

COMMUNITY-BASED REPORTING TEMPLATE

DCI Number/Fiscal Year:

HC-P086 (2022-2023)

Purpose:

This report is for reporting on performance of health programs and services. This report is **not** for reporting financial and audit information. Indigenous Services Canada will use the performance information to develop reports at the regional or national level. This allows Indigenous Services Canada and funding recipients to identify strengths and weaknesses in programming and to adjust programming to better serve the needs of First Nations and Inuit communities. For information on financial and audit reporting requirements, refer to your Contribution Agreement.

Reporting Period:

For the coming fiscal year ending March 31, 2023

Due Date:

The due date specified in your Contribution Agreement

Note:

- Collection and analysis of program performance information should be on-going to support your program management and reviews, and in order to submit the completed Community- based Report by the due date specified in your Contribution Agreement.
- For a multi-community Agreement, the recipient must complete a separate Community-based Report for each community under its Agreement.
- When completing questions that require numbers as answers, be sure to enter “0” when the answer is none. **Do not leave any answers blank.**
- Submit your completed report to the [First Nations and Inuit Health \(FNIH\) Regional Office, Indigenous Services Canada](#) by the due date stated in your Contribution Agreement.
- The following important reference documents can assist you in completing the CBRT:
 - FNIH Program Compendium 2015-2016 provides detailed program descriptions.
 - Program Component Performance Measurement Strategies, which are available from your FNIH Regional Office.

Field Definitions:

Field	Definition
Section 1: Identification Information	
Identification	
Recipient Name	The name of the organization that has received a transfer payment, and can be found in the contribution agreement.
Recipient Number	The number assigned by Indigenous Services Canada to the organization that has received a

Field	Definition
	transfer payment and can be found in the contribution agreement.
Contribution Agreement	
Contribution Agreement Number	Indicate the number on the appropriate Contribution Agreement
Highest type of funding model in the Contribution Agreement	Indicate the highest type of funding model used by the contribution agreement.
Contact	
Given Name Family Name Title/Position Telephone Number Extension Email Address	The given name, family name, position title, telephone number and email address (if applicable) of the person who can be contacted for further information about the report. A valid telephone number includes the 3 digit area code in the format ###-###-####. A valid email address may be in upper or lower case in the format a@a.a.
Reporting Period From (YYYYMMDD) To (YYYYMMDD)	Indicate the reporting period from and to dates from the drop down calendar. Dates are in the format of "Year-Month-Day"
Are the services delivered in the Contribution Agreement for multiple communities?	Select Yes or No If Yes, please specify the names of the communities and their health facilities. (Note: A separate Community-based Reporting Template should be completed and submitted for each community.)
Community Name	Indicate the name of the community where the services are delivered.
Health Facility Name	Indicate the name of the health facility where community members access services.
Section 2: Program Component Reporting	
HEALTHY CHILD DEVELOPMENT	This section is for reporting on all programs, services and activities that contribute to achieving the objectives and outcomes of the Healthy Child Development program component. Healthy Child Development programs are designed to improve overall outcomes of First Nations on-reserve and Inuit maternal, infant, child, and family health. Activities include improving nutrition; promoting early literacy and learning; encouraging physical activities; promoting healthy relationships as well as emotional and mental health; promoting injury prevention and harm reduction, and promoting First Nations and Inuit culture and languages. Programs in this component include Aboriginal Head Start On Reserve (AHSOR), Canada Prenatal Nutrition

Field	Definition
	Program (CPNP), Fetal Alcohol Spectrum Disorder Program (FASD), and Maternal Child Health (MCH).
1. Pre and Postnatal Nutrition Activities	This information is required to identify the types of pre and postnatal nutrition activities that are being offered to pregnant women and mothers of infants up to one year of age. Activities are defined as any program or service element that is funded through the contribution agreement for the purpose of achieving a program or service objective.
Nutrition Screening, Education and Counselling	This involves talking to a pregnant women or mother to determine if she would benefit from nutritional education or counselling. A screening tool is used to determine how a woman eats, what she needs to learn about nutrition, and how to help her set goals for healthy eating. The screening, education, and counselling are done by a program worker or other qualified worker.
<ul style="list-style-type: none"> - Nutrition or dietary screening - One-on-one nutrition counselling/education - Group nutrition counselling/education - Baby food making workshops/classes - Grocery store tours 	Indicate whether the nutrition screening, education and counselling activities and services were delivered in your community by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose its 'best fit', and account for it only once.
Maternal Nourishment	The activities involve providing healthy foods to pregnant and breastfeeding women. This can be done by giving women healthy food directly, giving them healthy snacks when they meet for groups, or giving them food hampers or vouchers.
<ul style="list-style-type: none"> - Food vouchers distributed - Community kitchens/community cooking classes - Food boxes or groceries distributed - Community gardens - Traditional food gathering/distribution/preparation 	Indicate whether the maternal nourishment activities and services were delivered in your community by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose its 'best fit', and account for it only once.
Breastfeeding Promotion, Education, and Support	Breastfeeding promotion encourages women to breastfeed, and encourages communities and families to support women who breastfeed. The education and support elements aim to teach women and their families about the benefits of breastfeeding, how to breastfeed, and how to maintain breast milk supply if separated from their infant, and to support them during breastfeeding.

