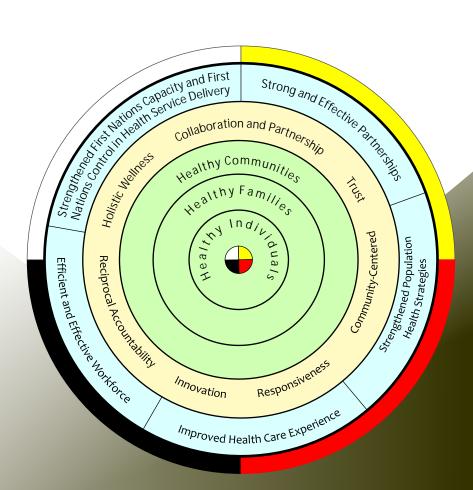
Santé

Canada

First Nations and Inuit Health Branch Saskatchewan Region

Strategic Plan 2014-2019





Health Canada is the federal department responsible for helping the people of Canada maintain and improve their health. We assess the safety of drugs and many consumer products, help improve the safety of food, and provide information to Canadians to help them make healthy decisions. We provide health services to First Nations people and to Inuit communities. We work with the provinces to ensure our health care system serves the needs of Canadians.

Published by authority of the Minister of Health.

First Nations and Inuit Health Branch, Saskatchewan Region, Strategic Plan 2014-2019

© Her Majesty the Queen in Right of Canada, represented by the Minister of Health, 2014.

This publication may be reproduced without permission provided the source is fully acknowledged.

PDF Print

Cat.: H34-275/2014E-PDF Cat.: H34-275/2014E ISBN: 978-1-100-23915-6 ISBN: 978-1-100-23914-9

HC Pub.: 140077

Table of contents

Message from the REO	3
Acknowledgements	4
Introduction	5
Development of the FNIHB Saskatchewan Region Strategic Plan	6
Partners Working Together to Improve Health Outcomes for First Nations People in Saskatchewan	8
Our Partners	10
Placemat	11
The Strategic Plan	13
Principles	15
Strategic Goal 1: Strengthened First Nations Capacity and First Nations Control in Health Service Delivery	16
Strategic Goal 2: Strong and Effective Partnerships	18
Strategic Goal 3: Strengthened Population Health Strategies	20
Strategic Goal 4: Improved Health Care Experience	22
Strategic Goal 5: Efficient and Effective Workforce	24
A Note About Implementation	26
Acronyms	26
Literature Review Sources	27

Message from the REO

As the healthcare system in Saskatchewan evolves, the need for partners to work together towards integrated, holistic health services is greater than ever. This is especially true when we consider the complex environment in which Saskatchewan's First Nations people receive health services. To ensure Saskatchewan's First Nations people have access to health services that meet their needs, Health Canada's First Nations and Inuit Health Branch, Saskatchewan Region (FNIHB-SK), must continue to work collaboratively with partners, including First Nations communities and organizations, our colleagues within the provincial health system, and with other federal departments.

Over the past several years, FNIHB-SK has continued to transform, becoming its own region in 2011. We've continued to work with our partners to improve the access and quality of health services for First Nations in Saskatchewan. First Nations communities and organizations have done the same, forging several new and innovative partnerships in healthcare with various organizations, including Regional Health Authorities. One major achievement to note is the completion of the ten-year Saskatchewan First Nations Health and Wellness Plan (SFNHWP), a product of the Memorandum of Understanding on First Nations Health and Well-being, which outlines several priorities areas for collaboration and trilateral partnership in the years to come. The First Nations and Inuit Health Branch, Saskatchewan Region Strategic Plan is not meant to replace the SFNHWP. Instead, it provides FNIHB-SK with a blueprint for how we will engage with our partners moving forward to address the priority areas found in the SFNHWP and other strategic documents, including the national First Nation and Inuit Health Strategic Plan.

