Sioux Lookout
First Nations
Health Authority

Social Emergency Committee - Update

How We Started. Where We Are. Where We Are Going.

A Collaborative Approach to Community Wellness

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What is a Social Emergency?

An event/situation threatening human life, mental health, or social fabric (e.g., suicide clusters, severe community dysfunction, food insecurity).

Purpose of the Social Emergency Committee

To coordinate a unified response to social emergencies impacting First Nations Communities:

1. Ensure we are responsive and aligned internally so that programs are not working in silos.
2. Support First Nations leadership with clear communication about what resources are available and how they can be mobilized.
3. Ensuring that when communities experience social disruption or crisis, SLFNHA responds in a way that is organized, collaborative, and respectful of community leadership.

How We Started

- Recognized increasing frequency and complexity of social emergencies.
- Identified need for structured, coordinated internal response.
- Established cross-departmental leadership table.
- Align with emergency management and public health mandates.

Foundational Principles

Community-driven and culturally grounded approach.

- Respect for First Nations leadership and governance
- Collaboration and partnership
- Timely, coordinated, and trauma-informed response.

Where we are now...

Formalized committee structure and defined roles:

- Follow IMS structure
- Regular coordination meetings/adhoc meetings during active events
- Improved communication pathways internally and externally
- Strengthened partnerships with leadership and agencies.

SLFNHA Services Provided

September 2025 – February 2026

Nodin Social Emergency Response Service:

- 45 crisis requests out of which 40 have been supported
- 10 volunteer crisis teams have been arranged; the total number of volunteer days is 62
- Contractors have spent a total of 402 days in communities
- Contractors have supported a total of 9805 individuals through group activities (this number does not include individual Counselling or individuals supported by volunteer teams)

SLFNHA Services Provided

September 2025 – February 2026

Engagement & Partnerships:

Prevention and Awareness Messaging:

- Ongoing prevention and awareness messaging shared across departments and communities, as directed, to ensure clear and consistent communication

Crisis Scenario Templates:

- Crisis communication templates are in draft to support timely and coordinated internal and external messaging during emergencies

Department Messaging Guidelines

- Standardized templates and guidelines in development to support consistent messaging across departments during social emergencies and service disruptions

SLFNHA Services Provided

September 2025 – February 2026

Diabetes Program

- Diabetes 1001 trainings to 13 community members (including what to do in emergency/critical situations)

Anishinabewaadizwin Program

- Cultural Support – Loss and Grief – 12 Clients
- Kiiweminowin Family Camp – various supports for 3 families
- 12 Sweat Lodges - 91 participants
- Traditional Medicine teachings
- Cultural teachings at Hostels
- Assist with assessments of children and create a cultural safety net for remote communities
- Providing support for families in hospital; traditional medicines –approx. 25 patients
- Providing support for families with palliative care – approx. 8 patients

SLFNHA Services Provided

September 2025 – February 2026

Approaches to Community Wellbeing

- Hosted Knowledge Gathering for Maternal and Newborn Health Status Report – Lac Seul
- Mental Health First Aid Training – Kitchenuhmaykoosib Inninuwug – 19 community workers in partnership with IFNA
- Wunnumin Lake First Nation – presentation to Chief and Council on the Sparrow Ascent project
- Harm Reduction Presentations and Booths(Safer Snagging; Safer Partying; Harm Reduction 101; Long Term effects of Substance Use; Effects of Alcohol and Non-beverage alcohol; Opioids Education; Hep C; STBBI presentations)– total of 17 educations events and a total of 312 participants
- Provided Community Needs Assessment training to all attendees at the Health Director's Conference
- Wandering dogs - providing guidance, coordination and safety measures to manage roaming animals
- Mould remediation – assisting communities with identifying, reporting and addressing mould-related health hazards.
- Water Treatment Operator Safety – supporting communities with concerns about exposure to chemicals and raw sewage.

Services Provided *(continued)*

Harm Reduction Supplies Distributed:

Monthly Totals						
Date	Injection	Snorting	Crack	Meth	Naloxone	DTS
September	8900	180	170	20	67	240
October	5140	60	76	56	203	100
November	6700	355	564	150	308	170
December	8900	120	688	40	115	280
January	6100	120	270	100	65	140
February	6100	60	610	100	40	50
TOTAL	41840	895	2378	466	798	980

