



First Nations Health Authority  
Health through wellness

# Mental Health & Wellness

## Memorandum of Understanding

### Funding Guidelines

December 21, 2018



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## **Background**

On July 26, 2018, the Government of Canada, the Province of BC and the First Nations Health Council (FNHC) signed the *Memorandum of Understanding: Tripartite Partnership to Improve Mental Health and Wellness Services and Achieve Progress on the Determinants of Health and Wellness* (“MOU”). The MOU aims to transform mental health and wellness services by putting Nations at the center of the design and delivery of these services. The MOU supports this transformation by increasing investment in mental health and wellness services, supporting Nations to plan, collaborate, design and demonstrate mental health and wellness programs, establishing simplified approaches to funding and reporting, and facilitating greater cross-government collaboration on actions aimed at improving health and wellness outcomes. The MOU resulted in a \$10 Million commitment each from Canada, BC and FNHA for a total of \$30 Million over two years to support Nation-Based Mental Health and Wellness planning activities and demonstration sites.

This tripartite commitment to transform mental health and wellness services with Nations has emerged at an important time for Canada, BC and BC First Nations. Both Canada and BC have committed to build a new relationship with First Nations in BC through the implementation of the United Nations Declaration on the Rights of Indigenous Peoples and the Truth and Reconciliation Commission Final Report and Calls to Action. Further, both Canada and BC have taken steps to restructure their delivery of services by establishing a single federal department responsible for the delivery of services to Indigenous peoples and a new provincial ministry responsible for designing a whole-of-government strategy for mental health and addictions services in BC. As these strategies and service delivery structures evolve, the tripartite partners (herein referred to as Partners) are committed to enriching the existing tripartite health partnership through increased investment, flexible funding, a community-driven, Nation-Based approach that contributes to healing and Nation rebuilding and improvements in the design and delivery of mental health and wellness and substance use services and supports.

The Partners aim to work collaboratively to transform services and supports and improve mental health and wellness outcomes by supporting and fostering:

- Culture as a Social Determinant of Health
- Mental health as a building block for Nation rebuilding
- Integration in service design and delivery
- An approach to addressing root causes

An MOU Implementation Plan, endorsed by the Partners, sets out the processes through which these commitments will be undertaken. The Mental Health & Wellness Table (MHWT) has been established and operates in accordance with the vision and principles outlined in health plans and agreements to date and is responsible for activities as outlined in the MOU Implementation Plan including the approval of Funding Guidelines. Roles and Responsibilities are further defined in Appendix A.

## **Total Funding and Target Regional Allocation**

The \$30 million in funding will support a flexible, transformative approach that supports Nations and aggregations of First Nations to come together to plan, design and deliver a full continuum of culture and strength-based mental health and wellness services, including prevention and early intervention, over two years (2019-2021). This funding

