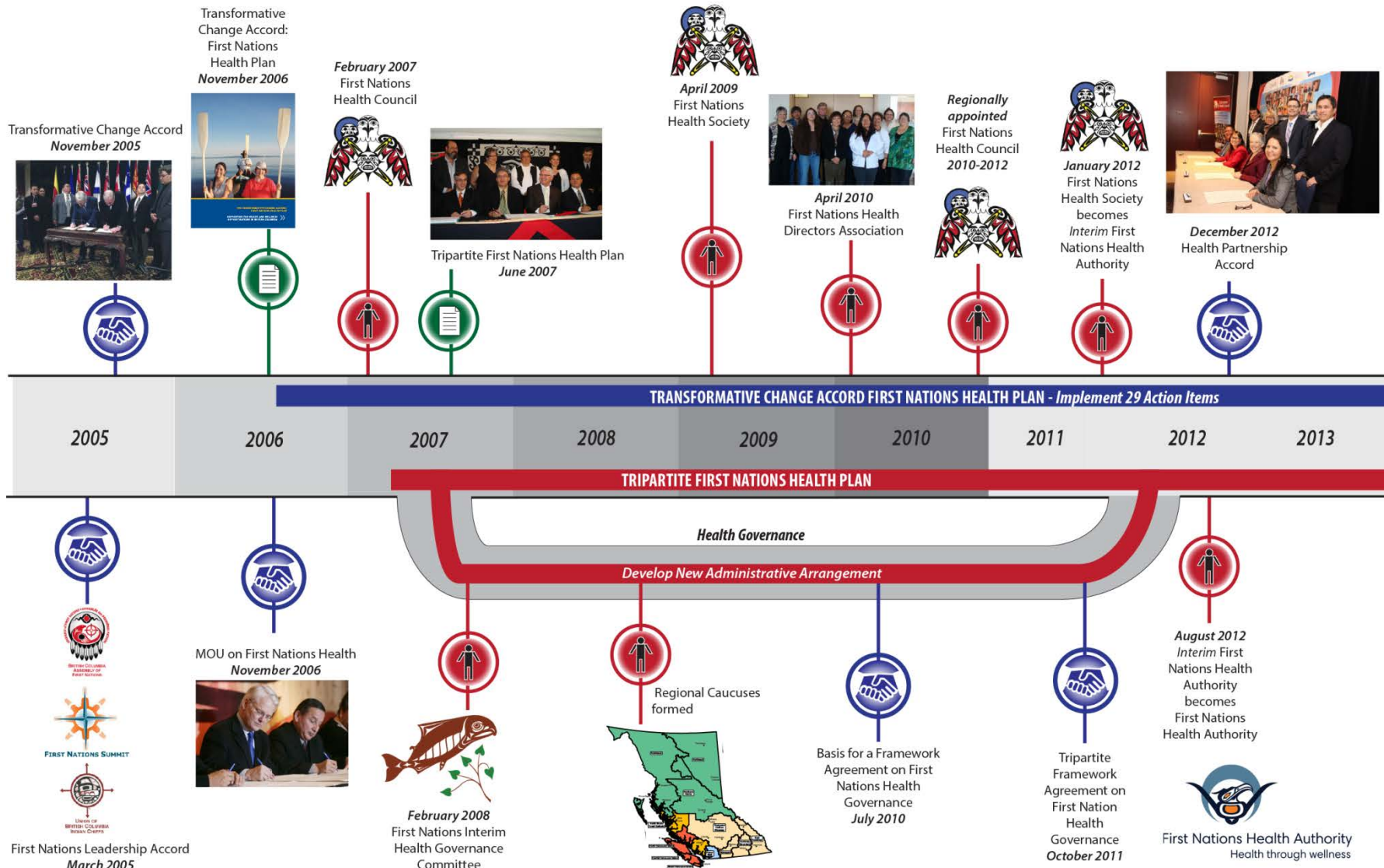




First Nations Health Authority
Health through wellness

First Nations Health Authority Chief Executive Officer Update

Where we have come from



Tripartite Success Factors for Transfer

1. Ensuring no disruption and minimal adjustment required by individual First Nations people and communities to the continuation of their health services or health benefits.
2. Ensuring minimal disruption and minimal added work burden on First Nations program providers who deliver community programs.
3. Respecting the 7 Directives from Gathering Wisdom.
4. Respecting the Vision and Principles of the Framework Agreement and create a solid foundation for its continued implementation.

FNHA Operational Priorities Through Transfer

1. Pay communities
2. Minimal service disruption
3. Pay staff
4. Improve operations and services where practical through transition





Building the FNHA

Our Vision

Healthy, self-determining and vibrant, BC First Nations children, families and communities

Our Values

Respect, Discipline, Relationships, Culture, Excellence & Fairness

www.fnha.ca

Our Directives

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



Building a First Nations Health Organization

- Honor the Seven Directives
- Grounded in traditional values and teachings of BC First Nations – Lead with ceremony
- A learning organization
- Here to work for and partner with BC First Nations people and communities
- Support service delivery on the ground
- Work in areas that provide for the collective benefit of all BC First Nations
- BC First Nations should have the best FNHA possible.