Field	Definition
<ul style="list-style-type: none"> - Education workshops - One-on-one breastfeeding support - Group breastfeeding support - Peer support program 	<p>Indicate whether the breastfeeding promotion, education, and support activities and services were delivered in your community by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose its 'best fit', and account for it only once.</p>
<p>Supportive Elements that address specific needs of at-risk clients</p>	<p>Supportive Elements are not related to nutrition but can contribute to the improved health of mothers and infants. There are two types of supportive activities. The first includes activities that help women to access nutrition programming, such as transportation and childcare. The second includes non-nutrition activities that help to improve the health of mothers and infants. Examples include, but are not limited to, exercise programs for women of childbearing age or programs that help women quit smoking.</p>
<ul style="list-style-type: none"> - Activities that help women access nutrition programming (i.e., transportation, childcare, etc.) - Activities that help improve the health of mothers and infants (i.e. exercise programs for women of childbearing age, smoking cessation programs, etc.) 	<p>Indicate whether the supportive element activities were delivered in your community by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose its 'best fit', and account for it only once.</p>
<p>2. Breastfeeding: For participants with infants six months or older</p>	<p>Indigenous Services Canada promotes breastfeeding as the best method of feeding infants because it provides optimal nutritional, immunological and emotional benefits for the growth and development of infants. One of the objectives of CPNP and MCH is to increase breastfeeding initiation and duration among participants.</p> <p>Information collected on the numbers of CPNP and MCH participants who have initiated breastfeeding, and on the number who have breastfed for the specified durations, will help Indigenous Services Canada to track and report on the overall, national breastfeeding rates among participants.</p>
<p>Participating Mothers</p>	
<p>Number of participating mothers with babies who turned 6 months (born between October 1, 2021 and September 30, 2022) during the reporting year.</p>	<p>Indicate the total number of participating mothers with babies who turned 6 months (born between October 1, 2021 and September 30, 2022) during the reporting year.</p>
<p>Breastfeeding Duration</p>	

Field	Definition
<ul style="list-style-type: none"> - Mothers who initiated breastfeeding <ul style="list-style-type: none"> • Mothers who breastfed for less than 1 month • Mothers who breastfed for 1 month to less than 2 months • Mothers who breastfed for 2 months to less than 3 months • Mothers who breastfed for 3 months to less than 4 months • Mothers who breastfed for 4 months to less than 5 months • Mothers who breastfed for 5 months to less than 6 months • Mothers who breastfed for 6 months or more - Mothers who did not initiate breastfeeding - Unknown whether breastfeeding was initiated 	<p>Indicate the number of mothers who breastfed for each of the breastfeeding durations listed.</p>
<p>3. Maternal and Child Health Screening and Assessment</p>	<p>Screening and assessment services offered by Community Health Nurses and Home or Family Visitors help to identify the needs of families and to determine the appropriate level and types of services to provide to the family. Comprehensive first level screening and assessments are beneficial for early identification of pregnant women and families with infants and young children who may be at risk for poor health outcomes.</p> <p>Screening can identify risk factors and excessive stresses that may negatively affect a mother's health and the health of her baby.</p>
<p>Screening and Assessment for:</p>	
<ul style="list-style-type: none"> - Risk factors for pregnant women and new mothers such as postpartum depression, chronic conditions such as Type 2 diabetes, gestational diabetes, and tobacco/alcohol/drug/solvent use - Risk factors for developmental milestones for infants and children - Vision/hearing/dental screenings or assessments for referral 	<p>Indicate whether the screening and assessment services were delivered in your community by choosing Yes or No in the drop-down list.</p>