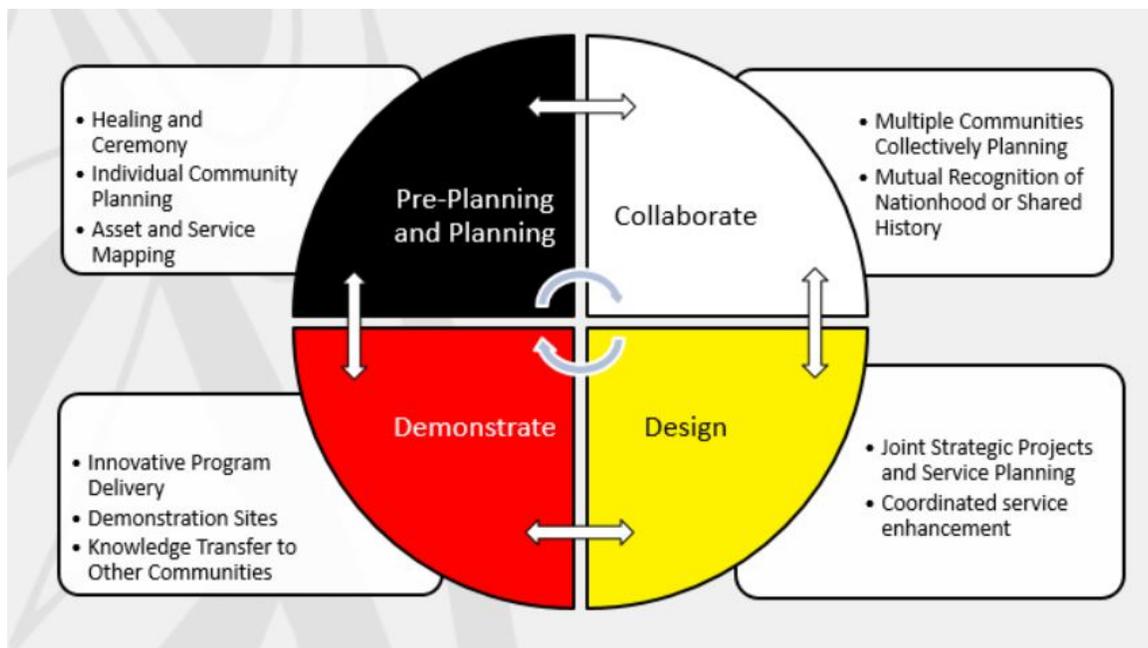


represents an initial phase of work that will inform the development of a broader ten-year tripartite strategy that facilitates a wholistic Indigenous approach for addressing the social determinants of health and wellness.

A target allocation will be determined for each region and will be managed through existing regional engagement processes. Regional allocations may be adjusted as needed to respond to the decisions of Nations on how they wish to work together and will not be constrained by regional health boundaries.

## **Funding Approach**

The funding approach recognizes that each community and Nation is at a different place on their journey to health and wellness. The diagram below describes the spectrum of activities eligible for funding.



In order to support all communities and Nations to achieve their own vision of mental health and wellness, the Partners are committed to creating a spectrum of supports and funding to ensure no one is left behind. Figure 1 outlines the spectrum of supports available, to build a foundation for every Nation to one day have their own demonstration site. This approach will serve as a foundation for a ten-year social determinants of health strategy.

### ***Pre-Planning and Planning***

The initial planning stage will support individual community members to come together to begin the healing journey, identify common interests and needs, and conduct asset mapping. The Partners recognize that supporting healing and ceremony is a necessary first step to rebuilding communities. By coming together through ceremony, communities can begin the journey to health and wellness in a good way. Each journey will be unique; communities may begin by identifying knowledge and other assets already embedded within the community through storytelling and sharing. Building from their traditional knowledge and systems of care, which have ensured the safety and wellbeing of children and families for thousands of years, communities can begin transforming a sickness system into a wellness system. Through these discussions, communities can renew and revitalize community health and wellness plans based on collaboratively identified local needs and interests.



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### ***Collaborate***

Once a community has come together and identified their mental health and wellness needs, they can begin to reach out and collaborate with other communities to address these needs. Collaboration between multiple communities will support the pooling of individual community knowledge and resources in order to benefit the many. Communities may choose to come together based on a mutual recognition of shared Nationhood, common language, shared history of collaboration, or common interests. The Partners recognize that First Nations communities have been historically fractured, and will work to empower communities to come together and plan for a new way of providing mental health and wellness supports and services. Building strong partnerships between communities will provide a foundation for planning a path forward.

### ***Design***

Building from the collaborative partnerships between communities, the design phase will provide the chance to begin implementing changes in mental health and wellness programs and services. The Partners recognize that communities need the support and flexibility to design a plan that reflects their unique needs, priorities and cultures of each group of communities. By combining resources and supporting communities to begin forming partnerships with federal and provincial service providers, joint plans will be turned into action. Communities will be supported to increase service coordination through partnerships with service providers, facilitating a more holistic approach to mental health and wellness.

### ***Demonstrate***

This phase will encourage groups of communities with a plan in place to work together. Funding will be provided to support innovative program delivery demonstration sites. It is recognized that a holistic and integrated approach is needed to address the many dimensions of mental health and wellness (e.g. education, public safety, cultural supports, childcare, etc.). To this end, demonstration sites will support a circle of care system delivery approach. A circle of care is defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) as approaches where First Nations are working “in partnership with public and private organizations to design mental health services and supports that are effective, that build on the strengths of the individual, and that address each person’s cultural and linguistic needs.” Using a circle of care approach, funding and support for demonstration sites will provide First Nations the ability to facilitate greater cross-agency collaboration and form innovative partnerships arrangements with all First Nations-serving agencies. Through interagency collaboration, First Nations reclaim ownership over decision-making processes, building the capacity to respond to the unique needs of children and families within their communities.