FNHA Operating Principles

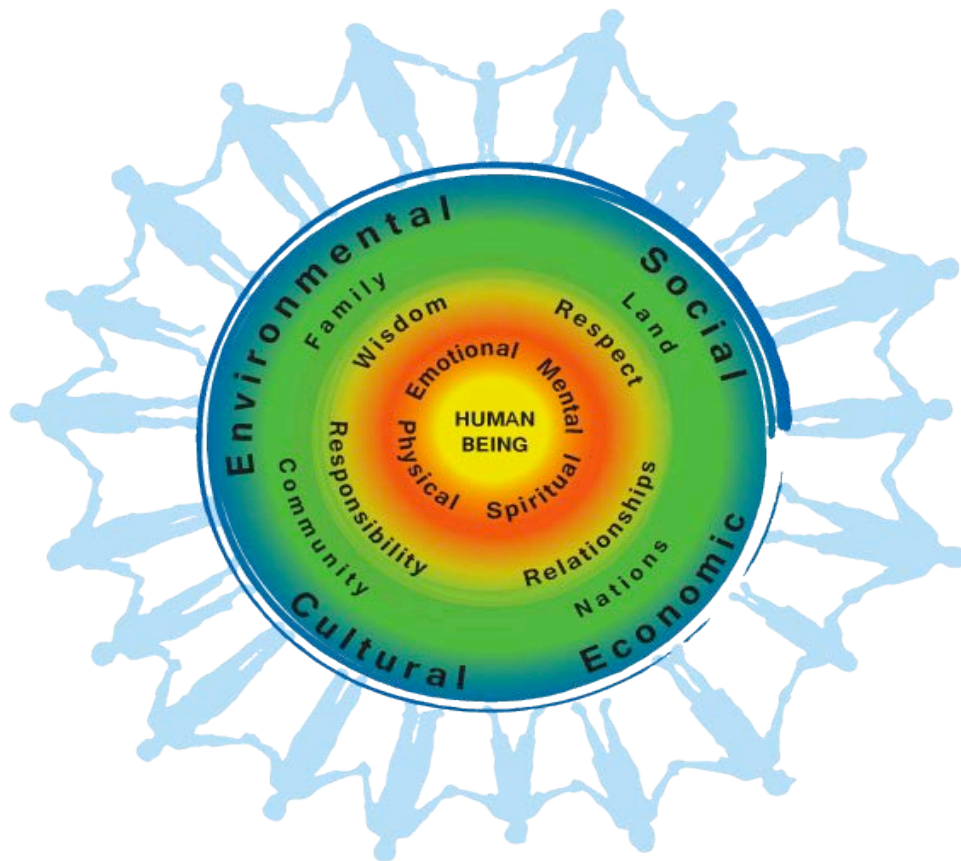
www.fnha.ca

- ❖ **W**ellness philosophy based on First Nations teachings is the perspective through which the FNHA approaches every aspect of its work and carries out its roles as health and wellness champions and partners
- ❖ **E**mphasis on personal best – being the best human being we can be – is how the FNHA approaches its work, partnerships, and those we serve
- ❖ **L**iving it – the FNHA leads by example as a First Nations Health Organization that models wellness
- ❖ **L**isten, learn, and act is the approach through which the FNHA establishes itself as a learning organization – and knowledge transfer will support shared learnings with health partners
- ❖ **N**ever leaving anyone behind, the FNHA works with its partners to ensure health initiatives, programs and services support and are accessible to all First Nations and Aboriginal peoples living in BC
- ❖ **E**xcellence means implementing initiatives, programs and services that brings the best in western medicine together with that of First Nations traditional knowledge and medicine and by examining needs to continuously improve services and approaches and remove barriers
- ❖ **S**ervice delivery and system transformation is driven by First Nations decision-making through engagement to determine desired outcomes, and supported by consensus leadership of the First Nations health governance partners and realized through leveraged collaboration with federal and provincial health systems
- ❖ **S**ustainability, integrity, efficiency and innovation are essential components to the business approach that the FNHA brings to its programs, services and initiatives



First Nations Perspective of Wellness

www.fnha.ca



- The lens the FNHA works through for everything it does
- Developed from the teachings and culture of BC First Nations
- FNHA - Health and Wellness Champion, Partner & Living it
- Commitment to supporting the health and wellness from the youngest to the oldest
- Commitment to our youth (*46% under 25)
- Wellness belongs to each of us and is as unique as we are
- Leading edge of systemic change by aligning with the Innovation and Change Agenda of the Province of BC



EVERYONE IS A WELLNESS CHAMPION

CIRCLES OF INFLUENCE



Lead by Example

Walk the talk

Wellness through Leadership

Do your best to **LIVE IT!**

History of First Nations WELLNESS

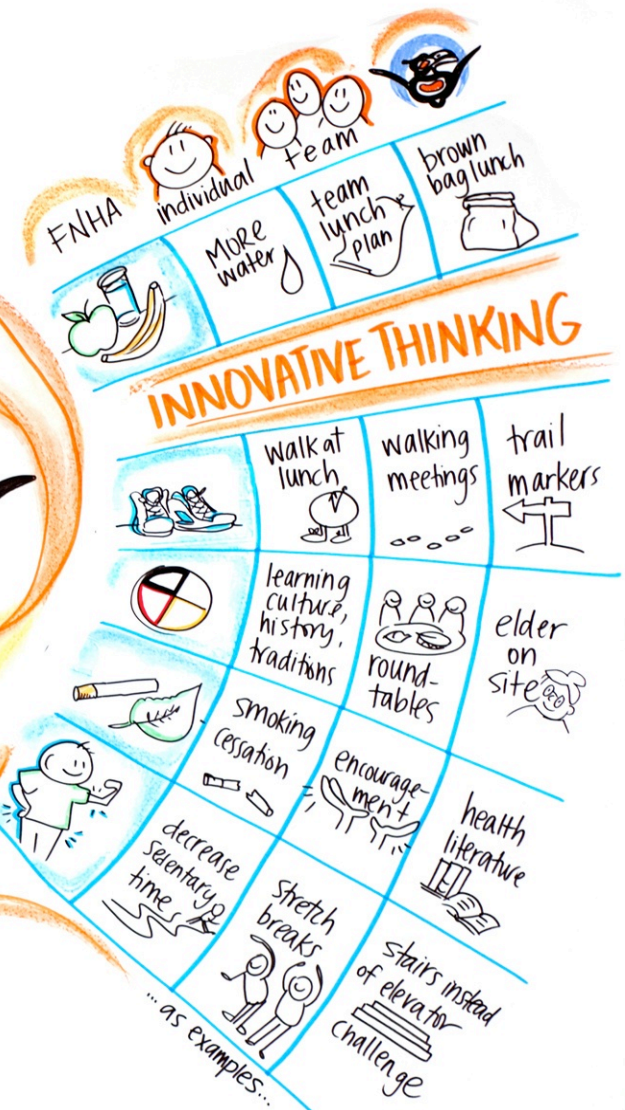
sharing stories
no journey is a straight line

