OUR BRAND

The First Nations Health Authority brand is based on the thunderbird, a traditional symbol of transformation and healing. The crescent around the thunderbird represents our environment, families, communities and the context in which our health is determined. The thunderbird's wings reach beyond this crescent, working within our context, but looking to break new ground in First Nations health. The thunderbird is shown looking up to signify a healthy future.

THE DESIGN WAS CREATED BY ANDREW (ENPAAUX) DEXEL, A NLAKAPAMUX ARTIST WELL KNOWN FOR HIS PRINTS AND PAINTINGS.
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EXECUTIVE SUMMARY

We are pleased to share our First Nations Health Authority (FNHA) Summary Service Plan for 2018/2019, which sets out our annual key priorities and the goals, outcome statements, objectives and strategies upon which our priorities are based. This plan marks the third year into our five-year health plan. Our Shared Vision, Mission, Values and 7 Directives remain at the centre of our Summary Service Plan, keeping us grounded in First Nations knowledge and teachings, and aligning our work with the consensus leadership expressed by our communities.

The coming year will see a continued focus on hardwiring First Nations perspectives, values and directives into the broader health system and advancing partnerships that leverage enhanced quality and value for First Nations and Indigenous peoples in British Columbia. Cultural safety and humility serves as a key platform for this change. Enhancing the quality of and improving access to FNHA programs and services will be key features of the coming year’s efforts—including advancing the migration of First Nations Health Benefits from the buy-back arrangement and advancing a regional basis for FNHA program and service delivery. Our organizational capacity will be enhanced through investment in workforce wellness and emergency response capability.

Our four goals continue to be a steady guidepost for our work, helping to steer us toward our Shared Vision:

- Enhance First Nations health governance;
- Champion the BC First Nations Perspective on Health and Wellness;
- Advance excellence in programs and services; and
- Operate as an efficient effective and excellent First Nations health organization.
THE FIRST NATIONS HEALTH AUTHORITY SUPPORTS BC FIRST NATIONS INDIVIDUALS, FAMILIES AND COMMUNITIES TO ACHIEVE AND ENJOY THE HIGHEST LEVEL OF HEALTH AND WELLNESS BY: WORKING WITH THEM ON THEIR HEALTH AND WELLNESS JOURNEYS; HONOURING TRADITIONS AND CULTURES; AND CHAMPIONING FIRST NATIONS HEALTH AND WELLNESS WITHIN THE FIRST NATIONS HEALTH AUTHORITY ORGANIZATION AND WITH ALL OF OUR PARTNERS.” – FNHA MISSION

Our goals are deliberately sequenced to focus:

• First, on the importance of First Nations’ engagement and decision-making in relation to their health and wellness, as part of the new health governance partnership;

• Second, on championing the concept and philosophy of health and wellness throughout the health system and partnering with individuals, families and communities on their health and wellness journeys;

• Third, on innovation and transformation of the delivery of programs and services that address and focus on health and wellness; and

• Fourth, on developing the FNHA into a First Nations health and wellness organization that BC First Nations are proud to call their own, and which will work to serve BC First Nations peoples and advocate for their health and wellness interests with the broader health system.

HEALTHY, SELF-DETERMINING AND VIBRANT BC FIRST NATIONS CHILDREN, FAMILIES AND COMMUNITIES. – FIRST NATIONS HEALTH COUNCIL (FNHC), FIRST NATIONS HEALTH DIRECTORS ASSOCIATION (FNHDA), FNHA SHARED VISION
The Story Behind Our Plan

Our history is an important part of our transformation journey. Through the Health Partnership Accord, our leadership encouraged us to reflect on and honour those who have paved the way—to pay respect to and honour the wisdom of those that brought us to where we are today. For this reason, we take a unique approach in that we focus not just on where we are going but also on where we have been.

Since time immemorial, healthy, self-determining and vibrant First Nations individuals, families and communities thrived throughout what is now known as British Columbia. A common thread across these diverse First Nations cultures was, and is, a holistic perspective on health and wellness reflective of the interconnectedness of the mental, physical, emotional and spiritual facets of life. The well-being of First Nations peoples was forcibly interrupted through government colonial measures designed to “get rid of the Indian problem,” including through disrupting First Nations’ personal and collective self-determination, dispossessing First Nations from the environments that enabled them to flourish, and severing cultural and familial connections that supported First Nations’ mental, emotional, physical and spiritual security.

First Nations leadership, over many years, fought to change this narrative through direct action, court cases and negotiations that strove for the acknowledgment of their land title and rights, and led to the implementation of a new relationship with federal and provincial governments, and society as a whole. Through these efforts, opportunities were created specifically to address the health and wellness of First Nations in BC.

A series of plans and agreements from 2006 to today reflect a broad First Nations health and wellness agenda supported by a strong governance partnership between First Nations and federal and provincial governments. These plans and agreements were developed through the consensus leadership of BC First Nations, exercising their authorities collectively to establish a health governance structure and standards, and to mandate that governance structure to strategically advance BC First Nations health and wellness philosophies, interests and priorities.
Since transfer of services in 2013, we have continued to strengthen our health governance structure and relationships with our partners. Improving health outcomes for First Nations takes many hands, and we could not do this work without the strong relationships we have fostered and our partners’ shared commitment to this journey.

The FNHA has focused on building a health authority that First Nations can be proud of, and this includes ongoing efforts to improve the quality and safety of services and to bring decision-making closer to home. We have a long way to go, but we are committed to challenging ourselves to do better each year, building on what we’ve learned and guided by our 7 Directives and Shared Values that were given to us by First Nations. The following pages illustrate our journey so far.
In 2012, established Joint Project Board, a senior Ministry of Health (MOH) and FNHA forum for joint decision-making, which supports 27 primary health care projects developed by First Nations and health authorities.

Developed three annual Interim Health Plans, followed by the five-year Multi-Year Health Plan in 2016/2017.

Since 2014/2015, annual agreements on reciprocal accountability and priority setting between the FNHA and provincial and federal partners established.

The FNHA is hardwired into various provincial health system decision-making/committee processes, as a governance partner with the MOH.

In 2016/2017, introduced QUALITY AGENDA to improve provincial, FNHA and community services.

In 2016/2017, for the third year, a 5.5 per cent increase applied to all community financial arrangements, supporting communities to utilize increases to address priorities.
In 2015, the FNHA, MOH and health authorities signed Declaration of Commitment on Cultural Safety and Humility in Health Services, with all 23 health regulatory bodies in BC signing by 2016/2017.

- In 2014, Memorandum of Understanding (MOU) signed with BC Coroners Service to address respect of family decision-making/Nation death and grieving laws and protocols. In 2017, Coroners Service signed Cultural Safety and Humility Declaration.

- In 2016/2017, Cultural Safety and Humility Policy Statement published. Cultural safety and humility now part of work plans and discussions of all regional partnership accord tables and embedded in Provincial Health Services Authority (PHSA), Providence Health Care, BC Coroners Service and Joint Project Board work plans.

