk and stretch sessions that incorporate healthy exercises and nature walks
- Successfully facilitated drum-making workshops for our clients and community partners, involving 51 participants from 8 different organizations and over 24 clients. This reflects our dedication to fostering cultural reclamation and promoting collaboration with our community partners

**Highlights of 2023**

- Added new Full Time Employees (1.0 Cultural Wellness Worker and 1.0 Program Support Worker) to our team

**Number of Cultural Wellness Sessions**



## Future Goals

- Our goal is to continue to help CINHS to reshape and re-envision how healthcare services are provided to Indigenous Peoples by offering land-based healing and creating a safe space where Indigenous clients can learn and practice their cultures
- We hope to continue to provide a holistic space that teaches and touches everyone, from clients to staff and our community partners
- To obtain the vision we have, we hope to continue to transform our cultural space in a way that reflects both the local territory of the Lheidli T'enneh and the cultural practices of the Dakelh people. By culturally transforming Natsoolyis', we can continue to re-establish Indigenous clients' trust in the health care system and create an opportunity for them to access additional services offered through our health centre. As a result, this space can serve as a gateway for most of our clients' wellness journeys

- Program extension: We hope to expand and extend our current programs including the drumming circles, men and women's healing circles and our Supporting Spirit Projects

In conclusion, the Natsoolyis' Cultural Wellness and Healing Space remains committed to its mission of promoting Indigenous ways of being and providing a safe and supportive environment for all who seek our services. With the dedication of our team and the support of our community partners, we look forward to achieving our future goals and continuing to make a positive impact on the lives of those we serve.



# A MESSAGE FROM THE HUMAN RESOURCES (HR) COORDINATOR

*Clarisse Clemente*

## *Introduction*

As we reflect on the past year, it's evident that our journey has been marked by resilience, adaptability, and an unwavering commitment to our people. In the face of unprecedented challenges, we've come together as a team, demonstrating the strength of our collective spirit and the power of HR to drive positive change within our organization.

The annual HR report serves not just as a documentation of statistics and figures, but as a testament to the incredible strides we've made together in shaping our workplace culture, nurturing talent, and fostering an environment where every individual thrives. It's a story of our shared successes, challenges overcome, and aspirations for the future.

Throughout the pages of this report, you'll find insights into the various initiatives, programs, and strategies that have propelled us forward on our journey towards excellence. From innovative recruitment practices to comprehensive employee development programs, each aspect of our HR efforts has been carefully designed with the overarching goal of creating a workplace where every individual feels valued, empowered, and inspired to reach their full potential.

But beyond the numbers and achievements lies a deeper narrative – one of dedication, passion, and the relentless pursuit of excellence. It's a story of the countless conversations, connections, and collaborations that have shaped our culture and strengthened our bonds as a team.



It's a story of resilience in the face of adversity, and the unwavering belief in our collective ability to overcome any challenge that comes our way.

As we embark on a new chapter filled with opportunities and possibilities, let us carry forward the lessons learned and the successes achieved, while remaining steadfast in our commitment to continuous improvement and growth. Together, we have the power to shape the future of our organization and create a workplace that is not just successful, but truly exceptional.

I invite you to journey with us as we delve into the highlights, insights, and reflections contained within this report. May it serve as a source of inspiration, motivation, and pride as we continue to write the next chapter of our story together.

## **Embracing HR Core Values**

In the bustling heart of our organization lies a set of guiding principles that form the bedrock of our HR practices – integrity, collaboration, diversity, equity, inclusion, and continuous improvement. These values aren't just words etched on a wall; they are the essence of who we are and how we operate, shaping every decision, interaction, and initiative within our HR department.

Integrity remains the foundation of our operations, guiding our decision-making processes and fostering trust among our employees and community partners.

Through collaborative efforts across departments and teams, we have leveraged diverse perspectives to drive innovation and achieve our shared goals.

Our commitment to diversity, equity, and inclusion has been evident in our recruitment practices, employee development initiatives, and inclusive workplace policies, fostering a culture where everyone feels valued and respected.

Additionally, our dedication to continuous improvement has led to the implementation of new strategies and processes aimed at enhancing efficiency, productivity, and employee satisfaction.

As we move forward, we remain steadfast in upholding these core values, recognizing them as essential pillars for the sustained success and growth of our organization.



# 1 RECRUITING & ACQUIRING

## GOAL

Increase the efficiency of our recruitment process by implementing targeted sourcing strategies and streamlining candidate evaluation procedures, resulting in a 20% reduction in time-to-hire within the next six months.

## ACCOMPLISHMENTS

- Streamlined Recruitment Processes with Technology. Leveraging the latest HR technology, we streamlined our recruitment processes to improve efficiency and candidate experience.
- Developed a staff recruitment action plan to increase the quality of staff hires and decrease the time it takes to fill positions.
- Strengthened diversity and inclusion initiatives, achieving greater representation of underrepresented groups within our workforce through targeted recruitment efforts and inclusive hiring practices.
- Cross-Functional Collaboration: In a collaborative HR recruitment process, HR works closely with coordinators to gain a thorough understanding of the specific skill sets and qualities needed for each role.

# 2 DEVELOPING & RETAINING

## GOAL

Elevate both individual and organizational effectiveness by cultivating an environment where each employee feels embraced, appreciated, and equipped with the necessary training, tools, and resources to thrive from their initial day of employment and persistently throughout their professional journey.

## ACCOMPLISHMENTS

- Implemented an onboarding activities dashboard within BambooHR as an integral component of the New Employee Onboarding Program, enhancing clarity and accessibility to essential onboarding tasks for improved understanding and visibility.
- Improved HR processes and standard operating procedures, training modules, communication channels, and reporting mechanisms associated with the Performance Management Cycle.
- Facilitated cross-cultural collaboration opportunities through in-person and virtual team meetings and knowledge-sharing sessions and trainings, enhancing communication skills and fostering a global mindset among employees.
- Conducted global training initiatives to foster a strong sense of belonging and loyalty across our global team, leading to significant improvements in staff retention and organizational success.



## 3 CULTURE

### GOAL

To establish a workplace environment that fosters inclusivity, cultural respect, and recognition of indigenous values, traditions, and perspectives, while integrating the best HR practices to ensure every employee feels valued and respected.

