

First Nations Health Council Report

Union of BC Indian Chiefs
Chiefs Council
March 17-18, 2010
Vancouver, BC

Background & Chronology

- Transformative Change Accord – Signed Nov. 2005
- TCA:FNHP Released & First Nations Health Plan MoU signed- Nov. 2006
- UBCIC resolution supporting TCA:FNHP, FNHP MOU, and establishment of the FNHC – Jan. 2007
- Meeting of UBCIC, BCAFN, and FNS to form the FNHC - Feb 2007
- UBCIC Resolution supporting FNHC ToR in principle – Mar. 2007
- TFNHP signed – June 2007
- BCAFN Resolution supporting TFNHP- June 2007
- BCAFN Resolution supporting FNHC ToR- June 2007
- FNS Resolution supporting the FNHC ToR – FNS Sept. 2007
- UBCIC Resolution appoints initial co-chair to FNIHGC – Nov. 2007
- FNHC endorses the ToR for its sub-committee the FNIHGC – June 2008
- Through resolution- BCAFN(No: 292008)/FNS(No: 0608.22)/UBCIC (No: 200825) support the development of regional Governance Caucuses

Implementing the Health Plans

- Both the Transformative Change Accord First Nations Health Plan and the Tripartite First Nations Health Plan are supported through resolution by UBCIC, FNS, and BCAFN.
- Tripartite First Nations Health Plan calls for the development of a First Nations Health Council
- The formation of the FNHC began the work to implement the health plans
- FNS provided initial administrative support for the activities of the FNHC
- Health Canada provides a 4 year funding commitment to health plan
- BC provides funding year 1 and year 2 only
- FNHC technical resources work with provincial and federal partners to move health actions forward
- FNHC supports FN's communities through the Community engagement hub process and organizing of the Gathering Wisdom forums

Implementing the Health Plans cont...

- FNHC creates sub committee (FNIHGC) to lead work on health governance
- Political organizations appoint representatives as co-chairs for the FNIHGC
- Regional Caucus work begins with FN's in each region
- FNHC determines that they needed a more appropriate structure to implement the Health Plans and forms the FNHS as an interim administrative arm to provide technical support to implement health plan initiatives
- BC commits 83.5 million over 10 years and agrees to “reset the clock” on the implementation of the TCA:FNHP

Establishing a FN Health Society

- The FN Health Society was registered on 6 March 2009 (File No S-54796) and started as a new legal entity on 1 April 2009 as the 'business arm' of the First Nations Health Council.
- The FN Health Society Constitution and Bylaws were established and now form the basis under which the Society operates to provide corporate and administrative support to the First Nations Health Council.

FN Health Society

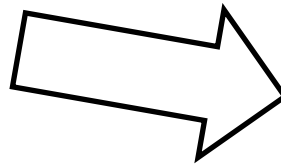
An Interim Structure

- The FN Health Society receives strategic direction from the First Nations Health Council while the Directors ensure the Society meets its obligations to the FNHC members and for the implementation of the TFNHP.
- **This new entity is an interim structure, and is not intended to preclude governance discussions with First Nations leadership.**

FN Health Society

HealthSociety Members

Chief Lydia Hwitsum (Co-chair)
Debbie Abbott (Co-chair)
Chief Elmer Moody
Chief Fabian Alexis
Chief Bill Starr
Chief Jennifer Bob
Grand Chief Doug Kelly
(ex officio)



HealthSociety Directors

Ruth Williams
Carol Ann Hilton
Marilyn Rook
Pierre Leduc (Chair)
Matt Pasco
John Scherebnyj (Treasurer)
Madeline Dion-Stout

