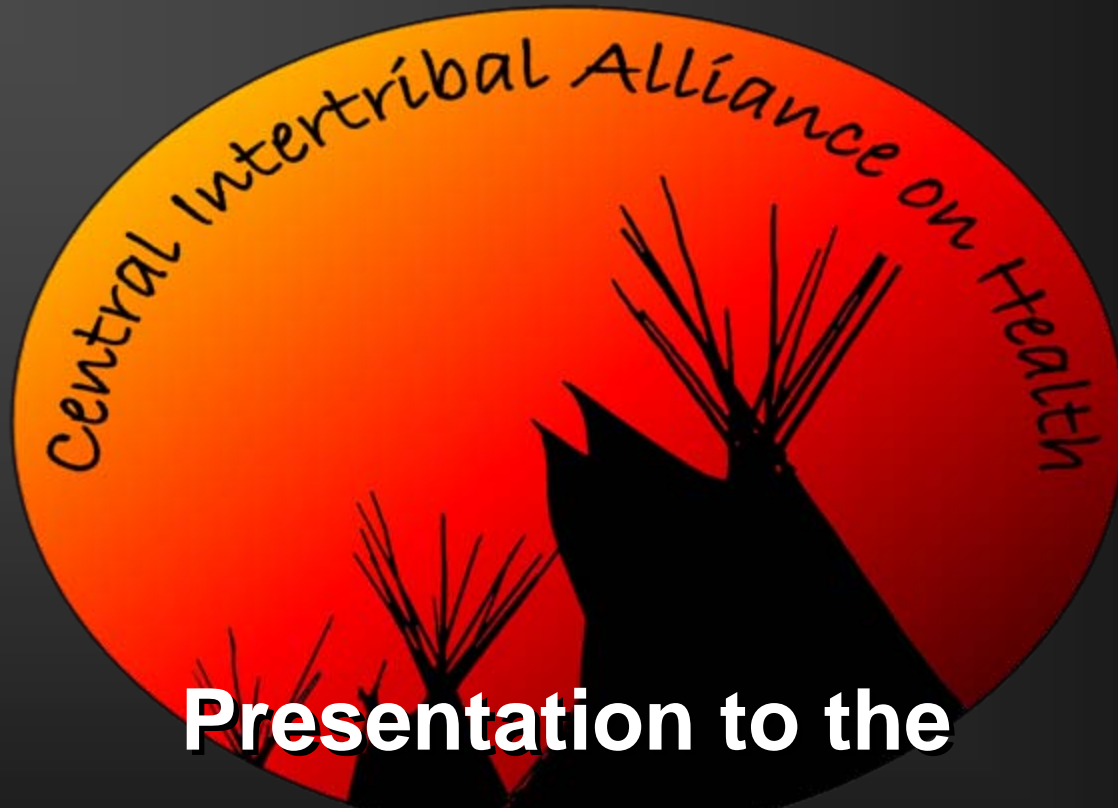


# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) PROJECT**



**Presentation to the  
AHTF Knowledge Transfer Conference  
June 9-10, 2010**

# CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) – What is it?

- A partnership of First Nations & Tribal Councils who:
  - Researching feasibility of establishing a health governance model for the provision of a wide range of third level health services
  - Wish to assume responsibility and authority to plan, design and manage third level health services
  - Respectful of each partners health administrative & governance structures

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) – What is it?**

**-Current partnership consists of 23 First Nations located in central Saskatchewan**

- Saskatoon Tribal Council (7 FNs)**
- BTC Indian Health Services (8 FNs)**
- Agency Chiefs Tribal Council (3 FNs)**
- Ahtakakoop First Nation**
- Beardy's Okemasis First Nation**
- Onion Lake First Nation**
- Thunderchild First Nation**
- Big Island Lake Cree Nation**

# CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) Partner Profile

- Many of the partners have over 20 years of experience in providing community based and second level services.
- BTC Indian Health Services has been experience in accreditation.
- STC has experience in providing a wide range of urban programs
- Onion Lake First Nations operates a pharmacy and ambulance services as well as community-based services
- Total population approximately 15,000 – 20,000 First Nations not including large urban populations in Saskatoon and North Battleford

