



Annual Report  
2012/13

# First Nations Health Directors Association

Sharing experience for community wellness



## Contact Us

1205 – 100 Park Royal South  
West Vancouver, BC  
Canada V7T 1A2

T 604.913.2080

F 604.913.2081

[www.fnhda.ca](http://www.fnhda.ca)





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*"We have recognized that our issues are collective therefore we know that we all share in the development of solutions. By providing technical advice to our leaders for consideration we can support the tripartite systems transformation that is underway."*

Jacki McPherson

## Message from the President

Dear respected Health Directors, Managers, and Leads,

First, let me extend my heartfelt congratulations to each of you on this historic achievement for First Nations health in British Columbia.

I have watched our Association grow, become stronger, develop its governance structure and become even more focused. It makes me proud to see our collective efforts, hard work and shared energy build a strongly woven basket, which only continues to bear more fruit. As a Health Director, reflecting on our past and where we were, not very long ago, and seeing this change today is exciting.

The First Nations Health Directors Association (FNHDA) is part of a unique health governance structure that includes political representation and advocacy through the First Nations Health Council (FNHC); design, planning, management, and funding the delivery of First Nations health programs and services in BC through the First Nations Health Authority (FNHA); and, technical support and capacity development provided through us, at the FNHDA. Collectively, this First Nations health governing structure works in partnership with BC First Nations to achieve our shared vision.

The FNHDA have assisted and supported our partners, the FNHA and FNHC, in the transition process referred to as "transfer" as we now assume greater authority and self-determination of our healthcare system(s) for our people and communities.

The relationship between the FNHDA, FNHA and the FNHC outlines the sound partnership sought by the Parties – a partnership based on shared values and understanding of our collective and respective roles, responsibilities, and accountabilities, as reflected in the Relationship Agreement. We are at an exciting juncture in our journey and we whole-heartedly embrace each step along the path, and look forward to continuing our work together with our partners.

It's motivating to see a shift in focus to service delivery and now more than ever our partners are reaching out to Health Directors, seeking their technical advice and using their feedback to bring about improvements, and relying upon the Health Directors to develop solutions and strategies that are efficient, practical and innovative.

We have recognized that our issues are collective therefore we know that we all share in the development of solutions. By providing technical advice to our leaders



for consideration we can support the tripartite systems transformation that is underway.

Structurally, a lot of work has been done this year by the Association and the First Nations Health Authority. The regionalization process, is one example of how Health Directors have been collaborating together to develop each of their unique and region-specific Terms of Reference which confirm the mechanics of working together, how outcomes are to be achieved, with a communication connection from community, to the region to the provincial FNHDA Board.

As in past years, our hard-working Regional FNHDA Board of Directors has assisted the Association in focussing efforts and strengthening our organization on behalf of our members. I am incredibly grateful for their professionalism and commitment, and for the gift of being able to work alongside them as we establish our own path forward. We are also excited and lucky to have a few new Board members, each with their own strengths, gifts, talents and community-based expertise which they bring to the table, working towards improving the health of BC First Nations.

I'm inspired by the work that is performed at our community Health centres on a daily basis and I'm impressed by the dedicated, committed and passionate Health Directors I have met during my travels. We believe our new tag-line *"Sharing experience for community wellness"*, epitomizes this passion and our role as community-based Health Directors who gather regionally to share our experience and strategize for solutions together, and then to share further at a provincial level for the benefit of all regions.

It is with humble appreciation that I am able to serve you, our members, as President of our Association during this historic moment of change for First Nations people in BC. I wish all of you a year of success and happiness and thank you for your continued support of our Association.

Sincerely,

**Jacki McPherson**

President

First Nations Health Directors Association



## Financial Report

During the 2012/13 fiscal year, the First Nations Health Directors Association was funded to support the activities described in this report by the First Nations Health Authority (FNHA). As per the Memorandum of Understanding between the two entities, the FNHA provides financial and corporate support on an annual basis from the funding they receive from Health Canada.

The First Nations Health Directors Association (FNHDA) Board of Directors elected Keith Marshall as the Secretary/Treasurer for this fiscal year.

The FNHDA Board of Directors wishes to thank Mr. Marshall for his commitment to this position and for overseeing the finances of the Association on behalf of our members.

### FISCAL 2012/13 FINANCIAL RESULTS

#### 1.1. New accounting standards adopted

New accounting standards were issued by the Accounting Standards Board of the Canadian Institute of Chartered Accountants (CICA). The FNHA has adopted the Canadian accounting standards for not-for-profit organizations (Part III). First time adoption of standards requires organizations to present opening statements as of date of transition. As such, the FNHA audited statements includes transaction information for April 1, 2011, the date of adoption. The change to this new standard is explained in detail in Note 3 on the audited financial statements.

#### 1.2. First Nations Health Authority Audited Financial Statements

The First Nations Health Directors Association financial results are included in the First Nations Health Authority audited financial statements. This annual report provides a summary overview of the FNDHA Fiscal 2012/13 operations that are included in the FNHA audited financial statements.

The FNHA auditors, Deloitte LLP has issued an unqualified or clean audit opinion that *"the financial statements present fairly, in all material respects, the financial position of First Nations Health Authority."* The financial statements were approved by the Members of the FNHA at their 2013 annual general meeting.

The total FNDHA expenditures reported on the Statement of Operations (in the FNHA audited financial statements) was \$746,796 for Fiscal 2013. Schedule 1 of the audited financial statements provides a further breakdown of the statement of operations into unrestricted and restricted categories. Restricted categories is where funding has been received for a specific purpose and any unspent monies must be returned as per the contribution agreement. For FNDHA the \$746,796 total expenditures was broken down into \$527,629 unrestricted and \$219,167 restricted.