Field	Definition
<p>4. Maternal and Child Health Home Visiting and Case Management Programming Reach</p>	<p>This section provides Indigenous Services Canada with information that is necessary to calculate the program reach by providing the number of participants who receive home visiting and case management services in your community during the reporting year.</p> <p>Women can be receiving home visiting and case management at the same time. Therefore women can be counted in both columns for this question.</p>
<p>Home Visits and Case Management</p>	<p>As part of maternal and child health services, Home Visits is a type of service delivery model that is provided in a home setting by a trained service provider. Services under home visiting include prenatal and post-partum support; infant development activities; identification of parents or families at risk through screening and assessment tools; education and support; and, when appropriate, referrals and case management.</p> <p>Case Management is the linking of an individual or family to health or social services. The key case management components are screening, comprehensive assessment, service planning, service coordination, on-going monitoring, and reassessment or evaluation of needs. Within the context of maternal and child health services, case management builds on the strengths of the individual or family and provides them with long-term support from pre-pregnancy through post-partum, infancy and early childhood.</p> <p>Participant for this question is defined as the primary contact for the home visiting and case management services, including services for their family and dependants.</p> <p>The definition of family is determined by communities. For example, a family could include extended family members and other community members.</p>
<p>Total number of participants who received home visits</p>	<p>Indicate the total number of participants who received home visits.</p>
<p>Total number of participants who received case management</p>	<p>Indicate the total number of participants who received case management.</p>
<p>5. First Home Visit</p>	<p>The earlier in a pregnancy that the first home visit takes place, then the earlier that risks can be assessed and appropriate supports or interventions can be delivered to the family. Information on the stage of pregnancy when women access maternal and child health programming helps the community</p>

Field	Definition
	and Indigenous Services Canada to determine whether more efforts are needed to reach families earlier.
First Home Visits	First home visit is the point of first contact with the MCH program to support pregnant women and families with young children.
Pregnant women who received their <u>first</u> Maternal and Child Health home visit in their 1 st trimester	First trimester of pregnancy is 0 to 12 weeks. Indicate the number of pregnant women who received their <u>first</u> Maternal and Child Health home visit in their 1 st trimester.
Pregnant women who received their <u>first</u> Maternal and Child Health home visit in their 2 nd trimester	Second trimester of pregnancy is 13 to 26 weeks. Indicate the number of pregnant women who received their <u>first</u> Maternal and Child Health home visit in their 2 nd trimester.
Pregnant women who received their <u>first</u> Maternal and Child Health home visit in their 3 rd trimester	Third trimester of pregnancy is 27 to 40 weeks. Indicate the number of pregnant women who received their <u>first</u> Maternal and Child Health home visit in their 3 rd trimester.
Women who received their <u>first</u> Maternal and Child Health home visit within 6 months of giving birth (postnatal)	Indicate the number of women who received their <u>first</u> Maternal and Child Health home visit within 6 months of giving birth (postnatal).
6. Fetal Alcohol Spectrum Disorder (FASD)	FASD services are directed toward First Nations on-reserve and Inuit individuals, children from age 0 - 6, and women of child bearing age. The main focus of the program is pregnant, at-risk women.
FASD Activities	
FASD community capacity building activities (i.e., awareness and prevention activities, and development of action plans)	FASD capacity building activities support First Nations and Inuit communities to build knowledge and skills (capacity) on FASD and healthy child development issues, in order to increase the number of healthy babies and to help prevent FASD. Examples of capacity building activities include FASD awareness and prevention activities and development of action plans. You do not need to report the number of participants in capacity building activities. Indicate whether FASD community capacity building activities were delivered in your community by choosing Yes or No in the drop-down list.
FASD community coordination/FASD case management	A community coordinator is a community-based liaison person who acts as an advocate for the child and the family. Indicate whether FASD community coordination/FASD case management was

Field	Definition
	delivered in your community by choosing Yes or No in the drop-down list.
FASD mentoring	<p>The mentor helps a woman to identify her strengths and challenges and links her to appropriate services and supports that can help to reduce her risk of having a baby affected by FASD.</p> <p>Indicate whether FASD mentoring was delivered in your community by choosing Yes or No in the drop-down list.</p>
7. Aboriginal Head Start On Reserve (AHSOR) Activities	<p>The activity types listed in this question support AHSOR's six components: culture and language, health promotion, nutrition, education, social support, and parental/family involvement. The information from this question will provide a better understanding of how the AHSOR program can support a child's health and development.</p>
Activity Type	<p>Activities are any program or service element that is funded by the contribution agreement for the purpose of achieving a stated program or service objective.</p>
Teaching children their First Nation language(s) (e.g., reading a story, teaching letters or numbers, etc.)	<p>Indicate whether activities related to teaching children their First Nation language(s) were provided by choosing Yes or No in the drop-down list.</p>
Traditional ceremonies and activities (e.g., smudging, gathering traditional foods, visits from Elders, etc.)	<p>Indicate whether traditional ceremonies and activities were provided by choosing Yes or No in the drop-down list.</p>
Early literacy skills (e.g., reading to children, singing songs, etc.)	<p>Indicate whether activities related to early literacy skills were provided by choosing Yes or No in the drop-down list.</p>
Fine and gross motor development activities (e.g., catching a ball, holding a pencil, etc.)	<p>Indicate whether fine and gross motor development activities were provided by choosing Yes or No in the drop-down list.</p>
Providing healthy foods (i.e., snacks and/or lunches)	<p>Indicate whether activities related to providing healthy foods were provided by choosing Yes or No in the drop-down list.</p>
Healthy personal hygiene and dental habits (e.g., teeth brushing, hand washing, etc.)	<p>Indicate whether activities related to healthy personal hygiene and dental habits were provided by choosing Yes or No in the drop-down list.</p>
Physical activity (e.g., outdoor play, games, dance, etc.)	<p>Indicate whether physical activities were provided by choosing Yes or No in the drop-down list.</p>
Linkages (including referrals and collaborations) to professionals and community supports and providers	<p>Indicate whether activities related to linkages were provided by choosing Yes or No in the drop-down list.</p>