# CENTRAL INTERTRIBAL ALLIANCE ON HEALTH – Partner Profile

- National leaders in promotion and advancement of OCAP principles in relation to data management and information systems
- Health Directors from partners have many years of experience of working together and developed trust
- Strong appreciation and incorporation of traditional values and customs in health services
- BTC Indian Health Services has developed a strong Diabetes Program that includes a research component



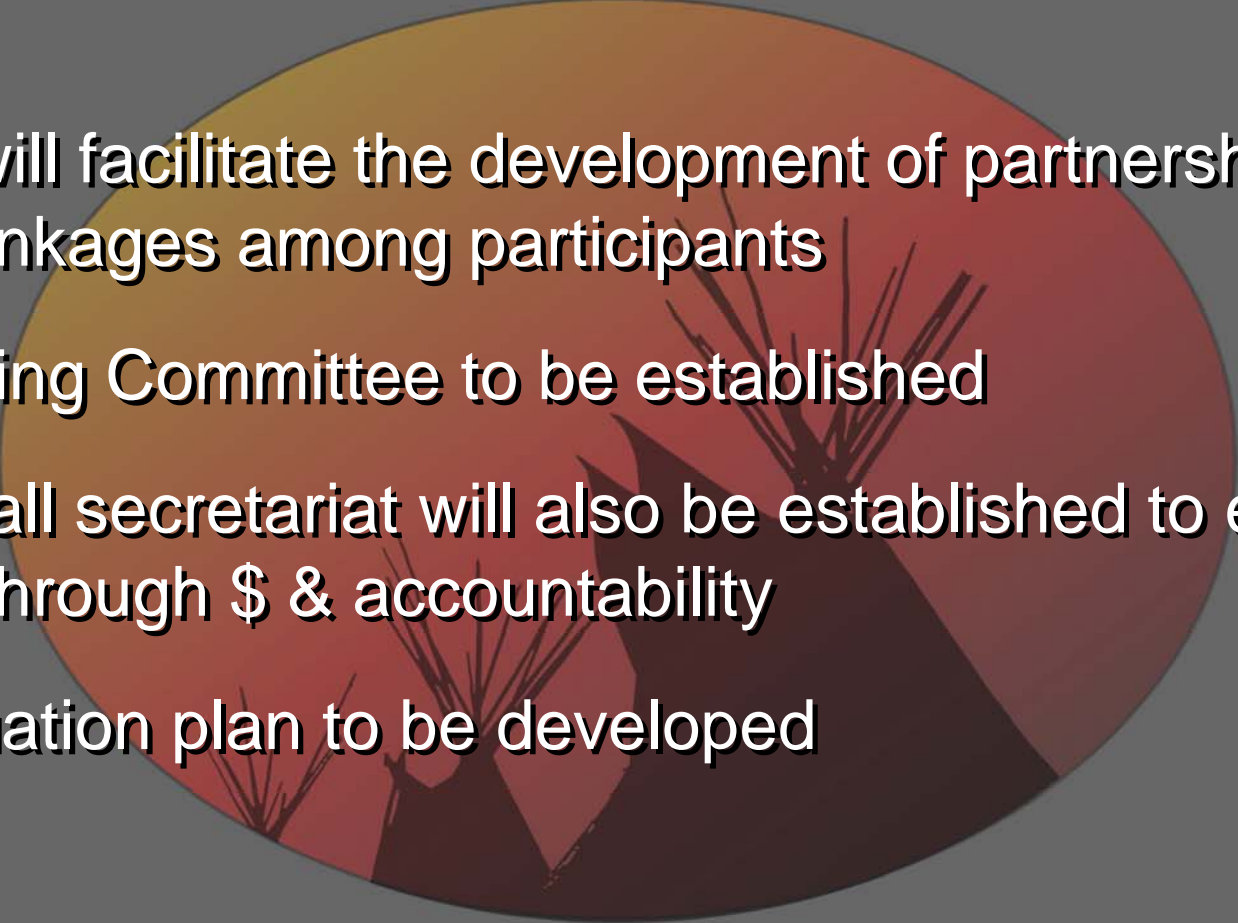
# **CENTRAL INTERTRIBAL ALLIANCE ON HEALTH-what is it (cont)**

- Partners have been meeting since June 2009
- Goal to develop a health governance model that will provide a wide range of third level services to FNs in central Saskatchewan
- Governance model will not replace existing current health service delivery mechanisms
- Governance model is not intended to create an administrative and bureaucratic infrastructure that will impact on First Nations community health funding arrangements and funding levels

