2019/2020 FNHA SUMMARY SERVICE PLAN
An Operational Plan for the Fiscal Year 2019/2020
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 (ENPAAUK) DEXEL, A NLAKA’PAMUK ARTIST WELL KNOWN FOR HIS PRINTS AND PAINTINGS.
2019/2020 FNHA SUMMARY SERVICE PLAN
An Operational Plan for the Fiscal Year 2019/2020
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EXECUTIVE SUMMARY

We are pleased to share the First Nations Health Authority (FNHA) Summary Service Plan for 2019/2020, which sets out our key priorities, annual key priorities and the goals, outcome statements, objectives and strategies upon which our priorities are based. This plan marks the fourth year of 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.

This year, the FNHA has matured our planning approach by identifying a set of seven organization-wide key priorities. Progress on these key priorities will be integral to advancing FNHA’s four goals.

- Evolving the FNHA Operating Model, including Regionalization
- Renewed Partnerships with First Nations
- Wellness
- Knowledge Development and Exchange
- Cultural Safety and Humility
- Service Excellence – Mental Health and Wellness, Primary Health Care, and Health Benefits
- Leadership and Culture Development

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
- 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
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 who 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.
SHARED VALUES

The First Nations Health Council (FNHC), First Nations Health Directors Association (FNHDA) and First Nations Health Authority (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: Shared values guide the tripartite work among the FNHC, FNHDA, FNHA and federal and provincial partners. This includes respecting shared principles, such as respect, discipline, relationships, culture, excellence, and fairness. Community-driven, nation-based, and shared visions are also important in achieving the healthy, self-determining, and vibrant BC First Nations children, families, and communities.

- DISCIPLINE: Disciplined approaches to health and wellness planning and the development of health program and service delivery improve the health and wellness of First Nations.

- RELATIONSHIPS: Effective working relationships with First Nations, federal, and provincial partners are crucial. They ensure shared responsibilities and mutual support, and are inclusive in communications, information-sharing, and decision-making.

- CULTURE: Shared values are underpinned by trust, honesty, understanding, and teamwork. They include concepts such as respect, discipline, relationships, culture, excellence, and fairness.

- EXCELLENCE: Excellence is the commitment to fostering effective working relationships and achieving outcomes. It is defined as the best interests of all First Nations, nation-based approaches, and is achieved through the alignment of First Nations priorities and community health plans.

- FAIRNESS: Fairness includes the commitment to respectful interactions with First Nations, tripartite generosity, being responsive to one another, and acknowledging that individuals and participants in the First Nations Health Governance are both good medicine and a good way to build relationships.

- SERVICES: The seven directives are focused on improving services for BC First Nations children, families, and communities. This includes the recognition of the authority of individual BC First Nations, increased access to primary care, and the development of a First Nations Health Authority. The directives also include the recognition of the influence of personal and cultural factors on health and the development of models of health and healing that incorporate First Nations knowledge, beliefs, values, practices, medicines, and cultural knowledge into all health programs.

- AUTONOMY: First Nations can work collectively to improve health and wellness, with increased community-level flexibility in spending and the recognition of the authority of individual BC First Nations.

- INNOVATION: The seven directives are based on the recognition of the importance of learning continuously to improve health and wellness. This includes recognizing the authority of individual BC First Nations, the increase in access to primary care, and the development of models of health and healing that incorporate First Nations knowledge, beliefs, values, practices, medicines, and cultural knowledge into all health programs.

- ECONOMIC OPPORTUNITIES: Economic opportunities are a result of the seven directives, with the development of capacity development opportunities, from each other and from new, different, and innovative models worldwide.

- SELF-DETERMINING: First Nations must have the ability to determine their own health programs and services. This includes the recognition of the authority of individual BC First Nations, increased access to primary care, and the development of models of health and healing that incorporate First Nations knowledge, beliefs, values, practices, medicines, and cultural knowledge into all health programs.