## **Funding Process – Statement of Readiness**

Communities and Nations will submit a Statement of Readiness to the MHWT in collaboration with FNHA Regional Teams that aligns to the quadrant (Pre-Plan/Plan, Collaborate, Design, Demonstrate) and activities that they wish to undertake and for which they are seeking funding and partnership support. The level of detail reflected in the Statement of Readiness will increase with the level of support requested and will include the following:



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	Pre-Plan & Plan “Let’s talk about it”	Collaborate “Starting to work together”	Design “Putting the work in writing and testing”	Demonstrate “Let’s show what we can do”
<b>Statement of Readiness will...</b>	<ul style="list-style-type: none"> <li>• Demonstrate community interest in pursuing this initiative</li> <li>• Identify key goals, activities and anticipated timeline</li> <li>• Outline budget requirements for above</li> <li>• Identify single funding recipient</li> </ul>	<ul style="list-style-type: none"> <li>• Identify mutual interest in planning across communities</li> <li>• Identify key goals, activities, and anticipated timeline</li> <li>• Outline budget requirements for above</li> <li>• Identify single funding recipient</li> </ul>	<ul style="list-style-type: none"> <li>• Identify joint project planning concept</li> <li>• Identify list of communities and key partners committed to proceed with design</li> <li>• Identify key goals, activities and anticipated timeline</li> <li>• Outline budget requirements for above</li> <li>• Identify single funding recipient</li> </ul>	<ul style="list-style-type: none"> <li>• Identify initiative and detail an implementation plan ( from Design phase or another process)</li> <li>• Outline timelines for implementation approach and funding required to support the plan</li> <li>• Demonstrate continued partner commitment, and opportunities to further engage partners if appropriate</li> <li>• Identify host agency and single funding recipient</li> </ul>
<b>Outputs could include:</b>	<ul style="list-style-type: none"> <li>• Draft plan and/or asset map</li> <li>• Ceremony or community gathering held</li> </ul>	<ul style="list-style-type: none"> <li>• Collaborative planning document developed</li> </ul>	<ul style="list-style-type: none"> <li>• Plan designed including description of project objectives, outputs, outcomes, evaluation considerations and costing breakdown to support intention to move into Demonstrate quadrant</li> </ul>	<ul style="list-style-type: none"> <li>• Implementation of wholistic, innovative and integrated mental health and wellness related services and supports, in collaboration with communities and partners as appropriate</li> <li>• Plan for continuous service improvement as supported by partners</li> </ul>
<b>Outcomes could include:</b>	<ul style="list-style-type: none"> <li>• Leadership endorsement to proceed to collaborate phase</li> <li>• Identification of key partners for collaboration</li> </ul>	<ul style="list-style-type: none"> <li>• Clear support across multiple communities, and endorsement to proceed to Design phase</li> <li>• Host agency and single funding recipient identified for Design quadrant if appropriate</li> </ul>	<ul style="list-style-type: none"> <li>• Partners will be unified and committed to the collective vision on next steps</li> <li>• Host agency and single funding recipient identified</li> </ul>	<ul style="list-style-type: none"> <li>• Validation of First Nation wholistic mental and wellness service approaches</li> <li>• Continued commitment to partnership and collaboration</li> </ul>



	Pre-Plan & Plan “Let’s talk about it”	Collaborate “Starting to work together”	Design “Putting the work in writing and testing”	Demonstrate “Let’s show what we can do”
<b>Reporting</b>	<ul style="list-style-type: none"> <li>Simple 1 page report of activities completed, outputs, outcomes achieved and intent for next steps</li> <li>Brief financial report</li> </ul>	<ul style="list-style-type: none"> <li>Simple, brief report of activities completed, outputs, outcomes achieved and intent for next steps</li> <li>Brief financial report</li> </ul>	<ul style="list-style-type: none"> <li>The plan to move forward to Demonstrate quadrant will meet the reporting need</li> <li>Brief financial report</li> </ul>	<ul style="list-style-type: none"> <li>Outcome reporting as per implementation plan, at least annually.</li> <li>Thorough report on service experience to share with other communities</li> <li>Detailed financial report</li> </ul>

