

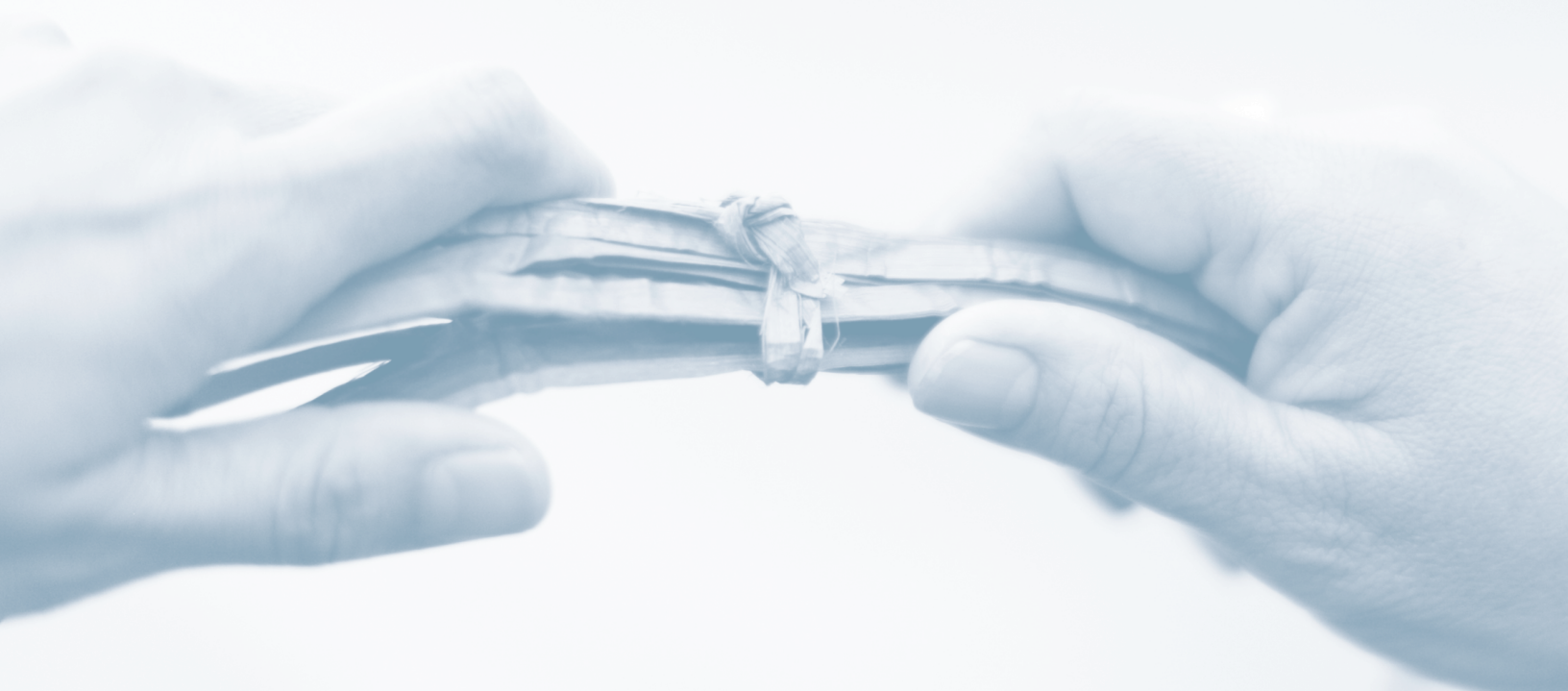
# MEMORANDUM OF UNDERSTANDING

BETWEEN:

The First Nations Health Authority

AND

The Canadian Institute for Health Information



First Nations Health Authority  
Health through wellness



Canadian Institute  
for Health Information

Institut canadien  
d'information sur la santé

## PREAMBLE

Whereas, within the scope of their respective mandates, First Nations Health Authority (FNHA) and the Canadian Institute for Health Information (CIHI) share the objectives of improving the health and well-being of First Nation individuals, families, and communities in British Columbia (BC) and contributing to the broader national process of reconciliation.

Whereas, FNHA is interested in furthering cultural safety and humility throughout the health system, and improving access to data and analytic expertise as well as information, tools and analytics pertaining to the health and wellness, and health service use of First Nations people in BC.

