ISLAND health

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NEW PROGRAM SUPPORTS CAREGIVERS

REDUCING GROCERY COSTS

COWICHAN HOSPICE HELPS PEOPLE ON END OF LIFE JOURNEY

Free Publication
Summer 2023 Issue
island health

CONTRIBUTORS

Audrey Larson feels honoured to live, work and learn in Coast Salish territory. As a communications and engagement advisor, she enjoys getting to know people in the communities in which she works. Audrey believes wholeheartedly in the power of collective impact and strives to support community connections that create better health for all.

Shawna Cadieux is an Island Health communications advisor with a background in broadcast journalism and communications. She and her family – her husband, two young adult children and spoiled Goldendoodle – are honoured to live, work and play on the traditional and unceded territory of the Cowichan Tribes people.

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Glenn Drexhage is an Island Health communications advisor who has worked extensively in print journalism, with bylines in numerous newspapers and magazines, and his communications experience includes post-secondary education. He's grateful to live in Nanaimo with his wife, seven-year-old son and two mischievous pups.

Lyz Gilgunn is an overdose response coordinator who strives to inspire people to be the healthiest versions of themselves. Lyz loves leading health promotion projects and nerding out on behavioural science. In her spare time, you can find Lyz outside or creatively destroying things in the kitchen.

Annie Moore works in the Research Department to enhance education, engagement and funding opportunities across the region. She works closely with researchers and colleagues to share stories about initiatives that can improve health and care where we live.

Cover photo: Heather Robb, patient at Cowichan Hospice. Heather passed away recently; she shared her experiences as both a volunteer and patient at Cowichan Hospice on page 13.

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With great respect and humility, Island Health acknowledges the Coast Salish, Nuu-Chah-Nulth and Kwakwaka'wkaw cultural families; whose relationship with these lands remains unbroken; whose homelands Island Health occupies. In making this acknowledgement, we commit to walk softly on this land and work to uphold self determination of the health of Indigenous peoples.

Island Health magazine is an award-winning free publication, produced in-house by Island Health's Communications and Partnerships Department. **EDITOR** Moira McLean. **PRINT** Mitchell Press.

We welcome all feedback about *Island Health* magazine at: magazine@islandhealth.ca.

INSPIRATIONAL ISLAND HEALTH EMPLOYEES ON THE ROAD TO RECOVERY

A pair of Cowichan-based Island Health employees are cycling across Canada this summer to raise funds and awareness about mental health, homelessness, substance use and brain injuries and how these issues are so connected.

Wayne Bourgeois and Ron Pachet are embarking on an inspiring journey—a cross-Canada cycling adventure they call *The Road to Recovery*.

"Our mission is to raise awareness and funds for the interconnected issues of mental health, homelessness, substance use, and brain injury, which affect millions of Canadians every day," says Bourgeois. "These challenges are often intertwined and addressing one can have a ripple effect on the others. We have chosen to donate all proceeds from this campaign to the Cowichan Brain Injury Society, an amazing organization in Duncan that offers support, education, and advocacy for individuals affected by brain injuries and their families."

The cause is close to their hearts—both work in Mental Health Substance Use in the Cowichan Valley.

Bourgeois and Pachet will cycle from the Atlantic to the Pacific coast, covering over 7,000 kilometres and connecting with communities of all sizes. Along the way, they'll share powerful stories of resilience, strength, and hope, collaborate with local organizations, and raise awareness about the complex challenges those grappling with mental health, homelessness, substance use, and brain injuries face.

The pair will begin their ride home from Newfoundland on June 28 with the goal to be back on Vancouver Island by the end of September.

SCAN HERE TO FOLLOW THEIR JOURNEY AND SUPPORT THEIR EFFORTS AT THIS GO FUND ME PAGE.

Ron Pachet (left) and Wayne Bourgeois (right).

MESSAGE FROM THE PRESIDENT & CEO

As the warmth of summer arrives, like many of you, I look forward to some time to relax and recharge with my family. Summer can be a time to slow down and reflect on what's been achieved so far this year and what lies ahead. I'm also mindful that the healthcare system doesn't have the opportunity to slow down. We need to continue to support the needs of our patients and communities while supporting those who provide care.

In this issue, you'll learn more about work underway in Cowichan communities. In partnership with community partners, Island Health has developed a comprehensive Cowichan Health & Care Plan designed to help people thrive, maintain their health, and avoid unplanned hospital stays.

The Cowichan Health & Care Plan is a whole community approach to planning and delivering health and care in Cowichan Valley communities. It establishes a roadmap for strengthening and integrating health services to address gaps and remove barriers to achieving better health. Ultimately, we expect to prevent 7,300 inpatient days at the hospital by 2025 and 12,000 by 2035.

The plan was conceived as part of the replacement of Cowichan District Hospital. Construction on the new 204-bed facility is in full swing and is anticipated to be ready for patient care in 2027. From hospital care to primary and community health solutions designed to meet the region's current and future health needs, Island Health is committed to building a fully integrated, seamless community of care in Cowichan.

I'm incredibly proud of the recognition this work has garnered. In May 2022, the Short Term Enablement and Planning Suites (STEPS) program received national recognition with the prestigious 3M Health Care Quality Team Award from the Canadian College of Health Leaders. STEPS is a partnership between Duncan Community Health Services, Island Health long-term care, and The Meadows, a privately owned assisted living home.

Ensuring culturally safe and appropriate care is crucial to the new hospital's design. Island Health's engagement with Indigenous communities led to eight recommendations– and the creation of an Indigenous Advisory Committee – to help the new hospital provide safe care for everyone. A second research partnership with Cowichan Tribes and First Nations Health Authority is underway to understand why pre-term birth is three times more likely among women in Cowichan Tribes and how to reduce these high rates.

I hope you enjoy reading about the work underway in the Cowichan Valley and have a safe and happy summer in our beautiful region.

With heartfelt good wishes,

Kathy MacNeil,
Island Health
President and CEO

"I was a part of the original meetings in sharing ideas. It is great to see what has come from those ideas."

— Member, Indigenous Advisory Committee

NORTHWEST AERIAL VIEW *Use of materials that are harmonious to the landscape, such as earth-toned exterior cladding, cedar. Incorporation of Indigenous plants within the landscaping; orienting the building to face Swuq'us (Mt. Prevost).*

Working from the ground up – join us on the journey to a new Cowichan District Hospital

by Audrey Larson

Cowichan District Hospital (CDH) supports high-quality acute health care for people at all stages of life, across many generations.

One of the most rewarding aspects of contributing to a new hospital build is working alongside people who are experts in their fields, collaborating to bring the community's vision into focus. Creating a new hospital that is welcoming to all is a significant responsibility that everyone involved takes to heart.

Site Superintendent Joe Chisolm has a front row seat to the construction activities happening at the future hospital site on Bell McKinnon Road. "No matter how many projects I've worked on, it's always exciting when we get to this stage," said Chisolm. "The user groups are busy fine-tuning all of the operational specifics of their

"The whole process has been so collaborative, and we've been welcomed to provide input."

— Patient Partner, Mental Health and Substance Use User Group

INPATIENT PSYCHIATRIC UNIT: SECURE OUTDOOR GARDEN *Incorporation of secure gardens to provide outdoor space where patients can get fresh air, with areas for quiet reflection or group activities.*

EMERGENCY DEPARTMENT ENTRANCE
Reconfiguring Emergency Department entry points so patients have a shorter travel distance and ambulances have faster access to the emergency entrance.

program areas and getting the details just right as we gear up to build the first block."

With the foundation concrete pours complete, the project begins "slab on grade" construction of the four-story Diagnostic and Treatment (D&T) Centre. "The D&T is the heart of the new CDH, where diagnosis and treatment will occur for non-admitted patients as well as inpatients who require medical imaging or surgery," explained Dr. Pat Gallagher, medical director for the project.

Level 0 of the D&T will house Emergency, Medical Imaging, Ambulatory Care and a bistro in the Community Hall. Level 1 includes Food Services, a cafeteria, and back-of-house programs which are unseen, but essential to the hospital's daily operation, including the loading dock. Construction of the D&T concrete structure is expected to take approximately one year. The remaining buildings include an 7-story Inpatient Unit (IPU), a bi-level reach-out building, and a service centre.