- Partnership with BC Patient Safety & Quality Council to embed cultural safety and humility as a dimension of quality in health services, including offering a Cultural Safety and Humility Webinar Action Series attended by over 1,800 people.

FNHA employees, partners and health leaders pledged CULTURAL SAFETY AND HUMILITY COMMITMENTS by 2016/2017.

650+
In 2013, the FNHA released results of 2008-2010 BC Regional Health Survey (RHS) phase two, Healthy Children, Healthy Families, Healthy Communities, reflecting 2,476 participants and 36 communities. In 2016/2017, each First Nations community in three of five regions (Interior, Fraser Salish and Vancouver Coastal) participated in the RHS.

In 2015/2016, carried out analysis of preliminary data on opioid crisis with partners, and in 2016 implemented multi-layered harm reduction response. Over 7,000 Naloxone kits provided to First Nations to date.


In 2015/2016, launched 2015 First Nations Community Survey, reflecting a number of First Nations communities across BC, which covered shelter, housing, food and nutrition, early childhood development, health services and social services, among others. In 2016/2017, developed new set of 15 health and wellness indicators with Provincial Health Officer.

DATA GOVERNANCE & KNOWLEDGE DEVELOPMENT

PROGRAM AND SERVICE REVIEWS

Since transfer, reviewed Indian Residential Schools Resolution Health Support Program, Nursing Services, National Native Alcohol and Drug Abuse Program, Aboriginal Diabetes Initiative, National Aboriginal Youth Suicide Prevention Strategy and Maternal and Child Health.

WELLNESS INITIATIVES

The FNHA is an annual partner to Gathering our Voices youth conference and Elders Gathering.

1,800,000

The FNHA has funded approximately 1.8 MILLION COMMUNITY-BASED SUMMER AND WINTER WELLNESS GRANTS since transfer.

In 2013, launched Beefy Chiefs and Champions challenge with First Nations Chiefs and BC health leaders, expanding campaign in 2014/2015 to all BC First Nations citizens—over 5,000 participants.

In 2016/2017, Esk’etemc Commitment Stick initiative launched to support efforts to end all forms of violence against women and girls.
PARTNERSHIPS

Since transfer, **OVER 80 HEALTH PARTNERSHIPS** established with federal and provincial institutions, First Nations, universities and other agencies, which are aligning/leveraging additional resources to advance First Nations priorities.

- In 2013/2014, the FNHA and BC Cancer Agency, BC Association of Aboriginal Friendship Centres (BCAAFC) and Métis Nation BC partnered to improve BC First Nations cancer journeys, and an Indigenous Cancer Strategy was released in 2017. The FNHA also supported integration of Nurse Practitioner services into First Nations communities through NP4BC Initiative with BC.

- In 2015, with Simon Fraser University and St. Paul’s Hospital Foundation, the FNHA established $1.9 million **FNHA Chair in Heart Health and Wellness** at St. Paul’s Hospital. In 2017, the FNHA and UBC created $3 million **FNHA Chair in Cancer and Wellness** focused on how cancer impacts First Nations.

Strengthening partnerships among ourselves, the FNHA-FNHC-FNHDA collaborate through Relationship Agreement, Terms of Reference and 2017 signing of Declaration of Lateral Kindness.

ENVIRONMENTAL HEALTH

- A number of long-term boil water advisories rescinded since transfer, and new community-based water monitors and water technicians trained.
PRIMARY HEALTH CARE

- Since transfer, developed Primary Health Care ++ Model, now being implemented in a number of communities.
- In 2014, conducted 16-week First Responder Training Program pilot project for individuals living in rural and remote First Nations communities.

$3 Million

SHARED INVESTMENT WITH INTERIOR HEALTH TO BRING ELDER CARE CLOSER TO HOME

- In 2017/2018, announced shared investment with Interior Health of $3 million to bring Elder care closer to home, including a nursing enhancement to support First Nations Elders and those living with chronic conditions and to support community preparedness.

MENTAL HEALTH & WELLNESS

- In 2012/2013, together with partners, the FNHA released *A Path Forward: BC First Nations and Aboriginal Peoples Mental Wellness and Substance Use – 10 Year Plan*.
- Variety of crisis response investments made, including: creation of *Hope, Help, and Healing Suicide Prevention, Intervention and Postvention Toolkit*; funding of *KUU-US Crisis Line* to expand culturally safe crisis services across BC; formalizing crisis response protocols between the FNHA and health authorities; development of trauma-informed training curriculum for all FNHA frontline/community-facing staff.
HEALTH BENEFITS

- Since transfer, Indigenous Cultural Safety (ICS) training mandatory for all Health Benefits Assessors, and in 2016, ICS training was made mandatory for all mental health providers.

- In 2014/2015, conducted medical transportation review and increased patient travel meal and mileage rates.

- In 2016/2017, obtained recognition of dental hygienists as independent service providers within First Nations Health Benefits with partners.

- In 2016/2017, launched First Nations Health Benefits Client Satisfaction Survey.

- On October 1, 2017, transitioned to BC PharmaCare's Plan W, bringing decision-making about Health Benefits closer to home.

MATERNAL & CHILD HEALTH

- In 2013/2014, developed parenting resources for First Nations, and in 2014/2015, developed Pregnancy Passport resource for First Nations and Aboriginal women with PHSA.

- In 2015, renewed MOU with BCAAFCs to improve health, safety and well-being of First Nations and Aboriginal individuals, families and communities in BC.

- In 2016, assumed responsibility for Jordan’s Principle service coordination in BC.

$375,000 INVESTMENT

BY THE FNHA SHARED WITH BCAAFC TO FUND FIRST NATIONS AND ABORIGINAL DOULA SERVICES.

Our kids our cultures our futures are worth it
The FNHC, FNHDA and FNHA conduct their efforts with one another in accordance with the Shared Values:

**RESPECT**

We believe that maintaining respectful relationships is fundamental to the achievement of our shared vision. Respectful relationships are built upon the recognition that we all have something to contribute as individuals, and participants in the First Nations health governance structure. Therefore, we commit to treating each other with dignity and generosity, being responsive to one another, and acknowledging that each entity has their own respective processes and practices. We are also committed to respectful interactions with First Nations, tripartite partners, and other collaborators.

**DISCIPLINE**

We have the historic opportunity to achieve transformative change in First Nations health and wellness, and an obligation to make the most of this opportunity. This will require discipline amongst us, including through: loyalty to one another and our shared vision; upholding and supporting our roles, responsibilities, decisions, and processes; maintaining and nurturing unity and a united front; integrity and reliability in fulfilling our commitments, and accountability to one another for these commitments and contributions; and, solutions-oriented and active participation.