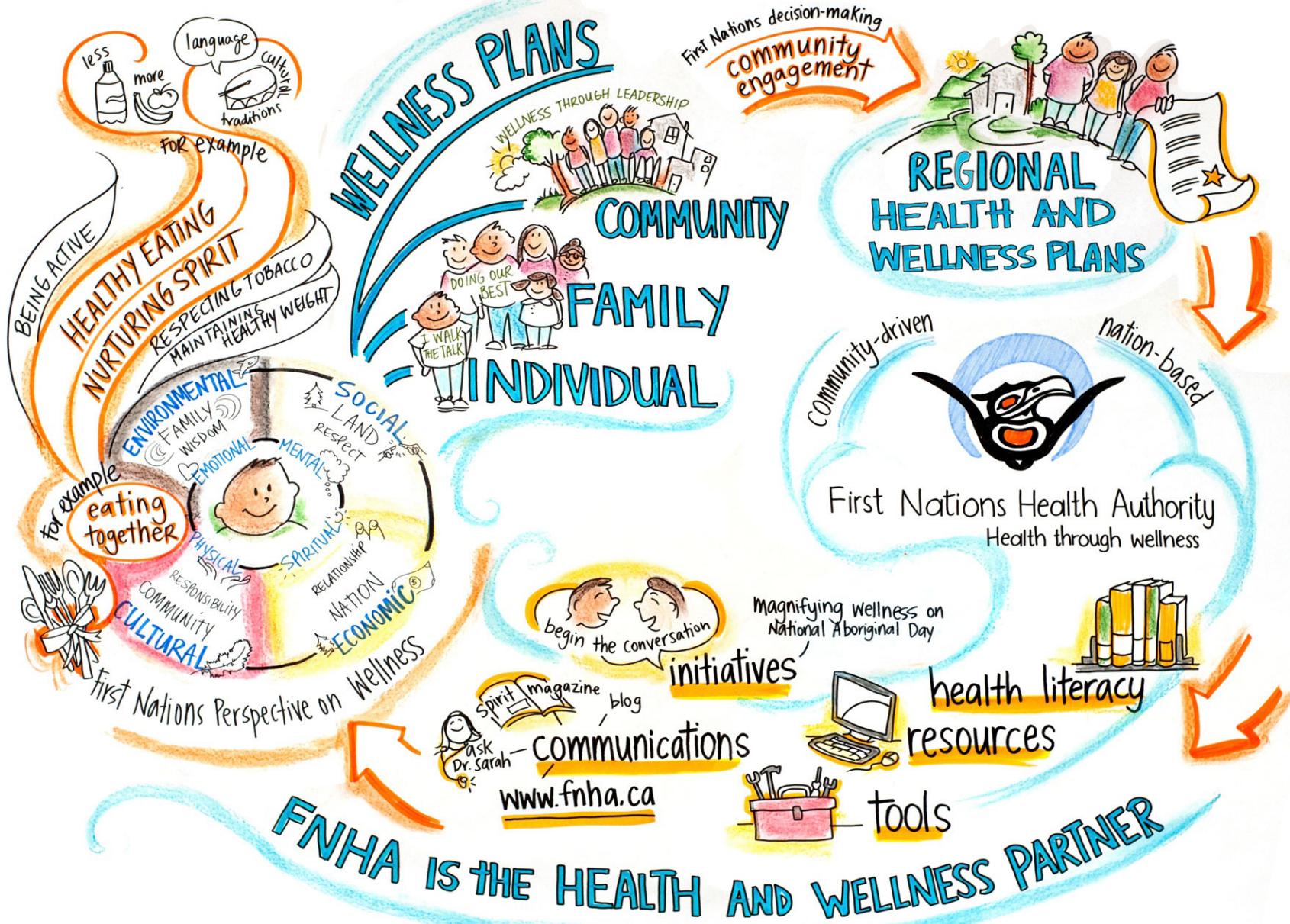
changing **I** to **WE!**
Illness to Wellness



First Nations Health Authority

Health through WELLNESS





Our Brand



First Nations Health Authority

Health through wellness

Thunderbird - a traditional symbol of transformation and healing

Crescent around the thunderbird - represents our environment, families, communities and the context in which our health is determined.

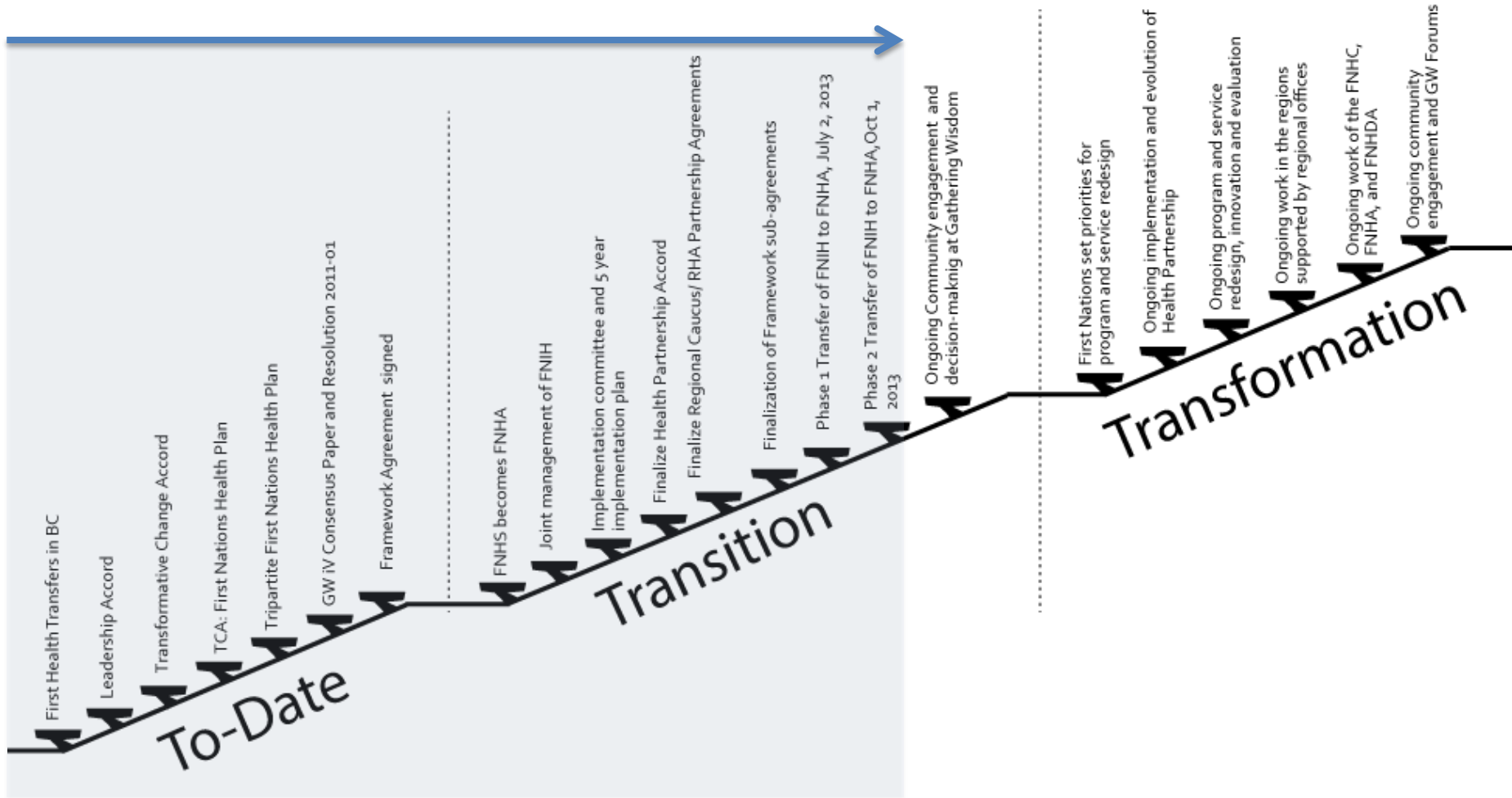
Thunderbird's wings reach beyond this crescent - working within our context, but looking to break new ground in First Nations health.