### ACCOMPLISHMENTS

- The Indigenous cultural awareness training is now an integral part of our onboarding process, ensuring that every new employee receives essential education and insights into Indigenous cultures and traditions.
- Successful planning and execution of a comprehensive global training program focused on lateral kindness. This initiative aimed to cultivate a workplace culture rooted in empathy, collaboration, and mutual support among employees across different teams
- Successful organization of our annual holiday luncheon, where every employee felt valued and respected. This event served as a celebration of our diverse workforce and a token of appreciation for the hard work and dedication demonstrated throughout the year.
- Promoted small events (i.e. Employee Appreciation, Birthdays, Staff Professional day) aimed at celebrating incremental achievements and fostering a culture of appreciation. Through these gatherings, employees have been uplifted and motivated by the recognition of their daily efforts, contributing to a more positive and rewarding workplace environment.

## 4 ENGAGING & REWARDING

### GOAL

To engage employees through creating a supportive culture that promotes their financial, physical, and emotional health & well-being, as well as their personal and career development.

### ACCOMPLISHMENTS

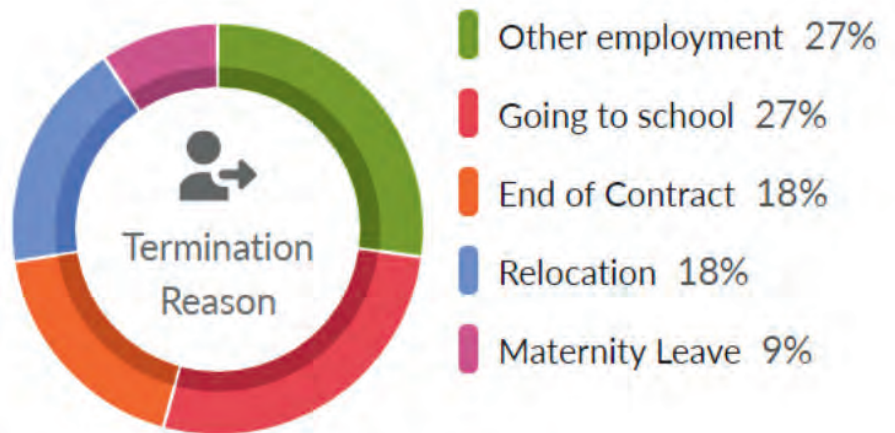
- Initiated a salary review to ensure that our compensation structures remain competitive in the market. This accomplishment not only demonstrates our dedication to fair and competitive compensation but also reinforces our employees' confidence in their value and contributions to the organization.
- Implemented significant improvements to our extended health and benefits program by providing a healthcare spending account for our employees, enabling them to personalize their healthcare coverage and access a wider range of services tailored to their individual needs.
- Increased vacation leave days for all employees, providing them with more time to rest, recharge, and achieve better work-life balance. This enhancement not only promotes employee well-being and morale but also contributes to increased productivity, creativity, and overall job satisfaction within the organization.

## Evolving HR Processes

The evolution of HR processes and resources represents a dynamic journey towards enhancing organizational effectiveness and employee satisfaction. Through ongoing assessment and adaptation, HR continually refines its methodologies, systems, and tools to better serve the evolving needs of the workforce and the broader business landscape. Some highlights include:

- BambooHR has streamlined our human resource management processes, providing a centralized platform for efficient employee data management
- Employment contract reviews have been enhanced to ensure clarity, compliance, and fairness for both the company and its employees
- Standard Operating Procedures (SOPs) for Coordinators have been developed, to bolster coordination efficiency, and to implement algorithms for data-driven decision-making
- A robust onboarding system has been established, facilitating smoother transitions for new hires and fostering early engagement
- Time and attendance tracking systems have been upgraded, enhancing accuracy and accountability in workforce management
- Health and safety programs have been strengthened, prioritizing employee well-being and compliance with regulatory standards
- Regular policy reviews have been implemented, ensuring alignment with evolving legal requirements and organizational needs
- Planning, training, and development initiatives have been restructured to better align with employee career growth and organizational goals, fostering a culture of continuous learning and development
- Hiring processes have significantly improved through BambooHR's streamlined platform, which facilitates efficient candidate tracking, seamless communication, and centralized data management, resulting in quicker and more effective hiring decisions

## 2023 People Highlights: Recruitment and Terminations

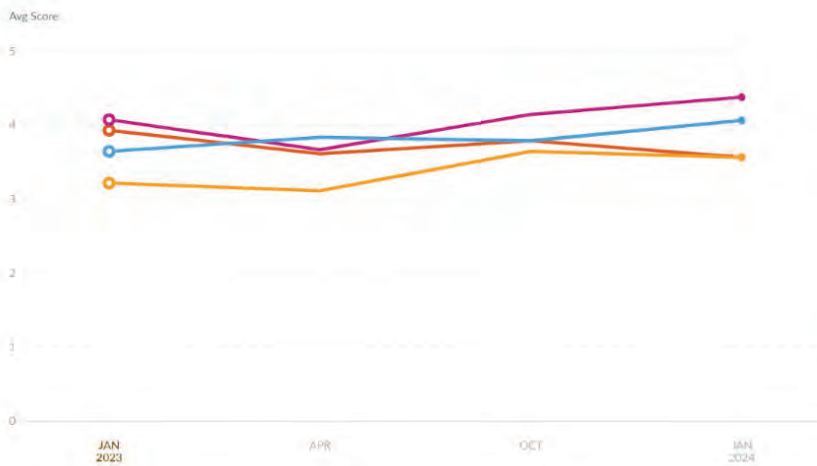


## Employee Wellbeing

As highlighted in our HR Annual Report, the Employee Wellbeing Survey, facilitated through BambooHR, plays a pivotal role in assessing the holistic health and satisfaction levels of our workforce. This survey, which anonymizes data collection, centers around four key pillars: Happiness, Personal Motivators, Company Motivators, and Relationships. The resulting Employee Wellbeing report prioritizes insights garnered directly from our employees, presenting scores within each category. This structured approach allows us to swiftly identify areas for improvement while also acknowledging and celebrating the aspects where our organization excels in meeting our employees' needs.