Field	Definition
(e.g., housing, education, specialists, etc.)	
Parent and family support activities (e.g., workshops for new mothers and young parents, support groups, etc.)	Indicate whether parent and family support activities were provided by choosing Yes or No in the drop-down list.
Visits from health professionals (e.g., nurses, dental hygienists, etc.)	Indicate whether activities related to visits from health professionals were provided by choosing Yes or No in the drop-down list.
Safety education and awareness activities, (e.g., playground safety, car seat technician training, car seat use, seat belt use, bike safety, etc.)	Indicate whether safety education and awareness activities were provided by choosing Yes or No in the drop-down list.
8. Number of Children in AHSOR Programming	<p>A child's early years (from birth to age six) are the most influential of any time in the life cycle for brain development and for future learning, behaviour and health. The AHSOR program supports children from birth to six years of age. However, similar to a preschool program, AHSOR typically serves children from ages 3-6 before they enter school.</p> <p>Note: If your community has more than one AHSOR program, include the total number of children attending all of the AHSOR programs in your community.</p>
Age	<p>Children younger than 3 years old means children who were younger than 3 years old during the reporting period.</p> <p>Children 3 to 6 years old means children who were between the ages of 3 and 6 years old during the reporting period.</p>
Number of Participants by Program Delivery Type	Indicate the total number of participants in AHSOR programming by age and program delivery type (centre-based and/or outreach/home visiting)
Does the program keep a waiting list?	Indicate whether the program keeps a waiting list by choosing Yes or No in the drop-down list.
If Yes, how many children are on the waiting list?	<p>The number of children on a waiting list means the number for each age group on a waiting list at the end of the reporting year.</p> <p>Note: If you keep a waiting list but no children in a specific age group were on the list at the end of the reporting period, use 0 (zero) for that age group.</p>
9. AHSOR Children and Special Needs	All children are recognized as having unique abilities and gifts, including children who have special needs. Early childhood development (ECD) programs like AHSOR can help to identify children who may be in need of extra supports and ensure their needs are met. If children with special needs

Field	Definition
	<p>are identified and diagnosed early, it can help them throughout their lives.</p> <p>Note: If your community has more than one AHSOR program, include the total number of children who have been diagnosed, screened, assessed, or referred for special needs in all of the AHSOR programs in your community.</p>
<p>Special Needs Diagnosis, Screening/Assessment, Referrals, Waiting List</p>	<p>Children with special needs require ongoing additional support(s) or service(s) for healthy development in order to interact with their peers in day-to-day living. Special needs may include physical, sensory, cognitive and learning challenges, and mental health issues. In this question, a single child may be counted in more than one category of special needs, if applicable.</p> <p>Diagnosis is the identification of a disease, disorder, or syndrome through a method of consistent analysis by a health care professional(s). <u>In this question, count only those children who have received a formal diagnosis, including those who were diagnosed before entering AHSOR.</u></p> <p>Screening and assessment can be used by parents or staff to determine if a child's development is progressing as expected, or if there is cause for concern and a need for further follow up. An example of a screening tool is <i>Ages and Stages</i>.</p> <p>Referral means a child has been referred to a health care professional or professionals, (nurses, doctors, specialists, etc.) for further special needs assessment or diagnosis.</p>
<p>Number of Children by Program Type</p>	<p>Indicate the number of children by program type, Centre-based or Outreach/Home Visiting.</p>
<p>HEALTHY LIVING</p>	<p>This section is for reporting on all program activities that contribute to achieving the outcomes of the Healthy Living program component. The programs in this component support the development and implementation of community-based activities that promote healthy lifestyle choices and support active living. Over the long term, these programs will contribute to the prevention of chronic disease and injuries across Canada. This component includes the Aboriginal Diabetes Initiative (ADI) and Injury Prevention.</p>
<p>10. Chronic Disease and Injury Prevention</p>	<p>The Healthy Living information collected will be used to inform program development, program and services improvement and the need for further</p>