Thunderbird looking up - to signify a healthy future.

Overall - conveys a hopeful, optimistic spirit.

Artist - Andrew (Enpaauk) Dixel from the NlakaPamux Nation

Transition Planning Stages





Key Transfer Activities

www.fnha.ca

Building Solid Systems & Structure

Building the FNHA
(Organizational Development)

IM/IT systems
Financial systems
HR systems

Assuming Assets

Real Property and Accommodations

Financial and Human Resources

Taking over programs and services

First Nations Health Benefits (NIHB)

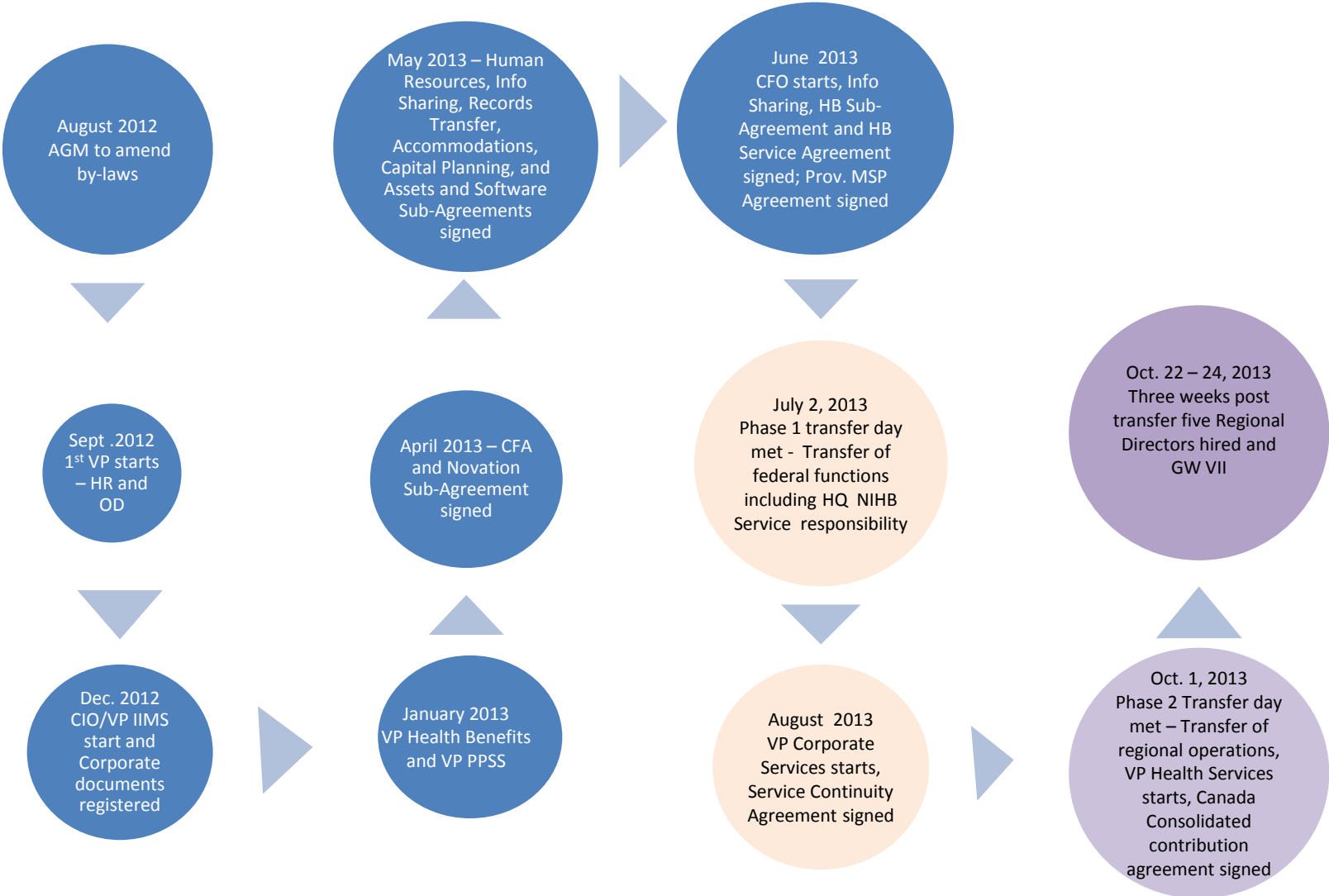
All Current FNIHB Programs and Services

Contribution Agreements