## New Employee Onboarding Satisfaction Statistics

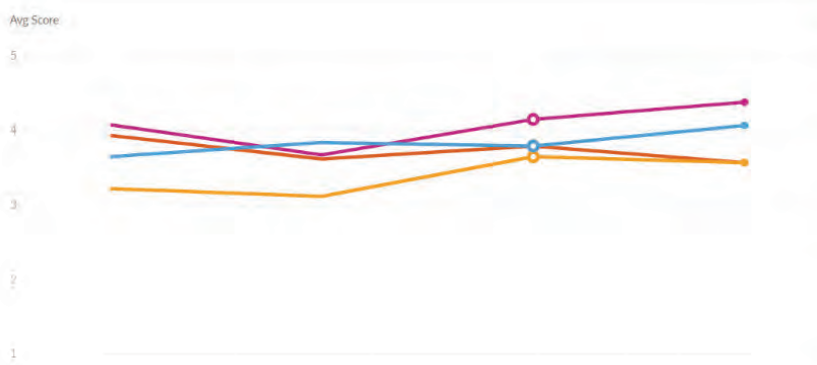
In reviewing the past 2 years progress, We are delighted to report on our New Employee Onboarding Satisfaction Statistics, which serve as a testament to our commitment to fostering a positive workplace environment. Our efforts to enhance the onboarding experience have yielded remarkable results, with an impressive 95% of new hires expressing satisfaction with their onboarding process. This statistic not only reflects the effectiveness of our comprehensive onboarding program but also underscores our dedication to ensuring a smooth transition for new team members. Through personalized training, mentorship opportunities, and robust support systems, we continue to prioritize the integration and success of every individual within our organization. As we move forward, we remain steadfast in our pursuit of excellence, continuously refining our onboarding strategies to meet the evolving needs of our growing workforce. (Please refer to attached statistics).



**January 2023**

Response Rate: 54% 14/26 Employees

- 3.9 Happiness**  
I am enthusiastic about my job
- 4.1 Personal Motivators**  
I have a sense of personal investment in my role
- 3.2 Company Motivators**  
I regularly receive recognition from my manager
- 3.6 Relationships**  
I feel a sense of comradery with my colleagues



**October 2023**

Response Rate: 40% 14/35 Employees

- 3.8 Happiness**  
I am enthusiastic about my job
- 4.1 Personal Motivators**  
I have a sense of personal investment in my role
- 3.6 Company Motivators**  
I feel supported by my supervisor
- 3.8 Relationships**  
I feel a sense of comradery with my colleagues

## HR Spotlight

In this year's HR Annual Report, we are honored to highlight a significant achievement within our organization: the recognition of our HR Coordinator through the HR Spotlight program, a prestigious initiative by Chartered Professionals in Human Resources of BC & Yukon. This esteemed program acknowledges exceptional individuals within the HR community who have demonstrated remarkable contributions, resilience in overcoming challenges, and served as inspirations to others. Our HR Coordinator's inclusion in this select group is a testament of her dedication, professionalism, and outstanding impact within our workplace. We take great pride in celebrating this accomplishment, which further solidifies our commitment to fostering excellence and leadership within our organization.



## Candidate Funnel Statistics

In our HR Annual Report, we examine the Candidate Funnel Statistics to gain valuable insights into our recruitment processes and strategies. Through meticulous tracking and analysis, we scrutinize each stage of the candidate journey, from initial outreach to final hiring decisions. By measuring metrics such as applicant conversion rates, time-to-fill positions, and offer acceptance ratios, we discern patterns and trends that inform our recruitment strategies. These statistics enable us to refine our approach, ensuring efficiency, effectiveness, and ultimately, the attraction and retention of top talent within our organization.



# A MESSAGE FROM THE ADMINISTRATIVE COORDINATOR

*John Callahan*

CINHS has experienced exponential growth in its administrative and operational needs, accompanied by an increase in operational budgets. This growth necessitates the purchase of more office supplies and improvements in safety standards. Over the years, CINHS has introduced panic buttons, CCTV cameras, MOIS, and incorporated high-tech security measures to ensure client data safety and mitigate data breaches. In terms of client safety, wheelchair-accessible bathrooms have been installed at our program space, along with chair lifts to support clients who require mobility assistance.

The task of the Administrative Coordinator (AC) is to support other coordinators by providing workspaces, medical and office supplies, and tech support. While the AC does not have a direct role with clients, supporting other coordinators enables them to provide better client care.

With recent developments and expansions, space has become a recurring issue. Thankfully, coordinators have been able to reach agreements to "loan" out space in their departments to accommodate new staff, both full and part-time. This temporary solution provides us with time to find a more permanent solution. Hopefully, our planned expansion will occur in a timely manner, opening up much more space for our staff to use without needing to borrow offices.



At CINHS we recognize the importance of building and maintaining relationships with community partners and service companies that ensure we are able to operate safely and effectively. We would like to extend our gratitude to each and every service provider who has jumped in to assist our organization over the years. From electrical and plumbing services, to construction, installations, and janitorial services, and many more, without these supports we would not be able to serve our community to the best of our abilities. Tubeh Musi (A big thank you)!

In conclusion, navigating the exponential growth and operational needs at CINHS has been both challenging and rewarding. By prioritizing safety measures, enhancing accessibility, and effectively managing resources, we have been able to support our staff and clients while maintaining operational efficiency. Our Administrative Coordinator is committed to continuing to collaborate with the CINHS team and external partners to ensure that our organization remains well-equipped to meet the needs of our community. With proactive problem-solving and strategic planning, we are confident that we will overcome any challenges that may arise and continue to thrive in our mission to provide quality care and support at CINHS.

# A MESSAGE FROM THE COMMUNITY ENGAGEMENT COORDINATOR

*Emily Christensen-Sweeney*

CINHS incorporates the voices of client experience into the collaborations and partnerships it has with countless community organizations. The goal of community engagement is to ensure that CINHS is represented in community events and at community tables related to the health and wellness of Indigenous peoples, and work centered around equity, trauma, and violence-informed care practices. The team at CINHS has always done an incredible job with their community, and client, engagement. To ensure continuation of these engagements, CINHS developed the role of Client Safety and Community Engagement Coordinator to help streamline processes and build strategies for engagement to inform goals and changes at our centre.