**RELATIONSHIPS**

We believe that effective working relationships with First Nations, tripartite partners, and with one another are the foundation for achieving our vision and implementing our health plans and agreements. We commit to fostering effective working relationships and camaraderie underpinned by: trust; honesty; understanding; teamwork; and mutual support. We also acknowledge that humour and laughter are both good medicine, and a good way to build relationships.
CULTURE
We are here because of those that came before us, and to work on behalf of First Nations. We draw upon the diverse and unique cultures, ceremonies, customs, and teachings of First Nations for strength, wisdom, and guidance. We uphold traditional and holistic approaches to health and self-care and strive to achieve a balance in our mental, spiritual, emotional, and physical wellness.

EXCELLENCE
We are humbled and honoured to have been asked by First Nations to work on their behalf to improve health and wellness, and have a moral and personal responsibility to strive for excellence. Excellence means that our outcomes are sustainable, that our processes are professional and transparent, and that we commit to learn continuously – through capacity development opportunities, from each other and from new, different and innovative models worldwide.

FAIRNESS
We work to improve the health and wellness of all First Nations in BC. Our decision making reflects the best interests of all First Nations, and leads to just and equitable treatment amongst all First Nations communities, First Nations organizations, and across all regions of British Columbia. We are committed to make room for everyone, and are inclusive in our communications, information-sharing, and discussions.
THE WORK OF THE FNHA AND ITS PARTNERS IS GUIDED BY THE SEVEN DIRECTIVES PROVIDED BY BC FIRST NATIONS CHIEFS AND LEADERS

THE SEVEN DIRECTIVES

1. COMMUNITY-DRIVEN, NATION-BASED

2. INCREASE FIRST NATIONS DECISION-MAKING AND CONTROL

3. IMPROVE SERVICES

SHARED PRINCIPLES GUIDE THE TRIPARTITE WORK AMONG THE FNHC, FNHDA, FNHA AND FEDERAL AND PROVINCIAL PARTNERS:

- RESPECT
- DISCIPLINE
- RELATIONSHIPS
- CULTURE
- EXCELLENCE
- FAIRNESS

FNHA, FNHC, FNHDA SHARED VISION >> Healthy, Self-Determining and Vibrant BC First Nations Children, Families and Communities.

DIRECTIVE #1

1. Support health and wellness planning and the development of First Nations Health Governance Agreements and partnerships.

2. Through the creation of a First Nations Health Authority with the goal of aligning health care services that serve BC First Nations.

3. Improve and revitalize the Non-Insured Benefits Program, service and policy development must be protected and enhanced.

4. Autonomy and authority of First Nations will not be without prejudice to First Nations’ rights and responsibilities at all levels.

5. First Nations community health agreements and capacity development opportunities, from each other and from new, different and innovative models worldwide.

DIRECTIVE #2

1. Involve First Nations in federal and provincial decision-making about health services for First Nations at the regional health authorities and supporting a First Nations population health governance arrangement.

2. Partnerships are critical to our collective success. First Nations will create opportunities through working collaboratively with federal, provincial, and regional health authorities and other First Nations organizations.

3. Indigenous and non-First Nations organizations will work collectively to improve health and wellness, and have a moral responsibility to strive for excellence. Excellence means informed and driven by the grassroots level.

DIRECTIVE #3

1. Implement greater local control over community-level decisions to meet their own needs and priorities.

2. Health services must be informed and driven by the grassroots level.

3. Collaborate with other First Nations and non-First Nations to support the achievement of our shared vision. Respectful relationships are the foundation for these commitments and contributions; and, solutions-driven active participation.

DIRECTIVE #4

1. Enable relationship-building between First Nations and FNHA, FNHC, FNHDA.

2. Parties will work collectively to improve health and wellness, and have a moral responsibility to strive for excellence. Excellence means informed and driven by the grassroots level.

3. Partnerships are critical to our collective success. First Nations will create opportunities through working collaboratively with federal, provincial, and regional health authorities and other First Nations organizations.

DIRECTIVE #5

1. Implement appropriate competencies for key roles and responsibilities at all levels.

2. Make best and prudent use of available resources.

3. Not impact on Aboriginal Title and Rights or the treaty possession principle regarding First Nations health and wellness planning and the development of First Nations Health Governance Agreements and partnerships.

DIRECTIVE #6

1. Enable respectful interactions with First Nations, tripartite partners, and with one another.

2.FNHC, FNHDA, FNHA Shared Values

• Respect, Discipline, Relationships, Culture, Excellence, Fairness

3. INCREASE FIRST NATIONS AUTHORITY, CONTROL

4. IMPROVE SERVICES

5. COMMUNITY-DRIVEN, NATION-BASED

6. INCREASE FIRST NATIONS DECISION-MAKING AND CONTROL

7. IMPROVE SERVICES

SHARED PRINCIPLES

Respect, Discipline, Relationships, Culture, Excellence, Fairness

FNHA, FNHC, FNHDA SHARED VISION >> Healthy, Self-Determining and Vibrant BC First Nations Children, Families and Communities.

- Respect
- Discipline
- Relationships
- Culture
- Excellence
- Fairness

RESPECT

- The work of the FNHA and its partners is guided by the seven directives provided by BC First Nations Chiefs and Leaders.

DISCIPLINE

- Respectful interactions with First Nations, tripartite partners, and with one another are the foundation for these commitments and contributions; and, solutions-driven active participation.

RELATIONSHIPS

- Respect, Discipline, Relationships, Culture, Excellence, Fairness

CULTURE

- First Nations community health agreements and capacity development opportunities, from each other and from new, different and innovative models worldwide.

EXCELLENCE

- Collaborate with other First Nations and non-First Nations to support the achievement of our shared vision. Respectful relationships are the foundation for these commitments and contributions; and, solutions-driven active participation.

FAIRNESS

- Here because of those that came before us, and to work on their behalf to improve health and wellness, and have a moral responsibility to strive for excellence. Excellence means informed and driven by the grassroots level.
The FNHA’s planning and processes flow from the First Nations Perspective on Health and Wellness—an approach that defines the FNHA as a wellness organization that is different from other mainstream health authorities and organizations that are acute-care focused. The FNHA is one component of this health governance structure established by BC First Nations.

Informed through regional processes, the FNHA works alongside the FNHC and FNHDA to achieve our Shared Vision of reclaiming “Healthy, Self-Determining and Vibrant BC First Nations Children, Families and Communities,” and to pursue strong health partnerships and integration with federal and provincial governments. Honouring the governance processes and standards that have led to the creation of this organization, the FNHA advances health system transformation and undertakes program and service delivery in a manner aligned with First Nations philosophies, perspectives and ways of being. In accordance with our Values and Directives, we pursue excellence in the delivery of our mandate, striving for efficiency and effectiveness to maximize value for those we serve.