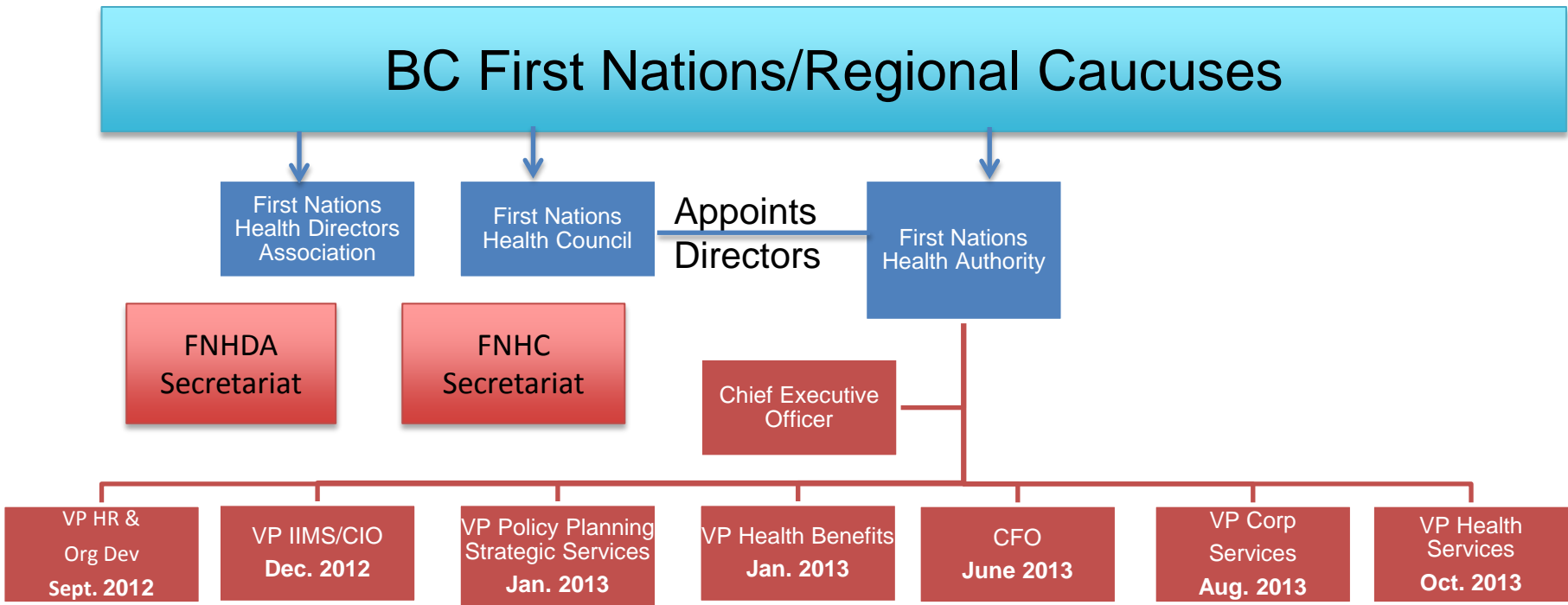
Creating a Shared Organizational Culture



Key operational milestones for the FNHA & intro of VP's



Our Structure





Work of the FNHA before and after October 1, 2013

www.fnha.ca

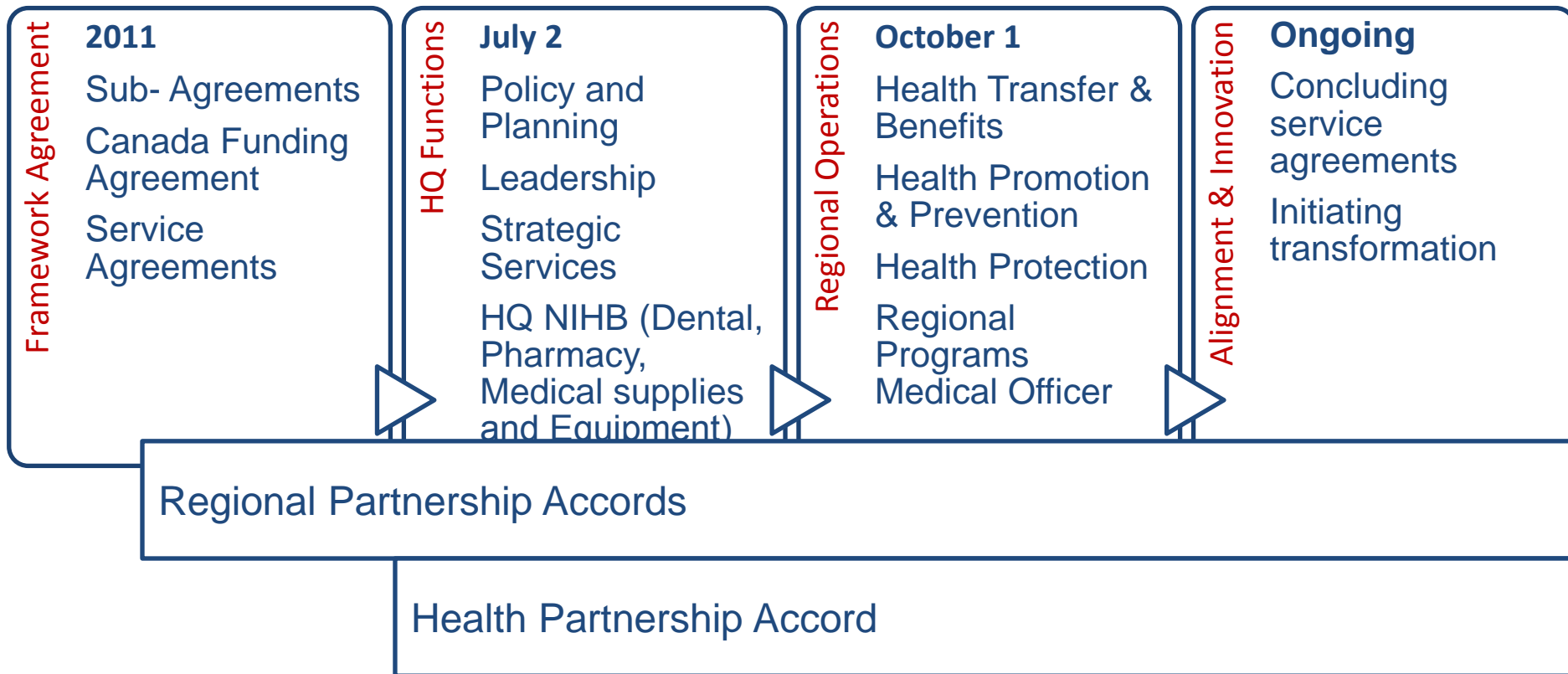
Health Governance Agenda

- Community Engagement
- Support Regional processes and health partnerships with BC and Canada
- TCFNH
- Deputy PHO position and partnership with PHO
- FNHC and FNHDA Secretariat
- Support discussion on Social Determinates
- Negotiate Transfer of FNIHB BC Region operations and relevant HQ functions to the FNHA
- Build FNHA