Participating in and hosting community events has allowed CINHS to connect deeper with clients and the community. They also create spaces for advocating for the rights of all persons, particularly Indigenous peoples and persons living close-to or on the streets, and providing platforms for conversations around politically charged topics that are at the heart of the challenges faced by our community. Events such as the Client Summer Barbeque and Client Winter Luncheon, are a few events hosted annually by CINHS that offers a chance for our team to connect with our community in a meaningful way, celebrating our clients and their journeys. The annual Overdose Awareness Fair is another event that is hosted every summer, led by our High Acuity Support Program team, that observes the impact that the toxic drug crisis has had on our community. The event gathers clients, community members and partners together to remember those souls who have gone before us, and continue to grow the conversation around what we can do to end this tragic crisis. Other events we are grateful to have participated in include the Healing Fires, National Indigenous Peoples Day, and the PGNFC Health and Wellness Fair.



These events build relationship between CINHS and organizations that share many similarities and mandates, thereby increasing connections for our mutual clients. These opportunities are vital for the success of our community's health and wellness in that they show the immense spectrum of services in our region and how our common goals can be met when working together.

Many CINHS staff often band together to represent the organization and show their support for other incredible community events and partners. The Annual Gala hosted by Positive Living North can usually expect a group of CINHS members to be in attendance, showing their love and support for a beloved community partner. The annual AIDS Walk also sees multiple CINHS team members joining in to show support for our community members living with HIV, remember folx who have passed before us from AIDS, and to advocate for destigmatizing HIV/AIDS.

CINHS has also committed to ensuring that our presence in the community is being acknowledged by the broader population. CINHS participated in the UNBC and CNC career fairs in early 2024 to broaden our reach when looking to hire for additional roles on our expanding team. It is an honour to be included in these events and to have the opportunity to speak to the greater population about the incredible services we offer and the positive impacts that our organization is having on the healthcare system by advocating for equity.

# THE PRINCE GEORGE COMMUNITY ACTION TEAM

CINHS has had the honour of becoming the lead financial agency and Chair for the Prince George Community Action Team (PGCAT) in July of 2022. The Community Action Teams are funded by the Ministry of Mental Health and Addictions' Overdose Emergency Response Centre to provide communities with the opportunity to come together to address the Unregulated Drug Poisoning Crisis. 15 community partners and organizations have joined the team along with a number of Peers, People with Lived or Living Experience, and community members. The PGCAT facilitates community engagement events, harm reduction trainings, and leads/facilitates conversations with community decision makers to advocate for increased supports, and safe access for folk affected by the toxic drug supply.

The PGCAT has been hard at work building connections across the province, learning what is or is not working well for other communities in regards to decreasing harms and stigma associated with the toxic drug crisis. Areas of note include looking at service gaps, promoting anti-stigma work through engagement sessions, participating in conversations at all levels to inform decision makers of statistics and community needs and more. In 2023 the PGCAT Coordinator presented at the BC Centre for Substance Use (BCCSU) Conference, highlighting the work done by the PGCAT and Community Peers to address harm reduction service gaps through community events and engagement. The team was grateful to have participated at the International Overdose Awareness Day, hosted by Moms Stop the Harm and Positive Living North, that saw



many community members engage in remembering those lost to drug poisonings, and offer supports, and information to increase awareness of the devastation the crisis has put us in. The PGCAT was proud to begin engagement with different community members, leaders, and organizations to look for solutions and offer supports surrounding substance use in our down town core.

### **Goals for the 2024/2025:**

Building and strengthening connections with community partners and businesses in the down town core. We also aim to connect with organizations, companies, and unions associated with the trades industry, engaging and supporting with local harm reduction events, and supporting and promoting peer driven initiatives. There are always topics and events popping up where the team feels their expertise can be utilized, and many opportunities are sure to present themselves as the team grows and continues to develop relationships in the community. The PGCAT is very excited to announce that their funding has been secured for the 2024 year, and the Ministry of Mental Health and Addictions has committed to steady funding of CATs across the province for the next 3 years! CINHS is grateful to be helping to lead this incredible initiative that is bringing community members together to focus on solutions to end the harms caused by the Unregulated Drug Poisoning Crisis.

# PATIENT LIAISON AND FEEDBACK PROCESSES

Central Interior Native Health Society has always been dedicated to listening to the needs of our clients to inform change in our centre. In the past, this feedback has been collected through conversations with clients on an opportunistic basis, usually through side conversations or concerns raised in appointments with team members. Since 2021, CINHS has begun to look for more sustainable routes to streamline client feedback and ensure that there are multiple mediums for clients to share their experiences accessing services at CINHS.

One key piece of this process was to create a separate role, the Patient Liaison. This new role is a secure way to ensure confidentiality and anonymity for clients detailing their experiences at CINHS. This process provides a safe, secure space for clients to share their concerns and provide insights and not have to worry if their information is being heard or read by the wrong person.

Our Client Feedback process offers four unique ways for a client to provide feedback or present a grievance:

1. Feedback Forms – located in multiple areas of the clinic and Natsoolyis' that can be folded and placed in a locked box, to be collected by the Patient Liaison
2. Telephone line – A secure, confidential telephone line directly to the Patient Liaison so that the client does not need to go through the front desk reception, protecting their identity
3. Email – sometimes written word is easier than verbal! CINHS offers a secure and confidential email address for feedback and grievances to be sent directly to the Patient Liaison
4. Just Ask! – The whole CINHS Team is dedicated to ensuring each and every client's voice is heard. If you have a concern and are unsure who to speak to, just ask the front desk or one of your providers who can connect you with the Patient Liaison, who will ensure that your feedback or concerns remain confidential and you can work to build a solution that will work for all!

**CENTRAL INTERIOR NATIVE HEALTH SOCIETY**

## We value your feedback

Please let us know what we did well and what we could do better so we can keep improving our service.