The Cowichan District Hospital Replacement Project is supported by ongoing collaboration and generous input from subject matter experts. The illustrations highlight a few examples of contributions and feedback implemented from interdisciplinary program user groups, patient partners and members of the Project's Indigenous Advisory Committee who have been drawing on their knowledge, experience, and evidence to advance the design of the new hospital.

FOR A GLIMPSE OF THE WORK TO DATE, CHECK OUT OUR FIRST MILESTONE VIDEO AND CRANE CAM PHOTOS OF THE WEEK ON OUR NEW CONSTRUCTION UPDATES WEBPAGE.

CENTRAL SPINE *Incorporating traditional language within the facility, Indigenous and non-Indigenous artwork throughout, the importance of inclusion, the Cowichan River, nature, ceremony and ceremonial practices, history of the lands and of Indigenous peoples within the community.*

Building safety and respect in construction

The New Cowichan District Hospital is one of the first projects in the province with a Project Elder and an Indigenous Coach and Cultural Advisor. These roles were created by BC Infrastructure Benefits (BCIB) to guide Indigenous recruitment, employment, apprenticeship, and worker retention. Together, Joe Thorne and Bubba Qwulshemut are creating a culturally safe and respectful jobsite for workers. In this way, the new Cowichan District Hospital will leave a legacy of diverse skilled trades workers in communities close to the project.

Elder Joe Thorne is a respected Quw'utsun Elder and cultural practitioner. He has an extensive background in Indigenous education, employment, and retention initiatives. In his role, he works with Nations and Indigenous organizations to raise awareness of skilled trades opportunities on the project.

The Indigenous Coach and Cultural Advisor is Bubba Qwulshemut. Bubba is a respected Quw'utsun traditional speaker and a certified Red Seal plumber. He provides direct support to Indigenous employees, such as transition-to-work supports. On the jobsite, Bubba is making worker experience more culturally relevant and respectful by actively sharing cultural teachings, experiences, and wisdom.

BCIB is proud to have Elder Joe Thorne and Bubba Qwulshemut on the team. The largest employer on the project, BCIB's role is to diversify the skilled trades – providing Respectful Onsite Initiative training for workers and honouring the Declaration of the Rights of Indigenous Peoples Act by making the jobsite a more welcoming place for Indigenous employees.

On the jobsite, Bubba is making worker experience more culturally relevant and respectful for Indigenous employees by actively sharing cultural teachings, experiences, and wisdom.

Joe Thorne,
Project Elder,
New Cowichan District Hospital

Bubba Qwulshemut,
Indigenous Coach and Cultural Advisor,
New Cowichan District Hospital

Caring for Cowichan

The Cowichan District Hospital Foundation has been raising funds in support of Cowichan District Hospital and Cairnsmore Place since 1984. The generosity of our donors helps bring world-class equipment to our area to help reduce wait times, improve patient experience and outcomes, and allow for less invasive procedures and treatments. It also helps improve patient comfort and allows more patients to be cared for in their community.

This spring, we completed our campaign to purchase Automated Dispensing Cabinets for CDH. Our annual Champagne Dinner & Auction raised funds for new maternity patient monitors for CDH as well as funds to install a **Tovertafel** at Cairnsmore Place. This beautiful interactive technology provides happiness to seniors and those with dementia. A portion of the funds raised is also dedicated to the new hospital.

Our major fundraising campaign supporting our new hospital will help ensure everyone in Cowichan has access to the best health care and our wonderful healthcare workers have the latest medical equipment. We are thrilled to work with the community on this initiative and are grateful for the ability to recognize donors with naming opportunities in the new hospital.

To learn more about how you can support our initiatives, please visit our website at cdhfoundation.ca or contact Naomi Low, Executive Director, at 250.701.0399 or **nlow@cdhfoundation.ca**

"I view community as family and family as community... supporting the greater valley and all of our healthcare needs is important, especially from children to elders, as we continue to grow, and reconciliation takes place in the Cowichan Valley."

— Garrett Elliott, Foundation Supporter

"My kids were born here; my dad spent some time in the hospital; I have spent some time in the hospital. I think it's really important to give back to the community."

— Balbir Parhar, Foundation Supporter

Members of the Cowichan Health and Care Plan team with patient Heather Robb.

COWICHAN HEALTH AND CARE PLAN: A COMMUNITY-CENTRED APPROACH

by Shawna Cadieux

People often think hospitals are the hub of healthcare; however, healthcare happens everywhere. Investments in community health services result in better patient outcomes by supporting them to manage their health from home or in the community while avoiding hospital admissions.

The award-winning Cowichan Health and Care Plan (CHCP), of which the Cowichan District Hospital Replacement Project is a key pillar, is proof of this.

"CHCP has a specific methodology based on a health needs analysis of Cowichan residents," said Donna Jouan-Tapp, CHCP project director. "Investments are being made strategically, helping us to match patient care needs while simultaneously saving acute care bed days at Cowichan District Hospital."

Introduced by Island Health in 2021 alongside the business plan for the new hospital, the community strategies in the CHCP are aimed at helping meet the current and future acute care needs of Cowichan residents. These strategies have already saved over 10,000 acute care bed days at Cowichan District Hospital (CDH).

The 15-year plan is currently made up of four operating models aimed at supporting patients and their families away from the hospital:

— Chronic Obstructive Pulmonary Disease (COPD)
— Frailty (with a focus on a Seniors Outpatient Clinic (SOPC)
— Enhanced palliative care that includes services at Cowichan Hospice and in the home; and
— Transitional care

As Island Health prepares to open the doors of a new CDH in 2027, investments in the community-based Cowichan Health and Care Plan will continue to help improve the health outcomes of people in Cowichan while ensuring hospital teams can focus on doing what they do best—providing exceptional acute patient care.

COPD CLINIC

Linda Zabok is a client of the Cowichan COPD clinic, attending one-on-one sessions with clinicians and participating in a series of group information sessions. Prospective clients are referred by a physician or can self-refer by calling Community Access Services at 250-739-5749.

"The services are fantastic, and the education I've received is incredible. I've learned so much, including how to use my inhalers correctly after using them incorrectly for years and pursed lip breathing to help me slow my breathing and relax," she said. "This is such an important clinic for Cowichan residents because it is helping people with COPD to manage our own health."

Since the introduction of the clinic, COPD has dropped from the fourth most common reason to visit the CDH emergency department to no longer in the top ten.

"We try and reduce the suffering and hospitalization of people with COPD," explained Brett Leppan, a respiratory therapist with the clinic. "If clients stick with us longer than two visits, we can make them feel better—we can't cure them, but we can give them a better quality of life."

During one-on-one visits, Leppan will confirm a diagnosis using specialized breathing tests, check oxygen levels, and facilitate supplemental oxygen if warranted. He and the COPD team also teach clients how to breathe, talk about medications and how to use them, and craft an action plan in collaboration with family physicians and clients aimed at keeping people happier, healthier and out of hospital. Typically, clients will attend two or more one-on-one appointments before participating in group sessions.

"Every time a client has a flare-up, their disease progresses, so if we can prevent that by teaching them how to self-manage their disease, we can slow its progression," said Jennifer Brown, clinical pharmacist. "The action plan outlines all of the ways we can set clients up for success so they aren't getting sick and ending up in hospital."

In addition to medication management and smoking cessation support, the team encourages whole-body wellness, which includes mental and emotional well-being.

"We want people to live well in every aspect of their life, and mental health plays a large role. Anxiety goes hand in hand with COPD—when people can't breathe, they get very anxious," said Heather Strong, who, along with Pete Pederson, is a behavioural health clinician at the COPD clinic. "We talk about the breathlessness/anxiety cycle and teach people how to calm themselves and breathe easier."