Business Model

FIRST NATIONS HEALTH COUNCIL

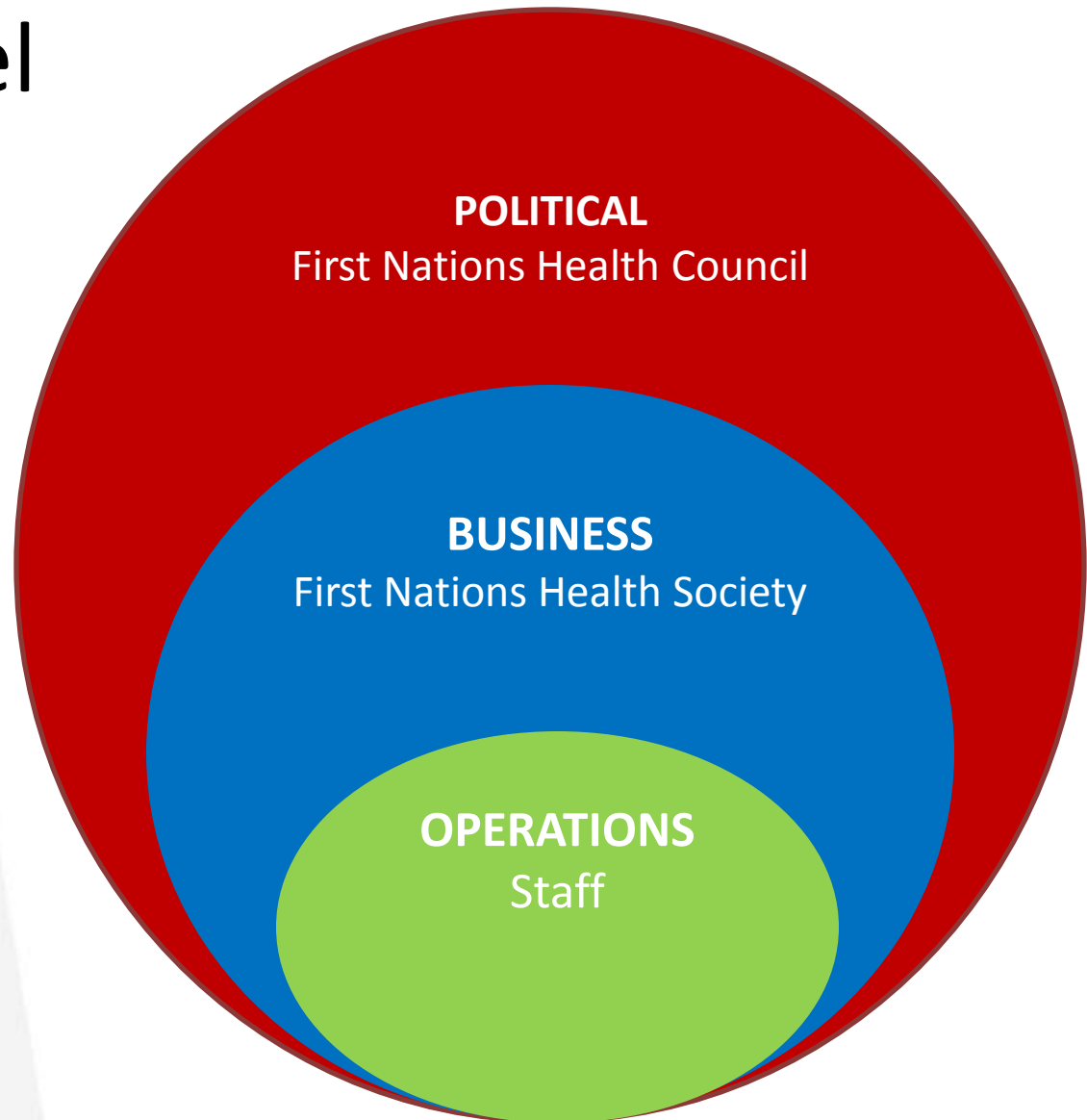
- Political Advocacy voice for BC First Nations
- Members of FN Health Society
- Accountable to BC First Nations Leadership, and communities

FIRST NATIONS HEALTH SOCIETY

- Manage human and financial resources of FNHC
- Accountable to First Nations Health Council (through accountability framework)