Our goals reflect our ongoing journey in the pursuit of excellence. Our goals draw upon our past, solidifying and building upon the elements of our success to date; reflect upon our culture and uniqueness and what this has to offer for those we serve and the broader health system; and signal our ongoing commitment to pursue excellence in programs and services and the operations that support their delivery.
The FNHA is utilizing a from-the-ground-up planning approach to ensure that the priorities, goals and perspectives expressed by BC First Nations guide the plans and investments made regionally and provincially. This planning approach ensures that activities at all levels are complementary to and support one another and are consistent with the 7 Directives, our Operating Principles and other guiding elements. The intent is to create a more integrated health system based on logical, transparent and synchronized planning with clearly defined service standards at each level.

The diagram on the facing page depicts the planning approach within the new First Nations health governance structure. Community Health and Wellness Plans will inform Regional Health and Wellness Plans, which in turn inform the FNHA’s and other entities’ plans.
The FNHA Board of Directors provides leadership and oversight for the activities of the FNHA.

The Board as a whole combines years of experience in First Nations health, community development, financial management and political expertise at all levels of government.

The Board of Directors includes members nominated by First Nations in our five regions as well as members at large. The Board continues to collectively work and make decisions for the benefit of all BC First Nations, regardless of residence. At the same time, the structure makes space for regional and other relevant experiences and perspectives. The appointments to the FNHA Board of Directors are made by the members of the FNHA.

The First Nations Health Authority Board of Directors as of April 1, 2018:

- Marion Colleen Erickson
- Jason Calla
- Dr. Elizabeth Whynot
- Jim Morrison
- David Goldsmith
- Helen Joe
- Norman Thompson
THE FNHA BOARD OF DIRECTORS PROVIDES LEADERSHIP AND OVERSIGHT FOR THE ACTIVITIES OF THE FNHA.

THE BOARD AS A WHOLE COMBINES YEARS OF EXPERIENCE IN FIRST NATIONS HEALTH, COMMUNITY DEVELOPMENT, FINANCIAL MANAGEMENT AND POLITICAL EXPERTISE AT ALL LEVELS OF GOVERNMENT.
“HEALTHY, SELF-DETERMINING AND VIBRANT BC FIRST NATIONS CHILDREN, FAMILIES AND COMMUNITIES.”

SHARED VISION OF THE FNHC, FNHDA AND FNHA.
OUR PLAN FOR 2018/2019

This Summary Service Plan marks a new chapter for the FNHA—one in which we articulate a set of five-year goals, outcome statements, objectives, strategies and a set of specific priorities for 2018/2019.

1. Enhance First Nations health governance;
2. Champion the BC First Nations Perspective on Health and Wellness;
3. Advance excellence in programs and services; and
4. Operate as an efficient, effective and excellent First Nations health organization.
Our **GOALS** are a statement of a strategic-level aspiration of the FNHA for the next five years. Each goal is coupled with an **OUTCOME STATEMENT** that describes the desired changed state resulting from our course of action over the next five years.

The **OBJECTIVES** describe how each goal will be achieved. They are the bridge between where we are now and where we want to be.

**STRATEGIES** and **ANNUAL KEY PRIORITIES** are identified for our objectives. Strategies describe the specific mechanisms and processes by which each objective will be achieved. Similarly our annual key priorities describe particular core areas of focus for the coming fiscal year.

**PERFORMANCE MEASURES** are quantitative and qualitative measures used to signal organizational progress toward our goals over the next five years.

**HEALTH PERFORMANCE STANDARDS** measure progress against the operational mandatory areas that the FNHA is tracking. Clear performance measures and standards with annual targets allow us to meaningfully assess our work and make changes, where needed, to reach our goals. The FNHA performance measurement approach is aligned with and contributes to a much broader evaluation agenda, which will assess progress of the tripartite partners toward the commitments we have collectively made in the health plans and agreements.
GOAL 1
ENHANCE FIRST NATIONS HEALTH GOVERNANCE

GOAL 2
CHAMPION THE BC FIRST NATIONS PERSPECTIVE ON HEALTH AND WELLNESS

GOAL 3
ADVANCE EXCELLENCE IN PROGRAMS AND SERVICES

GOAL 4
OPERATE AS AN EFFICIENT, EFFECTIVE AND EXCELLENT FIRST NATIONS HEALTH ORGANIZATION
GOAL 1
ENHANCE FIRST NATIONS HEALTH GOVERNANCE

THE FIRST NATIONS HEALTH GOVERNANCE STRUCTURE WAS BUILT BY AND FOR FIRST NATIONS TO BRING DECISION-MAKING CLOSER TO HOME AND INTO OUR HANDS.

Self-determination is a key determinant of health, and the FNHA remains committed to supporting sustainable and effective processes that enable First Nations to make their own decisions about their health and well-being. This includes supporting broader processes of Nation rebuilding. The principle of reciprocal accountability acknowledges that BC First Nations collectively own the First Nations health governance structure and are therefore together responsible for resolving concerns and issues, making key decisions and celebrating successes. In assuming collective responsibility, we have created a health ecosystem in which we are all connected and where our decisions and actions impact one another, and at multiple levels. Within this health ecosystem, the FNHA will provide capacity and other supports that enable decision-making at appropriate local, regional and provincial levels, and engage with First Nations to inform our decision-making.

In the spirit of reciprocal accountability—meaning that the partners “will work together at all levels in a collaborative manner to achieve our shared goals, living up to our individual and collective commitments”—we will work to further evolve and develop our governance partnerships with federal and provincial partners at multiple levels. We will represent our interests and priorities as First Nations throughout the health system and work as governance partners to develop and implement strong shared agendas and processes resulting in measurable progress. The governance partnerships among BC First Nations, and between First Nations and federal and provincial governments, will provide leadership to and enable the health systems transformation envisioned in the tripartite health plans and agreements.
**GOAL 1. ENHANCE FIRST NATIONS HEALTH GOVERNANCE**  
**OUTCOME:** Sustainable and accountable governance structures leading change.

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<th><strong>OBJECTIVES</strong></th>
<th><strong>STRATEGIES</strong></th>
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| 1.1 Strengthen regional decision-making approaches. | 1.1.1 Enhance capacity on a regional basis to advance regional priorities and processes.  
1.1.2 Work with the FNHC and FNHDA to engage BC First Nations in a manner that is equitable, efficient and cost-effective.  
1.1.3 Support the implementation of regional partnership accords. |
| 1.2 Collaborate with the FNHC and the FNHDA to achieve our Shared Vision. | 1.2.1 Uphold commitments to our First Nations health governance partners.  
1.2.2 Provide effective and appropriate secretariat supports for the FNHC and FNHDA.  
1.2.3 Represent the FNHA perspectives on social determinants of health with federal and provincial departments. |
| 1.3 Partner with federal and provincial governments to implement the tripartite health plan and agreements. | 1.3.1 Establish effective bilateral working partnerships and processes with federal and provincial governments.  
1.3.2 Actively and effectively participate in tripartite health governance structures and processes.  
1.3.3 Engage other government departments, federal and provincial associations and other service providers and agencies in health plan implementation. |

**ANNUAL KEY PRIORITIES**

1. Work with the FNHC and FNHDA to refresh relationship and engagement processes.  
2. Complete Regional Partnership Accord evaluations  
3. Work with partners, including the FNHC, FNHDA, First Nations and service providers to initiate away from home action plan(s).
HOW WILL WE MEASURE OUR PROGRESS?

