



EMERGENCY MANAGEMENT BC

AND

FIRST NATIONS HEALTH AUTHORITY

LETTER OF UNDERSTANDING

This Letter of Understanding (LOU) between Emergency Management BC (EMBC) and the First Nations Health Authority (FNHA) is an articulation of the way we intend to work together at an operational service level to achieve our mutual objective of improving emergency management preparedness, mitigation, response and recovery with First Nations and the First Nations population in British Columbia (BC). It is intended to describe the relationship between FNHA and EMBC, including how the parties will support one another's responsibilities, engage jointly in planning, monitoring and reporting, and generally work together with the goal of improving emergency management in line with the First Nations perspective on health and wellness.

This work does not define or replace, and is intended to be in support of, the work of First Nations leadership and the Province of BC at a political and oversight level.

In no way is this LOU intended to interfere with EMBC's engagement and work with First Nations communities, Métis Nation BC and Indigenous service organizations, such as the First Nations Emergency Services Society.

EMBC, like other agencies of the provincial government, has been directed to fully adopt and implement the *Draft Principles that Guide the Province of British Columbia's Relationship with Indigenous Peoples* (the Draft Principles), the *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP), and the *Calls to Action of the Truth and Reconciliation Commission* (TRC). Through this LOU (but not solely through this LOU), EMBC will collaborate on demonstrating progress in moving these commitments forward.

The relationship between FNHA and EMBC takes place within the context of the health governance partnership established between BC First Nations and the Province of BC, as described through a series of governance agreements and health plans (e.g., *the BC Tripartite Framework Agreement on First Nation Health Governance*, *the Health Partnership Accord*, *the Tripartite First Nations Health Plan*, *the Reciprocal Accountability Framework*). These documents establish a set of commitments, indicators and intentions for the improvement of health outcomes for First Nations in BC, enabled by First Nations health governance. A new First Nations health governance structure has been created, consisting of:

- the First Nations Health Council (FNHC), the political voice and advocate for First Nations health and the social determinants of health;



- the First Nations Health Directors Association which includes all the health directors working in First Nation communities;
- the First Nations Health Authority, whose role is outlined below; and,
- the Tripartite Committee on First Nations Health, comprised of senior operational leaders from across the health system and convened to advance aligned planning and action towards shared goals for First Nations health and wellness.

By virtue of these plans and agreements and the First Nations health governance structure, First Nations priorities and perspectives are being “hardwired” throughout the provincial health system.

Another key example of this system-wide progress is the signing of the *Declaration of Commitment – Cultural Safety and Humility in Health Services Delivery for First Nations and Aboriginal Peoples in British Columbia* by the Ministry of Health, FNHA and the six other health authorities in 2015, with action plans now in place for each organization. This Declaration is an important step to making the health system’s programs and services safer and more accessible for First Nations in BC. All sectors need to consider how culturally safe their programs and services are and how they engage with First Nations and other Indigenous partners to effectively support improved outcomes through true partnerships.

As related to emergency management, the wildfire season of 2017 was a turning point event for the provincial emergency management system, including the health system, First Nations, and the First Nations Health Authority, leading to numerous after action reports such as *With Us, Not For Us, FNHA Interior Region Report on Wildfires 2017* and *Addressing the New Normal: 21st Century Disaster Management in BC* (the Chapman/Abbott report). It is with the insights from these reports and recommendations, which were developed with input from impacted First Nations, that this LOU articulates shared priorities for service and operational improvement and an ongoing working relationship between the two signatories.

EMBC and FNHA Mandates

1. Emergency Management BC Mandate

EMBC leads the provincial government in efforts to improve the province’s preparedness, mitigation, response and recovery from disasters. EMBC has been directed by government to make substantive progress on the following priorities:

- Implementation of Chief Maureen Chapman and George Abbott’s recommendations identified in their 2018 report: *Addressing the New Normal: 21st Century Disaster Management in British Columbia*;
- Implementation of the Sendai Framework for Disaster Risk Reduction, adopted by the province in 2018;
- Recognition of the impacts of climate change and linkages to emergency management, and
- Modernization of the *Emergency Program Act*.



Through this LOU, EMBC will work collaboratively with FNHA on delivering this mandate so that FNHA's operational experience will inform the development of provincial legislation, policy and service delivery. In addition, this LOU will align EMBC's work and priorities with:

- FNHA;
- the First Nations health governance structure; and
- the interests of First Nations, and as part of the provincial commitment to the Draft Principles, UNDRIP and the TRC Calls to Action.

2. First Nations Health Authority Mandate

The FNHA is accountable for planning, designing, managing, delivering and funding the delivery of First Nations health programs and services, and undertaking strategic policy, partnership and planning functions to support integration and health system improvement for First Nations people in BC. The FNHA works collaboratively with the Ministry of Health and BC Health Authorities on the design and delivery of provincial health services available to First Nations in BC, including matters such as addressing gaps in service, improving quality (including dimensions such as cultural safety, appropriateness and continuity of care), and better coordination of services, so as to improve efficiency and effectiveness of health care for First Nations in BC (*BC Tripartite Framework Agreement on First Nation Health Governance 2011*, Section 6.1(1)(c)).

FNHA has set out its operational priorities and strategies for the delivery of its health services in *2016-2021 FNHA Multi-Year Health Plan*. FNHA commits to continue to: strengthen services and operations in alignment with the health and wellness philosophy of the organization; stabilize and evolve the organization including consolidating functions associated with service delivery, operations, and medical expertise, and aligning to the five health regions; and, nurturing partnerships with First Nations, government and health system partners. Progress will be made through actions aligned with four goals: 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.