"Fostering emotional health is also important when dealing with COPD. What are their relationships like, are they isolated? Have they experienced trauma? What might be in the way of them wanting to get healthier?" said Pederson. "In addition to tools and techniques, we teach them to breathe better, and we lead group sessions where camaraderie develops quickly as people realize they aren't alone in their illness. There's a synergy created by peer support."

Respiratory Therapist Brett Leppan helps patient Linda Zabok manage her COPD.

SENIORS OUTPATIENT CLINIC

The Seniors Outpatient Clinic (SOPC) is one component of the CHCP's frailty strategy. Clients with complex health needs who require an advanced geriatric assessment are referred by a physician to a team of clinicians. Since the introduction of the clinic in 2021, the wait time for advanced geriatric physician assessment has been reduced from six months to two.

"We work with a very unique population of frail, elderly clients, many of whom have dementia or some other kind of cognitive decline. Our team looks at why this might be happening through cognitive testing and provides a diagnosis," said Chris Parry, an RN at the clinic. "We then work with the client and family to determine the services that can be put in place to keep them living independently at home for as long as possible. People do better at home—they develop fewer infections, have more mobility and experience fewer rapid declines in their health."

According to Statistics Canada, more than one-quarter of Vancouver Island residents are 65 and older, making the SOPC a welcome addition to Cowichan. Once clients are referred, their interaction with the team could span a couple of visits, or they may be followed long-term.

"I enjoy seeing the supportive connection between our clients and their families and coming together as a team to best support them at home," said Elicia Bourgeois, an LPN at the SOPC. "Most people want to remain in their own home for as long as they can, and it is rewarding to support clients in achieving this goal."

> *"We then work with the client and family to determine the services that can be put in place to keep them living independently at home for as long as possible. People do better at home—they develop fewer infections, have more mobility and experience fewer rapid declines in their health."* — Chris Parry, RN

STEPS

Another successful CHCP strategy is the **Short Term Enablement and Planning Suites (STEPS) program** that allows Cowichan residents to transition temporarily between hospital and home. In May 2022, STEPS received a 3M Health Care Quality Team Award in recognition of innovation, quality, patient and family engagement, and teamwork.

STEPS is a partnership between Duncan Community Health Services (CHS), Island Health long-term care, and The Meadows, a privately owned assisted living home. The Meadows has set aside 10 assisted living suites, while Cowichan CHS provides staff, furnishings and equipment for patients who are ready to leave hospital but may not be able to return home for a number of reasons.

Once a client is identified and settled into a short-term placement at The Meadows—typically between 4 to 12 weeks—they receive 24-hour support from a team of community health workers who check on clients regularly, providing physical assistance and emotional support.

"By setting up a service where we can be efficient, patient-centred, and evidence based, we are improving the quality of care we are delivering," said Brenda Aguiar, Island Health manager, Quality Improvement, Cowichan Valley.

It's estimated that in 2021, the program saved 2055 hospital bed-days, which in turn helps to reduce pressure on the healthcare system.

Members of Cowichan Health and Care SOPC team.

Cowichan COPD clinic staff

Cowichan Hospice LPN (l) Janet Rowlinson and RN Joanne Morton (r) with patient Heather Robb

"It's all about dignity and quality of life, and the care I have received here surpasses anything I could have expected."

— Heather Robb

ENHANCED PALLIATIVE CARE

Patients requiring palliative care often end up in hospital during their final days. The CHCP has planned for enhanced community palliative care, working in collaboration with Cowichan Hospice while also supporting those who wish to die at home.

Heather Robb was a volunteer at Cowichan Hospice for several years. More recently, she was a patient, receiving compassionate end-of life-care and support from a team of dedicated clinicians and volunteers she knows well.

Heather passed away recently, spending her final days at Cowichan Hospice.

Before she passed, Heather spoke to Island Health Magazine about her experience and allowed her photo to be used on the front cover of this issue. "Being here has been like coming home. I do not want to be in the hospital—I know my prognosis, and this means everything to me," she said. "It's all about dignity and quality of life, and the care I have received here surpasses anything I could have expected."

Since the introduction of additional nursing resources at Cowichan Hospice and in the community to strengthen around-the-clock palliative support, there has been a 50% reduction in hospital deaths for palliative patients in Cowichan.

"We get to see people at their most genuine and most vulnerable times. It's hard sometimes, but so rewarding," said Joanne Morton, an RN at Cowichan Hospice. "Not everyone is drawn to this type of work, but there is a bond you develop with families and patients that is so significant."

"I go home at the end of the day feeling like I helped someone along their journey," said LPN Janet Rowlinson. "I know I made a difference. It is a privilege to work here."

"I go home at the end of the day feeling like I helped someone along their journey. I know I made a difference. It is a privilege to work here." — Janet Rowlinson, LPN

Learning from Indigenous Knowledge in Cowichan

by Annie Moore

As a result of colonialism and ongoing racism, Indigenous peoples continue to experience harmful health and social disparities. By working as allies with Indigenous communities, organizations, researchers, and collectives, we can begin to address these inequities and harms, enhance culturally-safe and trauma-informed research, and build strength and wellness.

Indigenous families and communities in Cowichan are leading two research projects that seek to create culturally safe health services and care in the new hospital, and reduce the risk of preterm birth.

BUILDING CULTURAL SAFETY INTO THE COWICHAN DISTRICT HOSPITAL REDESIGN

Island Health has engaged with First Nations and Métis communities in Cowichan to identify their needs in planning the new Cowichan District Hospital, to understand cultural protocols, and to share cultural safety knowledge with care teams. This knowledge with be shared through custom-created videos.

Once completed, the videos will be used in Island Health cultural safety and humility training and accessible to direct care teams and other health service providers in Cowichan. Sharing these videos with healthcare providers will enhance Nation-specific cultural safety training, mobilize ceremonial and cultural protocols for building respectful relationships, and transform health services to maintain community.

The videos were made possible thanks to two research grants from the Social Sciences and Humanities Council of Canada (totalling $100,000).

The first grant was co-led by Mary Knox (then Manager of Aboriginal Engagement, CDH Replacement Project, now Director of Indigenous Health for Central and North Island), Dr. Diane Sawchuck (Lead, Evidence, Evaluation & Knowledge Translation, Research Department) and Dr. Shannon Waters (Medical Health Officer for the Cowichan Valley), with contributions from Island Health's Planning and Improvement and Indigenous Health departments and Cowichan Valley leadership.

Through engagement with nine First Nations communities – Stz'uminus, Lyackson, Penelakut, Halalt, Cowichan Tribes, Malahat, Lake Cowichan, Ditidaht and Pacheedaht – one Métis community, and urban Indigenous populations, eight key recommendations to support a culturally-safe hospital were identified. In addition, an Indigenous Advisory Committee has been established; the CDH planning committee and Cowichan leadership are participating in Hul'q'umi'num language classes; and workshops were held on the traditional process and spiritual teachings around building a Cowichan-Coast Salish Big House, and on the importance of traditional food and medicinal plant sustainability.

The second grant is co-led by Joseph Elliott (Special Project Director, Indigenous Engagement), Dr. Sawchuck, and Dr. Waters, in collaboration with 11 First Nations communities, who will translate specific cultural safety knowledge into videos. The project will combine the collective knowledge gained from previous engagement sessions with community-identified stories to educate staff in cultural safety and humility teachings, and ultimately improve health outcomes and care services for Indigenous people.

The project focuses on co-developing videos with each of the communities, including the Cowichan Valley Métis Nation, Ditidaht, Pacheedaht, Ts'uubaa-asatx, Stz'uminus, Penelakut, Lyackson, Halalt, Malahat and Cowichan Tribes, as well as the urban populations served by Hiiye'yu Lelum – House of Friendship. Each community will guide their own video production, and lead the content and stories related to their protocols for Land Acknowledgement, introducing self, ways of showing respect, and any specific cultural beliefs and practices they choose to share and translate. Salish Eye Productions, an award-winning, local Indigenous company, is producing the videos.

Graphic Recordings from the Initial Cowichan Indigenous Advisory Committee and Island Health Gathering created by Michelle Buchholz.

