





# **VANCOUVER COASTAL PARTNERSHIP ACCORD**

**VANCOUVER COASTAL CAUCUS** 

and

**INTERIM FIRST NATIONS HEALTH AUTHORITY** 

and

**VANCOUVER COASTAL HEALTH** 

May 2012

# A. PURPOSE OF THIS ACCORD

The Vancouver Coastal First Nations political leaders and health technicians through the Vancouver Coastal Caucus, the Interim First Nations Health Authority, and the Vancouver Coastal Health (VCH) are working together to increase the influence of First Nation's decisions for health services in the Vancouver Coastal region with the goal of attaining shared decision-making.

The Vancouver Coastal Caucus, Interim First Nations Health Authority, and Vancouver Coastal Health seek to improve the health outcomes for First Nations and other Aboriginal people residing in the Vancouver Coastal territory, by achieving greater service integration through sharing decisions on planning and engagement; service delivery; and accountability and evaluation of First Nations and Aboriginal culturally appropriate, safe and effective services and systems.

Recognizing that this is a living document, from time to time, as agreed to by all parties and at least on an annual basis, this document may be reviewed and amended to the benefit of all parties involved.

# **B. PREAMBLE**

This Vancouver Coastal Partnership Accord is made in the spirit of partnership and commitment to the well-being of all First Nations and Aboriginal people living in the Vancouver Coastal region, regardless of Nationhood, status and location.

This Accord builds on several provincial and regional documents: the Transformative Change Accord, the Tripartite First Nations Health Plan. The Interim First Nations Health Authority (IFNHA), provides support to the work of the First Nations Health Council, including strategic advice and advocacy for First Nation community involvement in the implementation of the Health Actions of the Tripartite First Nations Health Plan.

The *Transformative Change Accord: First Nations Health Plan* was released on November 25, 2006 by the First Nations Leadership Council and The Province of BC. This ten-year Plan includes twenty-nine action items in the following four areas: Governance, Relationships and Accountability; Health Promotion/Disease and Injury Prevention; Health Services; and Performance Tracking.

The *Tripartite First Nations Health Plan* (TFNHP) was signed on June 11 2007 by the political executive of the Union of BC Indian Chiefs, First Nations Summit, and BC Assembly of First Nations, the Province of BC and Health Canada. The Plan builds on the Transformative Change: First Nations Health Plan and includes a number of new actions to be addressed by the partners in addition to the original 29 actions in the TCA: FNHP including the development of a new health governance model for First Nations.

The Consensus Paper: British Columbia First Nations Perspective on a new Health Governance Arrangement (2011) was adopted by resolution by BC First Nations on May 26, 2011. The Consensus Paper sets out a historic level of agreement amongst First Nations in BC about their health and well-being and sets out a series of next steps for the First Nations Health Council to undertake.

The resolution adopted by BC First Nations also endorsed the signing of a *Tripartite Framework Agreement* on First Nations Health Governance by First Nations, the Province of BC, and the Government of Canada. This legally-binding Framework Agreement outlines the new health governance structure for First Nations health services, the funding commitments, the transfer of federal First Nations health programs and services to the First Nations Health Authority, and how First Nations and the provincial health system will work together to better meet First Nations health priorities and needs.

This Accord continues to build on these landmarks and the development of partnerships and engagement between Vancouver Coastal Health, the Interim First Nations Health Authority (iFNHA), and the Vancouver Coastal Caucus.

# C. STRUCTURE OF THE PARTIES AND THEIR RELATIONSHIP

#### The Vancouver Coastal Caucus (VCC)

The Vancouver Coastal Caucus through their First Nations leadership provides political direction and advocacy on behalf of their Nations. The Vancouver Coastal Caucus is not a service provider.

The Vancouver Coastal First Nations in the Vancouver Coastal region have pre-existing inherent responsibilities for their citizens regardless of residency, as well as other First Nations and other Aboriginal people who reside in their ancestral homelands. Similarly, other First Nations and Aboriginal peoples who visit or reside in these ancestral homelands have a responsibility to respect and acknowledge the traditional territories, customs and laws of the Vancouver Coastal First Nations.