The principle of reciprocal accountability is fundamental to the First Nations health governance structure and the health partnership, meaning that the parties “will work together collaboratively and be accountable to one another at all levels to achieve our shared goals, living up to our individual and collective commitments.”

The effectiveness of the First Nations health governance structure is dependent on each member upholding their commitments. This measure is intended to track FNHA contributions to the health governance structure. Implementation of the health plans and agreements is largely achieved through effective governance. The FNHA will measure our strategic impact from our governance relationships and remain focused on ensuring the quality and relevance of our partnership work. Throughout the year we will track:

- **FIRST NATIONS HEALTH GOVERNANCE EFFECTIVENESS** by measuring: % engagement impact and % FNHC/FNHDA/FNHA partnership activities on target; and

- **GOVERNANCE PARTNERSHIP EFFECTIVENESS** by measuring: % tripartite and bilateral partnership activities completed and % tripartite and bilateral partnership initiatives on target.
GOAL 2
CHAMPION THE BC FIRST NATIONS PERSPECTIVE ON HEALTH AND WELLNESS

THROUGH THE PROCESS OF CREATING THE FNHA, BC FIRST NATIONS HAVE COME TOGETHER TO RESTORE THEIR SHARED PERSPECTIVE ON HEALTH AND WELLNESS, ENCOURAGE POSITIVE AND WELLNESS-BASED CULTURAL APPROACHES AND PRACTICES, AND SHARE THESE WITH THE BROADER HEALTH SYSTEM IN BC AND BEYOND.

The BC First Nations Perspective on Health and Wellness articulates a holistic view of well-being in which the health and wellness journeys of individual human beings are owned by those self-determining individuals. Importantly, it also reflects the values of First Nations people by representing the four dimensions of wellness—physical, mental, emotional and spiritual health—and acknowledges that we are influenced by external factors such as our families and communities, our environments and the social determinants of health. As an organization, we breathe life into this perspective in three key ways: as a champion, partner and through “living it.”

We champion this perspective among our communities and across the health system as a whole. Providers and health care systems need to understand how First Nations see their own health and wellness in order to provide appropriate care to First Nations. By embedding this philosophy throughout the health system and supporting the integration of traditional knowledge and approaches within mainstream health care, there will be improved cultural safety and humility across the health system and a repositioning of the current sickness-treatment system into one that supports wellness.

We partner with communities and individuals on their health and wellness journeys, recognizing that individuals and families are the active decision-makers in their own well-being. It is our role to provide support for these journeys through providing expertise, resources and initiatives. This includes broader areas of support and investment, such as traditional and alternative medicine and healing; recreation and physical activity; and cultural and spiritual teaching and practice.

As an organization, we are committed to “living it” by serving as healthy and well individuals. We support and make time for our individual health and wellness journeys and treat one another with kindness.
**GOAL 2. CHAMPION THE BC FIRST NATIONS PERSPECTIVE ON HEALTH AND WELLNESS**

**OUTCOME:** Culturally safe and supported health and wellness journeys.

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>STRATEGIES</th>
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</table>
| **2.1** Work with partners to transform from a sickness system to a wellness system by championing the First Nations Perspective on Health and Wellness. | **2.1.1** Embed the BC First Nations Perspective on Health and Wellness in various strategies and initiatives across the health system, including the wellness, mental wellness, heart health and cancer strategies.  
**2.1.2** Promote cultural safety and humility throughout the health system.  
**2.1.3** Align research, data, measurement and evaluation with the BC First Nations Perspective on Health and Wellness, including wellness indicators development within the FNHA and tripartite contexts. |
| **2.2** Partner with First Nations individuals, families and communities in their health and wellness journeys. | **2.2.1** Foster a health through wellness movement among BC First Nations by supporting initiatives, resources and tools aligned with the BC First Nations Perspective on Health and Wellness, including leadership challenges, day of wellness events across the province, and traditional and alternative medicine.  
**2.2.2** Share health and wellness stories and profile wellness champions.  
**2.2.3** Support lateral kindness initiatives. |

**ANNUAL KEY PRIORITIES**

| 4. Implement Indigenous Cancer Strategy year 1 activities with partners. | 5. Develop capacity and tools to support Cultural Safety and Humility Declaration signatories to plan, implement and report publicly on their commitments. | 6. Uphold First Nations data governance when releasing reports and data, including releasing to communities first, presenting findings from a wellness perspective and honouring stories. |
HOW WILL WE MEASURE OUR PROGRESS?

As a partner to communities and individuals in their health and wellness journeys, we support the self-determination of individuals, families and communities in their health and wellness journeys, supporting them to make good choices and navigate the system. FNHA campaigns, partnerships and initiatives positively impact individual, family and community wellness journeys by supporting health literacy and cultural safety of the health system. In order to assess our progress, we will track:

- IMPACT AS A HEALTH AND WELLNESS PARTNER BY MEASURING: WELLNESS MOVEMENT IMPACT, CULTURAL SAFETY AND CULTURAL HUMILITY INITIATIVES IMPACT AND # REQUESTS TO USE FNHA MATERIALS IN OTHER AGENCY PLANS/MATERIALS.
GOAL 3
ADVANCE EXCELLENCE IN PROGRAMS AND SERVICES

THE PRIMARY MANDATE OF THE FNHA IS TO DESIGN, DELIVER, MANAGE AND FUND HEALTH AND WELLNESS PROGRAMS AND SERVICES FOR BC FIRST NATIONS. THE FNHA IS COMMITTED TO CONTINUOUS IMPROVEMENT FOR EXCELLENCE IN DELIVERING UPON THIS MANDATE.

We put those we serve at the centre of our model of care and will continue to reposition our programs and services to align with First Nations knowledge, beliefs, values, practices, medicines and models of health and healing. We will seek greater value and efficiencies to maximize available resources for program and service enhancement and will develop new health strategies and approaches in priority areas for BC First Nations. As a partner to First Nations communities, we will provide expertise and tools to support their continuous quality improvement journeys.

Integration and new and expanding partnerships with the provincial health system will support improved transitions in care, increased priority health and wellness services for First Nations in BC and more efficient use of available resources.

PHARMACARE TRANSITION
The FNHA joined BC PharmaCare on October 1, 2017. FNHA clients are now part of the provincial drug benefits insurance program. This transition to PharmaCare is the first step in an overall plan to bring decision-making about Health Benefits closer to home and into the hands of First Nations. The FNHA PharmaCare plan is a fully paid plan and BC PharmaCare is the first payer for FNHA clients. Key benefits for FNHA clients include:

- Increased ease of access to benefits and services;
- A streamlined approvals process that reduces the number of steps needed for prescription approvals;
- Integrated benefits with the Province of BC, which will reduce confusion for clients who have often had to navigate both federal and provincial services; and
- A closer working partnership with PharmaCare, pharmacists and physicians/nurse practitioners, all of whom have an interest in better outcomes for FNHA clients.