- INCREASE: The seven directives are focused on increasing access to primary care, physicians, nurses, and other health professionals. This includes the development of a First Nations Health Authority, and the recognition of the influence of personal and cultural factors on health.

- IMPROVE: The seven directives are focused on improving health and wellness outcomes. This includes the recognition of the authority of individual BC First Nations, increased access to primary care, and the development of models of health and healing that incorporate First Nations knowledge, beliefs, values, practices, medicines, and cultural knowledge into all health programs.
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.
FIRST NATION COMMUNITY HEALTH & WELLNESS PLANS
NATION-LEVEL HEALTH & WELLNESS PLANS
FIRST NATION REGIONAL HEALTH & WELLNESS PLANS
FNHA MULTI-YEAR HEALTH PLAN
FNHDA STRATEGIC PLAN
FNHC STRATEGIC PLAN
REGIONAL HEALTH AUTHORITY PLANNING
TRIPARTITE PLANNING
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, 2019:

M. Colleen Erickson
Jason Calla
Dr. Elizabeth Whynot
Jim Morrison
David Goldsmith
Helen Joe
Norman Thompson
Marilyn Rook
Tammie Myles
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 2019/2020

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 2019/2020.

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 duration of our plan. Each goal is coupled with an **OUTCOME STATEMENT** that describes the desired changed state resulting from our course of action.

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

**PERFORMANCE MEASURES** are quantitative and qualitative measures used to signal organizational progress toward our goals.

**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.

Our **KEY PRIORITIES** describe particular core areas of focus and our **ANNUAL KEY PRIORITIES** for the coming fiscal year; they intentionally have a cross-sectional reach across FNHA's four goals.
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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| 1.1        | 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        | 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        | 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. |
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.

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| 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. |
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.
### OBJECTIVES

#### 3.1 Enhance integration with and access to quality and culturally safe provincial health care services for BC First Nations.

- **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.

#### 3.2 Achieve measurable improvements to FNHA programs and services.

- **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.

#### 3.3 Partner with BC First Nations to support their delivery of high quality health programs and services.

- **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.
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 AGREEMENTS FOR WHICH RECIPROCAL ACCOUNTABILITY TARGETS ARE MET AND FNHA PROGRAM INFORMATION ACCESS; AND

- **SERVICE QUALITY BY MEASURING:** HEALTH BENEFITS OVERALL CLIENT SATISFACTION RATE, % 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.
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 continues with detailed planning for the consolidation of existing Metro Vancouver office leases into a new head office building located on Tsleil-Waututh Nation land in North Vancouver. The goals of this project are to provide the FNHA with:

- 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;
- Ability to maintain focus on core service delivery during planning, development, commissioning and move-in, while reducing operational interruptions over the long-term;
- A demonstration of support for self-determination, independence, and broader BC Tripartite context and goals;
- A head office located on community lands and improved connection with BC First Nations culture, traditions and practices within the FNHA administrative team;
- 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 of First Nations Health Governance in BC 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.

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| **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. |
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; and

- **Information Management Information Technology** by measuring: % Approved Organization-wide IMIT-Related Initiatives on Target (Scope, Schedule, Budget), % Planned Organization-wide Enterprise Architecture Roadmap Developed and % Planned Enterprise Data Governance and Analytics Strategy Developed and Implemented.
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.
KEY PRIORITY: EVOLVING THE FNHA OPERATING MODEL, INCLUDING REGIONALIZATION

Evolving the FNHA Operating Model, including Regionalization, will focus on two areas: finalizing a strategic regionalization plan that includes a phased implementation approach as well as working with partners to establish service plans and thresholds to ensure quality service delivery.

