

Evaluation of the British Columbia Tripartite Framework Agreement on First Nation Health Governance

Recommendations & Response Plan

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Preamble

Since the release of the <u>Evaluation of the Tripartite Framework Agreement on First Nations Health</u> <u>Governance</u> final report in 2019, a number of crisis events changed the health landscape for First Nations in British Columbia (BC), including the ongoing toxic drug supply crisis, the COVID 19 pandemic, wildfires, flooding and atmospheric rivers, uncovering of mass graves, and increased awareness of the impacts of Indigenous-specific racism in health care. First Nations in BC and Tripartite and health governance system partners adapted to respond to the rapidly evolving environment. We worked hard together as partners to strengthen collaborative approaches to support First Nations in BC in these times. There were also new spaces for dialogue and opportunities for innovation and visioning for the next phase of health system transformation.

As Tripartite partners, we are taking stock of the changes and innovations to date, reflecting on our shared journey thus far, observing shifts in the health system and broader environment, and listening to the guidance of First Nations in BC about our journey over the next five years.

It is our pleasure to bring forward the following recommendations and response action items for the Tripartite partners to act on collectively. These were collaboratively developed by Tripartite partners based on engagement feedback gathered from Chiefs, Leaders and Health Directors/Leads and other community members or service providers between May 2021 and January 2022, including through:

- Spring and Fall Caucus presentations and Question and Answers
- Focus groups at regional or Nation-level tables
- Virtual provincial focus groups
- Gathering Wisdom XI presentation and Question and Answers
- An online survey

The recommendations and response actions are intended to highlight the voices heard from engagement, and Tripartite partner reflections and learnings from the comprehensive 2019 evaluation.

We welcome feedback and look forward to continued collaboration in advancing health system transformation for First Nations in BC. A follow up evaluation is planned for 2024.



Recommendations and Response Plan

In 2011, the historic and unprecedented British Columbia Tripartite Framework Agreement on First Nation Health Governance was signed between the Government of Canada, the Province of British Columbia and British Columbia First Nation Leaders which put in place a new First Nations Health Governance structure that would assume greater control over health programs and service delivery and work more closely with the provincial health system to provide better integrated and coordinated care based on the direction provided by Chiefs and Leaders.

This new tripartite health partnership has fundamentally altered the roles and responsibilities of the partners in First Nations health in the Province of British Columbia, thereby creating differing areas and levels of responsibility for the actions outlined herein. For ease of presentation within this document, all references to "partners" will refer to the tripartite partners. In those Response Actions where the tripartite partners are not specificially referenced, and a partner has not been specifically cited, it is understood that the action may involve one partner or a subset of the tripartite partners consistent with the evolution of our roles in First Nations health since the transfer of federal operations to the control of British Columbia First Nations.

1 Cultivate a clear understanding of First Nations' vision and priorities for health and wellness system transformation through meaningful engagement and enhanced partnerships with BC First Nations.

- 1.1 Continue engagement with First Nations in BC upholding the 7 Directives and honouring regional engagement and governance approaches.
- 1.2 Strategically plan engagement and events, advancing our Shared Vision and the BC First Nations health governance structure and partnerships, including prioritizing engagement topics reflective of community, Nation and regional priorities.
- 1.3 Use engagement findings to inform Tripartite partners' planning and decision-making, and advance information-sharing on First Nations perspectives and priorities among Tripartite and other health partners, where appropriate and when privacy limitations allow.
- 1.4 Canada and the province will continue to engage with BC First Nations through the regional engagement structures established by the First Nations Health Council (FNHC) and the First Nations Health Authority (FNHA) to ensure that BC First Nations views and perspectives continue to be incorporated into the development of new and emerging national and provincial policies or initiatives, as appropriate.

2 Continue to prioritize health system transformation and support alignment with the perspectives and priorities of First Nations in BC and the First Nations Perspective on Health and Wellness Response Actions.