Schedule 3 of the audited financial statements provides more information on the restricted funds. The FNHDA had two restricted fund grants – AHHRI funding and Novation funding. The AHHRI funding is shown in the second column in the table below. The Novation funding was included as a component in the Health Canada flexible agreement and the FNHDA component is embedded in the first column.

**TABLE 1: FNDHA STATEMENT OF OPERATIONS**

**FIRST NATIONS HEALTH DIRECTORS ASSOCIATION**

Statement of Operations  
For the year ended March 31, 2013

	Operation	Health Canada AHHRI Funding	Health Canada Novation	2013 Total
<b>Revenue</b>				
Health Canada - AHHRI		125,000		125,000
Health Canada - Novation			94,167	94,167
<b>Total Revenue</b>	-	<b>125,000</b>	<b>94,167</b>	<b>219,167</b>
<b>Expenses</b>				
Community projects, meetings and travel	53,050	63,017	44,584	160,650
Salaries and benefits	228,627			228,627
General administrative	45,765	4,024	611	50,400
Professional fees	10,501	29,661	21,425	61,587
Travel and meetings	113,579	28,299	27,547	169,425
Honoraria	76,108			76,108
<b>Total Non-Labour expenses</b>	<b>527,629</b>	<b>125,000</b>	<b>94,167</b>	<b>746,796</b>
<b>Net Expenditures</b>	<b>527,629</b>	-	-	<b>527,629</b>

Table 1 provides the extraction of FNDHA financial information from the FNHA audited financial statements. The Operation column is the unrestricted component of FNHDA operations \$527,629. The next two columns provide the restricted fund information. Due to vacancies in the FNDHA board positions, expenditures for travel and meetings and honoraria were less than expected. The AHHRI contribution agreement was for \$125,000 and was fully spent in during the fiscal year. The Health Canada Novation funding amount was for \$164,614, \$94,167 was spent in the fiscal year and the remaining balance of \$70,447 was deferred to be spent in Fiscal 2013/14.

**TABLE 2: FNDHA STATEMENT OF FINANCIAL POSITION**

**First Nations Health Directors Association**

Statement of Financial Position  
as at March 31, 2013, March 31, 2012 and April 1, 2011

	2013	2012	April 1, 2011
	\$	\$	\$
<b>Assets</b>			
<b>Current Assets</b>			
Cash	100	-	-
	<b>100</b>	-	-
<b>Liabilities</b>			
<b>Current liabilities</b>			
Accounts payable and accrued liabilities	100	-	-
	<b>100</b>	-	-
<b>Net Assets</b>			
Invested in property and equipment	-	-	-
Unrestricted	-	-	-
	<b>100</b>	-	-

Table 2 shows the balance sheet for FNDHA. During Fiscal 2012/13, the First Nations Health Directors Association opened an account with the Royal Bank of Canada to meet the legal requirements under the BC Society Act and the Association received a certificate of good standing from the BC Registrar. The offset is a payable in an equal amount to the First Nations Health Authority.

The FNHDA Board of Directors wishes to thank Mr. Marshall for his commitment to this position and for overseeing the finances of the Association on behalf of our members.



## Board of Directors Report

Passion, hope, and determination of BC First Nation Health Directors working to enhance community wellness is the foundation upon which our Association was incorporated as a BC society in 2010. And it continues to fuel our work today in hundreds of First Nations communities across British Columbia.

Our Association relies on our Board of Directors, nominated and elected by our Members. Our Board is made up of technical health leaders drawn from each BC health region, to help advance our goal of supporting Health Directors' professional development and providing technical advice to our partners, as well as our shared vision of supporting *Healthy, Self-Determining and Vibrant BC First Nations Children, Families, and Communities*.

This year, our Full Members decided to strengthen our Board, voting at the 2012 AGM to amend the Association's Constitution & Bylaws by Special Resolution to add an extra Board position for the Fraser and Vancouver Coastal Regions. Now our 15 Board Members is comprised equally of three Directors from each of five BC health region. The Association and Members benefit by having a larger and equal regionally represented

Board offering deeper, wide-ranging expertise, experience, and success in the health field.

Our Members elected new Board representatives including Chawathil First Nation Health Director Peter John, Qwemstin Health Society Health Director Colleen LeBourdais, Tla'azt'en Nation Health Manager Verne Tom, West Moberly First Nation Health Manager Patricia Hoard, Lil'wat Nation Health Director Rachel Andrew-Nelson, and Tsawout First Nation Health Director Edith Loring-Kuhanga\*. We also bid a fond farewell to outgoing Board members: former FNHDA Secretary and T'it'q'et Administration Health Manager/CHR Franny Alec, and former FNHDA Treasurer and Carrier Sekani Child & Family Services Health Director Mabel Louie. The Association is very fortunate to have exceptional community health leaders on our team. We are extremely grateful for their hard work and efforts that have helped bring our organization to where it is today.



Northern FNHDA Representatives:  
Patricia Hoard, Verne Tom, Lauren Brown



Vancouver Coastal FNHDA Representatives:  
Kim Brooks, Keith Marshall, and Rachel Andrew-Nelson

The Association is very fortunate to have exceptional community health leaders on our team. We are extremely grateful for their hard work and efforts that have helped bring our organization to where it is today.



Fraser Regional Representatives: Peter John, Virginia Peters, Jeanine Lynxleg



The Board appointed new Executives this past year including former FNHDA Vice-President and Osoyoos Indian Band Health Coordinator Jacki McPherson to the position of President, former Secretary and Stó:lō Nation Health Manager Jeanine Lynxleg as Vice-President, and Hailika'as Heiltsuk Health Centre Director of Community Health Programs Keith Marshall to the position of Secretary-Treasurer.