TELL US WHAT YOU THINK

### WAYS YOU CAN GIVE FEEDBACK

- 1. Talk to us**  
Speak to our **Patient Liaison** by phone or in-person  
**Call:** 250.614.2041
- 2. Write to us**  
Let us know of your concern by writing us through email  
**Email:** [client.support@cinhs.org](mailto:client.support@cinhs.org)
- Feedback Form:**  
Complete a feedback form and hand it to one of the team members or drop it in the "suggestion box" located at the front desk.



# CLIENT ENGAGEMENT – INFORMING CHANGE AT CINHS

CINHS has hosted a number of Client Feedback sessions and group interviews over the past 3 years to help inform different projects, research, and the progression of CINHS. These sessions were key in setting the stage for the increased collaboration with clients that we now engage in to inform our practices and growth.

A weekly question board and one-on-one interviews with clients helped to inform the Safe Spaces in Healthcare project (2021) where clients were asked to provide their thoughts on what it means to have a culturally safe environment to access health and wellness services. This session led to conversations around the importance of having input from those who we serve to guide our plans and actions as CINHS strives to increase services needed by our community.

The spring of 2022 presented an opportunity to collaborate with our clients and have a space available for them to inform the CINHS Strategic Plan by sharing their experiences at CINHS and what they would like to see in the future. Six engagement sessions were developed to ask clients their perspectives on topics such as Harm Reduction Services, Service Provision, and Accessibility. These sessions were hosted in our cultural centre, Natsoolyis', and was named No'h Ghuni Be'Yatsoolduk (Voices for Change), by the assistance of Dakelh Elders. Approximately 210 clients of CINHS (~35/session) provided their voices to help CINHS better understand the needs of the community and provided insights on the incredible work our interdisciplinary team does on a daily basis. Community Peers assisted with the facilitation of the sessions to help lower the barrier and create a safe space for clients to engage. The feedback gathered at these sessions has informed many important decisions and projects at CINHS since collection, continues to inform our goals for the future of our centre,



and has led to greater conversations and initiatives to have clients informing changes and processes throughout the organization.

Through the feedback provided, the CINHS team has been dedicated to finding solutions to the gaps identified in these sessions. For each session, here are examples of the questions asked, feedback provided, and actions taken by CINHS to meet the needs identified:

## Session 1: Harm Reduction

- “What is harm reduction?”
- “What has/has not worked for you via harm reduction?”
- “Where have you accessed harm reduction services?”

### Feedback:

- Good understanding of the harm reduction Scope and how CINHS provides those services
- Need for Peer Support workers, housing access, and after-hours services (evenings and weekends)

### Actions taken by CINHS:

- Working towards and succeeded in hiring a Peer supports in HASP, along with weekend Peer outreach
- Participating at community housing tables to advocate for clients and assist with housing placements; increased number of social workers to assist with housing applications
- Beginning to look at funding and ways CINHS may be able to operate after hours (still in progress)

### Session 2: Safer Supply

- “What is Safer Supply and what does it mean to you?”
- “What has/has not worked?”

#### Feedback:

- Safe supply provides a sense of stability and safety from the harms of the unregulated street supply
- Helps to reduce stigma and judgement
- Lack of accessibility to a prescriber
- Lack of options for smoking substances
- Having to access the pharmacy daily

#### Actions taken by CINHS:

- This session was tough, as some concerns would need to be addressed at higher systemic levels. That being said, CINHS is committed to advocating for interventions that promote holistic health and wellness, and as long as the evidence shows support for a safe supply model we will continue to advocate for systemic change and an accessible regulated drug supply

### Session 3: CINHS Service Provision

- “What helps you to access services?”
- “What prevents you from accessing services?”
- “How could we improve?”
- “What services would you like to see here?”

#### Feedback:

- Clients appreciated the warm inviting nature of the CINHS team
- Having all service needs met in one place
- The extra steps taken to ensure folx could attend their appointments (outreach transportation, reminder calls)
- More healthcare providers to help improve wait times
- Increase access to our warming and cooling center during extreme weather scenarios
- Increase transportation
- Increase Peer supports

#### Actions taken by CINHS:

- Additional outreach driver for appointments during the week
- Warming and cooling centers have been running out of our cultural center, Natsoolyis', during extreme weather
- Peer Support was hired in HASP
- Active recruitment and hiring of NPs and Family Physicians to meet the needs of our growing patient panel

### Session 4: Location

- “What do you like or not like about the current location of CINHS?”
- “What would be important to have at a new clinic if we moved?”

#### Feedback:

- Like: Easy access for mobility and folx living close to the streets, central location, close to public transportation
- Don't like: No weather cover if waiting outside, triggering to come down town, far from the hospital/ER
- Would like to see: more bathroom access, a chair lift for Natsoolyis', larger waiting room, hang out space, more cultural connections, a secondary location, increased supports in general

#### Actions taken by CINHS:

- Installed a chair lift for Natsoolyis'
- Actively looking at ways to expand physical space
- Hired additional Social Workers, Wellness Counsellors, RNs, Providers, Support Staff, Outreach Drivers, and Medical Office Assistants

### Session 5: Accessibility

- “Is there anything about the CINHS building that limits/prevents you from coming to appointments?”
- “Other than physical issues, are there other barriers that make CINHS difficult to access?”

#### Feedback:

- Physical space: Stairs, no wheelchair access to Natsoolyis' or upstairs meeting space; Narrow doorways for scooters and wheelchairs; can get crowded, not enough physical space
- Non-physical: Wait times (common at all doctors' offices), limited hours of operation, limited mental health supports, need more spiritual support, home visits would help, more flexibility if someone is late

#### Actions taken by CINHS:

- Wheelchair access to Natsoolyis' (less need to access the upstairs meeting space)
- Increased mental health supports to reduce wait times and provide more options
- Increased cultural and spiritual programming in Natsoolyis'
- CINHS is actively looking at ways to increase service hours, and other forms of facilitating care

## Session 6: Cultural Safety

- “Do you feel respected at CINHS? What do staff do to make you feel respected?”
- “If no, what can be done to ensure you feel respected?”
- “How could CINHS improve Indigenous-Specific care?”