BRINGING HEALTHY BIRTH BACK TO COWICHAN

Island Health is partnering with Cowichan Tribes and the First Nations Health Authority on a research project to reduce high rates of preterm birth among Indigenous women in Cowichan, supported by a Vancouver Foundation grant.

Preterm birth refers to a live birth before 37 weeks of gestation, which can lead to serious complications for some babies. On reviewing their records, Cowichan Tribes recognized that preterm birth rates are three times higher in their community than among non-Indigenous women. The reason for these high rates of preterm birth is unknown, so the community wanted to find out why and how they could prevent preterm birth.

The Quw'utsun (Cowichan) Preterm Birth Study will identify risk factors for preterm birth, develop ways to reduce risk, and work with the community and Island Health to implement strategies that can reduce the high rates in Cowichan territory and potentially in other communities.

The study team includes Elders Lydia Seymour and Doreen Peter, Cowichan community members Lynsey Johnny, Eugenia Tinoco, and Maia Thomas (Research Advisory Committee), Liz Spry (Project Lead, Community Health Nurse), Barbara Webster (Co-Lead, Clinical Nurse Specialist, Maternal Child Health, First Nations Health Authority), Brenda Yuen (Research Advisor), Jennifer Murray (Trainee), Dr. Waters, and Dr. Sawchuck (Island Health). Murray is embedded as a community-based trainee on the Hwialusmutul' (Healthy Families Team) at Cowichan Tribes' Ts'ewulhtun Health Centre.

Murray decided to pursue a PhD in public health at UBC to partner with the community to answer their questions about the high rates of preterm birth. Now a PhD candidate in the School of Population and Public Health, her work is funded in part by a Health System Impact Fellowship from the Canadian Institutes for Health Research. Dr. Waters is Murray's primary Island Health supervisor and her UBC supervisor is Dr. Patricia Janssen (Professor and Co-Lead of Maternal Child Health, School of Population and Public Health).

With the guidance of Cowichan Tribes, Murray and the research team are conducting interviews with women in the community to combine their stories of pregnancy experiences with medical record data.

Ultimately, the team hopes this study will generate valuable information about how to strengthen healthy pregnancies, births, and children in Cowichan, and ensure that expectant parents will feel safe accessing care and support.

For Dr. Waters, this work has transformative potential: "Birth is a time of tremendous transformation. The gift of learning from Quw'utsun teachings and Quw'utsun families' experiences around birth has the potential to transform Island Health's system."

> *"The people I work with are all really passionate about what we're doing. I've been able to conduct one-on-one interviews with women as a part of the first phase of the project, and they've been so generous in sharing their stories and lives with me. I feel so privileged to hear their stories of strength and disrupted journeys, and everything in between."* – Jennifer Murray

COWICHAN RESEARCH PRETERM BIRTH STUDY TEAM: *Study team members pictured (L-R): Brenda Yuen, Lynsey Johnny, Eugenia Tinoco (with baby), Joban Dhanoa, Elder Doreen Peter, Jennifer Murray, Elder Lydia Seymour. Team members not pictured include Liz Spry, Barbara Webster, Ashley Simpson, Maia Thomas, Fairlie Mendoza, Marnie Elliott, Dr. Shannon Waters, and Dr. Diane Sawchuck.*

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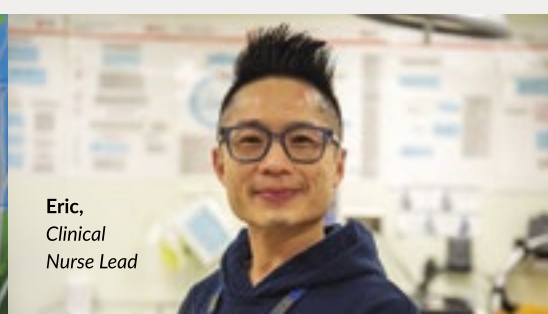

Eric, *Clinical Nurse Lead*

NEW CANCER CENTRE COMING TO NANAIMO

People in Nanaimo and surrounding communities are one step closer to having cancer care closer to home with the approval of a concept plan for a new cancer centre at Nanaimo Regional General Hospital (NRGH).

Premier David Eby was in Nanaimo to announce the new cancer centre on May 26. "Getting a cancer diagnosis can be some of the most difficult news someone gets in their life," he said. "We must ensure people in B.C. can access the care they need when they need it."

Health Minister Adrian Dix said Nanaimo is a rapidly growing community, "so it's important that we continue to meet the demand for healthcare services as it evolves. The centre will be crucial in our approach of achieving sustainable cancer care, province-wide."

Island Health Board Chair Leah Hollins said the new centre will strengthen access to care for the rapidly growing and aging population in this region. "This expansion of cancer care infrastructure in Nanaimo will enable Island Health and BC Cancer to provide high-quality, safe patient care, closer to home, for people living in the Central and North Island regions," she said. "This means many patients will be able to access this service in Nanaimo, eliminating countless hours of travel time for many Central and North Island patients who will no longer have to travel to Victoria."

"A cancer centre in our region is desperately needed to shorten wait lists, reduce travel to other regions for treatment and provide patients with more cancer-care options closer to home, said Ian Thorpe, Chair of the Nanaimo Regional Hospital District. "This commitment to a new cancer centre in Nanaimo provides hope for better health outcomes to the roughly 3,500 residents north of the Malahat diagnosed with cancer annually."

Treatments planned at the new centre include radiation therapy, an outpatient ambulatory care unit and a net new PET/CT machine. Construction will also include a new radiation-treatment space with four shielded treatment rooms for high-energy radiation-treatment linear accelerators, which deliver high-energy X-rays or electrons to the region of a patient's tumour.

Cancer care in Nanaimo is delivered through the community oncology network clinic at NRGH. Community oncology network cancer services are also available at North Island Hospital campuses in Courtenay and Campbell River, as well as at Cowichan District Hospital in Duncan.

In addition to the new cancer centre, planned upgrades at NRGH include renovating and expanding the existing community oncology clinic. This will increase the number of treatment spaces and exam rooms and replace the current cancer outpatient pharmacy.

Currently, the BC Cancer Centre in Victoria is the only regional cancer centre providing comprehensive cancer care services for patients in Island Health.

Getting a grip on your grocery bill

It's no secret that groceries today are more expensive. The *Food Costing in BC 2022* report, released June 2023, estimates that the average cost of a nutritious diet for a family of four for one month in BC is $1,263. The monthly average costs reported for the Island Health region is even higher at $1,366. The recent rise of the consumer price index suggests that at the time of this report's release, the cost of a nutritious food basket is likely even higher than the figures reported here.

And while it's possible to cut back on expenses in some areas of life, we all have to eat. According to Island Health Dietitian Helene Dufour, there are a number of ways to save money and still eat healthy meals.

"The first thing that comes to mind is that it's important to store food properly to avoid waste and make food last longer," says Dufour. "It's surprising how much food is wasted by Canadian households, and that waste is like throwing money away."

Dufour suggests checking out a resource created by the organization Love Food Hate Waste. Their mandate is to work with businesses, governments, and community groups across Canada to inspire and empower people to make their food go further and waste less. You can find their Food Storage A-Z list along with other resources at **lovefoodhatewaste.ca/a-z**.

"Produce is one of the main food items that gets tossed because it's no longer fresh," notes Dufour. "With proper storage, you can extend the shelf life of fruit and veggies and even bring wilted items back to life."

One way to save grocery dollars is to avoid pre-prepared fruit and vegetables—they are super convenient, but you'll pay a premium. And when meal-planning, include dishes that will generate leftovers, cutting down on buying additional food items and saving time.

Another key to keeping food costs in check is to plan ahead, make a list and check the sales.

"Plan out lunches and dinners for the week, including using leftovers, then check your pantry and fridge to see what you need and make a grocery list," says Dufour. "Check flyers for sales and be flexible. If you see a sale on a family favourite, you might want to adjust your meal planning to accommodate a great deal."

Dufour also suggests you consider grocery shopping online. "Online grocery shopping sites show you the sales items as you shop so you can compare prices and choose the best deal; it also limits impulse purchases. On the weekend I plan my meals and do my shopping online, then pick up my groceries later in the day, saving time and money."