The Board met five times spanning eight days between April 2012 to March 2013, to share ideas and create opportunities for planning, problem solving, and collaboration on the overall stewardship of the Association. This stewardship role includes oversight of the Association's activities, taking a leadership role in the development of the Association's strategic direction, and ensuring that the FNHDA Secretariat conducts the business and affairs of the Association in accordance with its objectives at a provincial level.

### IN ADDITION TO OUR REGULAR BOARD MEETINGS, THE ASSOCIATION'S VOICE WAS PRESENT AT SEVERAL IMPORTANT DECISION MAKING TABLES.

As part of their roles as for the Board, our President and Vice-President actively engaged with our partners on key committees and working groups including the Tripartite Committee on First Nations Health, Collaboration Committee, Health Actions Oversight Committee, and the Health Benefits Improvement Committee, to name a few. Our Board often volunteers their personal time to sit on a number of committees or working groups – to plan AGMs, training sessions and oversee a membership of Health Directors/Leads and Associates – to ensure FNHDA members' interests are incorporated into the work of the Association.



Vancouver Island FNHDA Representatives:  
Nora Martin and Georgia Cook. Edith Loring-Kuhanga and Judith Gohn missing from photo.



FNHDA Interior Representatives:  
Colleen LeBourdais, Patrick Lulua, Jacki McPherson

## OUR 2012–2013 MILESTONES INCLUDED:

- Successfully hosted our 3<sup>rd</sup> Annual General Meeting, awarded our first Inspiration Awards, and welcomed five newly elected regional Board of Directors on November 6–7, 2012 in Vancouver
- Signed the FNHC/FNHDA/FNHA Relationship Agreement, formalizing our commitment to build an effective partnership with shared values, collective and respective roles, responsibilities, and accountabilities in the new First Nations health governance arrangement
- Signed the FNHDA/FNHA Memorandum of Understanding which establishes how the organizations collaborate together on operational level issues, including resources and the provision of a Secretariat and corporate support
- Successfully held a series of spring training sessions in February and March 2013 across five BC health regions to help prepare for health transfer and transformation processes, including Novation

- Increased engagement opportunities between FNHDA Members and our partners
- Strengthened our Membership to 115 Full Members and 80 Associate Members
- All initiatives delivered within budget
- The Association's achievements are due to the efforts of our dedicated staff, our incredible Board of Directors, our generous partners, and our enthusiastic Members who all share an unwavering commitment to our mandate and shared vision of *Supporting Healthy, Self-Determining and Vibrant BC First Nations Children, Families, and Communities.*

Amid the key accomplishments of the previous year, we look forward to the exciting challenges ahead, and aspire to make 2013–2014 an even greater success. In the year ahead, you can be confident that the Association is focussed on delivering measurable results, managing risk and providing ongoing financial transparency to better support the needs of First Nations Health Directors as they heal wounds, hold hands and restore hearts in their communities.

\*Edith Loring-Kuhanga served on the FNHDA Board of Directors from November 5, 2012 until her resignation on June 26, 2013. The Vancouver Island Coast Salish FNHDA Members elected Cowichan Tribes Ts'ewulhtun Health Centre Health Director Judith Gohn to hold office from July 9, 2013 until the next FNHDA AGM. The Association bids a fond farewell and extends a heartfelt thank you to Edith for her dedication to the FNHDA and to our vision of enhancing BC First Nations health and wellness.

We look forward to the exciting challenges ahead, and aspire to make 2013–2014 an even greater success.





## Tripartite Committee on First Nations Health Update

The First Nations Health Directors Association (FNHDA) is a member of the Tripartite Committee on First Nations Health (TCFNH). This Committee is Co-chaired by the BC Deputy Minister of Health, Chairperson of the Board of the First Nations Health Authority, and the Assistant Deputy Minister, First Nations and Inuit Health Branch, Health Canada.

### MEMBERSHIP ALSO INCLUDES THE FOLLOWING PERSONS OR THEIR DELEGATES:

- the President of the First Nations Health Directors Association (FNHDA)
- the President / Chief Executive Officers of each of the BC Health Authorities
- Chief Executive Officer of the First Nations Health Authority
- Provincial Health Officer under the BC Public Health Act and the Aboriginal Health Physician Advisor
- Chairperson and Deputy Chairperson of the FNHC
- One representative from each of the 5 First Nation regional tables
- the appropriate Associate Deputy Minister and the Assistant Deputy Minister of the BC Ministry of Health
- any other non-voting, observer or full member as agreed to by the Tripartite Committee

The Tripartite Committee on First Nations Health (TCFNH) – formerly referred to as the Provincial Committee on First Nations Health – provides a forum for discussion on the progress and implementation of the Transformative Change Accord: First Nations Health Plan (TCA: FNHP), the Tripartite First Nations Health Plan (TFNHP) and the BC Tripartite Framework Agreement on First Nation Health Governance (Framework Agreement) and promotes effective partnership between BC First Nations, Federal and Provincial Governments and Regional Health Authorities. Originally referenced in the TCA: FNHP, this Committee has, and will continue to, evolve as the nature of the tripartite partnership continues to evolve over

time. The TCFNH is one of four key components of a new First Nations health governance structure in the Province of British Columbia aimed at improving the overall health and wellness of BC First Nations which is further described in the Framework Agreement.

The TCFNH coordinates the planning, programming and service delivery of health services for First Nations in British Columbia (BC) provided by Provincial Health Authorities and is the key forum for achieving the joint tripartite goals of building a more integrated health system and establishing a First Nations Health Authority (FNHA). The TCFNH's role is to establish an effective ongoing system of reciprocal accountability between the Provincial and Federal governments and First Nations health organizations operating in BC so as to provide a high quality system of First Nations health.