Specific to this LOU, FNHA will collaborate with EMBC, Ministry of Health and BC Health Authorities, and other partners to better coordinate and integrate emergency management with and for First Nations in British Columbia. Over the past two years, FNHA has strengthened its capacity to prepare, respond and recover from emergencies by establishing emergency management policies and procedures, developing an Emergency Operations Centre response mechanism, and creating additional staff positions focused on leading and supporting emergency management within its organization. This capacity did not previously exist within the regional office of the federal First Nations & Inuit Health Branch.

Mutual Commitments and Expectations

This LOU is intended to define and promote a positive and co-operative working relationship between FNHA and EMBC at a service planning and operational level.



This working relationship aims to improve the preparedness, mitigation, response and recovery pillars of emergency management in British Columbia, in relation to First Nations living at home and away from home, through: meaningful engagement with First Nations and respect for their autonomy, decision-making authority and capacity; aligning the actions and mandates of EMBC and FNHA to ensure effective service and operational coordination in a manner consistent with the Seven Directives (see Attachment 1); and, providing for continued partnership with the Ministry of Health and the health system regarding health emergency management.

EMBC and FNHA intend to achieve these goals by adopting the following mutual commitments and expectations:

1. Cultural Safety and Humility

Embed cultural safety and humility in emergency management's four pillars, aligning with the stated reconciliation goal of the provincial government and the signatories' commitment to continuous improvement of the emergency management system to better serve First Nations.

EMBC and FNHA will sign and action a declaration of commitment to cultural safety and humility, sharing information and progress on this commitment each year.

EMBC will initiate conversations with other partners as needed to increase the cultural safety of the provincial emergency management system.

2. Communication, Engagement and Information-sharing

Improve and streamline communications and engagement between EMBC and FNHA and with First Nations, particularly in preparation for and during emergency response.

EMBC and FNHA will work together on a **Concept of Operations** to clarify roles and responsibilities and information flows among First Nations, local authorities and provincial and federal agencies, including FNHA and its perspective, and update as needed.

EMBC and FNHA will share information and coordinate support for First Nations at higher risk for forecasted emergency events (primarily freshet and wildfire) in preparedness, response and recovery.

FNHA will provide advice and information to support EMBC in its work and meetings with First Nations communities, regions, and organizations.

FNHA will support EMBC's engagement with First Nations through the engagement network and capability enabled by the FNHA.



3. Training and Exercises

Collaborate on responding to First Nations' training needs and integrating training materials where possible, including participating in training exercises together to improve collective preparedness.

EMBC and FNHA will share information about training materials used to support First Nations communities in emergency management preparedness and identify areas for collaboration and improvement.

EMBC and FNHA will work on their operational relationship through activations, exercises and planning together.

4. Provincial Legislative/Policy/Operational Improvement Initiatives

Work together to incorporate First Nation perspectives into provincial emergency management legislation, strategies, policies and actions.

EMBC will engage with FNHA on provincial emergency management legislative, policy and operational changes related to First Nations, including responding to recommendations from the Chapman/Abbott report and other initiatives.

FNHA will provide perspectives, analysis, and evidence to support EMBC's development of strategy, legislation, policy, and service planning related to emergency management.

5. Joint Planning, Monitoring and Reporting

Develop joint planning, monitoring and reporting mechanisms to measure progress toward the goals.

EMBC and FNHA will collaboratively develop an annual workplan, which will track progress towards completion of actions, for review by the signatories of this LOU as part of the Collaboration Process outlined below. Through regular engagement with First Nations at emergency management partnership tables and health regional caucus meetings, the parties will monitor progress from First Nations perspectives and additional recommendations for improvements will be canvassed.

Collaboration Process

EMBC and FNHA are committed to working effectively together, through the adoption of the following:

1. The Deputy Minister and Chief Executive Officer will meet regularly and at least once every three months (monthly to begin with) to maintain open and frank dialogue on the progress and issues related to implementation of this LOU, with particular focus on



continuously monitoring and refreshing the annual workplan to be jointly developed. This will also assist in integrating FNHA within the provincial emergency management structure in preparation for any response and recovery mobilization needed due to an emergency situation.

2. During any emergency response, FNHA will be built into EMBC's information-sharing network, and the Deputy Minister of EMBC will be in regular contact with the Chief Executive Officer of FNHA.
3. EMBC will ensure that FNHA is engaged in relevant initiatives early in any process so as to have input into the structure and format of that process, including associated engagement plans with First Nations.
4. FNHA and EMBC will be as responsive as possible to each other's timelines and requests for input and information.
5. EMBC and FNHA will strive to conduct business together according to the principles and approaches described under the *Health Partnership Accord* and the Seven Directives (see Attachment 1).

Lori Halls
Deputy Minister
Emergency Management BC

Date signed: May 22/2019

Joe Gallagher
Chief Executive Officer
First Nations Health Authority

Date signed: May 22/19



Attachment 1

Seven Directives

In May 2011, through the *Consensus Paper 2011: BC First Nations Perspectives on a New Health Governance Arrangement*, First Nations established seven Directives and thereby set the fundamental standards for the new First Nations health governance structure and process:

Directive #1: Community-driven, Nation-based

Directive #2: Increase First Nations Decision-making and Control

Directive #3: Improve Services

Directive #4: Foster Meaningful Collaboration and Partnership

Directive #5: Develop Human and Economic Capacity

Directive #6: Be Without Prejudice to First Nations Interests

Directive #7: Function at a High Operational Standard