Keep some key staples on hand so that if you get stuck, you can create a pantry dinner rather than making an extra trip to the grocery store. This might include different types of pasta, rice, legumes, nut butter, dried and canned goods and tetra-packs of soup stocks. Keep items like loaves of bread, meat and poultry, both whole cuts and grinds, vegetables and fruit in the freezer. Creating a meal from what you have on hand is more cost-effective than shopping for more groceries.

"There are many great resources online as well as apps that will provide tips and ideas to save money on groceries," notes Dufour. "Use what you have on hand and avoid food waste, plan ahead, include ideas for leftovers and make a list before you head to the store. Follow these basic principles to help manage your grocery bill."

Following are a selection of recipes from the University of Guelph Family Health Study. You can download the entire recipe book at **guelph-familyhealthstudy.com/2019/09/19/rock-what-youve-got-recipes-for-reducing-food-waste/**

Their recipe ideas include:

—"2-in-1" recipes that make use of leftovers in a completely new (and tasty) dish; the portion sizes in the main recipes are intentionally larger to allow for the second meal.

—"Fridge Clean Out" recipes, which offer you plenty of ingredient options, so that you can make use of what you already have in your fridge.

—"Zero-Waste" recipes, which use up all the main ingredients, so you're not left with half of a leek or head of romaine that eventually find its way to the compost bin.

2-in-1 RECIPES

Sweet Potato Enchiladas *Makes 4 servings*

These delicious vegetarian enchiladas are a family favourite. Turn the leftover filling into a nutritious soup for lunch or dinner the next day.

INGREDIENTS:

1 cup (250 mL)	Brown rice, rinsed and drained
2 tbsp. (30 mL)	Olive oil
½ cup (125 mL)	Onion, diced
2 cloves	Garlic, minced
1 tsp. (5 mL)	Paprika
½ tsp. (2 mL)	Chili powder
½ tsp. (2 mL)	Salt
½ tsp. (2 mL)	Black pepper
½ tsp. (2 mL)	Cayenne powder, optional
1 can (796 mL)	No-salt-added diced tomatoes, drained
1 can (540 mL)	Black Beans, rinsed and drained
2 (1.5 lbs)	Sweet potato, peeled and diced into 1-cm cubes
1 cup (250 mL)	Frozen corn
2	Sweet bell peppers, any colour, diced
1 cup (250mL)	Water
8	10-inch Whole Grain Whole Wheat Tortillas
½ cup (125 mL)	Sour cream
1 cup (250 mL)	Grated cheddar, mozzarella or Havarti

DIRECTIONS:

1. Cook rice per package instructions. Once cooked, set aside to cool.
2. Preheat oven to 400°F and line a roasting pan with parchment paper or aluminum foil. If using aluminum foil, grease lightly with oil.
3. Heat a large pot over medium heat. Add oil, onion, and garlic. Cook for 2 minutes, or until the onions are translucent, stirring often with a spatula.
4. Stir in half of the paprika, chili powder, salt, pepper, cayenne powder (if using), diced tomatoes, canned beans, sweet potatoes, frozen corn, bell peppers and water into the pot.
5. Cover the pot with a lid and simmer over medium heat for about 10 minutes or until the sweet potatoes are fork tender.
6. Remove the lid from the pot and continue to simmer for 5 more minutes, to evaporate out some of the remaining liquid.
7. Stir in the cooked rice and remove the pot from heat.
8. Assemble and roll each tortilla with ½ cup of the bean-and-rice mixture, 1-tbsp. sour cream, and 1 tbsp. of shredded cheese. Place seam-side-down onto the roasting pan.
9. Sprinkle the remaining cheese and paprika on top as garnish. Bake in the oven for approximately 10 minutes, or until tortillas are crisp, and the cheese is melted.

Enchilada soup recipe follows.

Next Day Enchilada Soup

INGREDIENTS:

4 cups (1000 mL)	Leftover "Sweet Potato Enchilada" filling
4 cups (1000 mL)	Low-sodium vegetable broth
1 tsp. (5 mL)	Dried oregano
1 tsp. (5 mL)	Dried basil

DIRECTIONS:

1. In a medium pot, combine the "Sweet Potato Enchilada" filling, broth, oregano and basil.
2. Cover the pot with a lid and bring to a boil over medium heat.
3. Reduce heat to low and let the soup simmer for 5 minutes.

FRIDGE CLEAN-OUT RECIPE

Quick Cheesy Vegetable Pasta Bake *Makes 4 servings*

Use up those veggies in the bottom of your vegetable drawer in this family-favourite pasta recipe.

INGREDIENTS:

1 box (1 lb)	Pasta of your choice
4 cups (1000 mL)	Assorted vegetables, cut into bite-sized pieces
1 jar (650 mL)	Tomato sauce
1½ cups (375 mL)	Cheese, grated
1 tsp. (5 mL)	Dried oregano
1 tsp. (5 mL)	Dried basil
¼ tsp. (1 mL)	Black pepper

GET CREATIVE WITH THE FOLLOWING SELECTIONS:
Assorted vegetables: zucchini, broccoli, cauliflower, bell peppers, asparagus, green beans or onion
Cheese: mozzarella, cheddar, gouda or marble

DIRECTIONS:

1. Bring a large pot of salted water to a boil. Once the water has reached a boil, add pasta and cook according to the package instructions, about 10–12 minutes. In the last 5 minutes of cooking, add in the vegetables. When the pasta is just fork-tender, strain both the pasta and vegetables over a colander.
2. Meanwhile, preheat broiler and grease a 9x13" baking dish.
3. Pour the pasta and vegetable mixture into the greased baking dish and stir in the tomato sauce, 1 cup of cheese, basil, oregano and pepper.
4. Sprinkle on the remaining cheese on top and broil for 3–5 minutes or until cheese is melted and golden.

ZERO WASTE

Tomato Risotto with Grilled Romaine Lettuce

Makes 4 servings

No need to toss tomatoes that are past their prime. Cut them up to use in this delicious risotto.

INGREDIENTS:

1 tbsp. (15 mL)	Olive oil
3 cloves	Garlic, peeled and sliced
½ cup (1 small)	Onion, diced
½ tsp. (2 mL)	Salt
½ tsp. (2 mL)	Black pepper
3 cups (4)	Tomatoes, any variety, diced
5 cups (750 mL)	Water
2 tbsp. (30 mL)	Butter
2 cups (500 mL)	Arborio rice
1 can (540 mL)	White kidney beans, drained and rinsed
20	Basil leaves, finely sliced
6 tbsp. (90 mL)	Parmesan cheese, finely grated
2 heads lengthwise	Romaine lettuce, halved
1 tbsp. (15 mL)	Olive oil
⅛ tsp. (1 mL)	Black pepper

DIRECTIONS:

1. Heat a large skillet over medium heat. Once hot, add olive oil, garlic, onion, salt and pepper. Cook for 5 minutes, until onions are golden and translucent, stirring often.
2. Add in the diced tomatoes and simmer for 10 minutes. Transfer the cooked tomato mixture into a blender, add 2 cups of the water and puree until smooth. Set this broth aside.
3. Return the skillet over medium heat. Add the butter and rice, and cook for 1 minute, stirring to coat well. Add the remaining 3 cups of water and let it reduce until the pan is almost dry, about 5 minutes.
4. Stir in the tomato broth and white beans, and cook for 18–20 minutes, or until the rice is just tender, stirring frequently. Add more water, if needed.
5. Remove from heat and stir in the basil and 4 tbsp. of the parmesan cheese.
6. Preheat the second large skillet over medium heat. Lightly brush the cut sides of the romaine lettuce with olive oil. Place the romaine halves on the skillet cut-side down and cook until slightly charred and golden, 2–3 minutes. Arrange on a platter cut side up. Garnish with remaining Parmesan cheese and black pepper. Serve alongside the risotto.