FNHDA AGM World Cafe on NIHB (North Region)



At the TCFNH meeting in April, regional breakout sessions were held between the Regional Health Authorities, regional representatives of the FNHC, and the other TCFNH members to discuss key priorities within the five regions and how to strengthen and evolve the partnerships in support of improved health outcomes for BC First Nations.

The Tripartite Suicide Prevention Intervention Postvention (PIP) Working Group provided an update and will continue to provide an annual report to the Tripartite Committee.

This past year's activities were significant and involved the major milestone of "transfer" which occurred on October 1st: BC First Nations through the FNHA, assume responsibility for all of the resources, employees and facilities of Health Canada's First Nations and Inuit Health BC Region.

The Tripartite Committee and the inclusion of the FNHDA as a member is a reflection of the partnership commitment as reflected in the Relationship Agreement.

## A TCFNH work-plan was developed and includes four objectives:

1. To oversee coordination, integration and alignment of planning, programming and service delivery between the First Nations Health Authority (FNHA), BC Health Authorities (HAs) and the BC Ministry of Health (MoH), including the review of the FNHA's Multi-Year Health Plan and Health Authorities Aboriginal Health Plans (on-going).
2. Review progress and implementation of the Framework Agreement (2011) and other health arrangements, including the Transformative Change Accord: First Nations Health Plan (2006), the First Nations Health Plan MOU (2006), the Tripartite First Nations Health Plan (2007) and the Health Partnership Accord (2012) (on-going).
3. Report on the progress of the integration and improvement of health services for First Nations in British Columbia (on-going).
4. Implement a reciprocal accountability framework (on-going).



## First Nations Health Benefits Service Improvements Working Group Update

Improved access to the new Health Benefits program is critical to addressing systemic inequities between First Nations and non-First Nation British Columbians in health status and access to quality care, at the individual, community, regional and provincial levels.

First Nation Health Directors, Leads and Managers are the primary administrators of health programs in First Nations communities and oversee health programs and services for members with moderate, severe and/or complex health and social needs. Often juggling multiple responsibilities of health service delivery including managing human resources and financial resources, community Health Directors are well equipped to identify the existing challenges, limitation and gaps within community-based programs and services.

On September 13, 2012, the FNHC-FNHDA-FNHA Collaboration Committee discussed a shared approach to the work of the bilateral Health Benefits Working Group on Service Improvements. It was agreed that the FNHC, FNHDA and FNHA should have a common strategy which the Vice-President, First Nations Health Benefits will bring forward to the bilateral Working Group. The Collaboration Committee struck a First Nations Health Benefits Service Improvements Working Group which would report through and receive guidance from the Collaboration Committee, and develop strategies on potential improvements to the NIHB program.

The First Nations Health Directors Association (FNHDA) is a member of the First Nations Health Benefits Service Improvements Working Group and discusses its proposed strategies with the FNHC-FNHDA-FNHA Collaboration Committee. The FNHA has appointed its Vice-President, First Nations Health Benefits to participate on this Health Canada-FNHA Health Benefits Working Group on Service Improvements which was incepted on August 29, 2012.

### MEMBERS:

- Vice President, Health Benefits, First Nations Health Authority (Chair)
- Member, First Nations Health Council (supported by the Executive Director-FNHC Secretariat)
- President, First Nations Health Directors Association (supported by the Executive Director-FNHDA Secretariat)

### ADVISORY COMMITTEE

The purpose of this NIHB/FNHB Advisory Committee is to provide direction and recommendations to the President of the FNHDA as related to the work of the Health Benefits Improvement Committee, as well as assist with the dissemination of information and feedback to each of the regions. FNHDA Board Members are supported by the remaining Health Directors within each of the regions, and have committed to an inclusive reporting function with colleagues within each region.

### REGION

### FNHDA BOARD REPRESENTATIVE MEMBER

Interior	Colleen LeBourdais
Vancouver Island	Nora Martin
Fraser	Jeanine Lynxleg
North	Patricia Hoard
Vancouver Coastal	Keith Marshall



As Health Directors, we need to work towards strengthening the health system and consider ways in which we can do more with existing resources and look for new innovative and creative ways to support the growth, sustainability and quality of our new health system. In response, an FNHB Advisory Committee was established by the FNHDA Board on March 20, 2013. The purpose was to provide direction and recommendations to the President of the FNHDA related to the work of the Health Benefits Improvement Committee, as well as assist with the dissemination of information and feedback to each of the regions. FNHDA Board Members are supported by the remaining Health Directors within each of the regions, and have committed to an inclusive reporting function with colleagues within each region.

Still in its development phase, the HB Improvements Working Group has been focused on creating a workplan to assist with the transformation ahead. Recently, the group focused efforts on past FNHDA membership engagement efforts and builds upon previous engagement conducted to date by the FNHDA on the issue of NIHB and aligned with the process for FNHDA technical advice described in the *Relationship Agreement* amongst the FNHC, FNHDA and FNHA. Health Directors have previously identified what some of the key issues are within the following NIHB areas of: Medical Transportation Benefits, Drug Benefits, Medical Supplies and Equipment, Dental Benefits, Eye and Vision Care, Mental Health Counseling Benefits and General/Other.

In partnership with the FNHC and FNHA, the FNHDA developed a short fluid survey to stimulate conversations with Health Directors and gather feedback to be used as technical advice for strategies and solutions for improvement to the Health Benefits program. The

survey provided a framework for discussion and will be summarized into a FNHDA Collective Technical Advice Document, finalized and provided to the First Nations Health Authority (FNHA) and First Nations Health Council (FNHC) as technical advice. Our partners will take this advice into consideration in transforming systems related to Health Benefits programs in the future.