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) Planning Activities to-date**

- Any governance model developed will be supported by partners through written BCR's & TCR's.
- Formal partnership agreements will be signed between partners & CIA which will outline expectations from all parties.
- Third level services will be provided from within existing health infrastructures. Each partner will be responsible for provision of certain third level health expertise.
- CIA will enter into funding arrangements with partners and will play a monitoring and reporting role for accountability to funders (FNIH) and others

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) Planning Activities to date**

- CIA will facilitate the development of partnerships and linkages among participants
  - Steering Committee to be established
  - A small secretariat will also be established to ensure flow-through \$ & accountability
  - Evaluation plan to be developed
- 



# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) Scope of 3<sup>rd</sup> Level Services**

- Scope of Third Level Services Identified to date:
  - Nursing Expertise including Community Health, Chronic Disease Management, Diabetes, Home & Community Care
  - Primary Care including Injury Prevention, Health promotion, FNIHCC, Oral Health, Community Health Rep, Community Health
  - Children and Youth including Aboriginal Headstart (AHS), Canadian Prenatal Nutrition Program (CPNP), Fetal Alcohol Spectrum Disorder (FASD), Maternal Child Health

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH- Scope of 3<sup>rd</sup> level services (cont)**

- Chronic Disease and Injury Prevention including Aboriginal Diabetes Initiative
- Communicable Disease control including Airborne diseases, Blood borne Diseases & Sexuality (HIV/AIDS) and Vaccine Preventable Diseases
- Environmental Public Health and Research including Environmental Public Health Program, Environmental Health

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH- Scope of 3<sup>rd</sup> level services (cont)**

**Health Governance and Infrastructure Support  
including:**

- Aboriginal Health Human Resources Initiative
- Aboriginal Health Services Accreditation
- Aboriginal Health Transition Fund
- e-Health Solutions
- Health Careers
- Health Consultation & Liaison
- Health Facilities & Capital Program
- Health Integration Initiative
- Health Planning and Management
- Health Research & Coordination Projects

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH- Scope of 3<sup>rd</sup> level services (cont)**

## **Mental Health and Addictions including:**

- Brighter Futures
- Building Healthy Communities
- Indian Residential School Support
- National Aboriginal Youth Suicide Prevention Strategy
- National Native Alcohol & Drug Abuse Program