It would be helpful to consider the following questions in developing a Statement of Readiness:

- What activities will support and promote Nation-Based planning and service design for the social determinants of mental health and wellness?
- Which partners, neighboring nations, federal and provincial departments or ministries could be involved in the work?
- How will the development, renewal or redesign of your health and wellness plans align with your Nation’s vision of health and wellness?
- How will you consider developing coordinated and integrated approaches to mental health and wellness service design, planning and delivery?
- How would those new approaches support prevention and early intervention?
- How will your proposed activities support cultural and traditional healing and ceremony at the individual, family and community or Nation level?
- What support does your community or Nation need to develop a wholistic and integrated approach to mental health and wellness?

### **Funding Approvals – Statement of Readiness**

The MHWT will be reviewing Statements of Readiness from a wholistic, strengths-based, family-focused and community driven Nation-Based perspective in alignment with the Guiding Principles (Appendix B). Each Statement of Readiness will be reviewed for alignment with the Funding Process section. Funding for each Statement of Readiness submitted to MHWT may be fully approved, approved in principle, or recommended for further development with specific guidance provided. If a request is approved in principle, requestors will have a two month window to bring the request back to MHWT for approval, or funding may be reallocated.

For demonstration sites, the MHWT will be reviewing Statements of Readiness for the following:

- Nation-Based governance structure for the project in place
- Readiness to implement
- Integration of culture and traditional wellness
- Builds on existing assets



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- Wholistic approach
- Partnerships in place to enable system transformation to meet Nation’s mental health and wellness goals
- Detailed plan for people and budget

**Funding Timeline**

Funding is intended to be used prior to 2021.

**Budget Re-profiles**

Funds may be re-profiled within a budget provided changes do not increase the overall cost and all activities originally proposed are completed. If activities are revised, an updated written request will be submitted to MHWT for approval.

**Reporting**

Narrative reports related to identified outcomes will be submitted annually and at the completion of activities at a level of detail appropriate to the activities and will be as simple as possible. A template will be provided for this purpose. For demonstration sites, reporting may be requested more frequently to inform the development of the 10-year strategy on social determinants of health.

Financial reporting will be submitted annually at a level of detail appropriate to the funding level and will be as simple as possible. A template will be provided for this purpose.

In addition to community and Nation level outcome reporting the MHWT is developing an overarching provincial reporting framework highlighting trends that will be shared at an aggregate level with communities and Nations.

**Signed by the Co-Chairs on behalf of the Mental Health & Wellness Table:**

Mr. Richard Jock  
Chief Operating Officer  
Community Wellness Service Operations  
First Nations Health Authority

Mr. Nick Grant  
Assistant Deputy Minister  
Strategic Policy and Planning  
BC Ministry of Mental Health & Addictions

MHWT Date Approved: December 28, 2018

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## **Appendix A – Roles and Responsibilities**

Roles and responsibilities are described below:

- **Communities and Nations** – Identify and undertake the planning activities needed to develop Nation-Based Mental Health and Wellness plans and implement demonstration sites in collaboration with partners as needed.
- **FNHA Regional Teams** – Collaborate with communities, Nations, federal and provincial partners on planning activities and demonstration sites and support regional engagement processes.
- **Mental Health & Wellness Table (MHWT)** – Approval and implementation of funding guidelines, criteria and selection process for investments; approval of the Mental Health and Wellness Reporting Framework; and ensuring resources are made available to support Nation-Based planning and implementation processes. The table is Co-Chaired by First Nations Health Authority (FNHA) and BC Ministry of Mental Health and Addictions. The federal government participates on the Mental Health and Wellness Table in an advisory capacity only as it relates to all matters pertaining to funding decisions consistent with the agreements signed under the BC Tripartite Health Process.
- **Regional Partnership Accord Tables** – Collaborate with partners on planning activities and demonstration sites as needed.
- **Federal and Provincial Service Partners** – Collaborate with Nations and FNHA Regional Teams on planning activities and demonstration site implementations.
- **Tripartite MOU Working Group** – Supports the work of the MHWT on all aspects related to investment and planning. The Working Group is also responsible for supporting linkages and identifying opportunities to facilitate cross government collaboration on actions aimed at improving mental health and wellness outcomes.
- **FNHA Operations** – Provides support for planning activities including resources and templates in the Health and Wellness Planning Toolkit, develops guidelines and reports, and administers funding agreements.