### Feedback:

- Staff are polite, kind, encouraging, resourceful/helpful, non-judgmental, caring, and create a safe/comfortable space
- “If no what can be done?” – consider developmental diagnosis/brain injuries when communicating, give options for care/treatment, ensure privacy i.e., OAT clinic, some folx have their convos right in the open
- How to improve Indigenous-Specific care? – don't repeat services that can be accessed elsewhere; Elders and Indigenous liaisons to speak with in the waiting room; increase cultural programming and land-based practices; Indigenous counsellors using indigenous practices

### Actions taken by CINHS:

- Reviewed and reformed the orientation package for new staff, increased training and refreshers (trauma informed care, de-escalation, cultural safety, and more!) to improve the standards of care and promote understanding and clarity between staff and clients
- Increased Cultural programming in Natsoolyis', using the Two-Eyed Seeing method to bridge Traditional medicines and ways of being with Western medicine and practices – using new, innovative ways of connecting clients with their healthcare and cultural needs
- Promoting the need for client centered, trauma and equity informed care to ensure our clients are the leads in their health journey

While there are still many goals to achieve, CINHS has always held the voices of their clients and community at the center of care they provide. Without the feedback and insights provided by the people whom we serve, we would not be doing our community justice. We at CINHS extend our immense gratitude to our clients and community members for helping us to provide a safe space to access care, and for keeping us well informed of how we are providing services. TubeH Musi!

### Our Goal for 2024/2025:

To increase the feedback opportunities through promotion of our Client Feedback process. Ideas to improve feedback procedures include monthly question boards in our waiting area, and to create a consistent system of sharing feedback to our whole team to help inform their practice, and to our clients to ensure that there is transparency in how client feedback is used to improve care for our community.

# A MESSAGE FROM THE RESEARCH AND DEVELOPMENT COORDINATOR

*Oliveth Orjiocha*

Central Interior Native Health Society (CINHS) remains committed to supporting research initiatives aimed at enhancing community healthcare delivery services in Northern British Columbia and across Canada. Through collaboration, innovation, and dedication, CINHS continues to play a pivotal role in shaping the landscape of healthcare and ensuring that culturally safe, trauma-informed and equity-oriented healthcare are delivered to in our community including at risk parents, precariously housed and individuals impacted by colonialism, HIV/HCV and substance use challenges.

**Research Initiatives:** Throughout the year, CINHS has actively supported various research initiatives, focusing on key areas aimed at improving primary health care and promoting wrap around services to the most vulnerable groups. These initiatives have included but are not limited to research work supported by the various teams of CINHS:

## *Decolonizing Frontline Healthcare in a Rural-Urban Indigenous Health Clinic Research - 2023*

This year, the CINHS Clinical Coordinator (Tammy Rogers) embarked on a collaborative journey with our Client Safety & Community Engagement Coordinator (Emily Christensen-Sweeney) and Research & Development Coordinator (Oliveth Orjiocha), to advance her Master of Arts research on "Decolonizing Frontline Healthcare in a Rural-Urban Indigenous Health Clinic." The study delved into ways the Central Interior Native Health Society (CINHS) could adapt to better serve its clients, with a focus on decolonizing clinic services and health care practices.



Key inquiries include evaluating CINHS's responsiveness to client needs, envisioning an ideal future of responsive and decolonized services, identifying necessary actions and commitments, and determining required resources and supports. The study utilized Photovoice, focus group sharing circles, one-on-one interviews and clients' feedback surveys as primary data collection methods.

The research underscored the importance of collaborative care in dismantling the colonial underpinning of the health care system. It emphasized the critical role of integrating Indigenous wisdom and knowledge for a decolonized health care system. It highlights the importance of utilizing cultural wellness and balance, and integrating Indigenous perspectives in health care practice and leadership to address provider burnout. Furthermore, the study calls for education, institutional support, and systemic transformation to bolster frontline providers. The research process was guided by Indigenous Elders and Knowledge Holders, ensuring cultural sensitivity and relevance.

## *Practicum Students Project Report - 2023*

The CINHS TEA team offers hands-on training to social work practicum students, guiding them in developing and executing research initiatives aimed at addressing and alleviating social determinants of health. This year, the team collaborated with Mark Connelly, an MSW student at UNBC, to finalize his practicum project report titled "Healthcare Practices with Indigenous Populations at Central Interior Native Health Society: Insights on Trauma-Informed Practices, Neurobiology, Attachment Theory, and Adverse Childhood Experiences."

The study delves into how service providers integrate trauma-informed practices in client care. The project report examines the healthcare experiences of Indigenous individuals living on or close to the streets, analyzing their access to healthcare and the trauma-informed practices employed by the interprofessional team at CINHS. It highlights social determinants of health, systemic racism, and the importance of self-determination in healthcare practices for CINHS clientele.

### *CINHS High Acuity Support Program (HASP) Research Projects and Initiatives - 2023*

HASP has a long history of participating in research centered around HIV/HCV, mental health, and substance use. The team has partnered with agencies across the province and country to ensure the voices of Indigenous and non-Indigenous people living with HIV/HCV are represented in larger scale research. Some of the research initiatives supported by the team in 2023 include:

- **Making it Work:** From 2020 to 2024, the CINHS' High Acuity Support Program (HASP) collaborated with several organizations, including PAN, CIHR, University of Victoria, the Canadian Aboriginal AIDS Network (CAAN), Research Nexus, and the AHA Centre, to examine Indigenous community-based programs and services that provide case management services and support for folks living with HIV/HCV, mental health and substance use challenges. The study explores the success factors of these programs, and how service providers are adopting a two-eyed approach to healthcare and its impact on ensuring optimal health and wellness outcomes for their clients. Eleven CINHS team members participated in the community conversations and surveys, while 25 CINHS clients completed surveys assisted by peer researchers. A realist evaluation methodology was employed to analyze the collected data, which encompassed input from various locations including Prince George, Smithers, Victoria, and Vancouver. The research findings were presented at CAHR, and a paper summarizing the outcomes was published in the Journal of Indigenous Health Research
- **Gender-Based Impacts on Involuntary Care:** In August/September 2023 HASP worked with Health Justice, providing participants who had experienced involuntary admission to care facilities, with connection to a peer research associate to discuss the impacts of this involuntary committal. This project was funded by Women and Gender Equality Canada, and looked to better understand and prevent future trauma as a result of involuntary committal. The participants were able to share their experiences, as well as participate further in future development of gold standards of care moving forward
- **Trauma and Violence Aware Care for Women Living With HIV:** This research was led by the University of Toronto, University of British Columbia, and the Women and Children's Hospital. The study connected Peer researchers to women (trans and non-binary inclusive) living with HIV who have experienced trauma and violence. HASP provided 17 women a space and the support to participate in this research, ensuring northern Indigenous women were represented in this research project
- **BCC3:** Our partnership with the BCC3 study, has been a longstanding one. HASP coordinator (Jennifer Hoy) has sat on their Community Advisory Board for almost 3 years, helping shape the expansion of research into the north through study design, recruitment, retention, and knowledge translation. This research was quite intensive, comparing the aging process for women living with HIV to those not living with HIV. This research used tissue samples, bloodwork, swabs and extensive peer led interviews to capture a snapshot of people's health and wellness. We had 25 women participate in the research (Trans and non-binary inclusive). Of those, 18 participated in an evening knowledge translation event, and 2 women plus a HASP staff member were able to attend a knowledge translation retreat at Loon Lake. HASP, UBC, BC women's Hospital, are currently working together on extending funding to continue this valuable research

- **Dry Blood Spot Testing (DBST) Case Review:** HASP was fortunate enough to be able to have new services of DBST testing for HIV/HCV/syphilis evaluated alongside Northern Health (NH) and the BC Centre for Disease Control (BCCDC), to determine optimal usage for DBST, and how best to roll out larger scale testing models. This smaller scale research showed how effective this testing model is at bringing low barrier STBBI testing to vulnerable populations who struggle to engage in health care

### Future project by the HASP team

- **OSAC- Moving into 2024:** The team is excited to Pilot the Organization Stigma Assessment Cycle (OSAC), currently in development to support CBO's and health care agencies in assessing where stigma exists in service provision. Detailed analysis of client and staff surveys guide agencies to specific areas to work on, and the tools to do the work in destigmatizing service delivery. This will continue into the first 3 quarters of 2024
- **CIHR Clinical Trials Network:** The team also have plans to continue its collaboration with the Canadian Trials Network (CTN). The HASP team also provided a commitment to supporting ongoing research around women and HIV in the north, with a focus on Indigenous and remote women
- **Implementing a Community-Led, Trauma-Informed Women-Centered HIV Care Pocketbook Intervention in Three Canadian Provinces-** HASP is collaborating with Women's College Research Institute to join the National Women's Health Research Initiative to develop a tool to improve clinical outcomes, fostering a more equitable, culturally safe, and accessible healthcare system across Canada

### Impact and Outcomes

The research supported by CINHS has yielded significant impact and outcomes, contributing to advancements in primary care delivery services in Northern BC and beyond. Some notable achievements include:

- Increased access to healthcare services through the implementation of trauma-informed and culturally safe solutions
- Improved management of chronic diseases (including HIV/HCV), leading to better health outcomes and reduced healthcare costs
- Enhanced cultural competence among healthcare providers, resulting in improved health outcomes for Indigenous populations
- Implementation of integrated care models, leading to improved coordination and collaboration among healthcare providers and better patient experiences

In conclusion, CINHS is proud of the progress made in the past year and is excited about the opportunities that lie ahead. Looking ahead, CINHS remains committed to its mission of supporting research initiatives that shape primary care delivery services. As we move forward, CINHS will continue to prioritize collaboration, innovation, and community engagement research initiatives to address the evolving healthcare needs of our community.



## PAST TEAM MEMBERS AND STUDENT TESTIMONIES

**Jane Inyallie, Wellness Counselor** (January 2007 – April 2017)

I first heard of CINHS when I was working in social services in Vanderhoof in 2004. It was described as a primary clinic; I didn't know what that was and called a few colleagues to see what they thought of the clinic and how they worked. They said CINHS provided excellent medical and counselling services to people who didn't have medical services in the down town core of Prince George. My partner and I moved to Prince George in 2005. I found work in the community and with the thought of applying there if the counsellor position became vacant, which it did in late 2006, I applied and started working in January 2007.

CINHS's goal has always been to meet the needs of people where they are at; by using the multi-disciplinary team approach to deliver health care. This approach is effective in offering a variety of services necessary for healing the whole body. Cultural knowledge, traditional practices and medicines, ceremonies, and language are used with/by all staff and patients.

I used the medicine wheel format as a template for my notes on the work I did with individuals and groups. We used a small white board with different colored markers to write down information shared by individuals and/or groups.



The board often ended up looking like a piece of art; I would be asked to take a picture so it could be studied and possibly added on to later. Wednesday mornings were dedicated to a staff meeting, starting with a ceremony, with everyone sitting in a circle, (approximately 25 people in various disciplines). It was a way of keeping everyone informed of what was happening, what was a priority, reporting from departments and general clinic news. The meeting was a grounding and a coming together to make sure everyone was okay and finding solutions to various issues. In the beginning I was quite nervous to speak in front of a large group but later loved it. We had team building, educational sessions, strategic planning sessions, and cultural training. Each week we all brought something for a potluck lunch which was a great way to share a meal in a more relaxed atmosphere.

We all learned from each other, and we all grew in the process.

Mussi Cho.  
Jane Inyallie

**Kejaja Riruako, B.A., Mental Health & Addictions Clinician**

I am immensely grateful to CINHS for granting me the opportunity to provide counseling services to vulnerable communities. This experience has been incredibly fulfilling, allowing me to deepen my understanding of Indigenous health practices and greatly enhancing my professional skills.

I want to extend my heartfelt appreciation to my colleagues at CINHS for their unwavering support, collaboration, and dedication during my time here. It has been a pleasure working alongside such a talented and committed team, and I will sincerely miss our collaborations. I eagerly look forward to future opportunities and the chance for our paths to cross again.

Thank you, CINHS, for this enriching experience and for your continued dedication to serving our communities.

Tubeh Snachialya. Okunene Okuhepa. Blessings! Salute!"