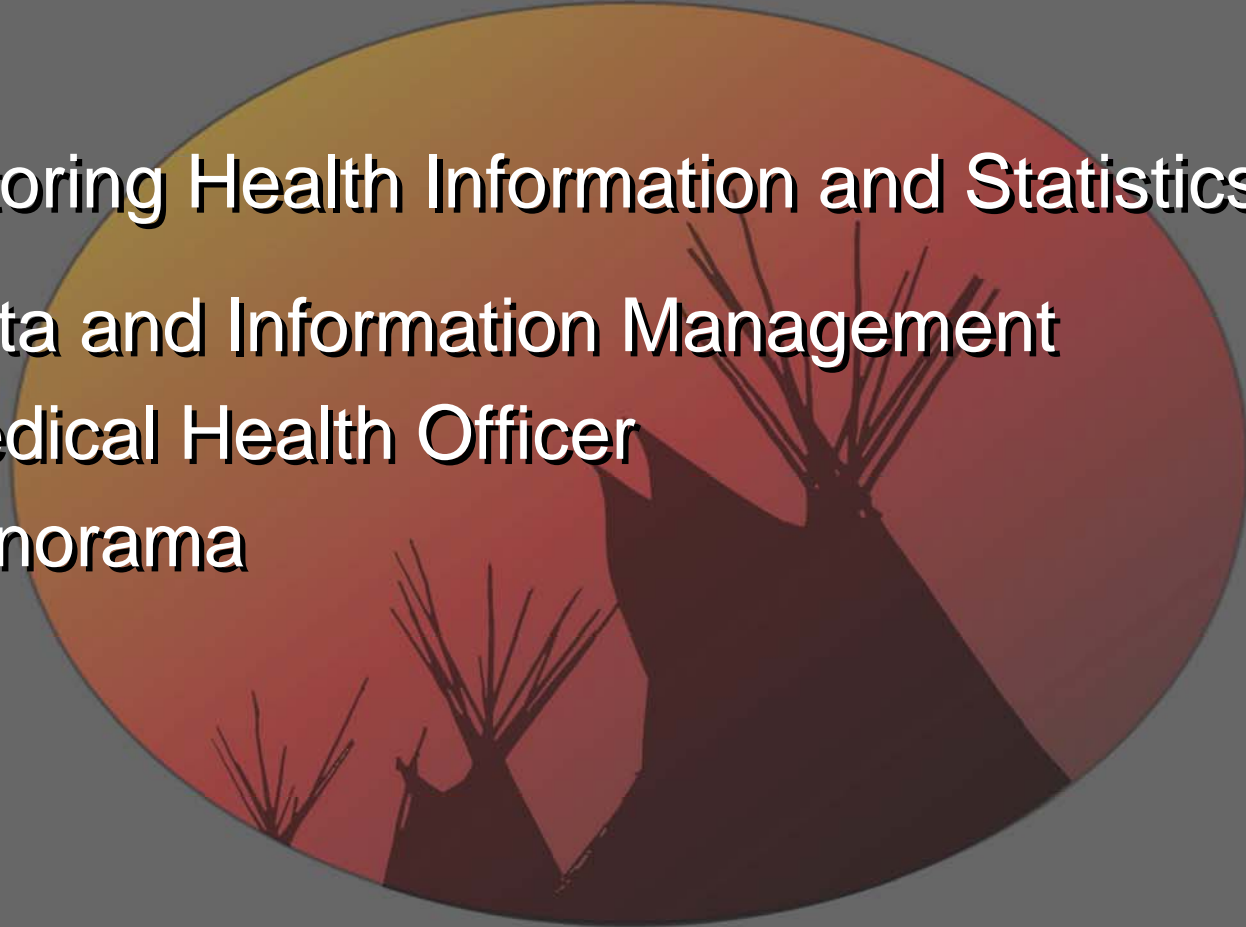
## **Community based programs:**

- National Native Alcohol & Drug Abuse Program – Treatment
- Youth Solvent Abuse

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH- Scope of 3<sup>rd</sup> level services (cont)**

## **Monitoring Health Information and Statistics**

- **Data and Information Management**
- **Medical Health Officer**
- **Panorama**





# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH – The need for 3<sup>rd</sup> Level Support**

- FSIN/FNIH/Prov. of Sask MOU agenda -goal for regional health authority. Difficulty in receiving regional support from Sask FN's.
- Demand for 3<sup>rd</sup> level services has increased and FNIH does not have adequate capacity to respond effectively and in a timely manner
- First Nations in central Saskatchewan will have an opportunity to collectively plan health services, research projects and other health priorities.
- Funding for 3<sup>rd</sup> level services will be based on fairness and equity

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH (CIA) - BENEFITS**

- Development of greater flexibility in meeting the unique health needs of First Nations in Central Saskatchewan
- First Nations will have an opportunity to provide direction on how third level services are provided
- Enhanced ability to ensure community health services are adequately supported
- First Nations health services will provide the third level services for their partners

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH Status to date**

- Establishment of Advisory Group consisting of health directors from each partner
- An inventory of health services provided by partners being prepared
- Initial draft of a proposal being prepared
- Development of standardized powerpoint
- presentation developed to be used in community level discussions
- Several consultations meetings have been held with partners

# **CENTRAL INTERTRIBAL ALLIANCE on HEALTH Status to date**

- Partners have been involved in two projects to date:
  - Entered into a partnership with FSIN for the Annual Youth Conference. CIA responsible for the Youth Suicide portion of the conference
  - Panorama consultation meeting coordinated and held in North Battleford