Health Actions Agenda

- Health actions roadmap to address health actions commitments
- Alignment with provincial health agenda
- Support to First Nations communities
- Development and implementation of Wellness concept
- Develop operational health partnerships with HC, MoH, Health Authorities, and Health Agencies

Additional FNHA Work Post-Transfer





Health Actions

Health Governance

www.fnha.ca



Health Services

Health Benefits



Human Resources

www.fnha.ca



Potential HQ positions



Actual regional positions



Total FNHA staff

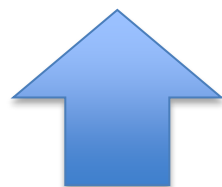
+



Total Regional positions on the books



RJO eligible



=



Total positions potentially part of transfer to run Regional Ops.



RJO accepting

+



Term & Casuals

+



FNHA staff



Human Resources & Organizational Development

- Support transfer of 134 Health Canada staff through federal Alternative Delivery Initiative Work Force Adjustment process
- Lead initiative to support labour relation successorship matters that apply as per the BC Labour Relations Code – 4 unions and 6 collective agreements – collapsed to 2 unions and 2 collective agreements representing former federal employees that accepted the RJO
- Development of new HR System for FNHA:
 - Org Structure in PeopleSoft
 - Other systems include pension, compensation and benefits, interim classification system, performance management, learning and training.
 - HR policy suite – approx. 30 policies

What communities can expect from FNHA HR & Org Development:

- Implementation of further HR modules in PeopleSoft to maximize efficiency and effectiveness
- Support further FNHA organizational re-design in response to transformation
- Incorporate wellness concept into organizational HR policies and processes
- Partnership with First Nations communities to support local human resources needs

Innovation and Information Management Services

- FNHA Corporate Network Connectivity Services for lower mainland offices
- Business and Integration services – PeopleSoft, SharePoint, and core infrastructure enterprise services (email, scheduling, etc.) implementation
- Support/manage Business Continuity and Health Benefits Service Agreements
- Migration of 15 out of 70 federal software systems to support operations
- IIMS policy suite

What communities can expect from FNHA IIMS:

- Further implementation of FNHA systems to complete transition
- Support for First Nations ehealth initiatives – such as telehealth expansion, panorama, etc.
- Leverage Provincial learnings, processes and infrastructure
- Technology based solutions to support communication and collaboration/partnership with First Nations Communities

Finance

- Total renovation of systems, processes and policy to reflect \$20 million-\$380 million dollar budget increase
- PeopleSoft implementation for Accounts payable/receivable, general ledger, reporting, payroll, travel and expense, and procurement
- Other financial systems and budgeting process implementation
- Contract management capacity development to support 80 per annum to 300 per annum
- Finance policy suite
- 4th annual audit – unqualified

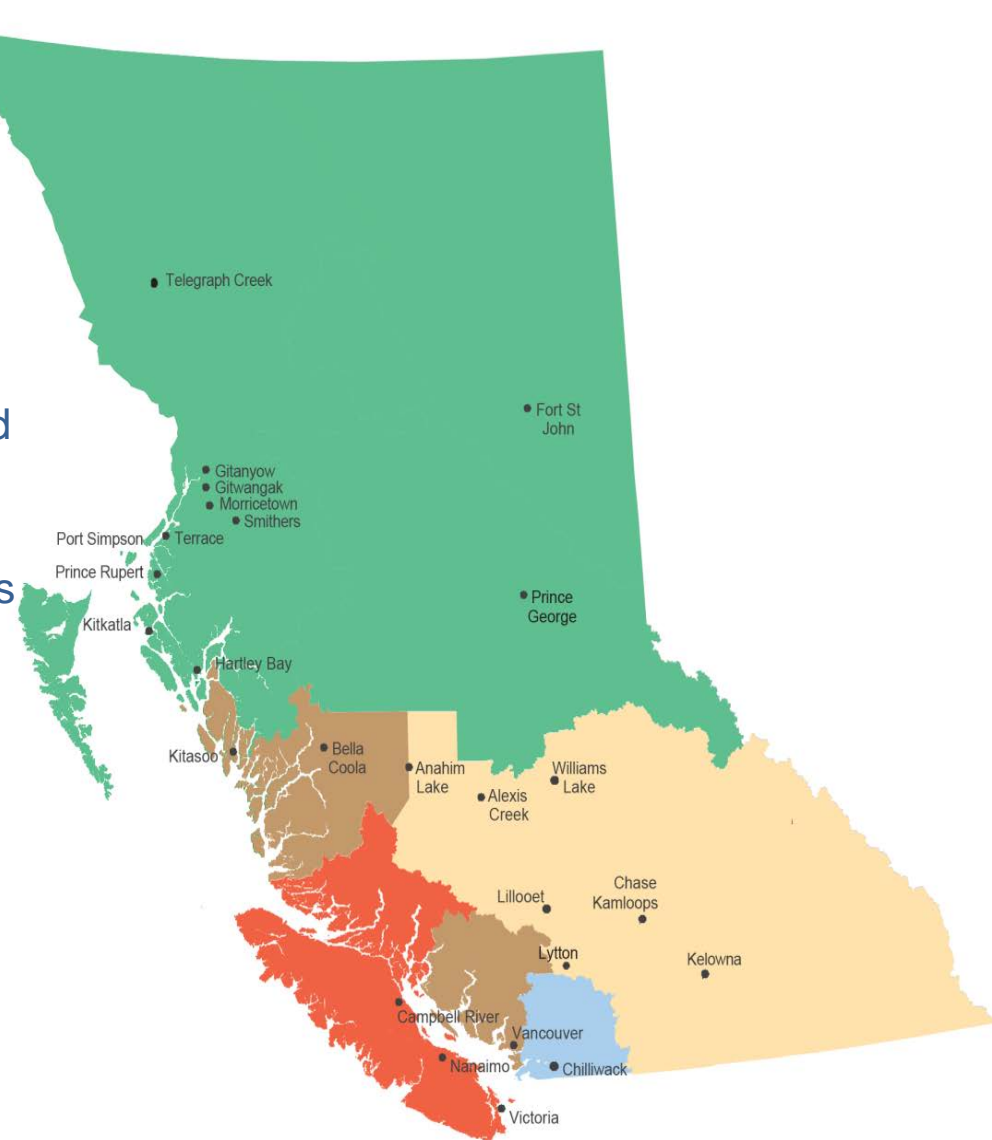
What communities can expect from FNHA Finance:

- Focus on stabilization of FNHA finance systems
- Establish internal audit function
- Move toward Public Sector Reporting for transparency
- Work with Board and SET on future budget allocations to provide maximum benefit to First Nations people with available funds
- Partnership development with First Nations when possible



Corporate Services

- 209/210 novated agreements
- Funding arrangement capacity development
- Transferred 13 leases (4 crown owned & 9 crown leased) plus nursing stations
- Adoption of HC 5 year Capital Plan, as interim Capital Plan for FNHA
- Assumption of Federal Capital Assets
 - Fleet
 - Hardware
 - MS & E
- Master space Plan and future building needs
- Risk Management registrar
- Corporate Services policy suite





Corporate Services cont'd

www.fnha.ca

What communities can expect from FNHA Corp Services:

- FNHA soon starting accreditation process with Accreditation Canada
- Stabilize Funding Arrangement support for FNHA including contribution agreement amendment process implementation
- Analysis of reporting requirements for practical improvements
- Capital planning program implementation
- Address future FNHA accommodation requirements
- Implement travel and fleet management services for FNHA
- Implement Enterprise Risk Management, security, business continuity and insurance program for FNHA
- Partnership development with First Nations when possible

Health Benefits

Develop and implement First Nations Health Benefits systems, processes and performance requirements for FNHA including:

- 168 million dollar program (2012/2013)
- Established MSP Group Admin
- Provider Management, including provider audit & liaison function
- Health Benefits Package, including Policies and Procedures
- Claims Adjudication Processes and Requirements
- Organizational design and IT system and software requirements
- Implement Health Benefits service agreement

Also responsible for seamless transfer of Dental services

Health Benefits (Cont'd)

What communities can expect from FNHA Health Benefits:

- Stabilization of current health benefits processes
- Work towards a more responsive health benefits program and a better customer experience
- Work to implement FNHA claims processing system to enable health benefits transformation
- Collaboration with First Nations clients, the FNHDA and the health benefits improvement committee to identify issues, approaches and strategies

Health Services

Seamless Transfer of all community programs and services to the FNHA including:

- Health Promotion and Prevention
- Health Protection
- Surveillance and Program Evaluation
- Nursing
- Environmental Health
- Organizational design and IT system and software requirements

What communities can expect from FNHA Health Services:

- Stabilization of health services
- Medical officers and program consultants working closer and directly with FN's communities as subject matter supports
- Re-alignment of some administrative/management functions to Corporate Services



Policy, Planning and Strategic Services www.fnha.ca

- Regional engagement and planning support - Regional Directors have been recruited in each region, Support for Regional Tables and relationship with Regional Health Authorities (Partnership Accords)
- Leadership role in Development of FNHA Interim Health Plan with input from regional planning processes
- Health Partnership development leadership and support
- First Nations lead policy and research agenda development
- Communication support for FNHA
- Leadership role in transformation agenda for FNHA health services
- Leadership role in TFNHP health action commitments implementation including human resource capacity development and improved primary care services



Our Future Health Professionals

Directive # 5 – Increase Human and Economic Capacity

- *Develop current and future health professionals at all levels through a variety of education and training methods and opportunities*
- Partnered with the New Relationship Trust Foundation to provide First Nations students interested in Health Careers
 - \$110,000 for 25 scholarships
 - \$50,000 for 15 bursaries



MELYSSA ROGERS
PENELAKUT NATION
Vancouver Island University
Bachelor of Science in Nursing

My name is Melyssa, and I am an adult student in the BSN program at VIU. My goals are to work within the community in and around Nanaimo. I would like to help bridge the gap between communities. I would like to work in paediatrics or in the E.R.

MASTERS



LEONA MCBRIDE
EHATTESAHT FIRST NATION
University of Northern British Columbia
Family Nurse Practitioner

I was raised on Vancouver Island by my grandparents. My grandfather was from Ehattesaht First Nation and my grandmother was from Ahousaht First Nation. My grandfather instilled in me the need to keep moving forward with education. Were it not for his persistence and support I would not be the woman that I am today. He taught me how to take care of myself and my family. I have a 19 year old daughter who now looks to me for guidance and support. I am completing my final year of my master's in the Family Nurse Practitioner program. This will allow me to work autonomously in primary care. My plan when I have completed the program is to work with First Nations women who may not have access to primary care or have a primary care provider.

Being granted this scholarship allows me to dedicate all my time and energy to excel in this program. I am very grateful for NRTs support and faith in me.



MELANIE RIVERS
SQUAMISH FIRST NATION
University of British Columbia
Public Health

My name is Melanie (7mlamelwet) and I am Coast Salish from the Squamish Nation. I have a Bachelor of Arts in anthropology and psychology from the University of Victoria, a Provincial Instructors diploma from Vancouver Community College and am currently working on a master's in Public Health at the University of British Columbia. I am the leader of the Chee Marnuk Aboriginal program at the BC Centre for Disease Control. For the

last fourteen years, I have worked with Chee Marnuk to provide HIV/AIDS education in a culturally appropriate way. I like to bring dedication, creativity and balance to my work, grounding the program in science, tradition and community.

