



First Nations Health Authority
Health through wellness



First Nations
Health Council

February 24, 2023

The Honourable Patty Hajdu, P.C., M.P.
Minister, Indigenous Services Canada
Ottawa, Ontario,
Canada
K1A 0A6
Email: patty.hajdu@parl.gc.ca

Dear Minister Hajdu,

RE: Renewal of Canada Funding Agreement between First Nations Health Authority and Canada

We are writing to address the statements raised by the First Nations Leadership Council in their letter dated February 3, 2023.

The letter requested you to pause the Canada Funding Agreement negotiations with the First Nations Health Authority, while also suggesting that the First Nations Health Governance structure is not meeting its obligations to First Nations people in BC. The FNHC and the FNHA do not agree with these assertions and our actions and strategic direction remain guided by the 7 Directives, developed and affirmed by First Nations Leaders and Chiefs across the province.

The current Canada Funding Arrangement (CFA) expires on March 31, 2023 which provides for direct funding to communities on an annual basis. Discontinuing CFA funding at this point carries considerable risk, not only for the initiatives that are being advanced at a community level through direct service delivery by the FNHA but also for the direct community contribution funding that communities receive as part of the CFA.

The FNHA is legally bound to fulfil obligations under the Tripartite Framework Agreement (TFA). This includes commitments related to financial planning and management under the TFA. First Nations in BC have let us know that their funding priorities include long-term sustainable funding; flexible funding to pivot to community needs/priorities; increased funding for urban and away-from-home; and streamlined reporting. These priorities remain at the forefront of our negotiations and plans. To avoid service disruption, risks and to meet the legal requirements, we must continue to finalize negotiations in the upcoming weeks.

The FNHA has made considerable progress in many areas since transfer; particularly, in the areas of health benefits, primary health care, mental health and wellness. Over the last ten years, approximately 91% of the FNHA's total budget has been allocated to direct services and funding to communities. Of the 91%, a majority of this funding represents direct community contribution agreement funding, which covers a range of services delivered in and by communities, such as nursing stations (see Table below). It also represents funding for services that the FNHA delivers to First Nations people, such as:

- First Nations Health Benefits program, which includes dental, pharmacy and medical transportation; and,
- Innovation services such as the newly established primary health care and counselling services,

which are available to First Nations in BC whether living on or off reserve.

Funding priorities for the FNHA going forward include securing funding for all communities to access maternal and child health programming, establishing First Nations Primary Health Care Centres throughout BC, supporting First Nations people to heal from the root causes of trauma, addressing the capital needs of communities, exploring options for expanded long-term care delivery in BC, and strengthening community contribution funding.

Multiple evaluations have been conducted of the FNHA, the First Nations Health Governance Structure, our services and our partnerships including: the [2019 Evaluation of the BC Tripartite Framework Agreement on First Nations Health Governance](#); the [2020 Evaluation of the First Nations Health Authority](#); the 2019 Evaluation of the Relationship Agreement with the First Nations Health Council and the First Nations Health Director's Association; the [2019 FNHA Board Evaluation](#); the [2022 Evaluation of the Implementation of the Mental Health and Wellness MOU](#); the [2019 Evaluation of FNHA's Health Benefits-Pharmacy Program for BC First Nations](#); the [2019 Evaluations of the Regional Partnership Accords](#). A number of case studies and reviews have also been carried out and are included in the [2020 FNHA Evaluation Case Study Technical Report](#).

To support its direct accountability to First Nations in BC, an additional, external and independent non-mandatory evaluation of the FNHC is currently underway to assess the progress that it has made against the work mandated by BC First Nations leadership, and what impacts have resulted. An open, transparent and Public Request for Proposals was issued through BC Bid, and the contract for the evaluation was awarded to Ference & Company – an independent, accredited, and leading evaluation and research consulting firm. Ference & Company will be providing an update and preliminary report on the evaluation at Gathering Wisdom XII on March 2, 2023. The FNHC would also like to clarify that the evaluation will be conducted at arms-length; meaning that neither the FNHC nor the FNHA are interfering with Ference & Company's autonomy to independently conduct the evaluation, nor will they edit the findings before distribution.

Both the FNHC and FNHA put reciprocal accountability into practice through the health governance structure's Engagement and Approvals Pathway, and reporting through regional caucuses and Gathering Wisdom. FNHC and FNHA representatives are also willing to meet directly with First Nations Chiefs, leaders and health leads when invited.