The FNHA is now better positioned to transform benefits to reflect the cultures and perspectives of BC First Nations and incorporate First Nations’ models of wellness. Over time, stronger relationships will develop with providers to better coordinate benefits and fully integrate the program within a client’s circle of care.
### GOAL 3. ADVANCE EXCELLENCE IN PROGRAMS AND SERVICES

**OUTCOME:** Advancements in the quality and cultural safety of programs and services available to First Nations individuals, families and communities in BC.

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>STRATEGIES</th>
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<tbody>
<tr>
<td>3.1 Enhance integration with and access to quality and culturally safe provincial health care services for BC First Nations.</td>
<td>3.1.1 Advance innovative, responsive, culturally safe and integrated models of care. 3.1.2 Prioritize improvements to primary health care and mental health and wellness services for First Nations in BC. 3.1.3 Enhance the integration of First Nations medicines and practices within the health system.</td>
</tr>
<tr>
<td>3.2 Achieve measurable improvements to FNHA programs and services.</td>
<td>3.2.1 Nurture a customer-owner philosophy with BC First Nations. 3.2.2 Undertake quality and cultural safety improvement of FNHA delivered programs and services. 3.2.3 Maximize value for BC First Nations through integration, partnerships and efficiencies.</td>
</tr>
<tr>
<td>3.3 Partner with BC First Nations to support their delivery of high quality health programs and services.</td>
<td>3.3.1 Support quality improvement and cultural safety of First Nations-delivered health programs, services and administration. 3.3.2 Implement improvements to planning, funding arrangements, reporting and accountability processes. 3.3.3 Provide BC First Nations access to quality data and information, e-health and information management and technology to support their program and service delivery.</td>
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### ANNUAL KEY PRIORITIES

7. Develop a traditional healing and traditional healers framework.  
8. Enhance regionally based and innovative service delivery through fully implementing all Joint Project Board-funded initiatives; establishing new mental health and wellness service and support capacity; ensuring regions are supported by a regional nursing team and nurses have access to clinical education/training to support best practice in communities.  
9. Continue to transform health benefits, with a focus on determining alternate provider for benefits not administered by BC PharmaCare, including vision, dental and medical supplies and equipment.  
10. Enhance innovation and partnership with community service organizations through updating planning, reporting, funding arrangements and allocations in support of transformation.
HOW WILL WE MEASURE OUR PROGRESS?

Our measurement considers the full ecosystem of our work, including how the FNHA’s success, reporting and accountability depends on community success, reporting, accountability and vice versa. The majority of FNHA funding, and therefore community service delivery, flows through funding arrangements. Effective tracking of partnership processes with communities and access to FNHA programs will support the quality of those services and the FNHA-community relationship. We also measure our service quality with a particular focus on Health Benefits client satisfaction and service standards for Health Benefits and environmental public health. Service standards and metrics associated with First Nations definitions of quality will support improved programs, services and responsiveness to community and client needs. To track our progress, we will monitor:

☐ FNHA AND FIRST NATIONS HEALTH ORGANIZATION PARTNERSHIPS BY MEASURING: % FUNDING AGREEMENT HOLDERS UPHOLDING MANDATORY PROGRAM AND FINANCIAL REQUIREMENTS, % FNHA RESPONSES TO FUNDING AGREEMENT HOLDERS WITHIN TARGETED TIME FRAMES AND FNHA PROGRAM INFORMATION ACCESS; AND

☐ SERVICE QUALITY BY MEASURING: HEALTH BENEFITS CLIENT SATISFACTION, % HEALTH BENEFITS SERVICE STANDARDS ON TARGET, % OF CLIENTS WHO RECEIVED AT LEAST ONE FNHA BENEFIT PER YEAR, ENVIRONMENTAL PUBLIC HEALTH OFFICER COMMUNITY WORK PLAN OBJECTIVES ACHIEVED ACCORDING TO SERVICE STANDARDS AND CHANGES TO FNHA PROGRAMS AND SERVICES.
GOAL 4
OPERATE AS AN EFFICIENT, EFFECTIVE AND EXCELLENT FIRST NATIONS HEALTH ORGANIZATION

FIRST NATIONS HAVE ESTABLISHED THE FNHA AS THEIR HEALTH ORGANIZATION. AS SUCH, THE FNHA REFLECTS FIRST NATIONS’ BELIEFS AND WORLDVIEWS IN ITS SERVICES AND AIMS TO MEET THE STANDARDS OF THE 7 DIRECTIVES IN ALL OF ITS OPERATIONS.

We are committed to creating organizational excellence based on First Nations culture, traditions and teachings. This includes ongoing strengthening of policies, procedures and practices to reflect system-wide best practice and First Nations ways of doing business. We will pursue innovation and opportunities to generate and leverage revenues to reinvest in the delivery of our mandate. We will make continuous learning a way of organizational life in order to improve our performance in service to First Nations and be a recognized leader in health system transformation.

METRO VANCOUVER OFFICE PROJECT
The FNHA has initiated planning for the consolidation of existing Metro Vancouver office leases into a new office building located on First Nations land in Metro Vancouver. The goals of this project are to provide the FNHA with:

- An office located on First Nations community lands and improved connection with BC First Nations culture, traditions and practices;
- A demonstration of support for self-determination, independence, and broader BC Tripartite context and goals;
- Permanence, stability and a demonstration of ongoing commitment to BC First Nations health services;
- Cost savings that can be redirected to health services over the long-term;
- Improved management oversight and team cohesion, collaboration and connection across functions; and
- Improved ability to attract and retain professional First Nations staff.

These goals are closely aligned with the FNHA’s mandate and founding agreements, including the Health Partnership Accord, Tripartite Framework Agreement on First Nations Health Governance and the 7 Directives.
GOAL 4. OPERATE AS AN EFFICIENT, EFFECTIVE AND EXCELLENT FIRST NATIONS HEALTH ORGANIZATION
OUTCOME: FNHA is an established leading-edge First Nations health organization.

