

Kiteley, Alana

From: Marsh, Griffin (AADNC/AANDC) <griffin.marsh@canada.ca>
Sent: Monday, April 6, 2020 9:05 PM
To: Kiteley, Alana; Basaraba, Christi (AADNC/AANDC)
Subject: RE: G&M: Remote Ontario First Nation requests aid after confirmed coronavirus case
Attachments: GCLTR 2020-03-27 Ministers re COORDINATED RESPONSE TO COVID-19 IN NAN TERRITORY.pdf

Hi! Sorry for not replying.

Attaching a letter where Grand Chief makes significant asks about PPE. I don't remember one about 30k in particular.

Minister, myself and department folks all spoke to the Chief from Eabametoong and Health folks at various times today. I was in staff level contact with Grand Chief Fiddlers' team all day.

From: Kiteley, Alana <Alana.Kiteley@pmo-cpm.gc.ca>
Sent: Monday, April 6, 2020 8:01 PM
To: Marsh, Griffin (AADNC/AANDC) <griffin.marsh@canada.ca>; Basaraba, Christi (AADNC/AANDC) <christi.basaraba@canada.ca>
Subject: FW: G&M: Remote Ontario First Nation requests aid after confirmed coronavirus case

Hi Griffin and Christi –

Are you able to share the letter referenced below? I may have seen it already, but just want to confirm.

Was your Minister able to connect with Grand Chief Fiddler or the Eabametoong Chief today? Or was there staff/dept level engagement?

Thanks!

From: News / Nouvelles (PCO/BCP) <News-Nouvelles@pco-bcp.gc.ca>
Sent: Monday, April 6, 2020 7:15 PM
To: Kiteley, Alana <Alana.Kiteley@pmo-cpm.gc.ca>
Subject: G&M: Remote Ontario First Nation requests aid after confirmed coronavirus case

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Remote Ontario First Nation requests aid after confirmed coronavirus case

Globe and Mail | Kristy Kirkup and Marsha Mcleod | April 6, 2020

The chief of a Northwestern Ontario First Nation said Monday he has not seen a plan to provide proper medical assessment, isolation or treatment of cases of COVID-19 after a community member tested positive for the virus.

Eabametoong First Nation Chief Harvey Yesno said his community is calling for a Canadian Forces field hospital with capacity to allow for the isolation of 50 to 100 community members because of chronic housing shortages.

The community also requires test kits, a safe testing site and increased health-care staff, Chief Yesno said.

"There has already been significant negligence in the lack of response to this pandemic for remote communities," he said in a statement.

"We had a lag of time here in the north to prepare, but not all parties have grasped the urgency of this situation. I expect our regional organizations and all governments to step up. What we need right now is not that complicated, but needs to be mobilized immediately."

The case of COVID-19 in Eabametoong, also known as Fort Hope, brings to light long-standing gaps in health-care delivery for a number of remote communities, Nishnawbe Aski Nation Grand Chief Alvin Fiddler said Monday.

The state of health care in Nishnawbe Aski Nation (NAN) territory, which encompasses 49 communities, is already severely lacking, he told The Globe and Mail, adding communities are even more vulnerable during the pandemic.

Public-health officials have also expressed concern about the potential for severe outcomes during the coronavirus crisis in First Nations, Inuit and Métis communities because of long-standing health inequities and a higher proportion of community members who suffer from underlying medical conditions.

At least nine First Nations now have confirmed cases of the coronavirus, including Eabametoong First Nation.

On Monday, Indigenous Services said there are 11 cases in Ontario, 20 in Quebec and four in Saskatchewan.

In a recent letter to both provincial and federal ministers, Grand Chief Fiddler urged Ontario and Ottawa to ensure there is a supply of at least 30,000 testing kits for remote and isolated First Nations in NAN territory.

He also said a team of health professionals advising NAN has raised concerns about the amount of time involved in the testing process because swabs need to be taken from remote and isolated communities to be processed at provincial laboratories.

Natalie Bocking, the public-health physician for the Sioux Lookout First Nations Health Authority's COVID-19 regional response team, said Monday that several groups were mobilizing to support Fort Hope.

"We are working with all levels of government in trying to get much needed supplies and help for Fort Hope and other First Nation communities," Dr. Bocking said.

She said the patient who tested positive had travelled from Thunder Bay to Eabametoong, where the patient self-isolated at home and is now doing well.

The Thunder Bay District Health Unit is following up with the airline the person used, as well as other contacts, she added.