Field	Definition
	investments in programs by Indigenous Services Canada. Information related to the types of activities delivered is essential to evaluate the quality, efficiency and effectiveness of Healthy Living programs and services.
Chronic Disease and Injury Prevention Activities	Chronic Disease Prevention Activities include awareness and education activities relating to diabetes and other chronic diseases, such as raising awareness, undertaking screening and supporting healthy eating and physical activity. These types of activities contribute to increased knowledge among community members about the risk factors for developing, for example, type 2 diabetes, what type 2 diabetes is, how it can be prevented, and who can provide support. Injury Prevention Activities include all injury prevention efforts such as sharing knowledge including traditional knowledge, raising awareness, working to change attitudes, and launching/improving community data collection.
Physical Activity	
Awareness activities related to physical activity (e.g., Diabetes Walks, Healthy Living Awareness Days, physical activity presentations)	Indicate whether awareness activities related to physical activity were provided by choosing Yes or No in the drop down-list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Walking clubs, running clubs	Indicate whether walking and/or running clubs were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Sport/recreation activities (e.g., soccer, basketball, etc.), open gym nights at school, opened/ran a community gym (weights, fitness classes, personal training, etc.)	Indicate whether sport/recreation activities, open gym nights at school, opened/ran a community gym were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Traditional physical activities (e.g. jigging, dancing, games, snowshoeing, canoeing)	Indicate whether traditional physical activities were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Nutrition	
Cooking sessions or classes (including community kitchens)	Indicate whether cooking sessions or classes were provided by choosing Yes or No in the drop-down

Field	Definition
	list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Traditional harvesting, food preparation, food preservation (e.g., berry picking, cleaning fish, canning, etc.)	Indicate whether activities related to traditional harvesting, food preparation, food preservation were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Healthy eating awareness and education (e.g., health fairs, radio shows, social media nutrition posts); displaying nutrition information (e.g., posters, nutrition displays, etc.); taste tests; cooking demos; nutrition presentations; games/challenges; community feasts; nutrition education in schools, preschools or daycares; etc.	Indicate whether activities related to healthy eating awareness and education were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Grocery tours	Indicate whether grocery tours were provided by choosing Yes or No in the drop-down list.
Community gardens	Indicate whether community gardens were provided by choosing Yes or No in the drop-down list.
Good Food Boxes	Indicate whether good food boxes were provided by choosing Yes or No in the drop-down list.
Food Vouchers	Indicate whether food vouchers were provided by choosing Yes or No in the drop-down list.
School-based feeding programs (includes land-based activities)	Indicate whether school-based feeding programs were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Additional	
Diabetes information sessions or workshops	Indicate whether diabetes information sessions or workshops were provided by choosing Yes or No in the drop down-list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Information sessions or workshops on other chronic diseases (e.g., cancer, heart disease, etc.)	Indicate whether information sessions or workshops on other chronic diseases were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.

Field	Definition
Development of resource materials (e.g., posters, cookbooks, displays, guides, etc.)	Indicate whether activities related to development of resource materials were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
Injury prevention training and awareness raising (e.g., safety committees (water safety, properly using helmets), tool kits, "A Journey to the Teachings" training, community data collection etc.)	Indicate whether activities related to injury prevention training and awareness raising were provided by choosing Yes or No in the drop-down list. If an activity you provide could fit under more than one category, choose whichever one is the 'best fit', and identify only once.
11. Diabetes Screening	<p>Collecting information on the number of individuals screened for diabetes in communities and the types of screening activities will help inform program development and guide improvements to diabetes programming and services and is essential to evaluate the quality, efficiency and effectiveness of Healthy Living programs and services.</p> <p>Diabetes and pre-diabetes diagnostic screening refers to glucose testing in collaboration with a primary care worker.</p> <p>Fasting glucose test is administered to determine how much glucose is in a blood sample taken after an overnight fast.</p> <p>OGTT, the Oral Glucose Tolerance Test, measures the body's ability to use glucose. The test is commonly used to diagnose pre-diabetes and diabetes, and is also used to check for diabetes in pregnancy (gestational diabetes).</p>
Do you conduct diabetes diagnostic screening in your community (e.g., fasting glucose, Oral Glucose Tolerance Test (OGTT))?	Indicate whether diabetes diagnostic screening is provided in your community by choosing Yes or No in the drop-down list. If an activity could fit under more than one category, choose whichever one is the 'best fit' and identify it only once.
If Yes , how many individuals were screened in the reporting year?	Provide the number of individuals who were screened for diabetes diagnostic in the reporting year. When the answer is No, please enter "0".
Do you conduct non-diagnostic diabetes awareness/prevention screening in your community? (i.e., non-diagnostic screenings at schools, workplaces, sporting events, health fairs, etc.)	Indicate whether non-diabetes diagnostic screening is provided in your community by choosing Yes or No in the drop-down list. If an activity could fit under more than one category, choose whichever one is the 'best fit' and identify it only once.