I want to thank everyone who fed into the development of this plan – both our partners through the engagement sessions held in the fall of 2013, and the various FNIHB-SK staff who fed into the process in various ways. This, FNIHB-SK's first strategic plan, is the result of your thoughtful input, participation and hard work. It focuses on how FNIHB-SK can support First Nations people and communities in addressing their health needs. Your ongoing willingness to work in partnership with FNIHB-SK is critical to the successful implementation of the plan. As an 'evergreening' document, it will evolve and be updated as needed, so that it continues to reflect the realities and needs of First Nations people in Saskatchewan. I am confident that it will serve as a useful guide for FNIHB-SK moving forward as we continue to work with our partners towards improved health outcomes for Saskatchewan's First Nations people.

Sincerely,

Alexander Campbell Regional Executive Officer First Nations and Inuit Health Branch Saskatchewan Region



The First Nations and Inuit Health Branch, Saskatchewan Region (FNIHB-SK), would like to acknowledge the following for their contributions in the development of this plan:

Saskatchewan First Nation Engagement Sessions

- the Northern Inter-Tribal Health Authority, Battleford Agency Tribal Chiefs, and File Hills Qu'Appelle Tribal Council for hosting the sessions in partnership with FNIHB-SK
- representatives from the host organizations, the Federation of Saskatchewan Indian Nations, the Saskatchewan Ministry of Health, and FNIHB-SK who planned the engagement sessions
- Flo Frank of Common Ground Resource Group for facilitating the sessions
- Stephen Weiss, Barb Crockford and Laurence Thompson of Laurence Thompson Strategic Consulting for writing the final report from the engagement sessions
- Representatives from Saskatchewan's First Nations and First Nation health organizations, the Federation of Saskatchewan Indian Nations, the Saskatchewan Ministry of Health, various Regional Health Authorities, Aboriginal Affairs and Northern Development Canada, the Public Health Agency of Canada, and other partners, along with FNIHB-SK staff, for their participation in the engagement sessions

FNIHB-SK Strategic Plan Working Group

• For their guidance and contributions in the development of this plan.

Introduction

Since the introduction of health services transfer in 1988, Saskatchewan First Nations communities and organizations have developed significant capacity in health service management and delivery. Although the First Nations and Inuit Health Branch (FNIHB) still directly provides some health services in Saskatchewan, the majority of health services on reserve are funded by FNIHB, but delivered by First Nations communities and organizations. This has led to First Nation health services and programs that are better adapted to community needs. First Nations capacity and expertise in the management and delivery of health services and programs continues to grow.

FNIHB recognizes that effective partnerships across jurisdictions are essential to supporting First Nations capacity in health service delivery. In recent years, First Nations communities and organizations successfully engaged in partnerships and joint initiatives with other organizations to address specific health and health service concerns facing their communities. Work to better integrate health services provided on reserve and off reserve continues, and there are many examples of collaboration between individual First Nations communities or organizations and provincial Regional Health Authorities. Further, In August 2008, the Federation of Saskatchewan Indian Nations, the Government of Canada, and the Government of Saskatchewan signed the Memorandum of Understanding on First Nations Health and Well-Being (MOU). The MOU commits the three parties to a joint planning process to close the gap in health status between First Nations people and other Canadians.

Building on this foundation, the First Nations and Inuit Health Branch, Saskatchewan Region (FNIHB-SK) is transitioning as an organization to better target investments in health services. This transition includes a shift to increased regional flexibility, designed to enable service delivery decisions to be made at the local level, based on population needs. This will allow FNIHB-SK to work more effectively with partners to strengthen health services and programs for First Nations people in Saskatchewan.

This regional Strategic Plan outlines FNIHB-SK's strategic direction moving forward as it undergoes this transition. The mission, principles, and strategic goals in this document describe FNIHB-SK's long-term direction, and are intended to be stable over the next 10 years. The objectives and activities outlined provide detail on how FNIHB-SK will work towards its strategic goals in the short and medium term, and are intended to be stable over the next 3-5 years.

Development of the FNIHB Saskatchewan Region Strategic Plan

In 2012, FNIHB released its first national, branch-wide strategic plan. The First Nations and Inuit Health (FNIH) Strategic Plan: a shared path to improved health (the Strategic Plan), identifies increased capacity in FNIHB regions as a key driver in accomplishing the Strategic Plan goals; steps identified in the Strategic Plan to increase regions' capacity include:

- transformation of the FNIHB National Office to a more supportive role to regions,
- strengthened health and wellness expertise in regions, and
- alignment with provincial services and systems

In support of these objectives, the FNIHB Accountability Framework (the Accountability Framework) outlines the roles and responsibilities of FNIHB National Office and FNIHB Regional Offices in implementing the Strategic Plan.