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>STRATEGIES</th>
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</table>
| 4.1 Build strong leadership and foster a First Nations organizational culture. | 4.1.1 Build a common FNHA organizational culture founded upon the 7 Directives, the First Nations Perspective on Health and Wellness and Shared Values.  
4.1.2 Be a worldwide leader in cultural safety and humility in the workplace.  
4.1.3 Develop leadership at all levels consistent with First Nations approaches and teachings. |
| 4.2 Foster a healthy and engaging environment that enables personal excellence. | 4.2.1 Support continuous learning and development.  
4.2.2 Implement an innovative health and wellness-based workforce approach.  
4.2.3 Engage FNHA staff in the ongoing change and transformation process. |
| 4.3 Achieve excellence in operations. | 4.3.1 Strengthen operational policies and procedures reflective of First Nations ways of doing business while meeting our legal and operational requirements.  
4.3.2 Generate and leverage additional resources through innovation, fundraising, business opportunities, shared services and efficiencies.  
4.3.3 Provide integrated, effective and efficient corporate support services and systems. |

ANNUAL KEY PRIORITIES

11. Establish an organizational standard for FNHA family (staff) engagement and workforce wellness, supporting all to work at their personal best on behalf of BC First Nations.  
12. Implement the first phase of an FNHA feedback process regarding the health services our people receive in BC, providing a safe venue for input, complaints, concerns and successes.  
13. Establish FNHA emergency response policies and plans connected with community and partner agency emergency response plans and capacity.
HOW WILL WE MEASURE OUR PROGRESS?

The FNHA is an organization dedicated to operational excellence. First Nations deserve an organization with strong leadership aligned with First Nations values; that is doing the right work in the right way; that is committed to wellness; and that is grounded in the diversity of First Nations cultures. Organizational wellness, sound corporate management and Board governance are critical success factors for functioning at a high operational standard. In order to ensure we are functioning at a high operational standard, we will measure:

- ORGANIZATIONAL EXCELLENCE BY MEASURING: % PLANNED ORGANIZATION-WIDE CULTURAL INITIATIVES ON TARGET, % SELF-IDENTIFIED INDIGENOUS STAFF AND PARTICIPATION RATE IN ORGANIZATIONAL CULTURE WORKFORCE SURVEY.

We will also be tracking three Organizational Excellence Health Performance Standards:

- ANNUAL BOARD OF DIRECTOR REVIEW OF CORPORATE POLICIES ON TARGET;
- % COMPLIANCE WITH INCLUSION OF DIRECTIVES AND OPERATING PRINCIPLES IN DECISION-MAKING PROCESSES; AND
- % STAFF PERFORMANCE PARTNERSHIP AGREEMENTS COMPLETED, INCLUDING STAFF WELLNESS PLAN.
THE FNHA HAS STRENGTHENED OPERATIONS; REORIENTED AND EVOLVED OUR ORGANIZATIONAL STRUCTURE TO BETTER REFLECT OUR SERVICE DELIVERY GOALS AND FUNCTIONS; AND IS GROUNDED IN LEADING-EDGE ORGANIZATIONAL POLICIES.
## ANNUAL BUDGET 2018/19

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<tr>
<th>REVENUES</th>
<th>2018/19 Budget</th>
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<tbody>
<tr>
<td>Health Canada</td>
<td>506,445,737</td>
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<tr>
<td>Province of British Columbia</td>
<td>29,816,466</td>
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<tr>
<td>Health Authorities</td>
<td>657,698</td>
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<td>Interest Income</td>
<td>3,240,940</td>
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<tr>
<td>Miscellaneous Income</td>
<td>1,155,051</td>
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<tr>
<td><strong>TOTAL REVENUES</strong></td>
<td><strong>541,315,892</strong></td>
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<tr>
<th>EXPENSES</th>
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<td>OPERATIONS</td>
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<tr>
<td>Corporate Operations</td>
<td>45,735,806</td>
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<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>562,745,215</strong></td>
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<tr>
<th>GOVERNANCE AND FIRST NATIONS ENGAGEMENT</th>
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<tr>
<td>First Nations Health Council</td>
<td>2,784,794</td>
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<tr>
<td>First Nations Health Directors Association</td>
<td>1,621,355</td>
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<td>First Nations Engagement</td>
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<td><strong>TOTAL</strong></td>
<td><strong>11,630,271</strong></td>
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<tr>
<th>PROGRAM SERVICES</th>
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<tbody>
<tr>
<td>Health Benefits</td>
<td>187,861,983</td>
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<tr>
<td>Direct Community Service Funding</td>
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<tr>
<td>Health Services and Programs</td>
<td>80,923,630</td>
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<tr>
<td>Regional Operations</td>
<td>4,814,871</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>505,379,138</strong></td>
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**EXCESS (DEFICIENCY) OF REVENUES OVER EXPENSES** (21,429,323)
CONCLUSION

Our sixth Summary Service Plan represents a considerable milestone in our journey of transformation. Over the past year, the FNHA has refined programs, services and operations. Some accomplishments include bringing decision-making about Health Benefits closer to home and into the hands of First Nations through the successful transition of First Nations Health Benefits to BC PharmaCare and the development of a new Indigenous Cancer Strategy, the result of a multi-year partnership between BC Cancer, the FNHA, Métis Nation BC and the BC Association of Aboriginal Friendship Centres. Quality and cultural safety and humility are integral to our change efforts, as are the partnerships that are helping shape our future.

The FNHA will continue forward in our four key goal areas:

1. Enhance First Nations health governance;
2. Champion the BC First Nations Perspective on Health and Wellness;
3. Advance excellence in programs and services; and
4. Operate as an efficient, effective and excellent First Nations health organization.

This Summary Service Plan responds to the engagement feedback and direction received from those we serve and our health system partners, and we continue to be grateful for the many stories and perspectives shared through the forums that have been held. Our plan provides an opportunity to capture the wisdom and knowledge that our communities bring to these tables. Ultimately, our plan reflects on progress and communicates our desired changed state for First Nations health in BC, a future in which culturally safe, high-quality services meet the health and wellness needs of our communities and people.
APPENDIX A

THE FNHA AND THE TRUTH & RECONCILIATION COMMISSION OF CANADA (TRC): CALLS TO ACTION

In many areas, the FNHA's work goes above and beyond the seven health-specific TRC Calls to Action, indicating our broader wellness-based approach.
The 2015 TRC report includes 94 recommended Calls to Action to advance the process of reconciliation. As a first-of-its-kind First Nations health organization in BC, and in partnership with First Nations, federal and provincial governments, the FNHA is involved with and supports the broader national reconciliation process on a daily basis.

The TRC report’s overarching themes, such as respect, relationships and cultural safety are well-embodied in the work of the FNHA, as is the TRC’s definition of reconciliation as “an ongoing process of establishing and maintaining respectful relationships.” In many areas, the FNHA’s work goes above and beyond the seven health-specific TRC Calls to Action, indicating our broader wellness-based approach since assuming the responsibilities formerly handled by First Nations and Inuit Health Branch. Following is an overview of some of the FNHA’s work associated with the TRC report’s Calls to Action.
CALL TO ACTION 3
JORDAN’S PRINCIPLE

- The FNHA is responsible for administering Jordan’s Principle Child-First Initiative resources in BC, including case coordination to help prevent any delay in accessing needed services by First Nations children.

CALL TO ACTION 5 & 12
CULTURALLY APPROPRIATE PARENTING AND EARLY CHILDHOOD EDUCATION PROGRAMS

- The FNHA funds early childhood development programs that support healthy pregnancies, parenting and child development.