FNHC STAFF

- Lead initiatives
- Implement the plan



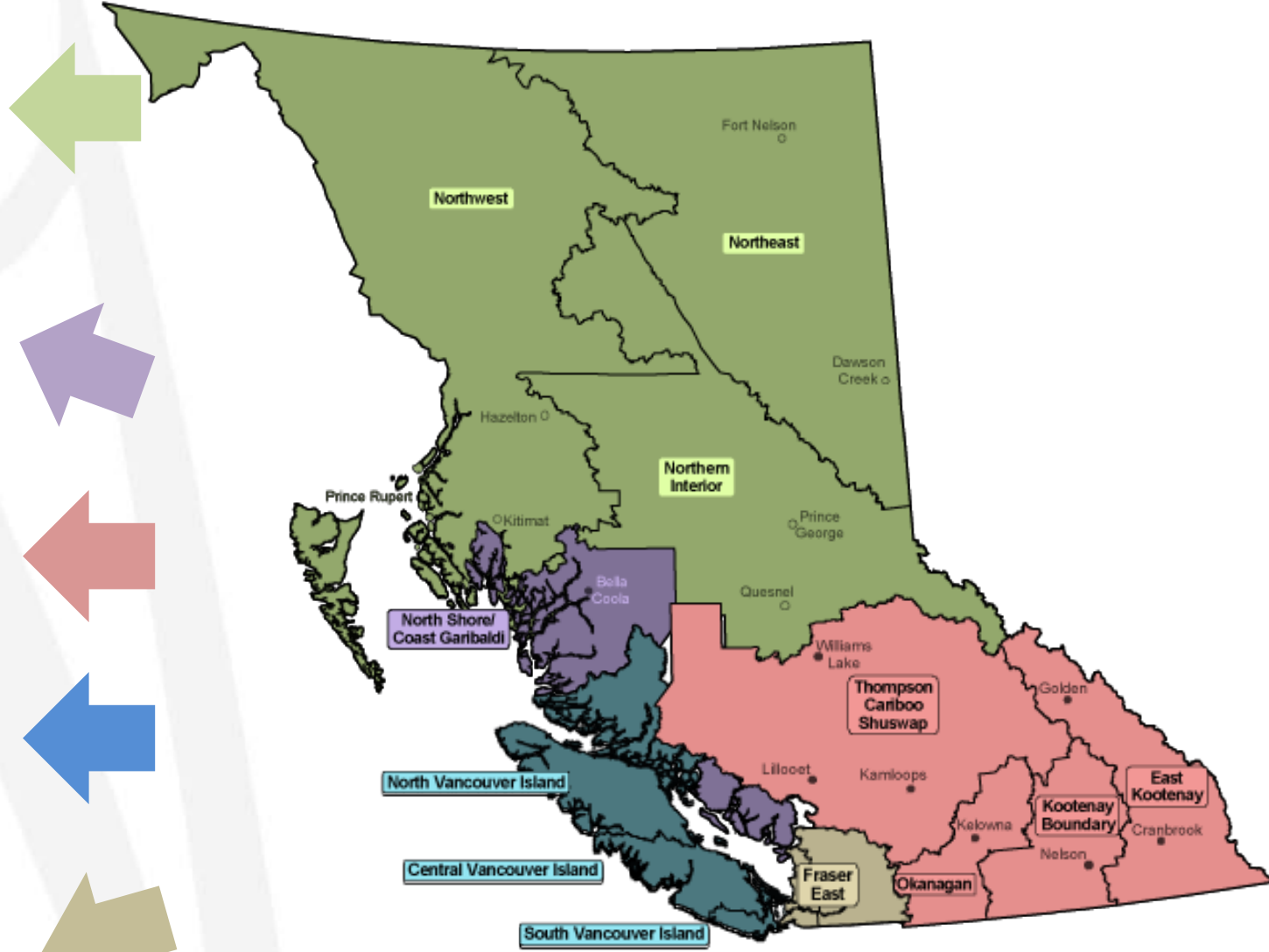
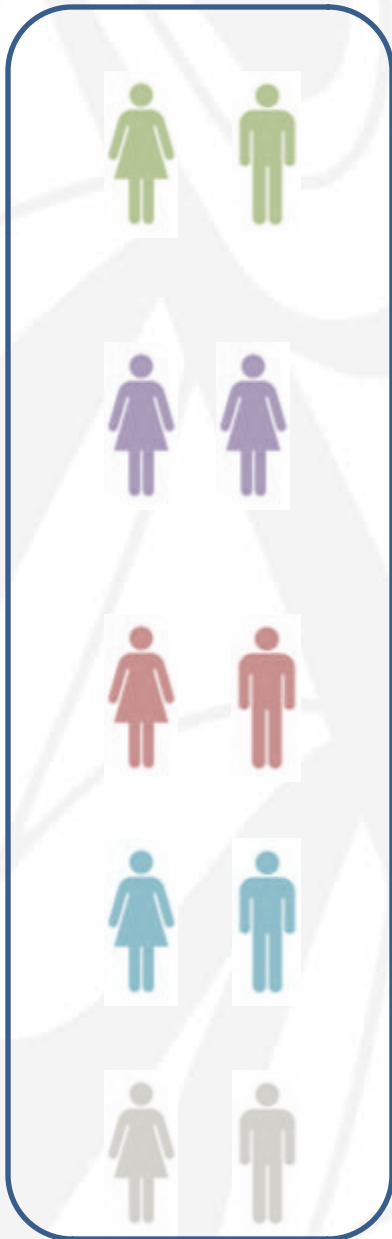
FN Health Society- Financial Reporting

