



First Nations Health Authority
Health through wellness

FNHA UPDATE Vancouver Coastal Region Caucus

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Updates on:

1. Community Capital

2. Primary Care

3. Tripartite MOU on Mental Health
& Wellness



1. Community Capital Program

4 Year Capital
Need

\$ 90 M

Annual Funding

\$ 10 M

Issue: How to address the gap

Consideration: One option is monetization



Community Capital Program - Monetization

- Are there specific communities interested in monetization?
- How monetize?
 - Aggregate a number of projects in feasibility or design or construction phases – economies of scale
 - Combine economic infrastructure with social infrastructure , e.g., private sector with community infrastructure
 - Explore different models of building ownership, e.g., partner with another organization
 - Explore different ways of doing O&M, e.g., First Nations O&M company – outsource O&M
 - Financing models could include – FNHA, FNFA, OSR, private sector, other governments



2. First Nations Primary Health Care Landscape

Multiple streams of PHC work occurring

13
Nursing
stations

Joint
Project
Board
Project

End to
End
Integrati
on

Primary
Care
Networks

Advancing
Enabling
Initiatives



Primary Care - Our Work

- Exploring unique models of First Nation Team-Based Primary Care
- Advocacy for First Nations Equity in PCN engagement and planning
- Exploring Care Connect access
- First Nation-Led Primary Care Initiatives
- Completion of 1st PC and Mental Wellness Summit
- Exploring models/opportunities for FNHA to deliver PC



Primary Care - What is the opportunity?

First Nations Primary Care

- Commitment to 17 First Nations-led Primary Health Care ++ projects distributed across regions over the next three years, based on FNHA's holistic team based care approach.
- Will integrate with PCNs when established and will serve a clearly described population base inclusive of both First Nations and open to non-First Nations clients.
- FNHA will have a funding arrangement with the Ministry to establish these projects and to employ/deploy their human resource complement.
- FNHA will be able to choose the location of these projects and will do so with the Health Authorities in shared regional planning.
- Will also look at building FNHA capability to deliver these innovative initiatives.
- FNHA will add to these projects through its own investment strategy to achieve the overall Primary Care ++ concept.
- Will look to find a solution to resourcing First Nations engagement in primary care transformation processes.



FN-Led PC Health Human Resources Model

- **Physician (GP)**
- **Nurse Practitioner (NP)**
- **Registered Nurse**
- **Oral Health**
- **Traditional Healer**
- **Midwife/Doula**
- **Elder**
- **RNC (Wellness Navigator)**

- **Mental Health Counsellor**
- **Social Worker/Soc Navigator**
- **Traditional Diet/Nutritional Advisor**
- **MOAs**
- **Clinical Practice Manager**



4. Tripartite MOU on Mental Health and Wellness

- Total \$30M commitment - \$10M each from Canada, BC & FNHA
- Focused on MHW planning and demonstration sites that support Nation-Based approaches, emphasize collaboration and collective action and contribute to healing and Nation rebuilding
- 67 communities have come together to submit 15 unique Nation based Statements of Readiness
- 2 Statements received from Vancouver Coastal communities to date and both are in progress