The Vancouver Coastal First Nations health leadership, which includes both political leaders and health technicians and represents a wide range of diverse Nations who are at different stages of development:

- Each community and Nation is different from the other in terms of needs and stages of development.
- Each of the 14 First Nations provides health services and programs in the Vancouver Coastal region and are at different stages of development based on their history of Health Transfer funding and arrangements with Health Canada First Nations and Inuit Health.
- The capacity and capability of each community or Nation to engage with Vancouver Coastal Health will
  vary among the communities. While approaches should be inclusive, no community should be forced to
  participate in region-wide strategies yet no community should be left behind.
- The 14 First Nations communities in the Vancouver Coastal region vary in size and include small and isolated communities who deserve equitable recognition in all activities outlined in this Vancouver Coastal Partnership Accord. Ulkatcho First Nations and Anahim Lake are within the Vancouver Coastal Health region; however, health services are provided by Interior Health Authority through a Service Agreement and the Ulkatcho First Nations is considered to be part of the Interior First Nations Health Governance.
- According to the 2006/2007 data, there are 24,470 First Nations and Aboriginal people living in the region, which includes 15,980 Status First Nations people.<sup>1</sup>
- All strategies agreed upon by the partners should take into account the desire by some communities to incorporate traditional methods of care.

In order to coordinate and oversee health developments in the Region, Vancouver Coastal First Nations have formed the Vancouver Coastal Caucus which provides a vehicle for the political leader and health technicians from the region's First Nations to come together at regular intervals. The Caucus has agreed that its appointed leaders should enter into this Vancouver Coastal Partnership Accord with Vancouver Coastal Health and the Interim First Nations Health Authority in order to establish a collaborative working relationship. The Caucus works with and invites partners to the table, including Vancouver Coastal Health, for the benefit of First Nations and Aboriginal people resident in the Vancouver Coastal region.

Three representatives from the Caucus are selected to sit on the 15 member First Nations Health Council, which operates at a provincial level on behalf of First Nations in British Columbia. These Caucus representatives also form part of the *Vancouver Coastal First Nations Regional Table* which acts as a strategic working group for the Vancouver Coastal Caucus to work alongside various partners including the Vancouver Coastal Health.

<sup>&</sup>lt;sup>1</sup> Vancouver Coastal Health – Aboriginal Health Status Profile, Updated August 2009

#### **Interim First Nations Health Authority**

The Interim First Nations Health Authority (iFNHA), working with the strategic political leadership provided by First Nations Health Council, is responsible for the legal and administrative aspects of the implementation of the British Columbia Tripartite Framework Agreement on First Nations Health (Framework Agreement), which includes the establishment of a new health governance structure for First Nations in BC. The Framework Agreement sets out that the responsibilities of the iFNHA, which include taking responsibility for the planning, management, delivery and funding of health programs presently provided for First Nations in BC through Health Canada as well as collaborating with the BC Ministry of Health and BC Health Authorities to coordinate and integrate their respective health programs and services to achieve better health outcomes for First Nations in British Columbia. This work includes enhancing collaboration among First Nations Health Providers and other health providers to address economies of scale service delivery issues to improve efficiencies and access to health care.

The iFNHA will incorporate First Nations cultural knowledge, beliefs, values and models of healing into all aspects of this work in order to better meet the needs of First Nations communities. The iFNHA will respect and uphold the following seven directives:

- Directive 1 Community Driven, Nation Based
- Directive 2 Increase First Nations Decision-Making
- Directive 3 Improve Services
- Directive 4 Foster Meaningful Collaboration and Partnerships
- Directive 5 Develop Human and Economic Capacity
- Directive 6 Be Without Prejudice to First Nations Interests
- Directive 7 Function at a High Operational Standard

As part of the new First Nations health governance arrangement and continued commitment to a community driven, nation based approach, the Interim First Nations Health Authority provides agreed upon funding, logistical and technical support to the Vancouver Coastal Caucus.

