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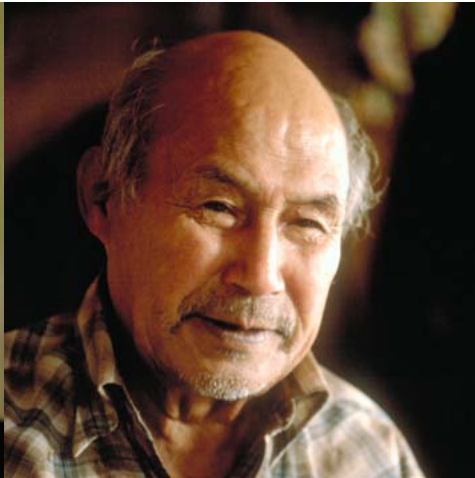
*Your health and
safety... our priority.*

*Votre santé et votre
sécurité... notre priorité.*

FIRST NATIONS AND INUIT HEALTH & THE TRIPARTITE FIRST NATIONS HEALTH PLAN

Northern Health Authority Region

Gathering Wisdom for a Shared Journey III November 4, 2009



Canada

OVERVIEW OF PRESENTATION

- First Nations and Inuit Health overview
- What has changed under the TFNHP?
- Tripartite activities and accomplishments
- Discussion



FIRST NATIONS AND INUIT HEALTH BC REGION

Our mandate:

- Ensure the availability of, or access to, health services for First Nations and Inuit communities
- Assist First Nations and Inuit communities to address health barriers, disease threats, and attain health levels comparable to other Canadians living in similar locations
- Build strong partnerships with First Nations and Inuit to improve the health system



FIRST NATIONS AND INUIT HEALTH BC REGION

Core activities in support of this mandate:

- Transfer existing health resources to First Nations and Inuit control within a time-frame to be determined with them
- Support action on health status inequalities affecting communities, according to their identified priorities - community involvement is key
- Establish a renewed relationship with First Nations and Inuit people



FNIH PROGRAMS AND SERVICES

Health Transfer & Benefits

- ♦ Post Transfer Agreements
- ♦ Transfer Development
- ♦ Integrated Agreements
- ♦ Contracts & Contributions

Non-Insured Health Benefits

- ♦ Drugs; dental; vision; mental health crisis counselling; medical supplies/equipment; medical transportation

Dental

- ♦ Children's Oral Health Initiative
- ♦ Therapy and Treatment
- ♦ Prevention and Promotion

Health Promotion & Prevention

- ♦ National Native Alcohol and Drug Abuse Program
- ♦ Mental Health
- ♦ National Aboriginal Youth Suicide Prevention Strategy
- ♦ Canada Prenatal Nutrition Program
- ♦ Aboriginal Diabetes Initiative
- ♦ Nutrition
- ♦ Fetal Alcohol Spectrum Disorder
- ♦ Aboriginal Head Start on Reserve
- ♦ Early Childhood Development
- ♦ Maternal and Child Health
- ♦ Injury Prevention

Health Protection

- ♦ Communicable Disease Control
- ♦ Epidemiology/Research
- ♦ TB Control
- ♦ Pandemic Emergency Planning
- ♦ HIV/AIDS

Policy and Planning

- ♦ Ab. Health Transition Fund
- ♦ Ab. Health HR Initiative

Environmental Health Services

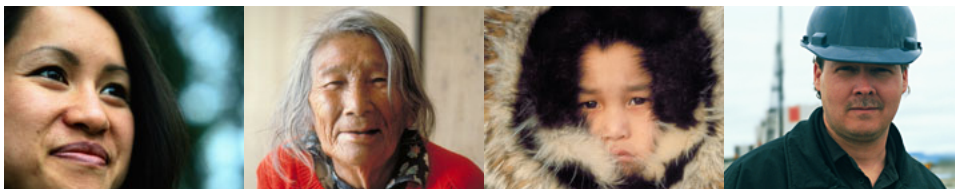
- ♦ Drinking Water and Sewage
- ♦ Food Safety
- ♦ Facility Health Inspection
- ♦ Housing
- ♦ West Nile Virus

Regional Programs Medical Officer

- ♦ Medical Delegated Authority
- ♦ Pharmacy
- ♦ Health Planning & Management
- ♦ Surveillance & Health Research
- ♦ Health Consultation & Liaison
- ♦ e-Health

Nursing

- ♦ Transfer Nursing
- ♦ Home and Community Care
- ♦ Recruitment and Retention
- ♦ Nursing Education
- ♦ Nursing Practice and Research



WHAT HAS CHANGED UNDER THE TFNHP?

- **Bringing a ‘tripartite perspective’ to our work**
 - Renewed focus on the ways in which working through existing partnerships, and building new ones, can better advance shared goals on First Nations health
- **Overcoming boundaries and jurisdictional divisions**
 - Exploring new opportunities to work together to address common priorities
- **Building new mechanisms to support collaboration**
 - Tripartite Management Team
 - Aboriginal Health Leads meetings
 - Tripartite committees, reference groups, and project teams



WHAT HAS CHANGED... CON'T

- **On the ground coordination to support service delivery improvements**
 - Developing a foundation for more coordinated health planning across the tripartite partners and with First Nations communities
- **Improved information sharing and communication**
 - Inviting partners to participate in events, meetings, consultations, etc.
 - Tripartite Communications Steering Committee



TRIPARTITE INITIATIVES

H1N1 Pandemic Influenza

How are we working together?

- Tripartite working group established and meeting regularly to support information exchange and cooperation among partners
- Drafting and distributing regular H1N1 communications to First Nations

How has this made a difference?

- Better and more efficient coordination
- Improved communication among partners and with First Nations
- Faster response times to emerging issue

Next steps

- Coordination for H1N1 vaccine clinics
- Evaluation of efforts
- Applying similar model with other health issues?



TRIPARTITE INITIATIVES

Community Health Planning

How are we working together?

- Completing a discussion paper highlighting current planning approaches, and exploring linkages between the planning processes used by partners

What difference will it make?

- The priorities of First Nations are reflected in provincial and federal planning, and provincial and federal priorities help to shape First Nations plans

Next steps

- Developing a tripartite multi-jurisdictional planning framework that will support increased coordination in health planning



MOVING FORWARD: CHALLENGES

What we've heard:

- The cost of health care in the North
- Access to culturally safe health services
- Support for patient travel
- Support for traditional medicine and healing practices

Working in a tripartite environment:

- Setting shared priorities between partners
- Building towards new ways of working while simultaneously maintaining services and programs that are supporting communities
- Sustaining momentum when change takes time to achieve



MOVING FORWARD: OPPORTUNITIES

- Using a tripartite approach to continue to seek new opportunities to improve health services
 - e.g. pilot projects to explore ways to build better physician services and mental health services
- Foundational partnerships and working relationships in place... and more to come
 - e.g. explore opportunities to make better use of patient transportation funding through collaborative approaches