The Accountability Framework, released in October 2012, identifies development of Regional Transition Plans as a key regional responsibility. In response, FNIHB-SK developed the FNIHB Saskatchewan Region Transition Plan 2012-2015 (the Transition Plan). Development of the Transition Plan was timely for FNIHB-SK, which became a new FNIHB region in December 2011. As part of the transition of FNIHB-SK, the Transition Plan identified the development of a FNIHB Saskatchewan Region Strategic Plan (the FNIHB-SK Strategic Plan) as a key milestone.

To develop the FNIHB-SK Strategic Plan, FNIHB-SK undertook the following activities:

- The Saskatchewan First Nation Engagement Sessions: In September and October 2013, FNIHB-SK, in partnership with First Nations organizations, hosted three regional engagement sessions. Session participants included representatives from various First Nations, provincial, federal and other partners. One of the main objectives of the engagement sessions was to engage First Nations communities/organizations and other partners in the development of the FNIHB-SK Strategic Plan. The input partners provided at these sessions was documented and summarized by Laurence Thompson Strategic Consulting in December 2013 in Report of a FNIHB-SK Regional Engagement Process. This report served as a foundational document as FNIHB-SK developed this Strategic Plan.
- FNIHB-SK Planning Session: In November 2012, the FNIHB-SK Regional Management Team participated in a planning session with Erin Campbell Howell Consulting, providing input into FNIHB-SK's strategic direction over the next five years.
- Document Review: In early 2014, the Policy, Planning and Partnerships Division,
 FNIHB-SK, completed a review and analysis of key documents (internal and
 external), including final reports from the two activities described above. A
 complete list of documents is included at the end of this plan for reference.
 From this exercise, the division identified common themes and developed an
 initial draft FNIHB-SK Strategic Plan.
- FNIHB-SK Strategic Plan Working Group: In February and March 2014, a group of FNIHB-SK staff reviewed the draft FNIHB-SK Strategic Plan in detail, validating the content.
- Approval: In March 2014, the FNIHB-SK Senior Management Committee reviewed the draft FNIHB-SK Strategic Plan. After completion of final revisions, the Regional Executive Committee approved the plan on April 4, 2014.

This Strategic Plan is not meant to duplicate or replace the national *FNIH Strategic Plan* or other strategic national or regional documents. Rather, it outlines how FNIHB-SK intends to apply the direction provided in the national Strategic Plan to the Saskatchewan First Nations context, and clarify how FNIHB-SK will address the priorities outlined in the various national and regional documents over the next 5-10 years.

Partners Working Together to Improve Health Outcomes for First Nations People in Saskatchewan

The health system that serves First Nations peoples in Saskatchewan involves the provision of health services and programs both on and off reserve by First Nations communities, a number of health care organizations (both First Nations and non-First Nations), FNIHB, and Regional Health Authorities (RHAs). Provided below is a brief description of the roles of these various partners.

First Nations and Inuit Health Branch¹

FNIHB, a branch of Health Canada, supports the delivery of a spectrum of community health services and programs on reserve, including primary care, public health and health promotion, and homecare. It also provides drug, dental and ancillary health services to First Nations people regardless of residence.

The mandate of FNIHB is to:

- ensure First Nations and Inuit communities have access to health services,
- assist First Nations and Inuit communities to address health barriers, disease threats, and attain health levels comparable to other Canadians living in similar locations, and
- build strong partnerships with First Nations and Inuit to improve the health system

¹For more information on FNIHB's mandate, priorities, and the national *FNIH Strategic Plan*, please visit: http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/fnihb-dgspni/mandat-eng.php.