In 2019/20, the FNHA will advance a sustainable, effective and regionally-responsive operating model by undertaking the following annual key priorities:

- **FINALIZE A SUSTAINABLE AND STRATEGIC REGIONALIZATION PLAN THAT INCLUDES CORE PRINCIPLES, A TARGET OPERATING MODEL AND A PHASED IMPLEMENTATION APPROACH.**

- **WORK WITH PARTNERS TO ESTABLISH SERVICE PLANS AND THRESHOLDS TO DESCRIBE SUSTAINABLE AND HIGH-QUALITY SERVICE DELIVERY AT LOCAL, SUB-REGIONAL, REGIONAL AND PROVINCIAL LEVELS.**
KEY PRIORITY: RENEWED PARTNERSHIPS WITH FIRST NATIONS

Renewed Partnerships with First Nations will include: the implementation of a new health and wellness planning approach and tool, continued transformation of funding arrangement/reporting requirements, and development of an approach to partner with communities, Nations and health service organizations on corporate governance, capacity and services.

This coming year, the FNHA will undertake the following annual key priorities to contribute to transformed partnerships:

- **LAUNCH IMPLEMENTATION OF A NEW HEALTH AND WELLNESS PLANNING APPROACH AND TOOL THAT ESTABLISHES PLANNING STANDARDS ALIGNED TO THE 7 DIRECTIVES, SUPPORTING FIRST NATIONS GOVERNANCE AND RENEWED RELATIONSHIPS WITH THE FNHA AND PROVINCIAL PARTNERS.**

- **RENEW THE FNHA FUNDING AND ACCOUNTABILITY MANAGEMENT FRAMEWORK, INCLUDING CLEAR PRINCIPLES TO GUIDE THE PARTNERSHIP WITH FIRST NATIONS AND HEALTH SERVICE ORGANIZATIONS, STREAMLINING OF THE STRUCTURE AND FORMAT OF FUNDING ARRANGEMENTS, AND MEANINGFUL TWO-WAY PROCESSES FOR FUNDING ARRANGEMENT REPORTING.**

- **IMPLEMENT AN APPROACH TO PARTNER WITH COMMUNITIES, NATIONS, HEALTH SERVICE ORGANIZATIONS AND HEALTH DIRECTORS ON CORPORATE GOVERNANCE AND SUPPORT CAPACITY AND SERVICES. THIS MAY INCLUDE SUPPORT FOR HEALTH GOVERNANCE DEVELOPMENT, REPORTING, HUMAN RESOURCES, CORPORATE POLICY, INFORMATION MANAGEMENT AND TECHNOLOGY AND FINANCE.**
KEY PRIORITY: WELLNESS

Wellness remains at the heart of our work. We will continue to integrate cultural and traditional wellness approaches and practices across the entire continuum of care. Activities undertaken this year will include continued support for wellness campaigns such as “Screen. For Wellness”, Day of Wellness grants and the FNHDA Head to Heart campaign; holding traditional healers gatherings and developing practical guides and tools to support traditional healing practices; establishing a learning/wellness championship platform; and developing a FNHA Wellness Policy.

To embed a focus on wellness, empowerment and resiliency of individuals, families and communities, the FNHA will undertake the following annual key priorities in 2019/20:

- **DEVELOP AN FNHA WELLNESS POLICY THAT WILL SUMMARIZE OUR COMMITMENT AND PHILOSOPHY OF WELLNESS, PROVIDE GUIDANCE TO EMBED A WELLNESS FOCUS ACROSS THE HEALTH SYSTEM, AND SUMMARIZE OUR COMMITMENT TO WELLNESS ACROSS OUR INITIATIVES, PROGRAMS, AND SERVICES.**

- **SUPPORT WELLNESS CAMPAIGNS AND INITIATIVES FOR OUR CITIZENS AT HOME AND AWAY FROM HOME, FOR OUR COMMUNITIES, AND FOR OUR LEADERSHIP, INCLUDING: SCREEN. FOR WELLNESS (CANCER SCREENING); A RENEWED LEADERSHIP CHALLENGE AND FNHDA HEAD TO HEART; AND DAY OF WELLNESS GRANTS.**