Whereas, CIHI is interested in expanding its understanding of the health and health service use of First Nations, Inuit and Métis persons in BC, the challenges and opportunities facing their organizations across Canada, and how best to work with these organizations in a culturally safe and humble way.

Whereas, this Memorandum of Understanding (MOU) serves to strengthen the mutual commitment to the need for quality data that is actionable to support informed decision making, and program and service delivery ensuring maximum benefit to the health of individuals and populations. The Parties recognize the importance of working collaboratively together in culturally humble and respectful ways as a means to mutually enrich our respective mandates, processes and programs. This journey will be enhanced by the sharing of teachings and learnings in cultural humility and safety, and will be strengthened by the collective impact engendered when FNHA and CIHI align their roles to make progress on a shared agenda and priorities. Collective impact is created when organizations coordinate their actions and activities towards a common commitment. It results in an effort synergistically greater than the sum of individual endeavors and which supports system-wide change.

## THE PARTIES

The FNHA, the first province-wide health authority of its kind in Canada, is a component of the First Nations health governance structure established by BC First Nations leadership. The FNHA is responsible for the planning, management, delivery and funding of health programs and services for First Nations in BC. The FNHA also pursues systems transformation through integrating with local, regional, provincial, national and federal partners and advancing the First Nations Perspective on Health and Wellness and cultural safety and humility throughout the health system.

CIHI is an independent, not-for-profit organization which is incorporated under the Canada *Not-for-Profit Corporations Act*. CIHI provides essential information on Canada's health systems and the health of Canadians. The mandate is to deliver comparable and actionable information to accelerate the improvements in health care, health system performance and population health across the continuum of care. CIHI's Strategic Plan has recently been refreshed with a focus on three strategic goals: 1) be a trusted source of standards and quality data; 2) expand analytical tools to support measurement of health systems; and 3) produce actionable analysis and accelerate its adoption. The Plan includes a focus on four population priorities: Seniors and Aging, Mental Health and Addictions, First Nations, Inuit and Métis, and Children and Youth.

## 1. PURPOSE OF MEMORANDUM

The purpose of this MOU is to describe and define collaborative areas of focus and the nature of the partnership between the FNHA and CIHI.

## 2. UNDERSTANDING AND SHARED PRINCIPLES

Indigenous peoples have the right to the dignity and diversity of their cultures, traditions, histories and aspirations (*United Nations Declaration on the Rights of Indigenous Peoples*, Article 15.1). Through this FNHA-CIHI collaboration, the Parties' approaches to data and information will be utilized in a way that advances the reconciliation of the legacy of colonization, helps to redress the historical imbalance relating to the First Nations health narrative in Canada, and promotes wellbeing of First Nations peoples.

These principles support the ongoing strengthening of our working relationship and help guide our work:

- **Equal Partnership:** We mutually and collaboratively support each other in attaining greater outcomes for First Nations in BC, and in advancing our respective strategic directions. As well, our partnership will influence the national and international conversations we engage in individually and collectively.
- **Mutual Respect:** We honor and seek to understand each other's cultures, knowledge, processes and ways of working; and we provide assistance to one another in navigating these processes.
- **Collective Impact:** We will support one another to uphold and leverage our respective mandates towards common goals and desired outcomes. Each Partner will leverage its part of the health system to uphold its respective commitments, to achieve collective impact and progress towards the shared vision.
- **Shared Learning:** We commit to learning together for the mutual benefit of both organizations and the people we serve, and to enable the ongoing growth and evolution of our partnership.
- **The Best of Both Worlds:** First Nations ways of knowing the world, which are captured and transmitted through storytelling, and other qualitative ways are living records and are as equally valuable as mainstream approaches, which primarily use quantitative data to understand the health needs of a population. We will use every opportunity to ensure that both perspectives are brought together in our shared work and commitments.
- **Championing Wellness:** Our work recognizes a First Nations worldview, which embodies a holistic, interconnected and balanced approach to life as embodied in the First Nations Perspective on Health and Wellness. Measures to understand health and wellness, where possible, are not deficit-based and instead honour our strengths and point towards the attainment of greater health at an individual, family, community, population and Nation level.