#### Vancouver Coastal Health (VCH)

The Vancouver Coastal Health serves over 1 million people including the residents of Vancouver, Richmond, the North Shore and Coast Garibaldi, Sea-to-Sky, Sunshine Coast, Powell River, and Central Coast. Vancouver Coastal Health has 22,000 employees and 2,500 physicians, and an annual budget of \$2.8 billion. Under the Transformative Change Accord: First Nations Health Plan (2005), the Province including Regional Health Authorities has the responsibility for providing all aspects of health services to all residents of British Columbia including Non-status Aboriginal people, Metis, and Status First Nations living on and off reserve. It is with this responsibility that Vancouver Coastal Health acknowledges the need to partner with First Nations and other Aboriginal people in its region to ensure culturally safe and effective delivery of services.

The Vancouver Coastal Health is led by its President and CEO who has overall responsibility for health programs and services in Vancouver Coastal Health. In VCH, services for First Nations and Aboriginal people are delivered through dedicated services and general services that serve the entire population but may have high proportion of First Nations/Aboriginal clients. Under the direction of the VCH Board and Chief Executive Officer, leadership for Aboriginal Health in VCH is assigned to the Aboriginal Health Strategic initiatives team under the Executive Sponsorship of the Vice President of Public Health. However, all programs are committed to delivering culturally appropriate services to First Nations and Aboriginal people.

The Vancouver Coastal Health acknowledges the rights and responsibilities of Vancouver Coastal First Nations within its coverage area and enters into this relationship with the recognition that improving the health status of First Nations and other Aboriginal peoples in the region requires a collaborative and defined mechanism for such a working relationship.

Nothing in this Vancouver Coastal Partnership Accord intends to undermine or interfere with the rights of each sovereign Nation to govern their own affairs; neither does it intend to undermine or interfere with the rights of Vancouver Coastal Health to govern its health services delivery. Rather, Vancouver Coastal Partnership Accord speaks to collaboration and commitment between the two parties in the provision of health services and programs to First Nations and Aboriginal people.

# D. COMMITMENTS OF THE PARTIES (VANCOUVER COASTAL CAUCUS, INTERIM FIRST NATIONS HEALTH AUTHORITY, AND VANCOUVER COASTAL HEALTH)

#### 1. Overall Commitment

#### The parties commit to:

- a. Communicate in a timely and effective manner to achieve the agreed objectives.
- b. Support each other in a positive and constructive manner to facilitate a positive outcome for Vancouver Coastal First Nation communities and other Aboriginal people.
- c. Work positively on population health approaches which the parties can jointly implement and evaluate with the Vancouver Coastal First Nations communities and other Aboriginal peoples.
- d. Recognize and support the overarching organizational and governance structures of the each party.
- e. Acknowledge that each party has legal and fiduciary responsibilities and each operates under different mandates. The Vancouver Coastal First Nations have the jurisdictional responsibility for their respective Nations but their goal of the relationship is to facilitate progress in addressing First Nations and Aboriginal people's health needs and well-being.

#### 2. Aboriginal Health Steering Committee

The parties commit to establish an Aboriginal Health Steering Committee to oversee the implementation of this Partnership Accord and serve as a senior and influential forum for partnership, collaboration, and joint efforts on First Nation and Aboriginal health priorities, policies, budgets, programs and services in the Vancouver Coastal region.

The membership of the Aboriginal Health Steering Committee will include:

#### **Vancouver Coastal Regional Caucus:**

The three Vancouver Coastal FNHC Representatives

## **Interim First Nations Health Authority:**

The Chief Executive Officer or designate; a Board representative; and a Senior team representative;

#### **Vancouver Coastal Health:**

• The Chief Executive Officer; a Board representative; the Vice-President of Public Health; and the Chief Operating Officer of Coastal Community of Care;

and any ex-officio members as jointly appointed by the parties.

Within one month of the signing of this Partnership Accord, the parties will complete a Terms of Reference for the Aboriginal Health Steering Committee, which will guide the Committee's operation and activities.