The FLUID NIHB/Health Benefits Survey was distributed on Monday, July 15 and closed on Wednesday, September 18, 2013. The NIHB/Health Benefits Survey had one of the largest response rates for the FNHDA with 119 Health Directors participating in the Survey. An amazing achievement!

Your participation in this survey illustrates the importance of the Health Director position within our First Nation communities, and how our connection makes us one of the best groups to make recommendations for change.

The FNHDA Board of Directors would like to express its gratitude to those who took time out of their busy schedules to ensure the first technical advice engagement was a success.



## AGM Committee Update

Throughout the year, our creative and committed Annual General Meeting (AGM) Planning Committee works hard to plan and bring you the most meaningful and special AGM event each year.

Besides overseeing the planning, development and logistics, the Committee considers all legal requirements for hosting our formal meeting, including a review of the year, regional Board elections, and opportunities to communicate and gather your feedback about issues and priorities important to members. The Committee considers the cultural appropriateness of each element of the programme to ensure it is relevant to BC's First Nation communities.

The FNHDA held its 3rd Annual General Meeting in Vancouver, B.C., on November 6–7– 2012 in Vancouver. The AGM emcee was hosted by Keith Marshall, FNHDA Board Member Representative from the Vancouver Coastal Region. AGM presentations focused on health transfer and transformation updates.

Health Directors appreciated hearing directly from FNHA CEO Joe Gallagher about the implementation of the Framework Agreement and opportunities for continued Health Director Involvement in the transformation process. Check out our website at [www.fnhda.ca](http://www.fnhda.ca) to view the presentation in its entirety.

Health Directors also provided feedback and insight during interactive presentations about Non-Insured Health Benefits, Health Actions, Communications and Community Engagement. An opportunity for Health Directors to discuss and provide feedback on these subjects was held in a World Café format.

The feedback gathered at these sessions was summarized and provided as options for consideration to the FNHA. Secondly, the feedback was considered and utilized towards the development of the FNHDA: NIHB/ FNHA 2013 Survey for Health Directors, and to continue

to gather Health Directors technical advice, to make improvements to the future Health Benefits program.

The Association also presented the first Inspiration Awards in 2012, celebrating the incredible accomplishments of one First Nation Health Director in each region. The FNHDA held a special honouring ceremony for Judith Gohn, one of their esteemed members for years of dedicated work in her community and the positive influence she has had on many other Nations in BC and across the country.

During the FNHDA AGM, the FNHDA, FNHC, and the FNHA held a Relationship Agreement signing ceremony, guided by the Sts'ailes Cultural Committee who shared the vibrant cultural protocol of the Coast Salish. The Relationship Agreement formalized the commitment of the FNHC, FNHA, and the FNHDA to build an effective partnership with shared values, and outlines our collective and respective roles, responsibilities, and

accountabilities in the new First Nations health governance arrangement. It also reinforces our commitment to uphold the Seven Directives adopted by BC First Nations, including the strategic level standard of ensuring a Community-Driven Nation-based approach to improve services and develop capacity. We look forward to continue working alongside our key partners to improve the health and wellbeing of BC First Nations people.

Our members also held regional discussions on a number of business items including elections to appoint members to the FNHDA Board of Directors.



For this year (2013), the AGM Committee held a number of planning meetings over the past year to prepare in advance and oversee the development of this year's annual FNHDA AGM 2013. A few items of example include:

- Selection Processes: Regional nominations will be held for outgoing, retiring and vacant FNHDA Board positions.
- Sharing Best Practices: There is an opportunity for networking which is important for the sharing of Best Practices and the exchange of information amongst Health Directors (and amongst the regions).
- Recognition: Nominated by their peers, the Inspiration Awards pay tribute, recognize and honour Health Directors who have contributed significantly to the field of First Nations health. The awards seek to recognize one Health Directors for each of the five regions.

At this year's AGM we plan to be entertained by the Cree comedian Don Burnstick who is from the Alexander

First Nation located outside of Edmonton, Alberta. Don has now been involved within the healing/personal wellness movement for the past 20 years and has utilized humor and performance to provide a holistic approach to healing. In addition to his healing work, Don has established himself as one of Canada's best comedians.

Our AGM event would not be complete without the special added touches such as the honoring celebration, feasts and gifts to uplift our spirits and support our own personal wellness.



## 2012 Inspiration Award Recipients

In 2012, the First Nations Health Directors Association was delighted to present its first Inspiration Awards to recognize the commitment and leadership of community-based Health Directors, Managers and Leads to furthering the shared vision of *“Supporting Healthy, Self-Determining and Vibrant BC First Nations Children, Families and Communities”* in each BC health region.

Based on the nomination process, the FNHDA was proud to present an Inspiration Award to the following honoured recipients at the November 5, 2012 Annual General Meeting:



**Laura Jameson**  
Little Shuswap Lake  
Indian Band Skwalax  
Wellness Centre

The First Nations Health Directors was delighted to present an Inspiration Award to Skwalax Wellness Centre Health Director Laura Jameson of the Interior Region. For over 12 years, Laura has been instrumental in strengthening the health, social development and employment services for over 250 on-reserve members of the Little Shuswap Lake Indian Band. For Laura, “it’s always about trying to be strategic and thoughtful about what the community really needs and how best to meet those needs. See services from the community members’ perspective.” Under Laura’s fearless leadership, the Little Shuswap Lake Indian Band launched a new Skwalax Wellness Centre in 2009, successfully improving access by bringing together the community’s health and wellness, and social development services under one roof. Other notable projects include collaborating with the Qwemtsin Health Society to establish a children’s oral health and dental clinic, co-managing the Secwepemc Injury Surveillance & Prevention Program since 2003, contributing to the development of a letter of understanding with Interior Health, and developing a Communicable Disease Control protocol in collaboration with Interior Health and the First Nations Indian Health Branch. For these reasons, the FNHDA is thrilled to present Laura Jameson with an Inspiration Award.