- **ESTABLISH A DEDICATED PLATFORM TO ENABLE LEARNING AND PROACTIVE WELLNESS CHAMPIONSHIP THROUGH THE SHARING AND CELEBRATION OF WELLNESS STORIES AND SUCCESSES.**

- **HOLD TRADITIONAL HEALERS GATHERINGS ACROSS REGIONS FOR KNOWLEDGE SHARING AND TO INFORM THE DEVELOPMENT AND RELEASE OF PRACTICAL GUIDES AND TOOLS TO SUPPORT TRADITIONAL HEALERS AND HEALING PRACTICES.**
KEY PRIORITY: KNOWLEDGE DEVELOPMENT AND EXCHANGE

Knowledge Development and Exchange will include evolving our data governance and research practices and capabilities to increase First Nations’ visibility within the provincial health system and generating new evidence inclusive of experiences and histories of our people. Activities to be undertaken this year include engaging with knowledge-keepers across the regions to further develop the population health and wellness indicators, formalizing FNHA’s data governance policies and protocols, finalizing a research agenda outlining the population health and wellness research priorities, sharing the results of various evaluations including the BC Tripartite Framework Agreement on First Nations Health Governance, Regional Partnership Accords, the FNHA Evaluation, and FNHA’s Health Benefits-Pharmacy Program for BC First Nations which includes the transition to Plan W.

Over the coming year, the FNHA will undertake the following annual key priorities to continue to invest in forms of evidence that amplify the experiences, philosophies and needs of our population:

- ENGAGE WITH FIRST NATIONS KNOWLEDGE-KEEPERS ACROSS THE REGIONS TO FURTHER DEVELOP THE POPULATION HEALTH AND WELLNESS INDICATORS AND ASSOCIATED DATA SOURCES.
- FORMALIZE FNHA’S DATA GOVERNANCE POLICIES AND PROTOCOLS TO REINFORCE OUR ROLE AS A TRusted SOURCE OF FIRST NATIONS HEALTH AND WELLNESS INFORMATION FOR OUR COMMUNITIES AND POPULATION.
- FINALIZE A RESEARCH AGENDA OUTLINING POPULATION HEALTH AND WELLNESS RESEARCH PRIORITIES.
- PUBLISH PROVINCIAL AND REGIONAL REPORTS ON TOPICS SUCH AS: REGIONAL HEALTH SURVEY; OPIOID PUBLIC HEALTH EMERGENCY; WOMEN’S HEALTH; HEALTH SYSTEM UTILIZATION; AND CHRONIC DISEASE AND INJURY.
KEY PRIORITY: CULTURAL SAFETY AND HUMILITY

The FNHA will continue to support the movement to advance commitment to Cultural Safety and Humility across the health system. This year will include a focus on finalizing a Change Leadership Strategy for Cultural Safety and Humility, engaging Health Directors and knowledge keepers to develop a cultural safety and humility accreditation standard, as well as working with provincial partners to create a safe environment for First Nations people to raise concerns about the cultural safety of care.

To advance a culturally safe health system through cultural humility, the FNHA will undertake the following annual key priorities in 2019/20:

- **IN PARTNERSHIP WITH THE HEALTH SYSTEM, FINALIZE A CHANGE LEADERSHIP STRATEGY FOR CULTURAL SAFETY AND HUMILITY THAT WILL ENSURE:** TARGETED EFFORTS TO ADDRESS SYSTEMIC BARRIERS; DEDICATED CAPACITY RESPONSIBLE FOR DRIVING CULTURAL SAFETY AND HUMILITY ACROSS THE HEALTH SYSTEM; THE DEVELOPMENT OF TOOLS AND RESOURCES AND PROACTIVE KNOWLEDGE EXCHANGE TO SPREAD CULTURAL SAFETY AND HUMILITY; AND OTHER ACTIVITIES TO PERMANENTLY EMBED CULTURAL SAFETY AND HUMILITY AS A REQUIRED COMPONENT OF A QUALITY HEALTH CARE SYSTEM IN BC.