## 3. GENERAL PROVISIONS

The Parties understand that nothing in this MOU is intended to create: (i) binding legal obligations; or, (ii) a legal partnership, agency or joint venture relationship between them and neither CIHI or FNHA will represent themselves as agents of the other.

All activities resulting from this agreement will be compliant with applicable law(s) and OCAP®.

#### **4. SCOPE OF COLLABORATION**

The Parties share a set of common interests to be advanced through this MOU. These include:

- Data and Analytics
- Performance Measurement
- Shared Knowledge and Learning

The Parties also share a common interest in enhancing one another's mandates and organizational capacity through the sharing of best practice, information, and experiences through dialogues on a variety of strategic topics.

As the partnership between the Parties evolves and matures, the scope of collaboration will too broaden and evolve over time.

#### **5. WORK PLAN**

To advance the intentions of this MOU, the Parties will develop an annual work plan. The annual work plan will articulate a variety of specifics, including but not limited to: priority areas of work, deliverables, timelines, responsibilities, inclusion of other key partners, and the approach to addressing costs.

#### **6. COMMUNICATION**

The Parties agree to maintain open lines of communication and to notify the other partner of any developments of a strategic nature that may affect the partnership.

The Parties will share information with respect to one another's programs, services, initiatives, and infrastructure with the goal of identifying opportunities for innovation, collaboration, and/or improvement; and in keeping with the principles articulated in this MOU.

#### **7. MEASURING AND OVERSEEING PROGRESS (MEETINGS)**

The Chief Executive Officer and senior executives of both Parties will meet on an annual basis to assess progress under this MOU and confirm the annual work plan between the Parties.

The Chief Operating Officer of FNHA, or designate, and the Vice President, Western Canada of CIHI, or designate, will meet twice a year to discuss emerging issues, share information of organizational interest, establish direction on mutual priorities and monitor the ongoing implementation of the work plan and this MOU.

Each organization will identify appropriate organization leads to function as a combined secretariat to provide logistical, coordination, planning and policy support for the functioning of the partnership.

Each organization will identify leads for the various actions articulated in the annual work plan. These leads will collaboratively implement their work plans and provide regular progress reports to the combined secretariat.

## 8. FUNDING ARRANGEMENTS

Each party shall be responsible for any costs it incurs through its participation in this MOU. Any specific work projects or implementation activities involving the contribution of funds and/or interchange of employees will be outlined in a separate agreement.

## 9. INTELLECTUAL PROPERTY

Intellectual property use and ownership will be based on the following understanding:

- i) FNHA and CIHI agree that sharing and spreading the outcomes, innovations and learnings from this partnership are important to inform health system improvement. In addition, FNHA and CIHI agree to work together to ensure that any dissemination and spread related to this partnership will be done in a way which properly acknowledges and ensures that the ownership and intellectual property rights of FNHA, First Nations communities and CIHI are preserved and protected.
- ii) Unless expressly agreed to the contrary, each Party shall retain ownership of intellectual property rights in the Intellectual Property developed solely by that Party.

The Parties agree and understand that they will appropriately acknowledge and attribute ownership and intellectual property rights to one another for work done in this partnership when disseminating information and/or products from the collaborative activities of this partnership.

## 10. DURATION, AMENDMENT AND TERMINATION

This MOU will come into effect on the date of the last signature and will remain in place until the parties agree otherwise.

This MOU may be amended from time to time by mutual written agreement of the parties. Either party may propose amendments to this MOU.

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### IN WITNESS WHEREOF,

the undersigned have executed this Memorandum of Understanding:

**BRITISH COLUMBIA  
FIRST NATIONS HEALTH AUTHORITY**

**CANADIAN INSTITUTE FOR  
HEALTH INFORMATION**

By: \_\_\_\_\_  
LYDIA HWITSUM, BOARD CHAIR

By: \_\_\_\_\_  
JANET DAVIDSON, BOARD CHAIR

Date: \_\_\_\_\_

Date: \_\_\_\_\_

By: \_\_\_\_\_  
JOE GALLAGHER, CEO

By: \_\_\_\_\_  
DAVID O'TOOLE, CEO

Date: \_\_\_\_\_

Date: \_\_\_\_\_



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