## **Appendix B - Guiding Principles**

Planning activities and demonstration sites submitted for funding will align with the Guiding Principles outlined in the Implementation Plan that reflect the 7 Directives as follows:

Directive	Description of Guiding Principles Specific to MOU Implementation
Community-Driven Nation-Based	<ul style="list-style-type: none"> <li>• Foster inclusivity by offering flexible funding opportunities that acknowledges that each Nation is at a different stage of capacity and readiness and that upholds the commitment to leave no community behind</li> <li>• Promote Nation-Based planning and service design for mental health and wellness, including provision of support for communities to come together to plan and support shared service arrangements among communities</li> </ul>
Increase First Nations Decision-Making and Control	<ul style="list-style-type: none"> <li>• Increase First Nations influence over the philosophy, design and delivery of mental health and wellness and substance use services that impact their children, families and communities</li> <li>• Increase the flexibility of funding with a focus on improving outcomes</li> <li>• Respect the autonomy and authority of Nations to make decisions and allocate funding to achieve outcomes set by their communities</li> <li>• Simplify the process for First Nations and Nations to receive and report on funding</li> <li>• Increase the availability of and access to health and wellness data to inform decision-making at the local level</li> </ul>
Improve Services	<ul style="list-style-type: none"> <li>• Foster coordinated and integrated approaches to service design, planning and delivery that account for and address the social determinants of health and wellness</li> <li>• Foster the creation of a continuum of care that brings together the best of traditional approaches with western approaches and encompasses a range of services and supports, including traditional healing, promotion, prevention, capacity building and education, early identification and intervention, wrap around supports, harm reduction, crisis response, trauma-specific services, treatment services and care planning</li> <li>• Promote equity, sustainability and predictability in the allocation of funding for mental health and wellness services</li> <li>• Improve access to services and supports that offer opportunities for cultural and traditional healing and ceremony at the individual, family and community level</li> </ul>
Foster Meaningful Collaboration and Partnership	<ul style="list-style-type: none"> <li>• Foster cross-agency collaboration at system and program and service levels with the intent to enhance the integration and coordination of responses to mental health and wellness and substance use</li> <li>• Enhance the ability of First Nations to access funding for mental health and wellness by increasing and leveraging investments from all sectors whose mandates are directly or indirectly related to mental health and wellness</li> <li>• Enhance the ability of First Nation children, youth and families to access mental health services provided by BC Health Authorities, the Ministry of Children and Family Development and other partners through shared service planning and coordination at the local level</li> </ul>



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<p>Develop Human and Economic Capacity</p>	<ul style="list-style-type: none"> <li>• Acknowledge that planning is a process of promoting the capacity of communities to develop, implement and sustain their own solutions in a way that shapes and supports control over physical, social, economic and cultural environments</li> <li>• Enhance the ability of First Nations to address challenges with recruitment, retention and training of qualified mental health and wellness professionals</li> <li>• Foster discussion on long-term strategies and solutions that support the development of a culturally safe and competent workforce</li> </ul>
<p>Be Without Prejudice to First Nations Interests</p>	<ul style="list-style-type: none"> <li>• Not impact Aboriginal Title and Rights or the Treaty Rights of First Nation</li> <li>• Be without prejudice to self-government agreements, court proceedings, or jurisdictional negotiations</li> <li>• Not impact on the fiduciary duty of the Crown</li> <li>• Not impact existing federal funding agreements with individual First Nations, unless First Nations want the agreements to change</li> <li>• Decisions to pursue Nation rebuilding and a Nation-to-Nation relationship with the Government of Canada and/or a Government-to-Government relationship with the Province of BC belong to each Nation when ready</li> </ul>
<p>Function at a High Operational Standard</p>	<ul style="list-style-type: none"> <li>• Be accountable through clear and regular reporting in the implementation of these commitments, including clear communication on the allocation of funding for this initiative</li> <li>• Promote collaboration and collective approaches to service design and delivery to make the most of available funding for mental health and wellness</li> <li>• Promote good governance in the design of new service models for mental health and wellness</li> <li>• Maintain minimal administrative overhead and flow funding directly to First Nations</li> </ul>