The Committee will host bi-annual meetings, and the business of the meetings will include:

- An annual meeting with the Vancouver Coastal First Nations Regional Table; and
- Review of the Partnership Accord relationship and the agreed upon outcomes.

# 3. Planning and Engagement

#### The parties commit to:

- a. Develop a strategic Aboriginal Health and Wellness Plan for the Vancouver Coastal region, with milestones and deliverables;
- b. Develop a joint community engagement strategy and Urban Health Strategy;
- Engage and ensure participation of Vancouver Coastal First Nations and other Aboriginal people
  particularly through the Regional and Sub-Regional caucuses to support local and regional health
  planning with Vancouver Coastal Health Executives and Managers;
- d. Whenever appropriate, jointly facilitate and host First Nations and Aboriginal community engagement and participation to support local and regional health planning, which would include an annual health gathering;
- e. Vancouver Coastal First Nations Regional Table or their designate will participate in the VCH Aboriginal Health Operations Council, which will allow for meaningful contribution to the Vancouver Coastal Health Aboriginal Health and Wellness Plan, and the Vancouver Coastal Health Aboriginal Health in Review Report.

#### Interim First Nations Health Authority and Vancouver Coastal Caucus commits to:

- a. Advocate for First Nations and other Aboriginal perspectives and inclusion in regional and provincial developments in health; and
- b. Contribute information, ideas, guidance, expertise to collaborative and common projects and initiatives (e.g. cultural competency training and events) with Vancouver Coastal Health.

#### **Vancouver Coastal Health commits to:**

- a. Develop, implement, and evaluate First Nations and Aboriginal cultural competency training and events to VCH executive, board, staff and contractors;
- b. Work with Vancouver Coastal Caucus to incorporate local perspectives (e.g. local governance liaison committees), health needs and aspirations for improvements to First Nations and Aboriginal health;
- c. Integration of First Nations and Aboriginal health perspective into Vancouver Coastal Health's various local programs, councils and other key planning networks and initiatives; and
- d. Participate in Vancouver Coastal Caucus meetings as appropriate.

#### 4. Service Delivery

#### The parties commit to:

- a. Jointly develop a protocol for First Nations and Aboriginal health staff to support continuing care being provided for First Nations and Aboriginal citizens in Vancouver Coastal hospital facilities through collaboration with the Aboriginal Health Strategic Initiatives;
- b. Jointly develop and submit for Vancouver Coastal Health's Board approval a "First Nations and Aboriginal Cultural Responsiveness Strategy for the Vancouver Coastal Health." The strategy would include guidelines and policies to incorporate specific First Nations and Aboriginal traditional protocols and practices for the entire VCH organization with the goal of supporting and improving Vancouver Coastal patients/community members experience with services provided by Vancouver Coastal Health.

## Interim First Nations Health Authority and Vancouver Coastal Caucus members commit to:

- a. Provide advice at a regional level in the Vancouver Coastal region; and
- b. Acknowledge and respecting the role of the Vancouver Coastal Health and their evolving relationships with local First Nations.

#### Vancouver Coastal Health commits to:

- a. Work towards effective collaboration and relationship-building between Vancouver Coastal Health and First Nations Health Centres;
- b. Engage Interim First Nations Health Authority, Vancouver Coastal First Nations Regional Table, and other service provider representatives along with Vancouver Coastal Health Operational Directors to participate in the Vancouver Coastal Health Aboriginal Health Operations Council. The Operations Council will coordinate and evaluate the planning and delivery of First Nations and Aboriginal health services in the geographical boundaries of Vancouver Coastal area. The Council will focus on operational planning, implementation issues and program/service alignment with the Aboriginal Health and Wellness Plan. Partner with First Nations and other Aboriginal community health leaders to develop comprehensive, Indigenous culturally appropriate strategies to improve the health of First Nations and other Aboriginal people in the Vancouver Coastal region; and
- c. Work with local First Nations and other Aboriginal peoples in the Vancouver Coastal region to continually review and improve the quality and cultural appropriateness of services delivered for all Aboriginal patients/community members.