- The FNHA has joint initiatives with the BC Association of Aboriginal Friendship Centres to support First Nations families to have access to culturally appropriate doula services.

- The FNHA partners with organizations such as the National Collaborating Centre for Aboriginal Health and Provincial Health Services Authority (PHSA) to develop interactive, culturally relevant and evidence-informed Maternal Child Health resources for caregivers.
CALL TO ACTION 18
ACKNOWLEDGE ONGOING LEGACY OF COLONIZATION ON HEALTH AND RECOGNIZE ABORIGINAL RIGHTS TO HEALTH AS EXPRESSED IN RELEVANT LAWS AND TREATIES

- The First Nations health governance structure in BC enables First Nations to more fully participate in the design and delivery of health services.

- BC First Nations have given clear standards and instructions to the First Nations health governance structure through the 7 Directives. In keeping with Directive 6, the FNHA operates “without prejudice to First Nations interests,” which includes having no impact on Aboriginal Rights and Title and First Nations treaty rights.

- The FNHA, as a service-delivery organization, is working to address systemic racism, support cultural safety and humility and advance trauma-informed care and practice across the health system in BC.

CALL TO ACTION 19
MEASURE AND PUBLISH PROGRESS ON CLOSING THE GAPS IN HEALTH OUTCOMES BETWEEN ABORIGINAL AND NON-ABORIGINAL COMMUNITIES

- The tripartite agreements established seven performance indicators to identify and close the gaps in health outcomes between Aboriginal and non-Aboriginal populations. The BC Public Health Officer (PHO) reports on these seven performance indicators every two years and on 64 health indicators every five years.

- The FNHA and PHO launched a set of 15 health and wellness indicators. These strengths-based measures of wellness were developed following a series of engagements with First Nations communities across BC.

- Through the implementation of the unique Tripartite Data Quality and Sharing Agreement signed in 2010, the tripartite partners are improving quality and availability of First Nations data to monitor health status and performance of health programs.
CALL TO ACTION 20
ADDRESS THE DISTINCT HEALTH NEEDS OF THE MÉTIS, INUIT AND OFF-RESERVE ABORIGINAL PEOPLES

- Tripartite agreements provide clarity that provincial programs and services are for all British Columbians, including First Nations at home and away from home (on- and off-reserve).

- The FNHA partners with the BC MOH, PHSA and regional health authorities on health services for Indigenous peoples in urban areas.

- The FNHA partners with NGOs on approaches and services for health and wellness, available to all Indigenous peoples in BC.

- The FNHA funds off-reserve urban initiatives that Indigenous people living in urban settings in BC can access.

- The FNHA has ongoing partnerships with urban Indigenous and Métis organizations to advance shared priorities in areas including cancer, Maternal and Child Health and physical activity.

CALL TO ACTION 21
ABORIGINAL HEALING CENTRES THAT ADDRESS PHYSICAL, MENTAL, EMOTIONAL AND SPIRITUAL HEALING

- The FNHA has reviewed mental health and substance use programs, such as the NNADAP, and is working to expand addictions treatment centres into centres that support holistic healing, including for trauma.

- The FNHA invests in culture-based healing at centres in First Nations communities.

- Traditional and First Nations healing is a key component of the FNHA Primary Health Care++ approach, and it is being integrated into a large number of new primary health care and mental health service delivery improvement projects.
CALL TO ACTION 22
VALUE TRADITIONAL ABORIGINAL HEALING PRACTICES

- Traditional wellness approaches are supported through new dedicated funding and a Traditional Wellness Strategic Framework, created with First Nations Elders and healers.

- To accompany the Framework, the FNHA is developing a First Nations healing and wellness guidebook. The guidebook aims to support communities and projects to integrate traditional wellness into programming.

- The FNHA invests in a variety of regional projects that support the delivery of traditional and cultural healing supports.

CALL TO ACTION 23 & 24
ABORIGINAL HEALTH CARE PROVIDERS AND CULTURAL SAFETY TRAINING PROGRAMS

- The FNHA promotes and supports the training of First Nations health professionals through funding for scholarships and strategic partnerships with leaders such as the First Nations Education Steering Committee.

- The FNHA hosts learning days on cultural safety and humility with BC health care leaders and senior health staff.

- In partnership with the BC Patient Safety & Quality Council, the FNHA hosts a series of cultural safety and humility webinars to support development of tools and skills to advance cultural safety and humility.

- The San'yas Indigenous Cultural Safety Training is a mandatory training for all FNHA staff.

- Trauma-informed training is a mandatory training for all frontline FNHA staff.
CALL TO ACTION 31 & 35
ALTERNATIVES TO IMPRISONMENT AND CULTURAL SAFETY FOR ABORIGINAL OFFENDERS

- The FNHA partners on initiatives to improve health, cultural safety and quality of life during and after prison, such as the “Partners in Change” project.

- The FNHA provided input into PHSA’s Clinical Services Plan to improve the cultural safety of health care service delivery, and to increase the number of cultural services and programs (e.g., access to Elders and traditional healers) in BC’s provincially run correctional facilities.

CALL TO ACTION 33 & 34
FETAL ALCOHOL SPECTRUM DISORDER (FASD) PREVENTION AND JUSTICE REFORMS FOR OFFENDERS LIVING WITH FASD

- The FNHA supports FASD programs through funding of prevention programs, a partnership with Community Living BC and strategic action in “A Path Forward” for preventing FASD and alternative justice for those living with FASD.

- Through Joint Project Board and regional envelope funding, regional FASD programs are being funded, including FASD assessments.

- The FNHA, utilizing Jordan’s Principle funding, is supporting the Native Courtworkers Association to provide FASD assessments for youth who are involved in the justice system.
CALL TO ACTION 71
CHIEF CORONERS AND PROVINCIAL VITAL STATISTICS AGENCIES TO PROVIDE DEATH RECORDS OF ABORIGINAL CHILDREN IN RESIDENTIAL SCHOOLS

- The TRC, FNHA and PHO are investigating 4,900 child death records from 1870-1894 to provide some measure of closure to families who lost loved ones, as part of the reconciliation process.

- The FNHA partners with the BC Coroners Service to enhance cultural safety in pathology practice and prevent future child injury and death.

CALL TO ACTION 90
SPORTS POLICIES, PROGRAMS, AND INITIATIVES ARE INCLUSIVE OF ABORIGINAL PEOPLES

- The FNHA is a founding member of the Aboriginal Sport, Recreation and Physical Activity Partners Council (now the Indigenous Sport, Physical Activity & Recreation Council), which delivers sport programs and services to Aboriginal people in BC and provides annual core funding.

- The FNHA issues a number of annual Day of Wellness granting processes, which provide flexible resources to support communities to celebrate health and wellness through physical activity, respecting tobacco, healthy eating and nurturing spirit.