- **ENGAGE HEALTH DIRECTORS, KNOWLEDGE KEEPERS, AND OTHER KEY CONTRIBUTORS TO DEVELOP A CULTURAL SAFETY AND HUMILITY ACCREDITATION STANDARD AVAILABLE ACROSS THE HEALTH SYSTEM IN BC, OUTLINING QUALITY STANDARDS TO ADVANCE IMPLEMENTATION OF CULTURAL SAFETY AND HUMILITY INTO HEALTH SERVICE OPERATIONS AND DELIVERY.**

- **WORK WITH PROVINCIAL PARTNERS TO CREATE A SAFE ENVIRONMENT FOR FIRST NATIONS PEOPLE TO RAISE CONCERNS ABOUT THE CULTURAL SAFETY OF CARE. THIS WILL INCLUDE ADDRESSING INCOMING FEEDBACK, INCIDENTS AND COMPLAINTS IN A CONSISTENT, TIMELY, SAFE AND PROFESSIONAL MANNER, AND SUPPORTING FIRST NATIONS PEOPLE TO NAVIGATE MAINSTREAM COMPLAINTS PROCESSES AS REQUESTED AND APPROPRIATE.**
KEY PRIORITY: SERVICE EXCELLENCE

Service Excellence reflects our continued effort to strive for excellence, including cultural safety and humility, in health and wellness programs and services accessed by our citizens at home and away from home, with a particular focus on Mental Health and Wellness, Primary Health Care, and Health Benefits.

MENTAL HEALTH AND WELLNESS
Together with Nations and our provincial partners, we will advance the following annual key priorities in a strategic and sustainable manner – one that serves our citizens at home and away from home:

- EXPAND LAND-BASED HEALING FROM FIVE TO 10 SITES ACROSS THE PROVINCE.
- TRANSFORM THE TREATMENT CENTRE MODEL INTO A HEALING CENTRE MODEL, INCLUDING PILOTING CONTINUOUS INTAKE, EXPANDING PROGRAMS THAT ADDRESS UNDERLYING TRAUMA, AND IMPLEMENTING INFRASTRUCTURE INVESTMENTS.
- WORK WITH THE FNHC, BC AND CANADA TO SUPPORT NATION-DEVELOPED MENTAL HEALTH AND WELLNESS PLANNING PROJECTS AND DEMONSTRATION SITES THAT REFLECT FIRST NATIONS MODELS OF HEALING COORDINATED WITH PROVINCIAL MENTAL HEALTH AND WELLNESS SERVICES.
- IMPLEMENT A RANGE OF INITIATIVES AND APPROACHES TO ADDRESS SUBSTANCE USE, INCLUDING: IMPLEMENTATION OF CASE MANAGEMENT, TREATMENT AND HARM REDUCTION SUPPORTS RELATED TO THE OVERDOSE PUBLIC HEALTH EMERGENCY; LAUNCH OF A PUBLIC EDUCATION CAMPAIGN AND A SET OF COMMUNITY RESOURCES RELATED TO THE LEGALIZATION OF NON-MEDICAL CANNABIS; REINVIGORATING PLANNING AND CAMPAIGNS AT PROVINCIAL AND REGIONAL LEVELS TO REDUCE THE USE OF COMMERCIAL TOBACCO; AND CONSOLIDATING AN APPROACH TO ADDRESS THE CONTINUING HEALTH IMPACTS OF ALCOHOL USE.
- CONTINUE IMPLEMENTING THE FNHA’S COMMITMENT TO TRAUMA-INFORMED CARE TRAINING FOR ALL STAFF.
KEY PRIORITY: SERVICE EXCELLENCE

PRIMARY HEALTH CARE
This year, the FNHA will continue to advance shared planning with the provincial health system and other partners to:

- WORK WITH OUR PARTNERS TO IDENTIFY NEW PRIMARY HEALTH CARE SERVICE MODELS AND INVESTMENTS FOR BOTH RURAL AND URBAN POPULATIONS.