Field	Definition
If Yes , provide an estimate of how many non-diagnostic screenings were conducted during the reporting year.	Provide the number of non-diagnostic screenings conducted during the reporting year. When the answer is No, please enter "0".
12. Diabetes Management	<p>Collecting information on how diabetes is managed after diagnosis helps to inform program development and to guide improvements in diabetes programming and services. Information related to the types of activities delivered is essential to evaluate the quality, efficiency and effectiveness of Healthy Living programs and services.</p> <p>Screening for complications is screening for limb, eye (retinal), cardiovascular, kidney (renal) and foot care complications according to Diabetes Canada's clinical practice guidelines for the prevention and management of diabetes in Canada.</p> <p>Referrals to health professionals or services are referral activities such as: working with the province or territory and other health care providers to improve the coordination of services for those accessing care outside the community; referral to hospitals or other treatment and management services for people with diabetes complications; and communication with community health nurses to ensure home care is provided after hospitalization is no longer required.</p> <p>Diabetes self-management sessions include, but are not limited to, the following topics: diabetes in pre-pregnancy and pregnancy, access to healthy foods, community weight-loss groups, healthy cooking classes for people living with diabetes, walking clubs or exercise programs for people living with diabetes, stress management sessions for people living with diabetes, sessions on testing blood glucose levels, sessions on diabetes medication and/or insulin and sessions on diabetes self-management using traditional approaches.</p>
Diabetes Management Activities	
Diabetes support or healthy living groups	Indicate whether diabetes support or healthy living groups were provided by choosing Yes or No in the drop-down list. If an activity could fit under more than one category, choose whichever one is the 'best fit' and identify it only once.
Screening for complications, i.e., eye (retinal) screening	Indicate whether retinal screening for complications was provided by choosing Yes or No in the drop-down list.

Field	Definition
Screening for complications, i.e., kidney (renal) screening	Indicate whether renal screening for complications was provided by choosing Yes or No in the drop-down list.
Screening for complications, i.e., cardiovascular disease screening	Indicate whether cardiovascular disease screening for complications was provided by choosing Yes or No in the drop-down list.
Referrals to health professionals or services	Indicate whether referrals to health professionals were arranged by choosing Yes or No in the drop-down list. If an activity could fit under more than one category, choose whichever one is the 'best fit' and identify it only once.
Diabetes self-management sessions	Indicate whether diabetes self-management sessions were provided by choosing Yes or No in the drop-down list. If an activity could fit under more than one category, choose whichever one is the 'best fit' and identify it only once.
13. Diabetes Clinics and Training	<p>Collecting information on the type of education, training and care clinics offered to people in the community living with diabetes will be used to inform program development and guide improvements to diabetes programming and services. Information related to the types of activities delivered is essential to evaluate the quality, efficiency and effectiveness of Healthy Living programs and services.</p> <p>Diabetes education and training clinics include diabetes self-management sessions, or workshops, that are intended to support individuals, groups and families living with diabetes.</p> <p>Foot care and foot screening clinics are delivered to assist individuals or groups with proper foot care, and are provided through Aboriginal Diabetes Initiative funding.</p>
Do you provide or support diabetes education clinics and training for clients to support their self-management (e.g., blood sugar testing, foot care, diet and exercise advice, traditional activities, etc.)?	Indicate whether you provide or support diabetes education clinics and training for clients to support their self-management by choosing Yes or No in the drop-down list. If an activity could fit under more than one category, choose whichever one is the 'best fit' and identify it only once.
If Yes , how many individuals were served in the reporting year?	Provide the number of individuals who were served in the reporting year. When the answer is No, please enter "0".
Do you provide foot care clinics?	Indicate whether you provide foot care clinics by choosing Yes or No in the drop-down list.
If Yes , how many individuals were served in the reporting year?	Provide the number of individuals who were served in the reporting year.