Peer-led and peer-run harm reduction team help keep people safe this summer

by Lyz Gilgunn, Overdose Response Coordinator

Centre Kaitlyn Nohr – Founder, co-owner, Executive Director WILD
Photo credit: Megan Maundrell Photography

This summer sees a return to outdoor concerts and festivals. For many of us, enjoyment of these events includes the use of substances. For some, it's a canned cocktail or THC candy. For others, it's a psychedelic (psilocybin, LSD), stimulant (cocaine, nicotine), or empathogen (MDMA, MDA). Whichever you choose or don't choose, being intentional about your use and taking a harm reduction approach can help you stay safer. If you or someone you love use substances, there are free harm reduction services available.

WHAT IS HARM REDUCTION FOR SUBSTANCE USE?

Harm reduction is a non-judgemental approach that meets people where they are now and helps keep them safer when they use. Evidence-based practices are grounded in public health and social justice to give individuals choices that empower decision-making and autonomy.

WILD Collaborative Harm Reduction Association is a peer-led and peer-run non-profit association that helps shift how communities talk about and engage in harm reduction.

"People use substances for many reasons, including curiosity, to enhance a social experience, or to cope with the demands of life," says Kaitlyn Nohr, executive director, WILD. "We don't judge. Our goal is to create safer spaces for all people to have informed conversations, no matter where you fall on the spectrum of substance use."

This summer, you'll find WILD at festivals and events across Vancouver Island—at a booth handing out supplies or roaming the grounds to check in and promote safety. The educated and informed team members provide harm reduction services and information, including free Naloxone training with take-home kits.

WILD also supports and promotes drug checking. This harm reduction approach helps minimize potential risks by providing accurate information about the chemical content, purity, and toxicity of whatever substance you use. The results allow you to make an informed decision about use, potentially reducing the likelihood of harmful effects, unintentional drug poisoning, or other adverse reactions.

"WILD Collaborative Harm Reduction Association is a peer-led and peer-run non-profit association that helps shift how communities talk about and engage in harm reduction."

WHY SHOULD I CHECK MY DRUGS?

Being intentional about your substance use can help you reduce the risk of drug poisoning or other adverse reactions. Free and confidential drug-checking services can help you:

— *Identify contaminated substances:* find out if there are contaminants, cuts or buffs, such as fentanyl or other synthetic opioids, that you didn't choose to take.
— *Reduce harm:* get insight into the strength and purity of your substance to help you make an informed decision about if and how much to use, and what to avoid mixing in.
— *Stay healthy and safe:* connect with health providers who can provide medical attention if you need help.
— *Learn and get support:* connect with harm reduction services such as WILD or other resources that may include treatment options such as detox.
— *Contribute to informing public policy:* provide valuable information to help identify drug trends. The data collected, which keeps private information anonymous, is used to develop targeted harm reduction strategies, raise awareness about dangerous substances circulating in the unregulated drug market, and provide education on safer drug use practices.

Harm reduction is part of a range of health care services which includes prevention, health promotion, treatment and recovery. All people are welcome without judgement and seen for their value as humans, regardless of their relationship to substances. By taking actions such as getting your substances tested or connecting with friendly and knowledgeable harm reduction workers, you can stay safe this summer.

FIND OUT MORE:

— WILD Collaborative Harm Reduction Services: **www.facebook.com/WILDharmreduction/**
— Substance Drug Checking: **substance.uvic.ca/**
— Island Health overdose prevention services: **islandhealth.ca/our-services/mental-health-substance-use-services/overdose-prevention-services**

New Program Supports Caregivers

by Trish Smith

Reaching out for help or support can be difficult; it can be even more difficult for caregivers helping to support a friend or loved one.

> *"Every caregiver's situation is different, and everyone is on their own journey. The beauty of this program is that it has the flexibility to meet caregivers where they're at and walk alongside them. We support them to gain the skills they need to live well and offer a safe place to talk about their concerns."*
>
> — Eryl Shermak, Social Worker

Eryl Shermak caring for her mother Marion, a senior living with cancer.

"A primary caregiver is a vital part of the healthcare team, but they still get burned out," said Eryl Shermak, an Island Health social worker who has helped develop the new program. "Every caregiver's situation is different, and everyone is on their own journey. The beauty of this program is that it has the flexibility to meet caregivers where they're at and walk alongside them. We support them to gain the skills they need to live well and offer a safe place to talk about their concerns."

That safe place is Island Health's new Caregiver Support Program, a program delivered virtually via Zoom and phone. It helps caregivers navigate the journey with a loved one or friend living with serious illness, chronic conditions, or frailty.

"It's not uncommon for caregivers to find themselves in their roles unexpectedly, and they may not have a circle of people to help share that role," said Shermak. "Whether it's an adult child looking after an elderly parent, a significant other caring for their partner, or a neighbour supporting a vulnerable senior next door – that's caregiving – and caregivers don't always know where to turn for help."

The caregiver program is delivered over three months and offers one-to-one counselling, skills-building workshops, and group counselling. "The program is quite individualized," explains Shermak. "It focuses on the caregiver's goals and needs which could range from learning techniques to communicate with a loved one with dementia to enhancing their skills to self-manage stress, anger, and grief."

"Caregiving is probably the hardest thing I have ever done," said Shauna, who recently completed the caregiver program. "I act as my father's brain as he has no insight into his condition and can no longer plan or strategize his day. He has to be coached and cued, from getting out of bed and operating the TV remote to hygiene and dressing. There is also the endless food prep to make meals he can and wants to eat."

Shauna moved to Ladysmith to look after her 92-year-old father, John, when he had a series of small strokes and began to succumb to vascular dementia. He required constant care so he could stay in his own home. After two years, caregiving was taking its toll on Shauna, both physically and emotionally. Shauna heard about the program on social media and once accepted to the program, was assigned to social worker Eryl Shermak.

"Eryl is empathic, smart, and incisive," said Shauna. "We talked about issues I was struggling with, like creating a plan for those medical crises that inevitably occur over a weekend, like falls. We talked about how things could go most easily for my father regarding placement into long-term-care, and then end-of-life planning. Eryl's knowledge of the health care system was invaluable; she gave me confidence that my choices were strategic, and in my father's best interest."

Emotionally and physically, healthy caregivers can better support and care for their loved one.

"Caregiving comes with a lot of complicated feelings, many of which are labelled as unacceptable," said Shauna. "I learned how to be curious, accepting, and compassionate about those feelings. Recognition and acceptance have allowed me to learn and adapt."

In the spirit of collaboration and with the goal of optimizing caregiver support on Vancouver Island, Island Health consulted with physicians, held focus groups with clinicians in Island Health, and worked closely with Family Caregivers of B.C., the University of Alberta, and the Alzheimer Society of B.C. to inform the creation of the Caregiver Program. Island Health also conferred with geriatric psychiatrist, Dr. Elisabeth Drance, who specializes in dementia caregiving.

"We created a program that focuses on caregivers with complex caregiving needs that can't be supported by other community services," said Kristina Felt, Manager of Seniors Health at Island Health. "Some caregivers are so busy caring for their loved one that they don't have time outside of providing care to attend an in-person class or visit a counsellor. Our virtual program also makes it easier for caregivers living in small communities to access help from the comfort of their home."

Shermak says it is important that caregivers get the support they need.

"As someone with firsthand experience as a caregiver, I understand the challenges and emotional toll that caregiving can have. Caregivers often put themselves on the back burner because so much focus is put on the person they are caring for. But if you can't help yourself, you can't help others. You have to have the strength to give that strength away."

To learn more about Island Health's Caregiver Support program, visit islandhealth.ca/cvc or to self-refer call your local Community Access Centre:

SOUTH ISLAND: (250) 388-2273
Toll Free: 1-888-533-2273

CENTRAL ISLAND: (250) 739-5749
Toll Free: 1-877-734-4101

NORTH ISLAND: (250) 331-8570
Toll Free: 1-866-928-4988

"Caregiving comes with a lot of complicated feelings, many of which are labelled as unacceptable. I learned how to be curious, accepting, and compassionate about those feelings. Recognition and acceptance have allowed me to learn and adapt." — Shauna, caregiver to her father.