Response Actions

- 2.1 Continue to advance the First Nations Population Health and Wellness Agenda and the ongoing partnership of the FNHA Chief Medical Officer and Provincial Health Officer, including efforts to build multi-sectoral partnerships considering the social determinants affecting the health status of First Nations in BC.
- 2.2 Continue integrating the First Nations Perspective on Health and Wellness in the health system, including First Nation models of wholistic health and wellness, traditional and land-based healing, and trauma-informed approaches.
- 2.3 Integrate First Nations vision and priorities in federal and provincial health legislation, policies and programs, BC Health Authorities policies and programs and health system transformation.
- 2.4 Continue to advance flexible funding models and innovations, examine opportunities to increase the flexibility, responsiveness and sustainability of existing funding, and identify new joint funding opportunities to support innovation and address emerging priorities and needs (such as through partnerships between communities and public and private entities).
- 3 Advance and enhance the Tripartite partnership by strengthening relationships, continuing coordinated planning, programming and service delivery, and enhancing tracking and reporting processes to measure progress against commitments.

- 3.1 Continue coordinating planning, programming and service delivery including a commitment to review priorities articulated within the <u>FNHA Multi Year Health Plan</u> and Regional Health and Wellness Plans.
- 3.2 Strengthen Tripartite and bilateral relationships, uphold the Tripartite Framework Agreement, and advance and measure progress against the evaluation recommendations and other tripartite commitments and agreements.
- 3.3 Develop improved tracking and reporting processes for progress made towards health arrangements, Tripartite commitments, action plans, frameworks and review/evaluation recommendations.
- 3.4 Develop an onboarding orientation package for new Tripartite employees and provincial and federal senior officials on the First Nations health governance structure and Tripartite Committee on First Nations Health. Include partners' roles and responsibilities, reciprocal accountability, anti-racism, cultural safety and humility, and understanding cultures and protocols of local First Nations.

4 Advance progress on building an equitable and culturally safe relationship around data sharing and data stewardship, and supporting access to First Nations research and data to support planning and decision-making.

Response Actions

- 4.1 Advance progress on improving the quality and availability of First Nations health data, ensuring alignment with First Nations data governance work currently underway.
- 4.2 Continue collaboration and information-sharing regarding reporting and evaluation initiatives, including efforts to transform reporting and evaluation requirements for First Nations communities in BC, support reciprocal information-sharing with Nations and communities and the sharing of related tools and resources. This would include data and information on key performance indicators to support the tripartite partners in their shared and indvidual reporting efforts.

5 Continue coordinated efforts to enhance access to quality, wholistic, culturally safe and sustainable health and wellness services for First Nations in BC.

- 5.1 Continue Tripartite partnerships and partnerships with other health system partners through agreements to advance service improvements for First Nations in BC.
- 5.2 Continue FNHA and BC MoH, BC Ministry of Mental Health and Addictions (MMHA) and Regional Health Authorities collaboration on the design and delivery of provincial health services available to First Nations in BC to address gaps and fragmentation, geographical and jurisdictional realities, and facilitate better coordination of care, including clinical/patient information protocols and systems, patient discharge and use of Indigenous patient liaisons.
- 5.3 Continue efforts to bring innovative, wholistic and culturally-safe services closer to home for First Nations in BC, for example, through Treatment Centres, opening new First Nations-Led Primary Care Centres, and continued support for Joint Project Board projects.
- 5.4 Continue to strengthen partnered emergency management response efforts and coordination, and examine opportunities to advance the sustainability of emergency management and response funding to ensure access to health programs and services for First Nations in BC during emergencies.
- 5.5 Support a coordinated, comprehensive approach for services and supports for urban and awayfrom-home populations that identifies mechanisms to reach and engage the population, clarifies roles and responsibilities of partners, and supports equitable access to services, accountability and value for money.

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- 5.6 Support province-wide guidance on the development of health human resource strategies and collaboratively work to support an increased supply of Indigenous and culturally safe health professionals in BC.
- 6 Continue coordinated efforts to address Indigenous-specific racism and advance cultural safety and humility in the BC health system.

- 6.1 Advance adoption of the <u>BC Cultural Safety and Humility Standard</u> and address Indigenousspecific racism in the health system.
- 6.2 FNHA, BC MoH, BC MMHA and Health Authorities to collaborate on the development of shared tools and indicators to evaluate the extent to which cultural safety improvements are felt by First Nations in BC.
- 6.3 Continue efforts to enhance access to culturally safe processes to report incidents of racism, supporting First Nations led resolution processes that are closer to home.
- 6.4 Support continued knowledge development and mandatory trauma-informed training regarding Indigenous-specific racism in health.