Health Transformation in Nishnawbe Aski Nation

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Outline of Presentation

• History: How did we get here?
• Why Health Transformation?
• Advocacy for Health Transformation
• Achieving Health Transformation
• The Process
• Community Engagement
• Urgent and Immediate Needs
History

• At the time, NAN’s response to the health crisis was to petition the Federal Government for help and to use media, political allies and non-profit organizations to get attention to the issue.

• Once we had the Fed’s attention, we expected Health Canada to provide solutions which were:
  • Could be co-created with the community affected.
  • Could be based on existing programs, which would then be localized.
  • Include new spending.

• What we’ve realized along the way; is that those three policy goals(solutions above), would not solve the problems we had with promoting wellness or managing chronic disease.
Why Health Transformation?

• The current health systems that Nishnawbe Aski Nation communities currently access are not broken, they work the way that they were designed by Canada to make First Nations sicker.

• The outcomes of current health systems are clear; the system doesn’t make us well but actually leads to harm of our people as patients.

• Health Transformation will not impose on or take away from community, Tribal Council and First Nations organizations initiatives and programs, it is meant to enhance them and build upon them.
Advocacy for Health Transformation

• Began in June 2015
• Work within NAN to advocate, develop relationships and build capacity towards health transformation.
• NAN presented a plan for health transformation to the Federal Government in October 2016.
• We now have a way to carry out health transformation through the Charter of Relationship Principles Governing Health System Transformation in the NAN Territory.
Charter of Relationship Principles

Signed on July 24, 2017 by:

• NAN Grand Chief Alvin Fiddler

• Federal Minister of Health Canada (now Minister of the Department of Indigenous Services Canada), Jane Philpott

• Ontario Minister of Health, Eric Hoskins
THE VISION: HEALTH SYSTEM TRANSFORMATION

This system-wide change would see First Nations have equitable access to quality care delivered within their community, in NAN territory, as a priority. The Parties intend the system to include holistic models of care, focusing on wellness planning, population health and health determinants. The system would be patient centred, responsive to community and patient voices, and ensure that health care providers funded by federal or provincial governments would have the skills required to provide responsive, effective and culturally safe care. Communities would be engaged at all levels (community workers, Elders, and youth) so that their voices are heard and incorporated into community-based programming.

The Parties intend to take all reasonable steps necessary to support health system transformation for the First Nations in NAN territory, including, but not limited to:

1) Supporting an alignment process that would bring decision-makers together to move health transformation forward in a deliberate, planned, and measurable way;
2) Creating a framework that would:

a) Include an immediate process that would review the urgent health needs identified by NAN and other First Nations health entities within NAN territory, prioritize actions, and implement a joint action plan with an evaluation program for transparency;

b) Include a joint review and implementation of commitments made by Health Canada in response to the Auditor General of Canada Spring 2015 Report on Access to Health Services for Remote First Nations Communities that are relevant for the NAN First Nations;

c) Include a joint review of the existing health system and funding model, and work towards health system transformation guided by existing system transformation models in the NAN territory that would create new models to improve access to health services;

d) Observe the principle that jurisdictional disputes should not prevent the timely provision of services to First Nations children.
3) Developing new approaches to improve the health and health access of First Nations people in NAN territory and associated communities, including increasing and improving services and access at the community level;

4) Supporting the ability of communities and First Nations institutions to deliver and plan health services;

5) Proposing policy reform, and considering whether legislative changes may be required, to design a new health care system for First Nations in NAN Territory that includes sustainable funding models within a new fiscal arrangement; decision making structures that provide First Nations with authority, control and oversight; and enable multi-sectoral approaches;

6) Removing barriers caused by jurisdictional, funding, policy, cultural and structural issues that negatively impact First Nations’ ability to plan, design, manage and deliver quality health care services in their communities and for their members; and

7) Establishing tri-governmental political oversight such that the actions and decisions of all officials within their organization, Department or Ministry are consistent with the political commitments made by their leaders.
The Process - Structure

• Directly under the Portfolio of Grand Chief Fiddler

• Process and operations oversight will be by Chief’s Council on Health Transformation

• Guidance provided by the Health Transformation Support Team
  • Advisors, Practitioners, Elders and a Traditional Healer

• Supported by the Internal Transformation Team within NAN
  • Ovide Mercredi, Lead Negotiator and Sol Mamawka, Transformation Lead.

• Other groups will be formed as the process is further developed.
The Process – Grass Roots & Community Driven

• Transformation involves change at a personal and systemic level – community members must be the ones to drive this change and direct us as we go.

• Communities are involved from the beginning in order to design the process and determine how they want to be engaged and how they want their issues addressed.
What is Community Engagement?

- Engage: Participate or become involved in
- Engagement: The action of engaging or engaged.
- Community Engagement: A process by which citizens are engaged to work and learn together on behalf of their communities to create and realize bold visions for the future.
- Community Engagement: Can involve informing citizens about your initiative, inviting their input, collaborating with them to generate solutions, and partnering with the community from the beginning to tackle community issues.
What is Community Engagement?

Community Engagement:

• To listen, hear, empathize, understand and believe the youth’s stories and experiences in the health system in NAN Territory.

• We will need truth-telling spaces for our youth to talk and work together on patient issues in health system.

• We are asking the community youth to trust us.
Engagement Process

• Engagement process is still being developed; however, it will involve:
  • A multi-year process where we talk to as many people as possible:
    • Chief and Council
    • Community members
    • Front-line workers
    • Service providers
  • Multiple opportunities and methods with multiple visits to communities and ongoing dialogue.
  • Hearing people’s stories – to be empathizing, listening and believing.
  • The approach is still being developed (community positions vs mobile teams)
Addressing Urgent and Immediate Needs

• While longer-term transformation happens, we will be addressing urgent and immediate community needs as we go.
  • Priorities will be identified and community projects will be supported with the full force of the process/team behind them.

• Preliminary results from engagement indicate the following priorities:
  • Mental Health and Addictions
    • Youth and family treatment
    • Aftercare
  • Infrastructure (water, housing, space to provide services)
  • Elder Care and Long Term Care
  • Addressing NIHB issues
  • Funding mechanisms
Engagement and Direction to Date

• NAN Chiefs Summit on Health Transformation (Nov 16 & 17, 2017)
• NAN Health Director’s Meeting (Jan 29 & 30, 2018)
• Various Regional Chiefs’ and Health Directors Groups (Dec 2017, ongoing)
• NAN Youth Gathering (February 9, 2018)
• NAN Health Transformation Gathering of Elders, Women and Youth (upcoming, March 2018)
Questions

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