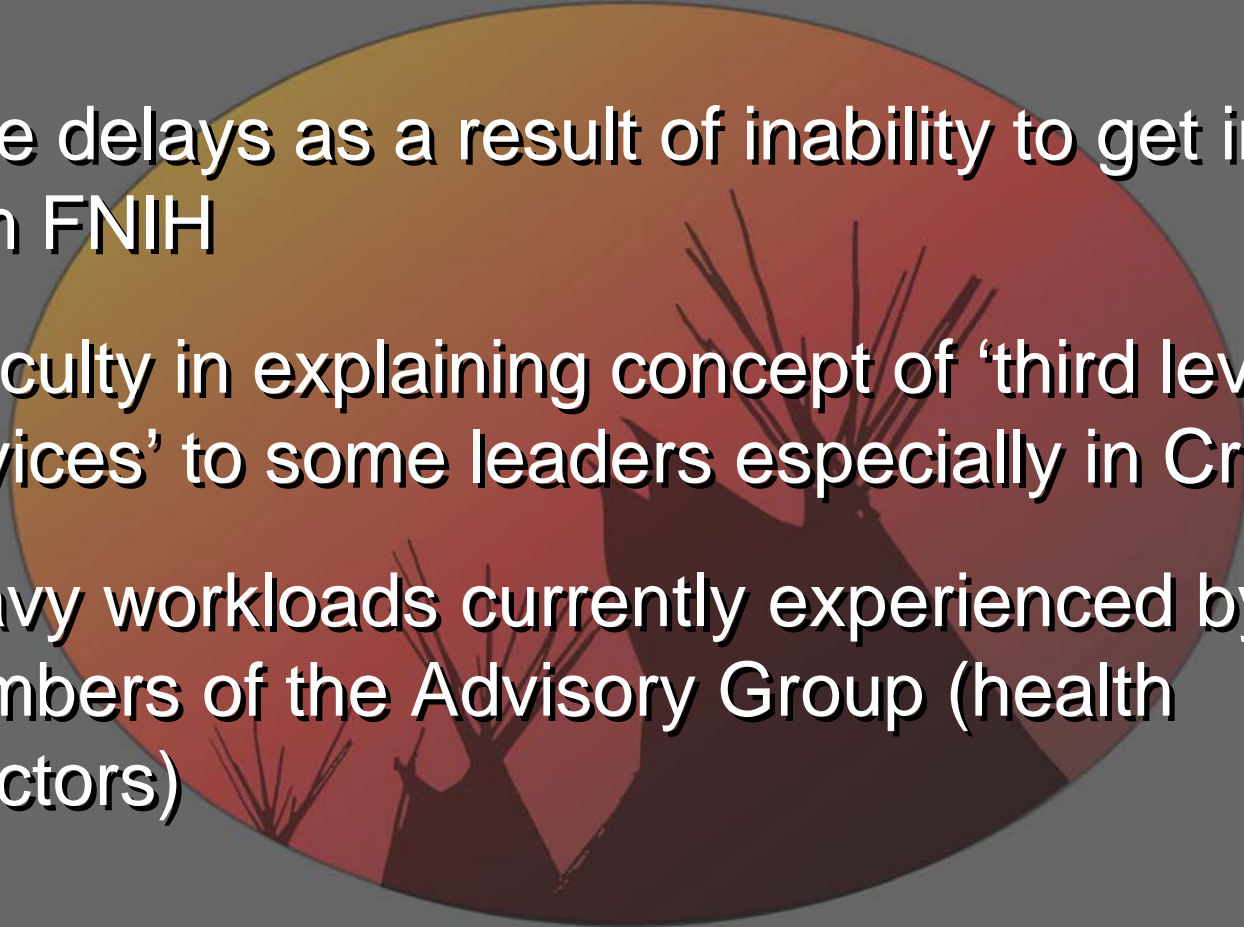
# CENTRAL INTERTRIBAL ALLIANCE on HEALTH - Challenges

- Greatest challenge to date has been trying to obtain information from FNIH Region on the amount of third level funding currently being expended on behalf CIA partners. Written requests submitted twice to Regional Director. Information also required for staffing levels & salary ranges of current FNIH staff providing 3<sup>rd</sup> level services, expenditures of the North Zone office directly related to second and third level services for CIA partners.
- ATIP request submitted but unsure of length of time to have CIA's request processed



# CENTRAL INTERTRIBAL ALLIANCE on HEALTH - Challenges

- Time delays as a result of inability to get info from FNIH
- Difficulty in explaining concept of 'third level services' to some leaders especially in Cree.
- Heavy workloads currently experienced by members of the Advisory Group (health directors)



# CENTRAL INTERTRIBAL ALLIANCE on HEALTH – Next Steps

- Continuation of proposal preparation especially on the background information and partner profiles
- Completion of annual reports
- Completion of proposal by early fall, 2010 **IF** financial information forthcoming from federal government.
- Exploring options for partnership with Sask Health on specific health initiatives