- The First Nations Health Council (and its business arm the FN Health Society) are funded by the BC and Canada to implement the Tripartite First Nations Health Plan
- FN Health Society allocates its annual budget in accordance with the FNHS Strategic Plan and reports in accordance with the Societies Act
- 2009-2010 financial reports for the FN Health Society will be included in the Annual Report
- 2007-2009 financial reports are included in the First Nations Summit audit, these revenues and expenditures will be detailed more fully in the pending 2008-2009 FNHC year in review report

Regional Representation

- In accordance with Summit resolution #1109.16 the FNHC is working with the FNIGHC to explore the option of changing from the current UBCIC, FNS, BCAFN representation to regional representation.
- BC First Nations have indicated a need to operate independently from the three (3) political organizations and act on behalf of all BC First Nations.
- This is consistent with the approach of other Councils and First Nations organizations that have moved to regional representation (ie Fisheries Council)

Proposed Regional Representation- FNHC



First Nations Interim Health Governance Committee Update



Why First Nation Health Governance?

- A common approach to province-wide initiatives and strategies which affect all BC First Nations
- A clear understanding of the roles of Provincial, Federal and First Nations in matters of health
- Which will lead to:
 - First Nations owned and operated health programs
 - Greater community control over the design and delivery of health programs and services



First Nations Interim Health Governance Committee

- FNIHGC co-chairs are appointed through the three political organizations respective processes
- Terms of Reference First Nations Interim Health Governance Committee ('the Governance Committee') – approved September 22, 2008 by the First Nations Health Council
- TOR for the Governance Committee are available online at the First Nations Health Council
http://www.fnhc.ca/index.php/health_governance/history/
- The FNIHGC TOR describe the membership of the committee and their roles & responsibilities



First Nations Interim Health Governance Committee

Current Committee members include:

- **North:** Chief Willard Wilson, Chief Margery McRae, Warner Adam, Feddie Louie, Anne Sam, Doris Ronnenberg, and Justa Monk
 - **Interior:** Chief Shane Gottfriedson, Chief Jonathan Kruger, Gwen Phillips, Chief Darrell Bob, Chief Ko'waintco Michel, Chief Bernie Elkins, Chief Geronimo Squinas
 - **Fraser:** Chief Willie Charlie, Chief Maureen Chapman and Councillor June Quipp
 - **Vancouver Coastal:** Charles Nelson, Ernest Armann and Leonard Bob
 - **Vancouver Island:** Cliff Atleo, Chief Russ Chipps, Chief Bob Chamberlin, and Jennifer Williams
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Negotiations Mandate

The First Nations Negotiations Mandate, developed by the FNIHGC, identifies the following priorities:

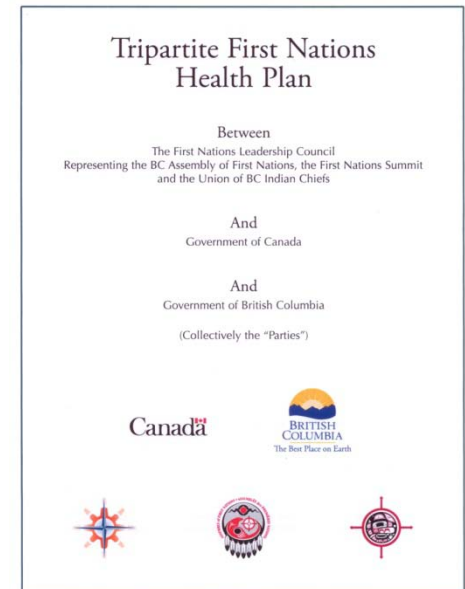
- Respect that every First Nation has the right to govern their health
- Quality care services & standardized programming – bylaws/constitution
- Access to health data and information
- Culturally appropriate care
- Reciprocal accountability and decision making authority
- Ethical practice – autonomy and equity
- Capital provision
- Integrated health planning
- Human resources
- Partnerships – rural/regional/provincial relationships