In pursuit of this mandate, the current priorities of FNIHB are to:

- manage the cost-effective delivery of health services within the fiscal limits of the First Nations and Inuit Health Envelope;
- transfer existing health resources to First Nations and Inuit control within a timeframe to be determined by them;
- support action on health status inequalities affecting First Nations and Inuit communities, according to their identified priorities; and
- establish a renewed relationship with First Nations people

FNIHB's mandate and current priorities provide the foundation for the work of the branch. The national *FNIH Strategic Plan* describes what *FNIHB* will do over the short, medium and long term to fulfill its mandate and take action on its priorities.

Our Partners

First Nations Communities and Organizations

There are 70 recognized First Nations in Saskatchewan and 84 First Nation communities that receive health service delivery directly in community. The majority of health services on reserve are delivered by First Nations communities and organizations, with support and funding from FNIHB. First Nations communities deliver many first level health services on reserve². Tribal Councils and other First Nations organizations also play a role in the delivery of health services, including provision of second and third level health services.

Saskatchewan Ministry of Health and Regional Health Authorities

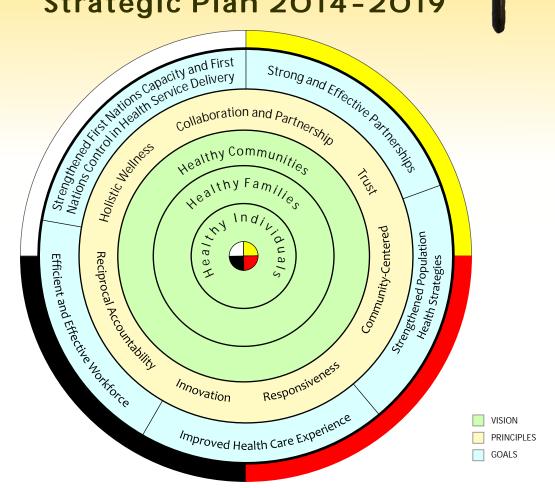
The Saskatchewan Ministry of Health oversees the strategic direction of the off-reserve healthcare system and is the primary funder of RHAs. RHAs are the primary provider of health services and programs off-reserve. There are 12 RHAs in Saskatchewan, along with the Athabasca Health Authority, a not-for-profit organization responsible for delivering health services on and off reserve in the Athabasca Basin. There are also a number of health care organizations who are affiliated with and receive funding from RHAs to deliver specific health services.

Other Federal Departments

Although Health Canada is the primary funder of health services on reserve, other federal departments have a role to play in improving health outcomes for First Nations people. Departments such as Aboriginal Affairs and Northern Development Canada and Employment Skills Development Canada invest in services and programs for First Nations and Inuit individuals, families and communities, that address many of the social determinants of health, such as housing, education, employment and economic development.

Generally speaking, first level services are front-line, community-based services, whereas second and third level services are coordination and/or supervisory services. The key difference between second and third level is primarily a matter of scale (regional vs. zone services); third level services are one more level removed from front-line services and typically do not include front-line supervision. Third level services often include provision of specialized healthcare expertise that is shared across organizations or geographic areas.

First Nations and Inuit Health Branch Saskatchewan Region Strategic Plan 2014-2019



Our Strategic Goals

GOAL 1 **Strengthened First Nations Capacity and First Nations** Control in Health

Service Delivery Strengthened First

Nations capacity and control in health service delivery will further equip First Nations people to take effective action on health priorities in their communities.

GOAL 2 Strong and Effective **Partnerships**

Strong and effective partnerships will promote holistic, innovative, integrated approaches that will address the health needs of First Nations people and improve health services both on and off reserve.

GOAL 3 Strengthened **Population Health Strategies**

Strengthening population health strategies will allow for effective, holistic health services and programs that are responsive to the evolving health needs of First Nations people across the lifespan.

GOAL 4 Improved Health Care Experience

Partners need to work together to ensure First Nations people have access to seamless, high quality, culturally appropriate health services and programs that are responsive to their needs.

GOAL 5 **Efficient and Effective** Workforce

Through promoting a work environment in which employees are supported to do their jobs well, FNIHB-SK can focus on collaboration with partners in a manner that is community-centered, responsive, and promotes reciprocal accountability

The Strategic Plan

First Nations and Inuit Health Branch Vision: Healthy First Nations and Inuit individuals, families and communities.