Recently, the FNHC and the FNLC met in Vancouver on February 13, 2023 to honor the commitments of their 2015 Social Determinants of Health Protocol Agreement and resolve our disputes in a good way. While we didn't come to a resolution in all areas of discussion, we did agree to meet again to foster ongoing communication and information sharing moving forward. Following that discussion, the FNHC Chair, Deputy Chair and FNHA Chief Executive Officer attended the recent First Nations Summit and Union of BC Indian Chiefs meetings to speak directly to Chiefs in attendance and provide updates on the FNHC evaluation process. Arrangements will be made to provide similar updates at the upcoming BC Assembly of First Nations meeting.

The health system in BC and its decision-making structures were built based on western approaches to medicine and colonial governance systems. The creation of the made-in BC First Nations Health Governance Structure was a key step toward reclaiming health and wellness and take control over Health Canada's programs and services.

We look forward to confirming our funding agreement and to continuing to work with you and First Nations to advance health transformation in BC.

In Health and Wellness,



Colleen Erickson,
Chair, FNHA Board of Directors



Richard Jock
CEO, FNHA



Wade Grant
Chair, FNHC



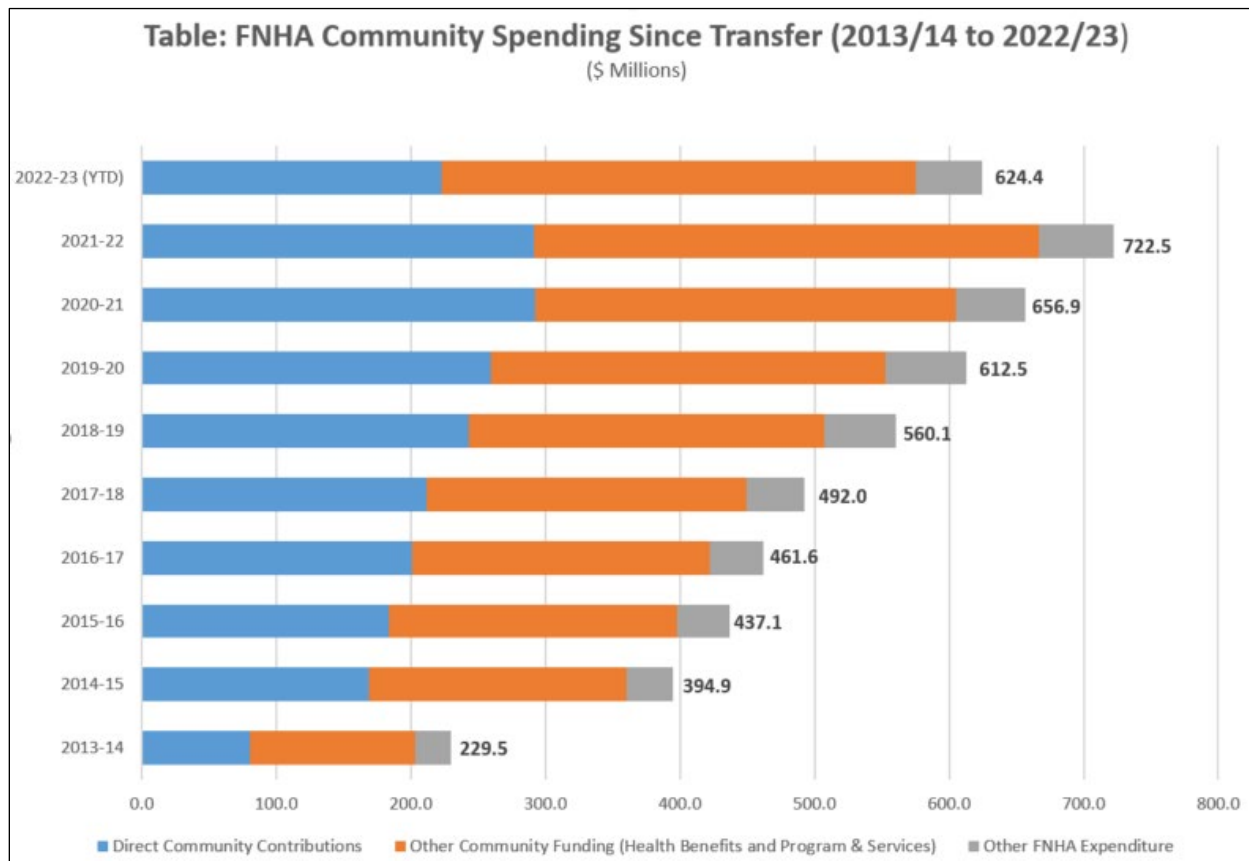
Wenecwtsin (Wayne Christian)
Deputy Chair, FNHC