**Judith Gohn**  
Cowichan Tribes  
Ts’ewulhtun Health  
Centre

It was with great honour that the FNHDA presented the Inspiration Award for the Vancouver Island Region to Cowichan Tribes Executive Health Director Judith Gohn. Judith had spent over 20 years in the health field, 15 years of which she spent contributing to many positive changes within her Nation. Judith helped build the Ts’ewulhtun Health Centre from a small 20-person operation in 1992, to a larger bustling 80-person operation in 2012. Judith oversees Cowichan Tribe’s numerous health initiatives including public health and communicable disease control, 50 assisted living units, working with physicians to develop health plans, as well as bringing together over 50 agencies to collaborate on the “Embracing Life” mental health project. The health education programs serve more than 7,000 Aboriginal people in the region, including 4,600 Cowichan Tribe members. Under Judith’s leadership, Ts’ewulhtun Health Centre was officially accredited health centre in June 2012, and elevated to Exemplary status in December 2012. FNHDA was honoured to present an Inspiration Award to Judith for her tenacity, strength, wisdom, and esteemed leadership shown while guiding her community through its greatest health challenges and achievements.



**Dolores  
O'Donaghey**  
Boston Bar  
First Nation Health  
Director

The FNHDA was proud to present the 2012–13 Inspiration Award for the Fraser Region to Dolores O'Donaghey. Dolores has been a Health Director for about 8 years for the Boston Bar First Nation which is a First Nations government in the Fraser Canyon region. Admirably, while also carrying out her role as Health Director, Dolores is also the Chief of the Boston Bar First Nation which even further demonstrates Dolores's amazing capabilities, experience and skills. Boston Bar First Nation, is located at Anderson Creek in the Fraser Canyon administers social programs and support funding for a membership of about 300. Boston Bar, it is a member of the Nlaka'pamux Nation Tribal Council. Under Dolore's tenure, Boston Bar celebrated the success of acquiring a new health clinic through a very positive collaboration with Fraser Health and was deemed a major accomplishment by both entities. Servicing community 'a win-win situation' for Boston Bar First Nation and non-First Nations who use the clinic's services. Very fortunate to have a great doctor and dentist, who are 'special people' and dedicate time to the community 'a lot of heart'. To name a few of Dolore's achievements under her health portfolio have been: Smoking Cessation Program; Diabetes Solutions Programs; Planning for a 'Health Obstacle Course' esteem builder; and, Physical activity project that will also be used for those in Substance Use programming. Dolores O'Donaghey is a deserving and accomplished Health Director, and we were privileged to honor her with an Inspiration Award.



**Charles Nelson**  
Nuxalk Nation

The FNHDA was proud to present the 2012 Inspiration Award for the Vancouver Coastal Region to Charles Nelson, Nuxalk Nation Health and Wellness Health Director. Charles is renowned for being a soft-spoken, caring, and wise health leader, serving over 900 Nuxalt members for over 5 years as the community Health Director. Charles worked to develop 'Safety Committee' for the last two years - that puts plans in place for victims and offenders. "The current justice system is very offender based and the victim often gets lost in the process" Mr. Nelson is part of a local 'Justice Committee' that goes hand in hand with wellness planning. In addition to this Charles is working on a Comprehensive Community Plan. A few of his notable accomplishments has been the Indian Residential School Society (IRSSS) Totem Pole Project. He has worked to develop Patient Travel Solutions by bringing specialists into the community. Charles has worked with various University collaborators - dentists, ear nose and throat doctors, allergists, nurse practitioners and students. Charles has involved in services involving First Nations people within the local hospital. Charles has spent the past few years working on the Nuxalt Healing Accord that intends to move forward on the interaction of traditional and contemporary medicine - bridging the gap, and discussing the place of ceremony, prayer, and much more. Charles Nelson is a deserving and accomplished Health Director, and we are privileged to honor him with an Inspiration Award.

Supporting Healthy,  
Self-Determining and Vibrant BC  
First Nations Children, Families  
and Communities.





**Feddie Louie**  
Iskut Valley  
Health Services

The First Nations Health Directors Association was proud to present an Inspiration Award to Feddie Louie, Health Program Manager of Iskut Valley Health Services located in the BC northwest region. Renown for being a visionary, Feddie has been a driving force for key healthcare innovations during her 17-year healthcare career with the 400 member Iskut Band. Feddie contributed to initial negotiations of the Iskut Health Transfer Agreement, and establishing the stellar Iskut Valley Health Services – one of the first independently run First Nations health authorities in Canada. Feddie was a pioneer in creating models of Home and Community Care, and Aboriginal Headstart before these programs were provincially structured. Feddie has been a key participant on the North West Regional Table, contributing to developing Northern regional health plan and a community health plan, creating closer partnerships with all services providers in the region. Feddie’s leadership approach it to “clearly understand what it is you’re trying to achieve before you move forward. Listen to what your community is saying. Role modeling is key – you have to walk your talk and have your community respect you or they won’t listen to you.” We applaud Feddie for her tireless leadership and congratulate her on winning a 2012 Inspiration Award.

## Membership Committee Key Activities

When the FNHDA was formally established in April 2010 and launched its first membership recruitment campaign, we could only imagine the impact this would have as we support our Members through the transition and transformation process of the new BC First Nations health governance arrangement.