DOCTORATE



ALEXIS BRAUN
NUXALK NATION
University of Cambridge
Cancer and Developmental Biology

I am researching developmental and cancer biology, more specifically the events that occur at the cellular level leading up to cancer. After I finish my PhD, I hope to continue on as a scientific researcher in academia. I thoroughly enjoy being a scientist and I hope one day to pass on the passion that I have for education to the next generation when I return to Canada.



NATHAN TEEGEE
TAKLA LAKE FIRST NATION
University of British Columbia
Medicine

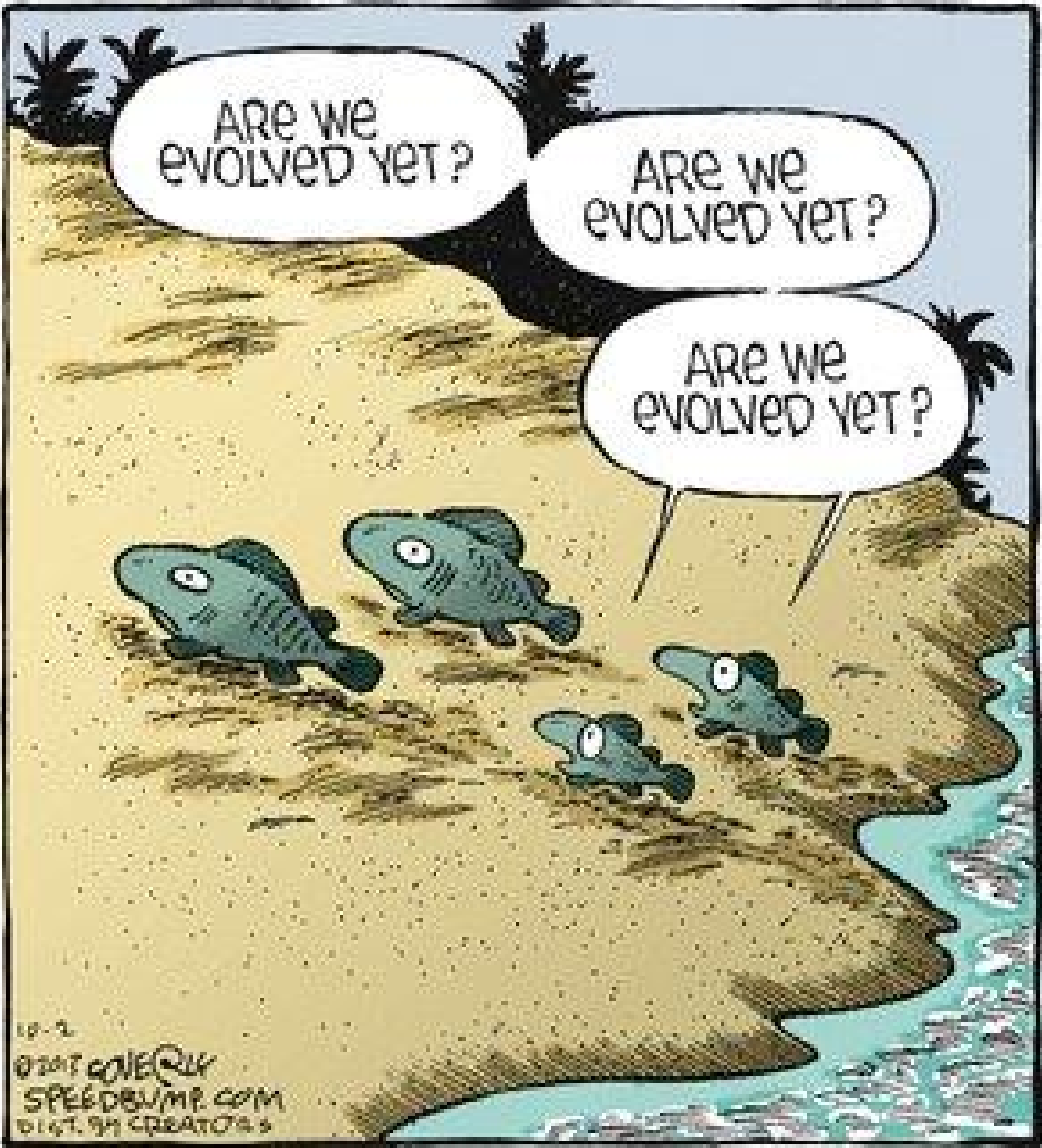
Nathan William Teegee is a Takla Lake First Nation member, and was raised by his grandparents Sarah and Willie Teegee in Fort St. James, B.C. He did his Honours Bachelor of Science degree at the University of Toronto and graduated in 2009. After graduating, he returned to B.C. to work for Carrier Sekani Family Services. Nathan has been working towards a career in medicine for almost all of his life, and is finally glad to be that much closer to his dream job - working in First Nations health care and improving the health of his people.



SAYLESH WESLEY
SKOWKALE FIRST NATION
Simon Fraser University | Gender, Sexuality, and Women's Studies

My name is Saylesh Wesley and I am passionate about restoring the Coast Salish two-Spirited roles as they relate to and fulfill meaningful political/community/ceremonial positions. I am working towards serving in a faculty-type capacity, and in an Indigenous studies sort of local university department. Traditional Indigenous knowledge systems continue to be focal points for where I am going and how I am going to get there. Also, as a classroom teacher, Aboriginal education contributes to how I view the world.







Transition Continues

- Infrastructure
- Technology
- Staffing
- Service Re-alignment
- Implementing a First Nations Health Organizational Culture
- Communications



FNHA New MAIN Telephone Number for Park Royal Offices

www.fnha.ca

- Current main line at Park Royal is: **604 913-2080**
- Will be replaced by: **604 693-6500** (VoIP DID).
- When: November 13, 2013
- Call intercept service in place for a period 3 to 6 months. This service will ensure all calls to the old (913-2080) number are routed to the new 693-6500 number. This is to ensure no disruptions occur.
- Please communicate this information to your stakeholders as you deem appropriate.
- Please note the main rationale for this change is the FNHA must port over to the new number due to our expanded organization. As well, the old number could not be ported over due to how it's currently configured with old system. Simply put, we've outgrown our system in more ways than one!