Field	Definition
	When the answer is No, please enter "0".
COMMUNICABLE DISEASE CONTROL AND MANAGEMENT (CDCM)	<p>This section is for reporting on program activities that contribute to achieving Communicable Disease Control and Management program outcomes. Communicable Disease programs are designed to protect First Nations and Inuit communities from preventable diseases. Programs within the Communicable Disease Control and Management component are: Vaccine Preventable Diseases and Immunization; Sexually Transmitted and Blood Borne Infections, Emergencies, and Respiratory Infections (Tuberculosis). For more information on these programs, see the FNIH Program Compendium.</p>
14. Awareness and Education Activities	<p>Information on the types of awareness and education activities helps your community and Indigenous Services Canada to determine where gaps exist and to better plan future activities. It is also the first step toward measuring the effect that awareness and education initiatives have on community knowledge, as well as identifying areas for improvement. This question has been separated into activities for healthcare providers (i.e. nurses, health facility staff, paramedics) and those provided for community members who are not healthcare providers. If you do not have this data separately, you can just include your total number of activities, regardless of intended audience, in the last column. This question asks for the number of awareness and education activities conducted in your community or organization for four different program and initiative areas.</p> <p>Awareness and education activities include social marketing campaigns, education sessions and other initiatives or activities designed to increase awareness and knowledge of communicable diseases, their prevention and how to appropriately manage them. Awareness and education activities will typically be targeted toward First Nation community members; however, in certain instances they can include health workers. If an awareness or education activity involved more than one topic, choose the program and initiative area that is the "best fit" for that activity and count it only once. For example, if an awareness session talked about Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) and Tuberculosis, it should not be</p>

Field	Definition
	<p>counted twice. Choose either HIV/AIDS or Tuberculosis.</p> <p>Use your discretion on how many times an activity should be counted. For example, if the same education session is provided six times throughout the year to six different groups of people, it will likely make sense for your community to count it as six activities. However, if you put up a poster in the health facility and had to replace it twice during the year, it likely will not make sense to count this as three activities.</p>
Program and Initiative Areas	<p>Program and Initiative Areas</p> <ul style="list-style-type: none"> • Sexually Transmitted and Blood Borne Infections • Tuberculosis • Vaccine Preventable Diseases and Immunization • Community Based Infection Prevention and Control
Number of Activities	<p>For each of the program areas listed, indicate the number of related awareness and education activities conducted in your community or organization. Where the answer is none, please enter "0".</p>
15. All Hazards Emergency Plans	<p>The information from this question is needed to identify what has been done in terms of community pandemic planning and what areas require additional work to ensure First Nation communities are well prepared for possible pandemics and other health emergencies.</p> <p>All Hazards Emergency Plan refers to a program, arrangement or other measure for dealing with emergencies regardless of cause. The plan documents the people, procedures, resources, communications, and organizational structures required to avoid or lessen the impact of an emergency.</p> <p>Last updated refers to the date that the last set of revisions were made, whether minor or substantial, to ensure your pandemic plan is fully up-to-date. Provide the day, month and year of the update.</p> <p>Emergency Management/Health Coordinator is a position designated to develop, implement and maintain a community's or tribal council's all hazards emergency plan, especially those with a health component.</p>

Field	Definition
<p>Does your community have an all hazards emergency plan with a health component? (If No, go to 16. Access to Services for HIV Testing and Treatment)</p>	<p>Indicate whether your community has an all hazards emergency plan with a health component by choosing Yes or No in the drop-down list.</p>
<p>When was your community all hazards emergency plan last updated?</p>	<p>Indicate when your community all hazards emergency plan was last updated. Dates are in the format of 'Year Month Day'.</p>
<p>When was your community plan last tested?</p>	<p>Indicate when your community plan was last tested. Dates are in the format of 'Year Month Day'.</p>
<p>Is your community served by an emergency management/health coordinator?</p>	<p>Indicate whether your community is served by an emergency management/health coordinator by checking (√) the option(s).</p>
<p>16. Access to Services for HIV Testing and Treatment</p>	<p>Information on access to services for HIV testing and treatment is required to measure the level of access to HIV/AIDS-related care, treatment, and support. Knowing the current level and type of access is the first step in determining where improvements can be made.</p>
<p>Is HIV testing accessible <u>on the reserve</u>?</p>	<p>Indicate whether HIV testing is accessible on the reserve by choosing Yes or NO in the drop-down list.</p>
<p>Is HIV treatment accessible <u>on the reserve</u>?</p>	<p>Indicate whether HIV treatment is accessible on the reserve by choosing Yes or NO in the drop-down list.</p>
<p><i>If not on-reserve:</i></p>	<p>Near the reserve means close enough to the reserve that travel is not a significant barrier for community members to get tested or receive treatment.</p>
<p>Is HIV testing accessible <u>near the reserve</u>?</p>	<p>Indicate whether HIV testing is accessible near the reserve by choosing Yes or NO in the drop-down list.</p>
<p>Is HIV treatment accessible <u>near the reserve</u>?</p>	<p>Indicate whether HIV treatment is accessible near the reserve by choosing Yes or NO in the drop-down list.</p>
<p>17. Access to Services for other Sexually Transmitted and Blood Borne Infection (STBBI) Testing and Treatment</p>	<p>Information on access to testing services for sexually transmitted and blood-borne infections other than HIV testing and treatment is required to measure the level of access to sexually transmitted and blood-borne infection-related care, treatment, and support. Knowing the current level and type of access is the first step in determining where improvements can be made.</p>