First Nations and Inuit Health Branch Saskatchewan Region (FNIHB-SK) Mission: Strengthen First Nations-driven, needs-based health services and programs that support First Nations people in Saskatchewan to improve their health outcomes.

Strategic Goals

To achieve FNIHB's vision and FNIHB-SK's mission, this strategic plan outlines five goals:

 Strengthened First Nations Capacity and First Nations Control in Health Service Delivery

Strengthened First Nations capacity and control in health service delivery will further equip First Nations people to take effective action on health priorities in their communities, supporting First Nation communities, families and individuals to improve their health outcomes. Health services and programs that are designed, delivered, and controlled by First Nations for First Nations are most responsive to the needs of their communities.

2. Strong and Effective Partnerships

Strong and effective partnerships will promote holistic, innovative, integrated approaches that will address the health needs of First Nations people and improve access to seamless, high quality health services both on and off reserve. First Nations communities and organizations, FNIHB, provincial government, Regional Health Authorities, other federal departments, and other invested stakeholders all have a role to play in improving the health outcomes of Saskatchewan First Nations people. To effectively utilize resources and leverage opportunities these partners must work together.

3. Strengthened Population Health Strategies

Strengthening population health strategies, with emphasis on upstream³ prevention approaches, will allow for effective, holistic health services and programs that are responsive to the evolving health needs of First Nations people across the lifespan. Taking effective action to improve health outcomes requires consideration of the various factors that influence health, including social, cultural, economic, physical and environmental factors. Population health approaches recognize the interplay between these factors, encompassing health promotion, protection, prevention and intervention strategies that address the determinants of health. These approaches invest resources where they will have the greatest impact on improving the health outcomes of First Nations people in Saskatchewan over the long term.

4. Improved Health Care Experience

Improving the experiences of First Nations families and individuals with the healthcare system is an identified need in Saskatchewan. Partners need to work together to ensure First Nations people have access to seamless, high quality, culturally appropriate health services and programs that are responsive to their needs. Focusing on improved quality of health services will lead to improved health care experience that will support First Nations people in improving their health outcomes.

Efficient and Effective Workforce

An efficient and effective workforce within the FNIHB-SK is necessary for FNIHB to build strong relationships with partners and to carry out its role in the design, planning and delivery of health services and programs with Saskatchewan First Nations communities and organizations. By promoting a work environment in which employees are supported to do their jobs well, they can focus on collaboration with internal and external partners to achieve the goals outlined in this plan, in a manner that is community-centered, responsive, and promotes reciprocal accountability.

Principles

In pursuit of its vision and mission, FNIHB-SK will respect and be guided by the following principles, in alignment with the principles of the national First Nations and Inuit Health Strategic Plan and other foundational document.⁴

- Collaboration and Partnership: working together with First Nations, provincial, federal and other partners through open communication and purposeful relationships.
- Trust: building relationships with First Nations and other partners based on mutual respect, integrity and shared understanding.
- Community-Centered: supporting health services and programs that are community-based, community-paced, and community-led, recognizing that effective health services and programs are not one-size-fits-all.
- Responsiveness: act on the needs and priorities of Saskatchewan First Nation individuals, families and communities, recognizing needs vary based on factors that include culture, language, history, identified health priorities and geographical area, among others.
- Innovation: translating knowledge into action through championing creative approaches to the planning, design and delivery of health services and programs.
- Reciprocal Accountability: recognizing a shared responsibility and accountability with First Nation, provincial and federal partners to support sustainable health services and programs and to take action on identified health priorities of First Nations individuals, families and communities.
- Holistic Wellness: integrating cultural approaches into planning, delivering and supporting health services and programs that consider the physical, emotional, mental and spiritual aspects of health.