At a Monday news conference in Ottawa, federal Health Minister Patty Hajdu did not speak to the specifics of the confirmed case but said it is far more difficult to self-isolate and practise regular handwashing in some communities.

The federal government has been working closely with communities on their pandemic plans to provide appropriate medical care and follow-up, Ms. Hajdu added.

Ottawa recently earmarked \$305-million for a support fund for Indigenous communities.

Chief Public Health Officer Theresa Tam said Monday that public-health officials work with the federal Indigenous Services department to provide guidance on how to manage outbreaks.

"Those do have to be adapted to the realities to what is on the ground," Dr. Tam said.

More than three weeks ago, Chief Yesno, urged federal and provincial governments to respond to the needs of remote and isolated First Nations, saying it would be irresponsible to wait until the first patient arrives at the nursing station.

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Office of the Grand Chief Nishnawbe Aski Nation

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Tel: (807) 623-8228 Fax: (807) 623-7730

March 27, 2020

The Honourable Marc Miller
Minister of Indigenous Services Canada
10 Rue Wellington
Gatineau, QC K1A 0H4

The Honourable Christine Elliott
Minister of Health
5th Floor 777 Bay Street
Toronto, ON M7A 2J3

Dear Ministers Miller and Elliott,

RE: COORDINATED RESPONSE TO COVID-19 IN NAN TERRITORY

As we continue to prepare for the COVID-19 response in Nishnawbe Aski Nation (NAN) communities, we are working closely with our NAN COVID-19 Task Team to ensure the safety and well-being of NAN communities and members. I am encouraged by both of your Ministries' willingness to participate with us in a tri-lateral discussion specific to NAN territory. We will be sending an invitation for our first call to take place early next week.

Prior to that, I would draw your attention to some important issues that we can discuss on our call, and others that I would ask that you address on an immediate basis. These particular requests are directed to the FNIHB; however, it is important that the province understand the issues as well to ensure a coordinated and quick approach.

1. We request that FNIHB confirm in writing that the federal PPE supply is available and being used for staff (both nurses and community health workers) at nursing stations and home and care community programs.

Despite repeated requests, we still do not know what PPE First Nations and Inuit Health Branch has ordered for nursing stations and health clinics, and what plans have been made for additional supplies. This is leading to significant anxiety and stress among health care providers.

2. We request FNIHB confirm in writing that the federal PPE supply is available and being used to prepare communities for assessment centres, self-isolation (quarantine) centres, and isolation centres. Supplies need to be sent before they are required.
3. We request that FNIHB clarify and widely share the process for ordering additional PPE supplies with health authorities, Tribal Councils, and communities.

Some Task Team members have tried to resolve PPE issues directly with FNIHB, but without success. Since March 13, 2020, Weeneebayko Area Health Authority has had two phone calls regarding PPE with FNIHB. FNIHB confirmed that they had received WAHA's request and said they

were working to get PPE to WAHA, without providing a time frame or confirming how much PPE they could expect to receive.

4. That FNIHB complete an inventory of PPE supplies at health authorities and in communities and identify needs.
5. That FNIHB make available on an ongoing basis to health authorities, Tribal Councils, and communities the inventory lists of PPE supplies, testing kits, and critical care equipment. This includes local operations, as sharing this information would be in the best interests of our communities.
6. That FNIHB make available on an ongoing basis to health authorities, Tribal Councils, and communities what additional PPE supplies, testing kits, and critical care equipment have been ordered and where orders are in the delivery process.
7. That FNIHB provide PPE funding to all communities, Tribal Councils, and Health Authorities regardless of community funding agreements.
8. That FNIHB share the Ontario Region Pandemic Plan as it relates to nursing operations. Community members living in remote NAN First Nations rely on nursing stations and nurses for primary care. However, FNIHB has not communicated its plans to ensure ongoing nursing operations should a COVID-19 outbreak occur in a remote NAN community.
9. That FNIHB provide a clear, written description of their contingency plans to ensure ongoing nursing operations in the even of a COVID-19 outbreak in a community.

It is our hope that the tri-lateral process will allow us to work through these important issues quickly, and we look forward to your participation.

Sincerely,
NISHNAWBE ASKI NATION



Grand Chief Alvin Fiddler

cc *Dr. Valerie Gideon (Senior Assistant Deputy Minister, First Nation Inuit Health Branch)*
Anne Scotton, Regional Director General, Indigenous Services Canada (Ontario Region)