- ADVANCE CAPABILITY OF FNHA TO EMPLOY AND DEPLOY PRIMARY HEALTH CARE PROVIDERS, SUPPORTING ENHANCED ACCESS, CULTURAL SAFETY AND HUMILITY, SUSTAINABILITY AND STABILITY OF PRIMARY HEALTH CARE SERVICES FOR OUR CITIZENS AT HOME AND AWAY FROM HOME.

- PLAN AND HOST A PROVINCIAL PRIMARY HEALTH CARE ++ CONFERENCE TO SHARE KNOWLEDGE AND ADVANCE PRIMARY HEALTH CARE FOR FIRST NATIONS IN BC.

HEALTH BENEFITS
Over the coming year, the FNHA will advance sustainable and continuous quality improvement of Health Benefits and advance the transition of the administration of benefits from Non-Insured Health Benefits to facilitate greater flexibility and future transformation, through undertaking the following annual key priorities:

- STRENGTHEN OUR RELATIONSHIP WITH CLIENTS AND COMMUNITIES THROUGH CONTINUED IMPLEMENTATION OF A DEDICATED COMMUNITY RELATIONS TEAM, HEALTH BENEFIT CLIENT SURVEY, MEASUREMENT AND REPORTING OF SERVICE STANDARDS, AND TIMELY RESOLUTION OF COMPLAINTS AND APPEALS.

- WORK WITH OUR PARTNERS ON CONTINUOUS QUALITY IMPROVEMENT OF PHARMACY BENEFITS, INCLUDING IMPLEMENTING LEARNING RESULTING FROM THE EVALUATION OF FNHA'S HEALTH BENEFITS- PHARMACY PROGRAM FOR BC FIRST NATIONS, WHICH INCLUDES THE TRANSITION TO PLAN W.

- UNDERTAKE A ROBUST ENGAGEMENT PROCESS WITH FIRST NATIONS LEADERSHIP, HEALTH DIRECTORS AND CLIENTS AT HOME AND AWAY FROM HOME TO SHAPE THE DESIGN AND TRANSITION OF DENTAL, MEDICAL SUPPLIES AND EQUIPMENT AND VISION BENEFITS.
KEY PRIORITY: LEADERSHIP AND CULTURE DEVELOPMENT

Leadership and Culture Development is aimed at continuing to build a BC First Nations institution by and for our citizens and communities. Drawing from ‘The Howl’ FNHA Employee Engagement Survey that was launched in 2018/19, we will implement an action plan to advance the key findings from the survey and monitor progress by administering another survey in 2019/20. We will also implement an approach for FNHA staff to visit and build relationships with communities and Nations to learn about the diversity of First Nations across BC. Further, we will put into place a leadership development program that supports BC First Nations, and Indigenous and non-Indigenous employees to lead from a ‘best of both worlds’ paradigm.

To continue to build a BC First Nations institution, by and for our citizens and communities, the FNHA will undertake the following priorities this coming year:

- IMPLEMENT AN APPROACH FOR FNHA STAFF TO VISIT AND BUILD RELATIONSHIPS WITH COMMUNITIES AND NATIONS, AND UNDERTAKE EXPERIENTIAL LEARNING ABOUT THE DIVERSITY OF FIRST NATIONS CULTURES AND PERSPECTIVES ACROSS BC.


- SUPPORT STRONG LEADERSHIP AND SUCCESSION PLANNING THROUGH INITIATING DEVELOPMENT OF A LEADERSHIP DEVELOPMENT PROGRAM FOR THE FNHA WORKFORCE THAT SUPPORTS BC FIRST NATIONS, AND INDIGENOUS AND NON-INDIGENOUS EMPLOYEES TO LEAD FROM A ‘BEST OF BOTH WORLDS’ PARADIGM FOR THE FNHA AND TO INFLUENCE THE BROADER HEALTH SYSTEM.
THE FNHA HAS STRENGTHENED OPERATIONS; RE-ORIENTED AND EVOLVED OUR ORGANIZATIONAL STRUCTURE TO BETTER REFLECT OUR SERVICE DELIVERY GOALS AND FUNCTIONS; AND IS GROUNDED IN LEADING-EDGE ORGANIZATIONAL POLICIES.
## Annual Budget 2019/20