Through the hard work of our Membership Committee in 2012–13, we celebrate a membership that has ballooned to 115 Full Members consisting of the most senior technical Health Directors, Managers, and Leads representing BC First Nation communities, as well as 80 Associate Members offering additional resources and expertise, which the Association can draw upon to move our work forward.

Here are key milestones for 2012–2013. As part of our Association’s membership recruitment campaign, the Committee carefully reviewed, evaluated, and made recommendations on 81 new applications brought forward for final Board approval. Enhanced membership benefits have taken shape with supports and services ranging from specialized professional training, new membership orientation packages, to improved communications (refreshed website, eBlast newsletters, new FaceBook and Twitter pages.) We continue to

monitor the FNHDA Secretariat as it undertakes research, with the support of the First Nations Health Authority Information Management Department, to identify a fully featured membership management system to improve tracking of members, newsletter subscriptions, invitations to events and workshops, exclusive member resources, and more. Preparation is underway to review and recommend improvements to a draft membership policy as other Association policy changes move into full swing. These are the key milestones our Membership Committee has worked hard to achieve.

Next year, we will continue to welcome new members that strengthen our collective voice, improved member benefits to better support you in your roles through transition and transformation of BC First Nations health services, membership database and policy enhancements to further boost our organizational health.

## FNHDA Policy Committee Update

The FNHDA Board of Directors is committed to establishing a strong foundation for the operation of the Association. Through our ongoing work, the Board of Directors recognized the importance of making sure any policies that are put in place support our Constitution and By-laws and recognize the work we have done since the signing of the FNHDA/FNHC and FNHA Relationship agreement.

The first policy the Board reviewed and considered was the *FNHDA Conflict of Interest Policy*. The intent of this policy is to clearly outline and explain the “Conflict of Interest Policy” that has been developed in accordance with the principles and functions set out in the Tripartite Framework Agreement on First Nation Health Governance. This Conflict of Interest Policy has been developed in order to ensure that there is a separation of political, business and technical functions.

As the work of the Board continued, the Directors determined it would be beneficial to create a policy to committee to assist with the development, updating and creation of new policies for the Association’s Board of Directors. In the future, this committee will be reviewing and creating a Board Meeting Policy, Code of Conduct, and Oath of Office.



The 2012-13 FNHDA Board of Directors



## FNHDA Regional Training and Engagement Sessions – Spring 2013

The 2013 FNHDA Regional Training and Engagement Sessions were designed as a three day learning and engagement session. FNHDA Members worked through a variety of subjects with opportunities to ask questions and provide feedback. Further, an opportunity was provided to Health Directors to sit together and share best practices. Positive evaluations were provided by Health Directors as feedback, with a few useful recommendations for future sessions.

The Spring Regional Training and Engagement Sessions was designed as a facilitated, open discussion that offers an opportunity to share and exchange knowledge while also providing feedback. This included a session on Understanding Policy where participants learned about the Policy Process, how to set the agenda and identifying issues, formulate policy and developing options that supports decision-makers in reaching informed decisions.

### REGIONAL SPECIFIC FEEDBACK AND DIRECTION WAS COLLECTED ON THE FOLLOWING TOPICS:

- Conversation about Policy – we heard Health Directors from all regions affirm that policy informs practice for the organization, outlines clear roles and responsibilities, and promotes fairness and consistency.
- Competencies – we heard common themes mentioned across regions were related to how competencies allow for performance management and evaluation, and that they provide a standard for measurement. Other frequently mentioned themes related to competencies overall were that they are useful for hiring processes, they help employees and communities evolve, and are important to have for technical and organizational skills.
- Role of the Health Director – we heard Health Directors mentioned that there were a number of health specific areas that Health Directors needed to be aware of (i.e. trends in health). Duties included management,

technical duties (i.e. program planning and evaluation), coordination (i.e. event planning), administration (i.e. report writing), and finances (i.e. budgeting).

- Training – we heard Health Directors note that training included communication, resource management and cultural competency.
- Certification – we heard Health Directors note that standardization was a valuable aspect, in that it acts as a benchmark. Other themes mentioned included certification provides credibility, peer support and networking opportunities, and further education.

We heard from Health Canada about Novation, considering Health Directors are the lead administrators of health programs in First Nations communities managing health centres and programs, this information session was critical to keep current on the new changes which is basically the substitution of a new contract for an old one (“Novation”) to ensure smooth operations.

The final session focused on financial training, based on a survey on training needs administered September 2011, where the area of financial training was identified as a component of training around which the FNHDA would appreciate receiving on-going or further education. This financial training was the next step in the financial training series. The financial literacy training was delivered by the Aboriginal Financial Officers Association (AFOA) aimed to assist the Health Directors in their role. The financial training session was taped and members received copies of the DVD as a future resource, as well as, resources posted to the FNHDA website.



A combination of facilitators, instructors and partners, the sessions focused on training areas to support the ongoing transformation process that is occurring in our province.

#### THE 5 REGIONAL SESSIONS WERE HELD:

1. Feb 5: Interior Region
2. Feb 12: Fraser Region
3. Feb 19: Vancouver Island
4. Feb 26: Northern Health
5. March 5: Vancouver Coastal

The feed-back gathered from each of the five sub-regional training and engagement sessions were analyzed by Reciprocal Consulting (a First Nations entity) and the prevailing themes summarized into reports. Each unique sub-regional report was shared back with the Health Directors from each region, as per the Engagement Pathway, for validation and eventually finalization for dissemination.



FNHDA Spring Engagement Session - Vancouver Coastal Region.