CC: BC First Nations
First Nations Health Council
The Honourable Jean-Yves Duclos, P.C., M.P., Minister of Health
The Honourable Carolyn Bennett, P.C., M.P., Minister of Mental Health and Addictions
The Honourable Adrian Dix, M.L.A., Minister of Health

Enclosure (2)

Table: FNHA Community Spending Since Transfer (2013/14 to 2022/23)

Funding envelope	Direct Community Contributions	Total other community funding (Health Benefits and Programs and Services)	Total Community Expenditures (community contributions + other)	Total FNHA Expenditures
Amount	2,155,184,392	2,584,468,668	4,739,653,060	5,191,647,057
% of total FNHA expenditures	42%	50%	91%	



FNHA Accountability Update

Reporting and Audits

- Ongoing frequent reporting to BC First Nations on FNHA activities at 23 sub-regional Caucus (9 in Fraser-Salish, 5 in Interior, 3 in North, 3 in Vancouver Coastal, and 3 in Vancouver Island), 5 Regional Caucus, provincial and 8 other sessions.
- As per the Tripartite Framework Agreement on First Nations Health Governance, the FNHA produces an annual report presented to the Members. BC First Nations are provided a copy and the report is available on the FNHA website.
- The FNHA carries out an independent financial audit each year and an independent auditors report is provided to the Board of Directors, presented to the Members and available on the FNHA website.
- With partners, the FNHA publishes annual Tripartite Health Plan Reports.
- The FNHA conducts internal audits on specific areas of interest, reported directly to the Board of Directors.

Planning

- The FNHA Multi-Year Health Plan is refreshed annually, presented to Members and available on the FNHA website as the Summary Service Plan. The plan highlights FNHA goals and strategies built from engagement feedback from BC First Nations. Regional Health and Wellness Plans and Community Health and Wellness Plans are reviewed on an ongoing basis, including the priorities set out in these plans to inform planning.

Evaluations and Risk Assessments

- The FNHA conducts comprehensive evaluations. The 2020 FNHA Evaluation is publically available; last year BC First Nations were engaged on the development of the response plan. The FNHA Board of Director evaluation and other evaluations are also on the FNHA website.
- The FNHA conducts internal audits and has an enterprise risk registry, reviewed quarterly by the Board of Directors.

Engagement and Satisfaction

- The FNHA continues to support ongoing engagement with BC First Nations, such as through regional caucuses, sub-regional tables, and Gathering Wisdom. The "Engagement and Approval Pathway" is the process by which the FNHC and FNHA gathers input and guidance and builds consensus on key decisions. This Pathway was designed and adopted by and for BC First Nations at Gathering Wisdom IV (2011).
- Over the past 2+ years, the FNHA prioritized increased engagement and direct communication with BC First Nations. Since 2020, FNHA held 315 engagement activities through Town Halls, provincial sessions, 150 surveys, regional partnership tables, and other approaches. Topics included COVID 19, the toxic drug supply, the refresh of the FNHA Multi-Year Health Plan and the FNHA and Tripartite evaluation. Engagements on FNHA program and service transformation continues. As an example, medical transportation engagement began in 2020 and FNHA provides ongoing and transparent updates on its website and through the monthly Journeys bulletin.
- There is high overall Regional Caucus satisfaction in recent years, averaging 88% from 2019/2020 2021/2022.
- Health Benefits client satisfaction survey results shifted from 48.4% in 2021/2022 to 41.1% in 22/23.

Complaints Process

- FNHA established a process for receiving, reviewing and responding to complaints and feedback for any BC public health care services, including services delivered and/or funded by the FNHA.

Policy

- FNHA policies are guided by, and consistent with, our Vision, Mission and Values, and 7 Directives. Corporate policy is intended to provide guidance to team members and support decision-making. FNHA policies are consistent with the BC Societies Act and subject to the Personal Information Protection Act.

Decision-Making Closer to Home

- FNHA established Vice President, Regional Operations positions and regional teams, who work closely with local First Nations as a partner in health and wellness and work continues on further regionalization.