Services Provided *(continued)*

Naloxone Training and Kit Distribution - Sept 2025-Feb 2026

Date	Location	How many trained?	# of Kits distributed?	Comments
22-Sep	Muskrat Dam	6	6	6 Muskrat Dam Health Centre/ Band Rep Office/ Treatment Centre staff trained with training manuals
25-Sep	Muskrat Dam	9	14	Trained 9 Muskrat Dam community members and health centre staff informally
15-Oct	WINKS – Windigo Students	6	6	Trained 5 windigo students and 1 Windigo staff
13-Nov	Pelican Students	4	37	15x 241247, 22x 240751B, informally trained 4 Pelican Falls students at NAN student orientation
18-Nov	KOBE Students	12	18	12 KOBE Students trained with Naloxone PPT
19-Nov	Kejick Bay	11	19	11 Kejick Bay community members trained during NAAW event
24-Nov	Wabigoon Lake	5	53	Trained 5 Wabigoon health centre staff in naloxone and spoke with them about fentanyl drug testing strips for NAAW. Distributed 53 naloxone kits to trained staff and the extras to keep in community.
25-Nov	Saugeen	9	36	Trained 9 Saugeen community members for NAAW
25-Nov	Webequie	15	45	Trained 15 community members in naloxone, and did an impromptu naloxone demo for NAPS on the 27th for their drugs and alcohol presentation.
26-Nov	Saugeen	5	15	Trained 5 Saugeen community members for NAAW
07-Feb	Minnitaki Lodge – ROC Peer Training Camp	12	12	Trained 11 youth and escorts from community for Peer Training Camp at Minnitaki Lodge, only 2 had been previously trained
12-Feb	Onaman Ziibi – Nodin Family Camp	3	7	Trained 3 community members (adults) at the Nodin Family Camp via informal conversation, no one trained previously
TOTAL		**97**	**268**	

Menu of Services

Outlined resources available to communities during social emergencies.

- Public Health response and nursing surge support
- Mental health and wellness supports
- Emergency management coordination and planning assistance

Current Strengths

Integrated public health and emergency management response

- Coordinated support and resources to communities.
- Integration of public health expertise with emergency management principles to ensure that the response is organized, culturally grounded, and aligned with community needs.
- While we do not directly deploy staff into communities, we are able to readily mobilize resources, guidance, and technical support to programs and partners who are on the ground.
- We maintain clear documentation and situational awareness processes, which ensures that decisions are informed, timely and transparent. This also allows us to track trends, identify gaps and support continuous improvement.
- Use of the Incident Management System (IMS) framework across Mitigation/Prevention, Preparedness, Response, and Recovery Phases.
- Menu of Services Document – Outlines the full range of resources, supports, and guidance available to communities during times of crisis.

Challenges & Gaps

01

Capacity constraints during prolonged or multiple concurrent events

02

Need for clearer activation thresholds. And defined engagement processes

03

External communication with community leadership and partner agencies needs strengthening

04

Complexity in coordinating across partners during rapidly evolving situations

05

Opportunities to improve data tracking, evaluations, and reporting

Where we want to go...

- Strengthen the Social Emergency Committee into a fully coordinated, resilient, and sustainable system
- Expand into a ***Regional Social Emergency Group***, bringing in partner organizations to improve outcomes.
- Formalize governance through a clear Terms of Reference and defined activation protocols.
- Ensure dedicated surge capacity and resources for rapid, effective support.
- Integrate evaluation and continuous quality improvement to learn from each event.
- Maintain a proactive, culturally grounded system that supports community safety, health and wellbeing.

Our Vision Forward

- A responsive, coordinated, and culturally grounded social emergency system
- Sustainable, resilient, and integrated across SLFNAH programs and partner organizations.
- Strong partnerships with First Nations leaders and regional agencies.
- Regional collaboration to improve community outcomes during social emergencies.
- Continuous improvement through learning, evaluation, and shared best practices.

Next Step(s):

Coordinator, Social Emergency – Safe Communities

We are currently recruiting for a dedicated Coordinator position.

- Single point of contact for social emergency activation.
- Coordinates internal programs and external partners
- Strengthens planning, documentation, and follow-up processes.
- Supports continuous quality improvement.

Next Step(s):

Expanding to a Regional Social Emergency Group

- Build a collaborative network of partner organizations across the region.
- Enhance resource sharing and coordinated response.
- Standardize protocols and communication pathways.
- Strengthen collective capacity to respond to social emergencies

Potential Partner Organizations

Complementary Organizational and Community Strengths:

- Indigenous governance organizations (Tribal Councils, Friendship Centers).
- Mental Health and social services agencies
- Policing and first responder organizations
- Provincial emergency management teams

Benefits of a Regional Approach

- Improved situational awareness and information sharing.
- Coordinated mobilization of resources
- Increased efficiency in planning, response, and recovery.
- Strengthened advocacy for additional funding and supports.

Next Steps for Regional Expansion

- Identify key partner organizations and invite to join
- Develop regional activation and communication protocols
- Integrate regional group into existing SLFNHA governance and Terms of Reference.
- Conduct joint exercises and after-action reviews to improve effectiveness.

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Questions? Comments?

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Thank you / Miigwech