

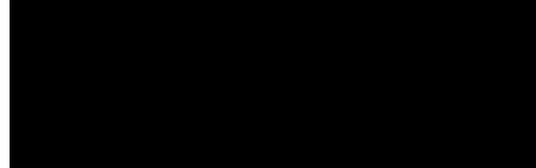
September 18, 1977

Recommendations made regarding future health care delivery to Northern Labrador:

1. Active involvement of the Government of Canada and the Province of Newfoundland and Labrador is requested for the administration and funding of the health services for the communities of Irrelevant Davis Inlet, Irrelevant. The Federal presence should involve as many departments of the Government as seems necessary, primarily, National Health and Welfare, Medical-Services Branch, and the Department of Northern and Indian Affairs. The Provincial Government's presence would primarily involve the Department of Health and Memorial University, with the present contracted health services provider, the International Grenfell Association, being viewed as an employee of the Provincial Government.

The administrative cooperation of the Federal and Provincial Governments would be instituted as rapidly as possible, but would itself be viewed as an interim measure, functioning executively only until a Regional Health Board was prepared to undertake this function.

2. Financial and administrative input is requested of the Government of Canada and the Province of Newfoundland and Labrador regarding rapid provision of needed community services and facilities, without which health and health-care-delivery cannot measurably improve. These services must include provision of portable water, sewage and garbage disposal, adequate housing, improved communication and transportation systems, as well as professional expertise in related areas. It is assumed that the Federal experience in other areas of the Canadian north will be utilized. It is also assumed that the extent of the financial input needed for such overdue facilities will necessitate multi-departmental involvement and probable cabinet acceptance of these priorities. Any proposed facilities, services and staff must be scrutinized and approved by local councils prior to their implementation.
3. Federal and Provincial agreement should be reached to jointly provide and/or support the following:
 - a) Those communities requesting health council formation and/or a Health Representative in town/band councils to receive the necessary advice and funding.
 - b) Specific increased emphasis, including necessary funding and professional access, be placed on the problem areas of nutrition, drug abuse, respiratory and middle-ear disease, and social problems, along with other standard Public Health programs.

 
 c) Provision and relevance of services to "out-post" groups be negotiated.

d) A Community Health Representative (CHR) course be held in Irrelevant.
Irrelevant, open to all Labrador coastal communities, in 1978.

e) Provision of a medical translator service be provided to all coastal communities having more than 10% of the population speaking Naskapi/Montagnais or Inuktitut as the primary language. This would include funding of an on-call rota for night and home visits.

f) Dental Therapists from the coastal communities be recruited and sponsored to attend Fort Smith training program as soon as possible. This might also involve provincial legislative amendments to encourage use of the Therapists on the coast.

g) Assurance be given of increased support of the Alcohol Rehabilitation Program of Davis Inlet and Irrelevant, and of other communities who wish to organize similar programs.

h) A Public Health Clinic to be provided for Irrelevant.
Irrelevant.

i) Nursing stations for Irrelevant be provided as soon as possible, with an absolute maximum time allotment of two years. In the interval an alternating and/or resident RN service should be negotiated.

j) The present and proposed nursing stations should be upgraded to meet federal nursing station standards.

k) Additional staff be provided for these nursing stations, with an emphasis on public health programs.

l) An attempt be made to encourage the travelling doctor and dentist to be based in Nain, with necessary alterations in the facilities there.

m) Increased consultant visits from St. Anthony and St. John's be made to nursing stations and secondary-care facilities.

n) Medically authorized no-charge-to-user transportation to both secondary and tertiary-care centres in the province must be guaranteed. This must not be dependent on financial capability or cultural background.

- > b) A rational and coordinated plan must be developed regarding the future of health care delivery in Labrador. This evolving plan must be led by the Labrador people and should utilize the advice of Federal and Provincial specialists. One of the immediate priorities of such a planning committee would be to outline the future of the [irrelevant] hospitals, and to plan needed upgrading of secondary-care facilities at one or both of these hospitals.

4. Federal/Provincial funding of an annual and independent medical audit should occur, with the proposed Regional Health Board having the right to recommend the appointment of such an auditor, and to approve or veto the appointment of a government-selected auditor.
5. Federal/Provincial provision of bursaries to health-care training programs for Indian/Inuit and Settler candidates should be provided and advertized. These bursaries should be numerous, substantial and flexible. Special arrangements should be made to assure the success of Settler/Inuit/Indian applicants. A Labrador Department of Memorial University should be established, with specific emphasis on the cultural realities and needs of the Labrador people.
6. It is recommended that an Interim Advisory Health Board be formed, consisting of representatives from [irrelevant], Davis Inlet, [irrelevant], [irrelevant], with a mandate to become sufficiently knowledgeable in health matters that it will be capable and willing to become an Executive Regional Health Board for Northern Labrador by January 1, 1980. This Executive Board would be responsible for contracting policy, for budgets and administration of health services (and/or hiring individuals or groups to provide these services), including recruiting and hiring of professional and non-professional services. It is felt that the interim period until 1980, during which time the Regional Health Board would be an advisory body to the joint administrative services of the Provincial and Federal Governments, would provide adequate time to become familiar with the obligations and potential of such a Board. This assumes evolution of control of funding of the health service, and emphasizes the need for regional control of regional services. It also assumes the necessity of continuing participation by Government in those areas in which the Regional Health Board will not have executive control, such as budgetary allotments and setting of medical standards.

It is recommended, as a necessary part of the proposed Regional Health Board, that individual communities either form a Health Council or have the existing town/band councils take over this role, ultimately to be primarily responsible for the health service in that community, and to provide representatives for the Regional Board.

The above proposals include [irrele], Davis Inlet, [irrelevant] [irrelevant] as primary-care centres, with [irrelevant] [irrelevant] as secondary-care centres, and St. Anthony and St. John's as tertiary-care centres. Memorial University and International Grenfell Association are both felt to represent the Provincial Government of Newfoundland and Labrador.

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