The Final Draft of the Basis Agreement

- The Basis Agreement

- Is an important phase in the implementation of the Tripartite First Nations Health Plan
- reaffirms the parties commitments to the TCA, TCA: FNHP, and TFNHP
 - 10 year clock reset and 83.5 million BC funding commitment
- Begins to set out the arrangements with Health Canada to transfer Federal programs, services, functions and resources.
- preserves currently funded federal health programs and services



UPDATE: Final draft of Basis Agreement



- Final draft of BC Tripartite First Nations Health *Basis for a Framework Agreement on Health Governance* has been reached (March 3, 2010) subject to final federal funding proposal.
- Target date March 23th, 2010 for Federal Cabinet approval which will include the federal funding proposal
- The *Basis for a Framework Agreement on Health Governance* (“the Basis Agreement”) is a non-binding political accord that describes the process by which a legal agreement may be negotiated.

Principles in the final draft of the basis agreement

- The Parties acknowledge and uphold the principles agreed to in the Tripartite First Nations Health Plan, and additional principles such as:
- **Respect & Recognition**
 - The Parties recognize the need for FN to be able to govern their own health and have direct input into decision-making in health through a nation-based approach
 - The Parties recognize that First Nations' models of wellness, which will include cultural knowledge, values and traditional health practices and models, will enhance First Nations health and the health care system



Principles in the final draft of the basis agreement

- **Governance & Partnership**

- The Parties acknowledge that First Nations have the authority to design and deliver health services at the community level , and collaborative arrangements will be necessary at a regional or provincial level to address population health issues.
- The role of Health Canada will shift from a designer & deliverer of health service to a funder & governance partner
- The Province will continue to fund the TFNHP, act as a governance partner, & provider of provincial health services



Principles in the final draft of the basis agreement

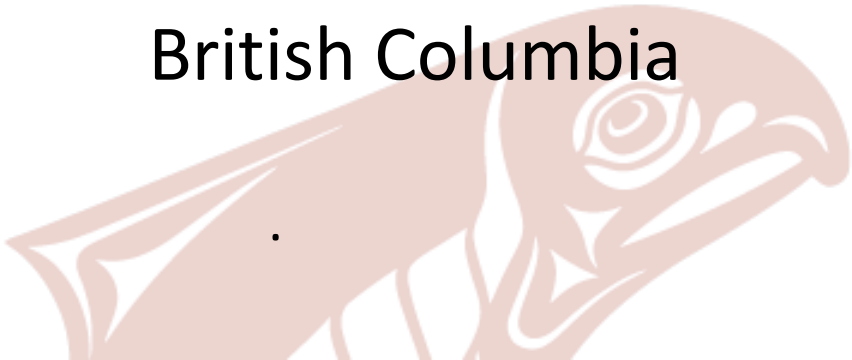
- Strengthening and Restoring Health and Well-being
 - The Parties recognize that the transfer of health policy and program responsibilities to BC First Nations would enable the development of holistic and better integrated programs to improve the necessary linkages in education, child and family, housing etc.
- Accountability
 - The new health governance structure will be based on reciprocal accountability of the parties as described in the TFNHP and as outlined in the final draft of the basis agreement



The final draft of the Basis Agreement

General Provisions:

PURPOSE: The purpose of the basis agreement is to set out the description of the elements, mutual undertakings and processes that form the foundation for the negotiation of a British Columbia Tripartite First Nations Framework Agreement on Health Governance (“the Framework Agreement”) between the Federal Government and the Province and First Nations of British Columbia



The final draft of the Basis Agreement

- **Highlights of General Provisions**

- will provide for the transfer of the policy & service delivery role currently undertaken by the Federal Government to BC First Nations
- will set out the main commitments for the transfer of federal funding to First Nations to support federally funded transferred programs and service that include:
 - Community programs
 - NIHB
 - Capital
 - Policy & program leadership
 - Management & Administrative Services
 - Support to the Tripartite First Nations Health Plan
 - Contains provisions for a ten year agreement with an annual escalator for the first 5 years
 - Recognize that there will be subsequent agreements detailing specific bilateral agreements