#### 5. Accountability and Evaluation

#### The parties commit to:

Continue to work jointly to develop and measure effectiveness of the shared governance and decision-making based on reciprocal accountability of the parties, and ensuring First Nations and other Aboriginal participation at all levels. Specifically reciprocal accountability requires:

- · Clear roles and responsibilities of the parties;
- Clear performance expectations which are balanced to the capacities of the parties;
- · Credible and timely reporting; and
- Hold each other accountable in the spirit of reciprocal accountability for the commitments in this Accord.

The parties commit to the following deliverables:

- Present at a minimum, an annual progress report card to the Tripartite Committee on First Nations Health;
- Participate annually in a meeting between the Aboriginal Health Steering Committee and the Vancouver Coastal Caucus to review the progress of this Accord; and
- Evaluate the progress of closing the health disparity gap between First Nations and other Aboriginal
  and non-Aboriginal Vancouver Coastal Health residents through an annual review of the performance
  indicators and quality of care of strategic initiatives. Outcomes and health status indicators will be
  measured, using mechanisms such as administrative data provided by the Ministry of Health Services
  or regional/community generated data and information.

## E. DEVELOPMENT OF SUCCESS INDICATORS

Measurable Success Indicators will be developed collaboratively between the parties. Depending on evidence, best practice literature, and data availability for the Vancouver Coastal region, these indicators may reflect the following:

- a. A clear vision for health, health wellness and health care delivery for First Nation and Aboriginal people is established jointly by Vancouver Coastal Health and First Nations and Aboriginal people (e.g., joint vision statement, community engagement strategy and urban health strategy).
- b. Coordination of health service planning, health service delivery and Tripartite initiatives (e.g., E-health) are enhanced between Vancouver Coastal Health and First Nations and other Aboriginal people (e.g., joint health plans approved; number of joint community planning sessions; number of First Nations and Aboriginal community engagement sessions; number of telehealth sites; joint membership on project teams; number of common E-health systems).

- c. Access to VCH services and programs is improved for First Nations and other Aboriginal people (e.g., patients accessing Aboriginal Navigator program; patient satisfaction with access; number of telehealth sites).
- d. Formal linkages are strengthened between Vancouver Coastal Health and Vancouver Coastal First Nations and Aboriginal health centres (e.g., number of service agreements, number of integrated delivery programs; participation on Integrated Primary and Community Care (IPCC) initiatives; number of joint staff development sessions; number of VCH funded programs delivered in First Nation Health centres).
- e. A culture of safety and inclusiveness is discernable for First Nations and Aboriginal people accessing VCH programs and services (e.g., number of joint cultural competency training events; cultural competency of staff).
- f. Appropriateness, quality and acceptability of health services are increased for First Nations and other Aboriginal people (e.g., patient satisfaction; number of referrals to Aboriginal navigators and Indigenous practitioners; number of Aboriginal health practice guidelines in place; cultural competency of VCH staff, board and executive).
- g. First Nation and Aboriginal communities are supported through partnerships with other Ministries, municipalities, private sector and non-profit service providers to address the social determinants of Aboriginal health (e.g., First Nations participation on VCH Governance Liaison Groups).
- h. Health and Wellness of First Nations and Aboriginal people is improved and the gap in health status is decreased between First Nations and Aboriginal people and other residents in the Vancouver Coastal region (e.g., life expectancy, infant mortality, communicable diseases, substance abuse related morbidity, injuries, dental health, self reported health status and mental health, family connectedness, injury free).

# Vancouver Coastal Partnership Accord agreed on May 16, 2012

Signatories for the Vancouver Coastal Regional Caucus	
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Georgina Flamand – representative for the Central Coast	
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Ernest Armann – representative for Southern Stl'atl'imx	
For Interim First Nations Health Authority	
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Joe Gallagher, CEO, Interim First Nations Health Authority	8.7
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Lydia Hwitsum, Chair, Interim First Nations Health Authority	_
For Vancouver Coastal Health  Led Drum / Jon	
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