

D) Strategic Directions Workshop (Part I)

Focus Question: “How can we innovatively move towards our Vision (actions we can take)?”

Health Human Resource Meeting

February 24 & 25, 2005 Winnipeg, MB

Taking Stock Of Where We Are And Building On Successes	Respecting, Reaffirming, And Protecting Traditional Knowledge	Developing Cultural Competency	An Education Strategy That Focuses On Health Human Resources
<p>Build on what is already being done</p> <p>Define our own successes</p> <p>Build in milestones of successes</p> <p>We are the “Experts”</p>	<p>Big Cultural School (Teach the Teachers)</p> <p>Utilize traditional medicine & Elders (Life skills = formal; life lessons = Education)</p> <p>Canadian Currency (Native Faces, Not Animals)</p> <p>First Nations Hudson Bay Co. – Exposure, Not locked away – Museum – History / Artefacts</p> <p>Make Room for Traditional Healers / People</p> <p>Take Responsibility: Individually and collectively</p> <p>Healed Communities (Provincial / National Strategy)</p> <p>Acknowledge Traditional Medicines as an Alternative</p> <p>Seek Advice / Direction from our Medicine People</p> <p>Respect for Aboriginal Protocol</p>	<p>Aboriginal Awareness Training for Everyone in Health Care</p> <p>Educate Staff and Key Stakeholders</p> <p>Expect Reciprocity in partnerships</p> <p>Skills Training for Addressing Racism in the Work place (Health)</p> <p>Focus on Cultural Beliefs to Systems</p> <p>Educate on Institutional Racism</p> <p>Create a Positive, Respectful Work Environments</p> <p>Patient Feedback process to enhance quality of service to community</p> <p>Promote Corporate Culture that embraces cultural safety</p> <p>Promote Environments that embrace “cultural safety” throughout the lifespan</p> <p>Aboriginal Representative of Boards of Regional Health /Authorities</p>	<p>Develop Materials to promote non-traditional health careers to youth</p> <p>Secondary school health career exposure</p> <p>Develop Career Planning, re: Early Years</p> <p>2 week Summer Immersion at U of M</p> <p>Develop Unique Campaign – Communication Strategy</p> <p>Adjust Communication Strategy to the Audience</p> <p>Get Families Involved in Transition to University</p> <p>Break the Status Quo!</p> <p>Develop Adult Education Programs that promote Healthy Living</p> <p>Develop our own Health Resources</p> <p>Relevance to Region i.e., Various RHA’s</p>

D) Strategic Directions Workshop (Part 2)

Focus Question: “How can we innovatively move towards our Vision (actions we can take)?”

Health Human Resource Meeting

February 24 & 25, 2005 Winnipeg, MB

Designing Quality Assurance Tools to Enhance Retention & Recruitment (Multi-Tiered)	A New Education System that reflects First Nation World Views	Ensuring First Nation HHR Strategy is entrenched and supported by leadership	Increasing support mechanisms that enhance transition to post-secondary environments	Commitment to on-going Strategic Planning
<p>Defines Support Services</p> <p>Support System for Aboriginal professionals</p> <p>Provide mentorships to achieve success with education and careers</p> <p>Inventory of existing resources (what will still be there in 2020)</p> <p>Quality services provided vs. quantity (Services to patients)</p> <p>Change screening tools that keep Aboriginal people out</p>	<p>Revise Education System</p> <p>Define First Nation Health Requirements</p> <p>Align Education to meet needs</p> <p>Pool \$'s to support Education</p> <p>Extensive promotion of careers in health (the big picture)</p> <p>Rework Curriculum to include Aboriginal Health perspective</p> <p>Give credit for First Nation language retention</p> <p>Mandatory Health & Wellness: K-12 Talk, walk, promote wellness at home, work, play</p> <p>Establish partnerships with local educational institutions</p> <p>Pool \$'s to deliver health programs</p>	<p>Ensure HHR stays on the agenda; Ensure government and powers-that-be receive this information and act on it; Policy that provides clear directive; Willingness and commitment from Gov't's to dept's (Fed/Prov/FN's); Build on existing partnerships, services, etc.; Create FN Health Delivery Agency (Cross Jurisdictional); Better housing policy for healthy communities; Political “buy-in”; Create buy-in (general public, FN public, Can. Government, FN Government);</p> <p>Mayor of Winnipeg: Aboriginal candidates for every election (A role model more than AMC, SCO, MKO);</p> <p>Promote and “sell” ideas (vision);</p> <p>Create momentum i.e., action on RCAP Have a follow-up forum – action plan</p> <p>Support Exchanges between leader and trailblazers</p> <p>Prioritize representative workforce planning</p>	<p>Educated, qualified people (Prov/National Strategies)</p> <p>Learn education procedure, teach children</p> <p>A student program exchange FN health interested individual</p> <p>Teach our young people about our background (history)</p>	<p>Give ourselves adequate time to reach our vision</p> <p>Develop long-term thinking models</p> <p>Develop short and long term goals</p> <p>Develop implementation strategies for our goals</p> <p>Develop SWOT Analysis of our Vision (Threats, Opportunities, Weaknesses, Strengths)</p> <p>Develop timelines for our goals</p> <p>Develop and evaluation process</p>

D) Strategic Directions Workshop (Part 3)

Focus Question: “How can we innovatively move towards our Vision (actions we can take)?”

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Policy Development	Curriculum Development & Implementation (K-S4)	Database Development	Increase Funding	Develop and Implement a First Nation HR Strategy	Integrate Traditional Medicine	Community Supporting members Training
<p>Change policies for funding health, education, social programs (INAC, Health Canada)</p> <p>Tripartite Commitment to develop and implement HR Strategies</p>	<p>Fast Track First Nation Curriculum Development – History, Culture</p> <p>Clear Education Standards (Eliminate Social Promotion)</p> <p>Career Awareness Counselling (Own Role Model Recruiter)</p> <p>Clarity on First Nation Education from First Nation perspective</p> <p>Culturally appropriate science, math programs (secondary & post secondary)</p> <p>Quality Science Programs & Instructors</p>	<p>Tripartite establishment of a HR First Nation database – First Nation equal partners</p> <p>Develop HHR database</p>	<p>Need influx of \$’s to change current system</p> <p>Increase funding living allowance</p> <p>Greater support for programs demonstrated successful e.g., Yellowquill, UM ACCESS</p> <p>Flexible avenues for post-secondary funding access</p> <p>Training for physiotherapist occupational Therapist to actually happen</p>	<p>HHR Management, Recruitment, and Retention</p> <p>Equitable salaries for First Nation Health Providers regardless of location</p>	<p>Recognition, acceptance, and integration of Traditional ways & medicine</p> <p>First Nation patents of traditional medicine</p> <p>Create partnerships</p> <p>Multi-sector partnerships for healthy communities</p> <p>QOL indicators & Holistic Health Measures</p> <p>Implementation of RCAP</p> <p>First Nation leaders providing direction</p> <p>Political leaders make clear statement regarding jurisdiction</p> <p>Leadership awareness support</p> <p>Resolution and closure of jurisdictional issues; Own First Nation Health Authorities; Create a Manitoba First Nations Health Council</p>	<p>Training closer to home</p> <p>Define expectations for commitments back to community</p>