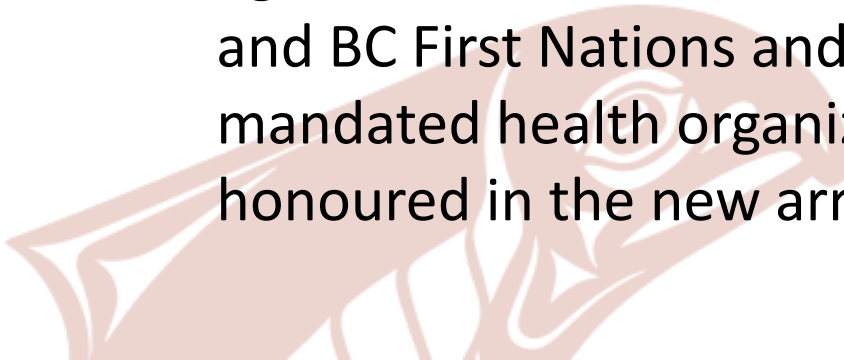
No Prejudice

- The political agreement is a non-binding agreement and therefore does not alter the Federal fiduciary obligation to BC First Nations
- Further, the draft political agreement provides expressly that it does not end or alter the fiduciary obligations of the Crown for First Nations, and it expressly recognizes the authority of First Nations over the design and delivery of health services at the community level.
- The draft political agreement also clearly states that it is not intended to affect any inherent right of self-government vesting in any First Nation, whether with respect to health or otherwise.



The Final Draft of the Basis Agreement

- **Is not a rights-based agreement** and will not affect First Nations rights and title
 - Provides the opportunity and authority for First Nations to assume decision-making over health programs, services, functions and resources
 - Confirms that all existing contribution agreements between Health Canada and BC First Nations and their mandated health organizations will be honoured in the new arrangement.



The Final Draft of the Basis Agreement

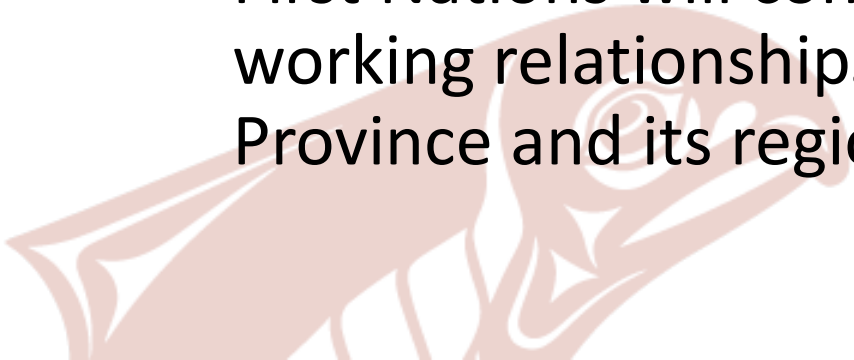
- The final draft of the Basis Agreement outlines a potential staged approach for reaching a final agreement which will:
 - Confirm how First Nations will work with federal resources
 - Set out a 2-3 year transition period
 - Determine what legal arrangements will exist between First Nations and the Province and First Nations and Health Canada
- During this period First Nations will make decisions on the role and functions of the First Nations Health Council, a First Nations Health Authority, Health Directors Association and the interrelationship among these three bodies and with the Provincial Committee on First Nations Health



Transition Period

An opportunity to reassess the agreement

- Once a legal agreement is in place, First Nations will enter a transitional period in which:
 - First Nations will assess the workability of the arrangement with Health Canada this may include potential areas of re-negotiation, and to determine whether to proceed to effective date.
 - First Nations will continue to re-define the working relationships and arrangements with the Province and its regional health authorities.



Fulfilling the FNIHGC Negotiations Mandate

Through the new arrangement the new First Nations Health Authority working in partnership with the FNHDA, FNHC, the PCFNH, and Federal and Provincial Governments will be in a position to address:

- Respect that every First Nation has the right to govern their health
- Quality care services & standardized programming – bylaws/constitution
- Access to health data and information
- Culturally appropriate care
- Reciprocal accountability and decision making authority
- Ethical practice – autonomy and equity
- Capital provision
- Integrated health planning
- Human resources
- Partnerships – rural/regional/provincial relationships



Next Steps

- First Nations Interim Health Governance Committee
 - Updates to be provided at UBCIC, FNS, and BCAFN with potential decision points
 - Complete a transition plan for the interim First Nations Health Council to its final form, including regional representation
 - Confirm ratification process for political agreement
 - Requirement of the FNIHGC process (including Co-chairs, Regional Reps & Regional Caucuses) to work more effectively to carry out their respective roles & responsibilities
- Regions
 - Confirm how the Nations will work together, including roles of host agencies, other available resources
 - Establish clarity around the roles of regional representatives