Give people the tools:

Dr. Paivi Abernethy on climate change, health and empowerment

by Glenn Drexage

In December 2012, Dr. Paivi Abernethy had an epiphany. As part of her Ph.D. research, she conducted interviews with various specialists about the fall-out from torrential rain in Mid-Wales during the past summer. As a result of the deluge, tailings from historic silver mines overflowed and ran downhill; the concentration of lead resulted in the death of cattle. There were also serious concerns among locals about toxicity in community gardens.

She discovered, however, that the voice of a seemingly key partner – public health – was absent. "I was thinking, this is where public health is missing the ball," she recalls. "That's why I think that we really need to work with the environmental side and other stakeholders because they have the knowledge. And they don't think about public health, so we have to highlight it. That's what got me into climate change."

More than a decade later, Abernethy is bringing her holistic, collaborative approach to Island Health as the new climate change and health lead. She's working with people and leaders from various areas – including Public Health, Indigenous Health and Facilities Management – to chart how the organization addresses climate change.

She took on the role, which falls under the Population and Public Health portfolio, in March. "It's been a whirlwind," she says. "But I love my new job. I'm still floating several feet above the ground."

Abernethy brings along a wealth of experience. She grew up in Kuopio, Finland; when she finished high school, she "went gallivanting in the big, wide world" and to date, has lived in several European countries, the U.S. and Canada.

After completing her first master's degree, she worked as a community health promoter at a public health unit in Parry Sound, Ontario. She obtained her second master's degree—this time in public health, from England's Lancaster University. "I went back to school to see how we can empower people," she says. "Then I worked at Cancer Care Ontario to implement an Indigenous cancer prevention program developed with community members. That was my first stab at doing more inclusive health promotion."

Abernethy received a Ph.D. in social and ecological sustainability from the University of Waterloo, where she researched how to better integrate health and sustainability. Her academic life has continued with a range

of research and teaching roles; she's currently an adjunct professor in public health at the University of Victoria and environmental studies at the University of Waterloo. And her postdoctoral work has often focused on what she calls "bringing together different ways of knowing for better decision-making."

"How can we use the local and Indigenous knowledge to create better science?" asks Abernethy. "And how can we bring different ways of knowing together to have better and more meaningful evidence, to make decisions and change policy, and to make the science more meaningful for the people who should use it?"

As a climate change and health specialist at First Nations Health Authority, she advised on the health impacts of climate change and worked with B.C. First Nations to support community-led projects focused on climate resilience.

She's taking a similar approach at Island Health – and a key goal is to integrate multiple voices and views. "Climate change is the biggest threat to public health. And it doesn't happen in a pristine environment affecting healthy people in a well-prepared society," says Abernethy. "It's part of a range of cumulative impacts influencing health, and we can't treat climate change as a singular, separate thing. It's not just about mitigation—it impacts health care, it impacts people in the community, it impacts the environment."

So where to start on such an all-encompassing issue? An initial effort involves identifying regional, climate-related health threats and mapping out where communities, and Island Health, stand in terms of their approach to climate change. This will help determine strengths, gaps and issues – knowledge that can be used to pool resources and set priorities.

Supporting communities is a big focus for Abernethy. She recalls attending a recent meeting of the Union of BC Municipalities, where a northern B.C. mayor shared how nearby forest fires and blanketing smoke resulted in mental health problems and despondent residents.

"How do we empower communities so they don't feel paralyzed? So that we don't create more problems, so that we actually find ways of strengthening the existing capacity and bring First Nations and the neighbouring municipalities together where that's not already happening," says Abernethy. "So, acknowledge where people are strong – but particularly pay attention to equity and trying to support those who may not be so strong."

Ultimately, the goal is to empower people, within the health authority and throughout the Island Health region, in the face of a daunting challenge. "This is such a big and scary thing that you can't just tell people what is wrong. You have to give them some tools to work with," says Abernethy. "We also need to better understand the linkages between our health and the environment – and how we can make a difference."

Rethinking our relationship with water

by Glenn Drexage

As climate change impacts our world and our health, Island Health continues to put a local lens on a topic of global importance: stewardship of our water systems.

Water quality, quantity and conservation have been long-standing topics throughout Island Health. Water system operators have implemented many creative efforts over the years to support conservation of this precious resource. But the intensity of drought conditions on the Island in recent years and other factors, such as population growth, is lending a heightened urgency to this water-related work.

"We need to rethink our relationship with water. This is a climate change and health issue," says Dr. Shannon Waters, Stz'uminus band member and medical health officer for the Cowichan Valley region. "The narrative is changing. It's important that we plan ahead because we're already seeing the reality of drought effects on our drinking water systems on the Island."

That reality hit home last December when the Mount Washington Alpine Resort near Comox Valley experienced water shortage issues leading up to the launch of ski season. Thankfully, the situation stabilized, aided by proactive measures that were put in place—but it also highlighted how drought is impacting the Island Health region in previously unforeseen ways.

Accordingly, the resiliency of drinking water systems is a priority of Island Health's climate change and health programming. The loss of drinking water is a public health issue; minimum amounts are needed for daily consumption, food preparation and sanitation. Adequate water supply is also vital for firefighting needs and the operation of many businesses and services.

Last fall, **Environmental Public Health** distributed a survey to water system operators throughout the Island Health region. Its purpose was to evaluate the impact of drought on water systems and evaluate system capacity and mitigation plans.

The first such survey was sent out in 2015; subsequent surveys took place in 2021 and 2022. Given the ongoing impact of drought due to climate change, it's expected this reporting will continue annually.

Dr. Shannon Waters
Photo credit: Sandy Powlik.

WATER WISDOM: TIPS FOR REDUCING YOUR WATER USE

— Keep showers to five minutes or less.
— If washing dishes by hand, fill the sink rather than let the water run freely.
— Instead of running the tap, keep a jug of cool water in the fridge.
— Turn off the tap when brushing your teeth or shaving.
— Regularly check your home for leaks.
— Run full loads in the washing machine and dishwasher.
— Water lawns sparingly. Lawns only need about 2.5 cm of water per week.
— Water in the morning or evening to reduce evaporation.
— Clean the driveway with a broom instead of a hose.
— Check for leaks in outdoor pipes, faucets, and hoses.
— Talk to a local nursery or garden supplies centre about drought-tolerant plants.
— Use rain barrels to collect rainwater for outdoor plant use.
— If you have a swimming pool, consider a water-saving pool filter.

"This work will be invaluable as we collaborate to ensure our water systems remain resilient moving forward," says Waters. "It brings to mind the phrase *Nutsumat kws yaay'us 'utu qa',* from the Hul'qumi'num language spoken by some coastal First Nations: We come together as a whole to work together to be stronger as partners for the water."

Some key findings related to the latest survey include:

— In 2021, Vancouver Island experienced the most prolonged period of high drought levels (levels 4 and 5), compared with 2022 and previous years.
— During fall 2022, normal moisture conditions in soil did not return as fast as in 2021, which could be due to the cumulative effect of two consecutive years of high drought levels.
— A small majority of water system operators have a Water Conservation Plan in place. About 75 percent of water systems rely on voluntary water use reductions; only about 15 percent of operators rely on bylaws.
— It is unclear at this point how prolonged droughts and projected population growth would impact water availability on Vancouver Island. Constant monitoring and proactive adaptation are highly recommended.

Survey findings were recently distributed to more than 1,000 water operators. The findings also highlighted that operators must have an Emergency Response and Contingency Plan to address the risk of drought.

While the majority of operators have a plan in place, some still need to create a plan. Island Health's drinking water officers can provide guidance as needed, as well as review existing plans. These officers also advise on water conservation, another vital support that can help address issues such as leaks due to aging infrastructure and how operators monitor the impact of drought on their systems.

For more on health and drinking water, please visit **islandhealth.ca/learn-about-health/drinking-water**

Members of the NVI Transport Service Team with one of their new transport vans.

NORTH VANCOUVER ISLAND ADDS NEW TRANSPORTATION SERVICE

A new transportation service now rolling between healthcare sites in Port Hardy, Port McNeill and Port Alice is improving access to healthcare services for North Vancouver Island residents.