### Revenues

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<th>Source</th>
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<td>Health Canada</td>
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<td>Province of British Columbia</td>
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<td>First Nations Information Governance Center</td>
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<td>Health Authorities</td>
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<td>Interest Income</td>
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<td>Miscellaneous Income</td>
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<td><strong>Total Revenues</strong></td>
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### Expenses

#### Operations

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#### Governance and First Nations Engagement

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<td>First Nations Health Directors Association</td>
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<td>First Nations Engagement</td>
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<td><strong>Total Expenses</strong></td>
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#### Program Services

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<td>Direct Community Service Funding</td>
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<td>Regional Services and Programs</td>
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<td><strong>Total Expenses</strong></td>
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### Excess (Deficiency) of Revenues Over Expenses

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<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Excess (Deficiency) of Revenues Over Expenses</td>
<td>(27,869,675)</td>
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CONCLUSION

Our seventh Summary Service Plan represents a considerable milestone in our journey of transformation. Over the past year, the FNHA has refined programs, services and operational responsiveness. Some accomplishments include working with partners to initiate away-from-home action plan(s), upholding First Nations data governance and establishing FNHA emergency response policies and plans. Quality and cultural safety and humility continue to be 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

REFLECTING ON OUR PROGRESS
APPENDIX A

REFLECTING ON OUR PROGRESS

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.

• Five of five regions completed Regional Health and Wellness Plans and Partnership Accords with regional health authorities.

• For three consecutive years, FNHA applied a 5.5% increase to all community funding agreements, enabling communities to utilize increases to address their priorities. Starting in 2018/2019, the FNHA applied a 3% increase across all community funding agreements and targeted the remainder towards additional addictions, nursing and home and community care workers and salary competitiveness, and for remote communities.

• 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.
CULTURAL SAFETY AND HUMILITY

- 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, Joint Project Board and Canadian Institute for Health Information work plans.

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

- Partnership with BC Patient Safety and 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.

- In 2017/2018 the FNHA and Ministry of Mental Health and Addictions signed a Declaration of Commitment on Cultural Safety and Humility.

- In 2017/2018 the FNHA signed a Letter of Understanding with Health Standards Organization to collaborate and co-design a Cultural Safety and Humility Standard.

- The Committee on First Nations Health (TCFNH) approved a draft Change Leadership Strategy for Cultural Safety and Humility, designed to increase system level supports and structures across the health system.

DECLARATION of COMMITMENT

CREATE A CLIMATE FOR CHANGE
- Articulating the pressing need to ensure cultural safety within First Nations and Aboriginal Health services in BC.
- Opening an honest and convincing dialogue with all stakeholders to show that change is necessary.
- Forming a coalition of influential leaders and role models who are committed to the priority of embedding cultural humility and safety in BC health services.
- Leading the creation of the vision for a culturally safe health system and developing a strategy to achieve the vision.
- Supporting the development of workplans and implement through available resources.

ENGAGE & ENABLE STAKEHOLDERS
- Communicating the vision of culturally safe health system for First Nations and Aboriginal people in BC and the absolute need for commitment and understanding on behalf of all stakeholders, partners and clients.
- Openly and honestly addressing concerns and leading by example.
- Identifying and removing barriers to progress.
- Tracking, evaluating and visibly celebrating accomplishments.

IMPLEMENT & SUSTAIN CHANGE
- Empowering health organizations and individuals to innovate, develop cultural humility and foster a culture of cultural safety.
- Allowing organizations and individuals to raise and address problems without fear of reprisal.
- Leading and enabling successive waves of actions until cultural humility and safety are embedded within all levels of the health system.
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 2017/2018, the FNHA released Overdose Data and First Nations in BC: Preliminary Findings, sharing with regions and communities first, followed by a media event.