For more background information, and the power point presentations, please see the FNHDA website under “Members” and “Documents”:

[www.fnhda.ca/members/documents](http://www.fnhda.ca/members/documents)



## Forward Thinking: FNHDA Secretariat Report

Over this past year, the FNHDA Secretariat team has been working tirelessly with the Board of Directors and members to embark on a new direction for a successful and solid organization.

Looking ahead, our Secretariat knows that we have a lot of hard work ahead of us when implementing the vision of the Association and the upcoming Transformation phase. Here are some of the priorities we will be focusing on during the 2013/14 year:

### STRATEGIC PLANNING

The previous Strategic Plan developed by the FNHDA Board of Directors and endorsed by members, expired at the end of 2012. Before the Board embarks on the next phase of planning, they will meet as a group later in November to begin mapping out a new strategic plan. The plan will be based on the research and feedback provided by our membership and gathered through various forums and regional sessions. This information and discussion will assist with the joint FNHDA/FNHC/FNHA strategic planning session scheduled for the beginning of 2014.

### FNHDA TRAINING PLAN

One of the strategic priority areas identified by members was to begin planning professional development activities for our membership. In order to ensure the proposed activities met the learning objectives and needs of our members, an engagement on professional and education needs was conducted. This information has been shared with each region and will form the basis for the training plan moving forward.

### MEMBERSHIP TOOLS AND RESOURCES

With the assistance of our Board of Directors and with the guidance of our members, the Secretariat has begun working on the development of our first FNHDA Membership toolkit. Members have shared

they would like to see items such as templates, links to other resources, emergency contacts, and human resource support.

### TECHNICAL ADVICE

This year the Secretariat assisted with the development and implementation of the FNHDA Health Benefits Survey for Health Directors. Many Health Directors participated in providing direction and feedback into one of many engagement activities on this subject. The next step will be to take all the information gathered and share with the Health Directors that participated, the Health Benefits committee and the FNHDA Board of Directors for future direction and comment.

### COMMUNICATION

One of the exciting endeavors the Association is undertaking this year is the launching of our new logo and letter, history and pamphlet describing our services and mandate. This is a critical step for us as we continue along our journey of growth, and solidifies the position of the FNHDA as a pillar within our new BC First Nations Health Governance arrangement. Along with launching the new member login and portal, improving member communications is one of the many priorities for the Secretariat.

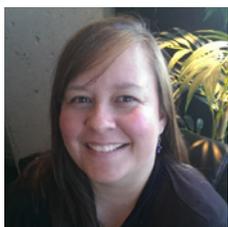


As the requirements of the Association continues to evolve over the next year, the Secretariat will be working hard to ensure the best possible supports are in place to help our members make informed decisions about the important work ahead.

We hope you enjoy being a member of the FNHDA and thank you for participating in our many events, surveys and activities.

With kind regards,

**Christine Stahler**  
Executive Director  
First Nations Health Directors Association Secretariat



We are always looking for ways to improve our services, if you have any suggestions or comments, contact:

**Christine Stahler**, *Executive Director*  
604.913.2080 ext 256  
[Christine.Stahler@fnha.ca](mailto:Christine.Stahler@fnha.ca)



Along with the incredible leadership and guidance provided by our Board of Directors, we have assembled a strong support team within the FNHDA Secretariat, dedicated to the work of the Association and our members.



**Valerie  
Birdgeneau**  
Policy Analyst

Valerie Birdgeneau, member of the Fort Nelson First Nation, has transitioned as Coordinator to her role as Policy Analyst and has been instrumental to the success of vital projects. Assigned to assist with the external communications, policy writing and research, Valerie is responsible for the popular FNHDA eblasts and FNHDA Board Summaries. Often seen working hard at her desk, this past year Valerie reviewed over 350 travel claims, contracts and event logistics for our AGM and various regional sessions. Valerie was an integral part of the 2012 AGM event success.



**Nicole Hetu**  
Sr. Policy Analyst

Beginning in January, the Secretariat was pleased to welcome our first Senior Policy Analyst Nicole (Migizikwe) Hetu, member of Saulneau First Nations. Nicole worked hard this past summer to make sure participants had all the necessary tools for a successful meeting and was a key contributor to strategy and policy development for the Association.

**Danielle  
Searancke**  
Executive  
Administrator

The Secretariat also welcomed Executive Administrator, Danielle Searancke, who will be assisting us with our administration needs as the Association continues to develop and grow. Danielle comes with great experience and is the friendly voice members will hear when calling into the office for more information.



*"We have recognized that our issues are collective therefore we know that we all share in the development of solutions. By providing technical advice to our leaders for consideration we can support the tripartite systems transformation that is underway."*

Jacki McPherson





## First Nations Health Directors Association

Sharing experience for community wellness

### We would love to hear from you!

First Nations Health Directors Association Secretariat  
501-100 Park Royal South  
West Vancouver, BC V7T 1A2  
[www.fnhda.ca](http://www.fnhda.ca)

<b>General inquiries</b>	info@fnhda.ca
<b>Membership inquiries</b>	Membership@fnhda.ca
<b>Event inquiries</b>	Registration@fnhda.ca

#### **Christine Stahler**

*Executive Director*  
*First Nations Health Directors Association Secretariat*  
P 604.913.2080 ext 256  
C 604.315.7304  
Christine.Stahler@fnha.ca

#### **Valerie Birdgeneau**

*Policy Analyst*  
*First Nations Health Directors Association Secretariat*  
P 604.913.2080 ext 360  
C 778.840.7848  
Valerie.Birdgeneau@fnha.ca

#### **Nicole (Migizikwe) Hetu, MA**

*Senior Policy Analyst*  
*First Nations Health Directors' Association Secretariat*  
P 604.913.2080 ext 233  
C 604.787.5729  
Nicole.Hetu@fnha.ca