The new service, established as part of the Province's $30 million investment to stabilize and improve healthcare services in North Vancouver Island (NVI), provides vital transportation, five days per week, to people accessing Port Hardy Hospital, Port McNeill Hospital and Port Alice Health Centre. The service includes a daytime route and an afternoon/evening route. It also provides daily return connector transportation to the North Island Hospital Campbell River and Comox Valley campuses.

Three wheelchair-enabled shuttle vans have been purchased to support the transportation service. All drivers hold class 4 licenses and are trained in the safe transport of people with mobility issues, including wheelchair users and safe handling of dangerous goods.

"The intention for the dedicated transportation service is to support those we serve and their loved ones who must travel outside of their home community for health-care services," said Kaylee Gray, Island Health Logistics and Supply Chain Manager. "For example, if someone who lives in Port Hardy receives care at Port McNeill Hospital and is discharged from that site, staff

"A new transportation service now rolling between healthcare sites in Port Hardy, Port McNeill and Port Alice is improving access to healthcare services for North Vancouver Island residents."

at Port McNeill Hospital will make arrangements for those individuals to be transported free of charge back to Port Hardy Hospital and vice versa."

The local service also benefits Port Alice residents by providing reliable access to non-urgent hospital-based outpatient services, including x-rays. The local route will also provide courier services, such as transporting lab samples between Island Health sites and pharmacies in the area and gives staff better flexibility in travelling between sites.

"A local shuttle service will not only help our residents who need transportation assistance to access health services in the North Vancouver Island region, but it will also help to ensure paramedics remain available for emergency calls," said Port Hardy Mayor Pat Corbett-Labatt.

The connector service to the North Island Hospital campuses currently provides two round trips daily to assist NVI residents who need to access healthcare services at these locations or who require transportation back to their NVI home communities following a hospital stay.

"I think this service will be welcomed by many of my fellow North Vancouver Island residents," said Bob Kadwell, one of the new inter-facility porters hired for the transportation service. "I enjoy driving and the scenery up here is so beautiful. I'm really looking forward to helping safely shuttle patients and staff between sites."

For more information on NVI health-care improvements, visit **islandhealth.ca/nvi**

Please Be Kind

Island Health is committed to providing professional, respectful and culturally safe care and services to all patients, clients and residents in our facilities.

Our staff, physicians and volunteers have the right to do their jobs in a safe environment, free of physical and/or verbal abuse.

PLEASE BE PATIENT AND CONSIDERATE

as we work to provide the best care possible for everyone. Thank you.

—KATHY MACNEIL, PRESIDENT & CEO

island health

Campus Ultrasound first of its kind

An outpatient ultrasound clinic which opened at Camosun College in February is a bold new partnership between Island Health and the college. The clinic increases access to ultrasound for patients and provides on-site learning for medical sonography students in Camosun's School of Health and Human Services. It also gives Island Health a leg-up in recruitment.

Pippa Cilliers, first year Diagnostic Medical Sonography student.

"Attracting students to pursue their careers with Island Health is so important in today's tight labour market," says Tracy Martell, Executive Director of Surgery, Diagnostics and Ambulatory Care. "We hope this new partnership with Camosun College will not only benefit patients and provide more hands-on learning for sonography students, but it will also help students see the benefits of joining the Island Health team."

Campus Ultrasound has two general ultrasound rooms and two echocardiogram rooms, allowing four students to be trained in-house simultaneously with access to real patients, advanced simulation and experienced Island Health sonographers and radiologists—all in one space.

Students training at the clinic administer ultrasound scans used to diagnose, treat and monitor various medical conditions within two specialty disciplines: general and cardiac. About 32 Camosun College Diagnostic Medical Sonography students receive hands-on training at Campus Ultrasound each year.

"The learning opportunities provided through the program at Camosun have been invaluable," says Pippa Cilliers, first year Diagnostic Medical Sonography student. "Since the clinic opened on campus, I feel my skills and knowledge in this program have improved tremendously. The preceptors are fabulous, and provide us with ample scan time and encouragement. Most patients are more than happy to allow us time to practice our scanning skills with them, and it has been such a positive experience overall. I feel very lucky to be in a program where I am able to align my academic knowledge with the applied skills necessary for my future career in Sonography."

The clinic operates collaboratively between Island Health's Medical Imaging and Heart Health departments. Island Health expects to expand diagnostic ultrasound services by approximately 5,000 general ultrasound exams and 3,000 echocardiogram exams annually at the new clinic, which will be staffed by cardiac sonographers, general sonographers, and clerical support.

"The opening of the Camosun Ultrasound clinic is a significant step towards ensuring that all members of our community have access to the essential health care they need," said Health Minister Adrian Dix. "This state-of-the-art facility will provide high-quality diagnostic services and help to alleviate pressure on existing clinics, making it easier for patients to receive the care they need in a timely manner."

Emily Olsen and Niki Ottosen were presented their awards May 2nd at Royal Jubilee Hospital.

RECOGNIZING MEANINGFUL CHANGE

Island Health is recognizing two people for their efforts to create meaningful change for people struggling with mental health and substance use challenges. Niki Ottosen created an initiative to help people living without homes, and Emily Olsen founded a mental health platform to support, educate and destigmatize mental health issues. The two are winners of Island Health's 2023 Mental Health and Substance Use (MHSU) Community Service Awards.

For the last 14 years, Ottosen's Backpack Project has delivered donations of humanitarian aid such as tents, sleeping bags, warm clothes, and food to members of our community who live without homes. Supplies are donated by concerned, compassionate community members who live throughout the region.

Olsen created the Connection Project Society in 2018 to facilitate events and provide online resources for mental health. Their annual Mental Health Storytelling event takes place in SET,TINES, on W̱SÁNEĆ Territory and allows people to share stories through various forms of artistic expression such as storytelling, music, dance, and more.

"People living with mental wellness concerns face significant challenges every day. Our two recipients have shown so much kindness, willingness, and unwavering tenacity to help people and have touched so many lives in our community positively." said Marion Gibson, chair of the MHSU South Island Advisory Committee.

The MHSU South Island Advisory Committee identifies community members who make a difference in the lives of people with mental health and substance use challenges. It also purchases artwork from artists with lived experience to present to the award recipients.

ISLAND HEALTH EMPLOYEES SHOW GENEROUSITY

Island Health was a recipient of United Way Southern Vancouver Island's Thanks a Million Spirit Award for 2023, thanks to the generosity of our employees.

Island Health has been participating in the United Way's workplace campaign since 1994, and employees have given an incredible $6.3M through donations, fundraisers, and payroll giving.

Executive Director of United Way Southern Vancouver Island Erika Stenson presented the Thanks a Million award to President and CEO Kathy MacNeil along with past and present members of the Island Health United Way steering committee.

From left to right: Alison James, Kathy MacNeil, Erika Stenson, Victoria Power, and Shannon Marshall.

Mental Health & Substance Use Service Link

1.888.885.8824

Are you looking for information on mental health, substance use, addiction medicine, and harm reduction services?

Call any day of the week to connect with mental health and substance use services across the region.

Support – Not Stigma

- Scan the QR code for islandhealth.ca/mhsu
- And check out the new Wellbeing.gov.bc.ca webpage!

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JOIN OUR NURSING TEAM

COWICHAN DISTRICT HOSPITAL

2023 BC's Top Employers

EXCEPTIONAL CARE, EXTRAORDINARY COMMUNITY

Island Health is looking for talented professionals to join our team of compassionate and dedicated nurses at Cowichan District Hospital today.

With a new, world-class community hospital under construction and doors opening in 2027, there are opportunities in all programs, including specialty areas. Registration with the BC College of Nurses and Midwives as a practicing RN or LPN registrant is required.

Join our growing team!
These positions would be a great fit for you if you love the outdoors, want to escape big city living, and are looking for a new, fulfilling career in a vibrant, culturally diverse community that cares.

Relocation assistance may be available for eligible positions.

These positions may also qualify for the Federal Loan Forgiveness program.

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For more information, visit **join.islandhealth.ca/cdhjobs**