Strengthened First Nations Capacity and First Nations Control in Health Service Delivery

- 1.1 Support the development of health human resources for First Nations communities and organizations.
 - a) Promote the development, recruitment and retention of First Nations health professionals.
 - b) Ensure a coordinated training approach for First Nations health managers and community-based workers, to support action on the identified health priorities of First Nations communities.
 - c) Strengthen the community-based workforce via enhanced linkages to regulated health professionals.
- 1.2 Support the delivery of sustainable health services and programs for Saskatchewan First Nations people.
 - a) Conduct a funding allocations review of the current Saskatchewan First Nation funding arrangements to ensure funding allocations are sustainable for Saskatchewan First Nations health service delivery.
 - b) Identify service gaps and review the regional funding envelope to ensure an efficient and equitable allocation and use of existing resources.
 - c) Improve regional policies, processes, and practices, utilizing a quality improvement approach, to better support the planning and delivery of health services and programs to First Nations people by First Nations communities and organizations.



- 1.3 Facilitate greater flexibility and innovation in the delivery of health services and programs for Saskatchewan First Nations communities and organizations.
 - a) Support First Nations-led community development initiatives to facilitate the delivery of community-centered, culturally appropriate health services and programs.
 - b) Explore new health service delivery models and governance structures with partners that will facilitate further transfer of FNIHB-funded health services and programs to First Nations communities and organizations.
 - c) Facilitate further transfer of health services and programs to First Nations communities and organizations, using appropriate funding models

Strategic Goal 2: Strong and Effective Partnerships

- 2.1 Improve communication and collaboration with partners to respond to the health needs of Saskatchewan First Nations people in a timely manner.
 - a) Identify and strengthen mechanisms for communication, informationsharing and collaboration with First Nation, provincial, federal and other partners.
- 2.2 Plan in partnership for high quality health services.
 - a) Implement an engagement process with Saskatchewan First Nations and other partners for decision-making and joint-planning, including providing input to FNIHB-SK on its planning and priority-setting.
 - b) Collaborate with First Nations communities and organizations, the Federation of Saskatchewan Indian Nations, and provincial partners to implement the 2013 Saskatchewan First Nations Health and Wellness Plan.
 - c) Work both within FNIHB and with external partners to facilitate evidencebased health service planning, design and implementation, including integrated teams approaches.
 - d) Work with First Nations communities and organizations to strengthen capacity in health planning, including coordination of health services with partners.



- 2.3 Increase integration of health services and programs through partnerships.
 - a) Support First Nations communities and organizations in planning and implementing joint initiatives with Regional Health Authorities and other local partners.
 - b) Invest in provincially interoperable electronic systems and technologies.
- 2.4 Address jurisdictional barriers to improve continuity of care.
 - a) Work with First Nations, provincial, and federal partners to clarify jurisdiction, and to identify and address service gaps for First Nations people.
 - b) Develop strategies with partners to strengthen linkages between federally-funded and provincially-funded health services that will promote seamless delivery of health services for First Nations people, including primary health care services.

Strategic Goal 3: Strengthened Population Health Strategies

- 3.1 Develop and strengthen evidence-based upstream health strategies.5
 - a) Develop an approach to coordinated planning and initiatives with First Nations communities and organizations, other federal departments, and other agencies that address the social determinants of health, such as housing, education, employment and economic development.
 - b) Work with First Nations and other partners to improve and coordinate upstream health promotion and prevention initiatives, with emphasis on women, children and youth.
 - c) Develop and enhance approaches that focus on wellness and prevention or delayed onset of disease in priority areas, including mental health, chronic disease, HIV and tuberculosis.

Upstream health strategies: Investments in the systemic or root causes/determinants of health, with the aim of improving health outcomes of the population and reducing the need for "downstream" interventions such as treatment, rehabilitation and continuing care.



- 3.2 Work with partners to improve outcomes-based data collection, measurement and analysis that is integrated and reduces duplication.
 - a) Build capacity regionally, including with First Nations communities and organizations, in evaluation and data collection, analysis and management.
 - b) Work with First Nations and provincial partners to develop data sharing agreements that will enhance access to quality data for health planning, while respecting the principles of ownership, control, access and possession (OCAP).
 - c) Define and develop common indicators with partners, with emphasis on outcomes-based measures.
 - d) Establish new and coordinate existing means or systems to collect data to measure progress in population health target areas.



- 4.1 Improve access to health services and programs, with emphasis on those living in small, rural and remote First Nations communities.
 - a) Enhance programming and services that bring care closer to home, including optimizing the use of medical transportation resources.
 - b) Invest in facilities, equipment and technology that support health services in community, bringing care closer to home.
 - c) Ensure access to medical transportation services that meet the unique needs of the client and of communities.
 - d) Work with First Nations, provincial and federal partners to improve access to continuing care for the elderly and those with special needs.