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.

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.

In 2017/2018, the FNHA conducted analysis of primary care services at provincial and regional levels. The work was shared with First Nations and the TCFNH. Five separate regional reports and a summary of key findings report were prepared and released in 2018/2019.

In 2017/2018, the FNHA partnered with the BC Cancer Agency to complete the first study of its time comparing cancer incidence and survival rates between First Nations and non-First Nations people in BC.

In 2017/2018, the FNHA and the BCCS released a report sharing key findings and recommendations to prevent unintended First Nations youth and young adult injury and deaths in BC entitled “BCCS and FNHA Death Review Panel: A Review of First Nation Youth and Young Adult Injury Deaths: 2010-2015.”
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’en Commitment Stick initiative launched to support efforts to end all forms of violence against women and girls.

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.
PARTNERSHIPS

80+

- 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.

- Strengthening partnerships among ourselves, the FNHA-FNHC-FNHDA collaborate through Relationship Agreement, Terms of Reference and 2017 signing of Declaration of Lateral Kindness. In 2018/2019, a commitment was made to evaluate this partnership.

- 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.

- In 2017/2018, the FNHA signed a Letter of Understanding with the Ministry of Mental Health and Addictions.

- In 2017/2018, the FNHA and the Canadian Institute of Health Information signed a Memorandum of Understanding.

- In 2017/2018, the FNHA, Providence Health Care and the Roman Catholic Archdiocese of Vancouver came together in a ceremony to mark the start of a new partnership.
A number of long-term boil water advisories rescinded since transfer, and new community-based water monitors and water technicians trained.

Last year, communities across the province faced unprecedented flooding and wildfires. The FNHA supported communities with drinking water safety information for community and individual wells and septic systems and shared resources about how to clean up flooded homes.

During the provincial state of emergency for wildfires in BC, the FNHA developed a series of communiques that included key contact information, funding information, emergency response, air quality and health and nursing supports. The FNHA also provided help at evacuation centres and supported members to receive the help they needed. Traditional and Elders support was also available.

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.

The FNHA continues to work with the MOH to provide input on policy development and support the implementation of Primary Care Networks as part of the Integrated System of Primary and Community Care. The FNHA and MOH are co-chairing a short-term working group that is developing a cultural safety and humility guidebook for Primary Care Network planners.
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.

To respond to the opioid public health emergency, the FNHA developed a Framework for Action: Responding to the Overdose/Opioid Public Health Emergency for First Nations.

In 2017-2018, the FNHA held the inaugural two-day Mental Health and Wellness Summit in Vancouver, which highlighted promising and wise practices to support the mental health and wellness of First Nations communities in BC. In total, 538 people attended from across Canada.

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.

In 2018/2019 the FNHA invited First Nations clients, Health Directors, Chiefs and other health staff and leaders to review and provide input on our Regional Engagement Guide and Questionnaire. This feedback will help support our work in Dental, Vision and Medical Supplies and Equipment.
• 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.

$375,000

• $375,000 BY THE FNHA SHARED WITH BCAAFC TO FUND FIRST NATIONS AND ABORIGINAL DOULA SERVICES.

• FNHA continues to play a role in Jordan’s Principle service coordination in BC with ISC BC Region and has done so since 2016.
APPENDIX B

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.

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CALL TO ACTION 3  
JORDAN’S PRINCIPLE

- The FNHA continues its Jordan’s Principle navigation functions in BC through the FNHA Child and Youth Systems Navigators.

CALL TO ACTION 5 AND 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 National Native Alcohol and Drug Abuse Program, 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 AND 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 AND 35
ALTERNATIVES TO IMPRISONMENT AND CULTURAL SAFETY FOR ABORIGINAL OFFENDERS

- The FNHA partners on initiatives to improve health, cultural safety and humility, 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 and humility 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 AND 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.
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