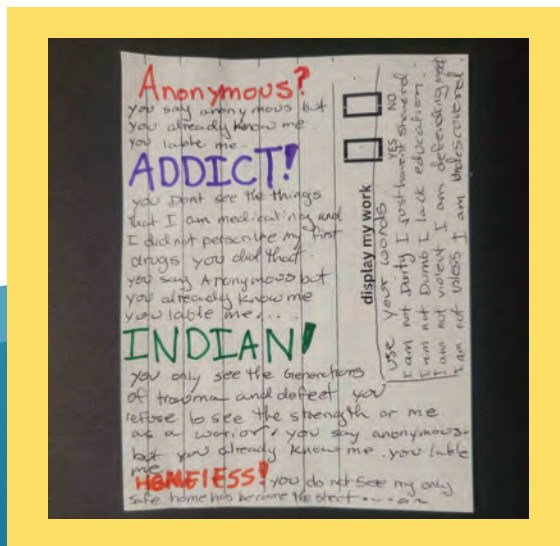
Kejaja Riruako, B.A.  
Mental Health & Addictions Clinician  
Urgent & Primary Care Centre - IPT-7



**Violet, RN Practicum Student**

My name is Violet, I am a 4th year nursing student. I was fortunate to have my last focused clinical placement at CINHS. I am and have always been passionate about Indigenous health equity as an Indigenous woman. When entering this clinical placement, I had no preconceived ideals of how the clinic was operated. From my first moment at CINHS, I was met with inclusion and respect. I found through my time with CINHS that the whole team from services to management and all in-between believes in the core values of Indigenous health. I value the lessons of two-eyed seeing and upstream approaches to care that the staff practice in their care models. The patient interaction and feedback that I received about the care of CINHS were dominated by gratitude and want for expansion of services provided by CINHS. As a student it is difficult for me to build trust with clients in a clinical setting as there is limited time to do so, however, CINHS placed a focus on relational care, and this shift in focus allowed me to build a better-trusting care relationship with clients. Living in a location with such a diverse Indigenous population I feel that this extraordinary experience is invaluable to my future nursing career. I hope one day to return to CINHS in a professional capacity.

Violet, RN Practicum Student





# 2023 HIGHLIGHTS



Natsoolyis' Drum Making



Men's Wellness Group



Medicine Gathering



Natsoolyis' Drum Making



Natsoolyis' Drumming Circle



Natsoolyis' Drumming Circle



Berry Picking



Blanket wrapping during CINHS Letting Go Ceremony



Medicine Gathering



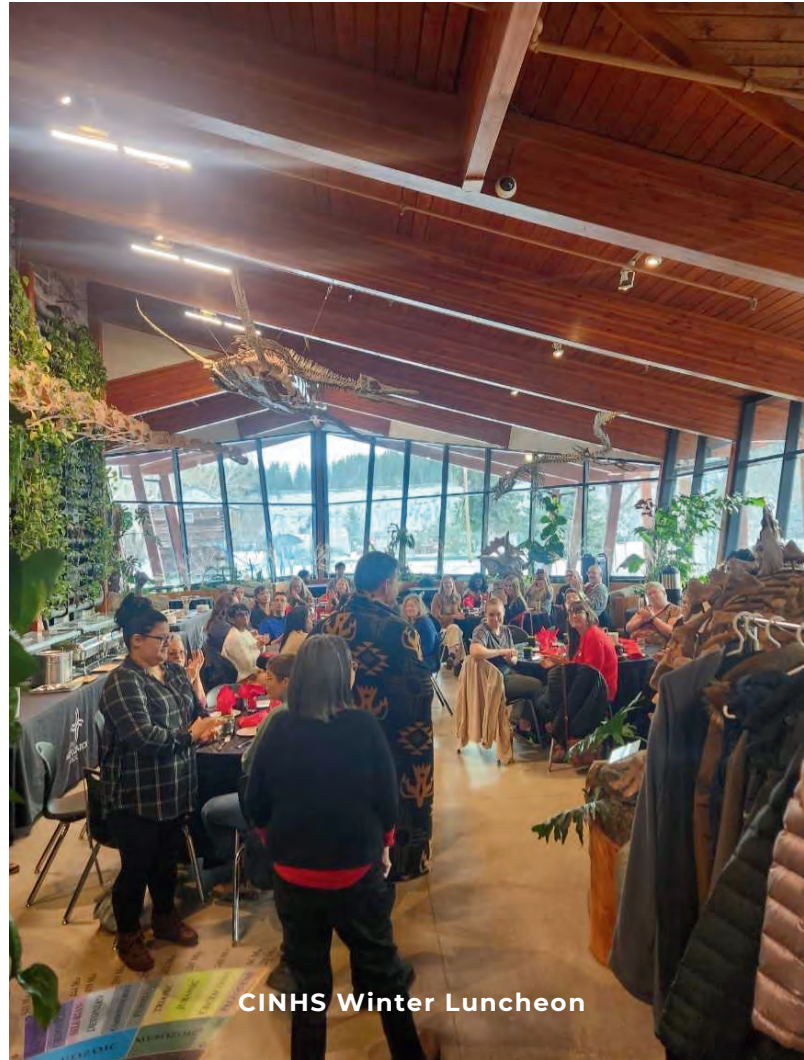
Community Education and Advocacy for Housing



CINHS Clients Barbeque



CINHS Outdoor Team Planning Activities



CINHS Winter Luncheon



CINHS Clients Barbeque



CINHS Outdoor Team Planning Activities



CINHS Indoor Team Planning Activities

# OUR TEAM



Blanket wrapping during CINHS' Letting Go Ceremony



National Day for Truth and Reconciliation - Every Child Matters



CENTRAL INTERIOR  
NATIVE HEALTH SOCIETY

# TUBEH SNACHAILYA

We would like to extend our gratitude to our funders and community partners for their financial support and resources which are instrumental in the work we do.

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- Ministry of Health
- Northern Health Authority
- Provincial Health Services Authority
- British Columbia Association of Community Health Centres (BCACHC)
- Indigenous Service Canada
- Community Action Initiative
- Prince George Community Foundation
- Prince George Nechako Aboriginal Employment & Training Association (PGNAETA)- Reaching Home
- Canadian Association of Community Health Centres
- Telus Communications



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