- 4.2 Strengthen the quality of health services and programs for First Nations and Inuit individuals, families and communities.
 - a) Work with First Nations partners to develop and implement program and service standards that promote consistent quality of health services and programs.
 - b) Continue to support and expand accreditation of health services and programs in First Nations communities and organizations, including NNADAP treatment centers.
 - c) Work with partners to promote and improve access to health services and programs that are holistic and culturally appropriate both on and off reserve.
 - d) Engage First Nations communities and organizations in quality improvement, to build capacity for community-driven quality improvement initiatives.
 - e) Work with partners to improve the continuum of mental wellness programs and services, with emphasis on evidence-based interdisciplinary approaches that provide holistic care to First Nations and Inuit individuals and families.
 - f) Work with partners to improve and coordinate approaches to the delivery of mandatory programs: communicable disease control, immunization, environmental health, home and community care and primary care.



- 5.1 Support the development of cultural competencies, utilizing community development and capacity building principles, to enhance working relationships with First Nations partners that are based on understanding and reciprocity.
 - a) Invest in tools and professional development opportunities for staff that both develop cultural competencies and provide opportunity to utilize those competencies in their work.
 - b) Promote development of cultural competencies by facilitating opportunities for staff to engage directly with First Nations partners to learn from their knowledge and experience.
- 5.2 Foster an organizational culture that values and promotes continuous quality improvement.
 - a) Embed quality improvement at all levels of the organization using the FNIHB Quality Improvement Policy Framework to identify, prioritize, and oversee quality improvement initiatives within FNIHB-SK.
 - b) Provide opportunity and empower staff to embrace and utilize quality improvement knowledge and skills in all aspects of their work.



- 5.3 Promote a respectful and supportive work environment.
 - a) Develop leadership competencies in managers and supervisors that will equip them to foster an environment that models public service values and ethics.
 - b) Promote a strengths-based approach to performance management that allows employees to develop competencies and skills in a positive way.
 - c) Ensure regional policies and processes enable, rather than hinder, employees in providing support to First Nations individuals, families and communities.

A Note about Strategic Plan Implementation

The FNIHB-SK Strategic Plan will serve as a foundation and a guide for ongoing operational planning within FNIHB-SK. As well, FNIHB-SK will develop an implementation plan in 2014-15 that will provide additional detail on what FNIHB-SK will do to meet and how it will measure progress towards the Strategic Plan goals.

Acronyms

AANDC – Aboriginal Affairs and Northern Development Canada

FNIHB – First Nations and Inuit Health Branch

FNIHB-SK – First Nations and Inuit Health Branch, Saskatchewan Region

NNADAP – National Native Alcohol and Drug Abuse Program

Literature Review Sources

Erin Campbell Howell Consulting Incorporated. 2012. First Nations and Inuit Health SK Region 2012-2017 Planning Session Notes.

Federation of Saskatchewan Indian Nations, Government of Canada, and Government of Saskatchewan. 2013. Saskatchewan First Nations Health and Wellness Plan.

Health Canada. 2012. About Health Canada: FNIHB Mandate, Plans and Priorities. http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/fnihb-dgspni/mandat-eng.php.

Health Canada. 2012. First Nations and Inuit Health Branch Accountability Framework.

Health Canada. 2012. First Nations and Inuit Health Branch Saskatchewan Region Transition Plan 2012-2015.

Health Canada. 2012. First Nations and Inuit Health Branch Quality Improvement Policy Framework.

Health Canada. 2012. First Nations and Inuit Health Strategic Plan: a shared path to improved health.

Health Canada and Aboriginal Affairs and Northern Development Canada. 2012. Community Development and Capacity Building Framework: partnerships for aboriginal well-being.

Laurence Thompson Strategic Consulting. 2013. Report of a FNIHB-SK Regional Engagement Process.

Saskatchewan Ministry of Health. 2012. 2013-14 5-Year Plan - Hoshins Matrix.