Field	Definition
Is testing for other STBBIs (e.g. beyond HIV) accessible <u>on the reserve</u> ?	Indicate whether testing for other STBBIs is accessible on the reserve by choosing Yes or NO in the drop- down list.
Is treatment for other STBBIs (e.g. beyond HIV) accessible <u>on the reserve</u> ?	Indicate whether treatment for other STBBIs is accessible on the reserve by choosing Yes or NO in the drop-down list.
<i>If not on-reserve:</i>	Near the reserve means close enough to the reserve that travel is not a significant barrier for community members to get tested or receive treatment.
Is testing for other STBBIs (e.g. beyond HIV) accessible <u>near the reserve</u> ?	Indicate whether testing for other STBBIs is accessible near the reserve by choosing Yes or NO in the drop-down list.
Is treatment for other STBBIs (e.g. beyond HIV) accessible <u>near the reserve</u> ?	Indicate whether treatment for other STBBIs is accessible near the reserve by choosing Yes or NO in the drop-down list.
18. Access to Sexually Transmitted and Blood-Borne Infection Testing Technologies	There has been increased development and availability of innovative sexually transmitted and blood-borne infection testing technologies such as self-test kits and dried blood spot testing). This information will measure the level of access to these treatments on-reserve and help identify where opportunities for expansion of these technologies may be beneficial.
Are new sexually transmitted and blood-borne infection testing technologies (e.g. self-test kits, dried blood spot testing) accessible on the reserve?	Indicate whether new sexually transmitted and blood-borne infection testing technologies are accessible on the reserve by choosing Yes or No in the drop-down list.
19. Access to Services for Tuberculosis (TB) Testing and Treatment	Information on access to testing services for TB testing and treatment is required to measure the level of access to TB-related care, treatment, and support. Knowing the current level and type of access is the first step in determining where improvements can be made. If TB is not a concern in your community, please choose N/A from the drop-down list.
Is TB testing accessible <u>on the reserve</u> ?	Indicate whether TB testing is accessible on the reserve by choosing Yes, No or N/A in the drop-down list.
Is rapid point-of-care testing available <u>on the reserve</u> (Gene Xpert)?	Indicate whether rapid point-of-care testing is available on the reserve by choosing Yes, No or N/A in the drop-down list.

Field	Definition
Is TB treatment accessible <u>on the reserve</u> ?	Indicate whether TB treatment is accessible on the reserve by choosing Yes, No or N/A in the drop down list.
<i>If not on-reserve:</i>	Near the reserve means close enough to the reserve that travel is not a significant barrier for community members to get tested or receive treatment.
Is TB testing accessible <u>near the reserve</u> ?	Indicate whether TB testing is accessible near the reserve by choosing Yes, No or N/A in the drop-down list.
Is rapid point-of-care testing available <u>near the reserve</u> (Gene Xpert)?	Indicate whether rapid point-of-care testing is available near the reserve by choosing Yes, No or N/A in the drop-down list.
Is TB treatment accessible <u>near the reserve</u> ?	Indicate whether TB treatment is accessible near the reserve by choosing Yes, No or N/A in the drop-down list.
Supporting Documents (if applicable)	This table allows you to identify the supporting document(s) being submitted and the method of submission.
Title	Enter the name of the supporting document.
Submission Method	<p>From the drop-down list, select the method by which additional documents will be submitted. The options include:</p> <ul style="list-style-type: none"> - Attachment - Email - Facsimile - Mail - By Hand/Courier <p>If you select 'Attachment' as the submission method, an 'Attach File' button will appear. Selecting this button allows you to select a file that will be attached to the form. After attaching the file, you can click on the paper clip icon on the left side of the Adobe application to see the attached file. Once the file is attached, the 'Attach File' button changes to 'Remove File'. To remove the file only, select this button. To clear all fields for a single document and remove the associated file, select the [-] button.</p>
Declaration	
Given Name Family Name Title/Position Date (YYYYMMDD)	The given name, family name and title/position of the person who acknowledged the accuracy of the information, and the date on which it was completed. Dates are in the format of 'Year Month Day'.