

2016-2017

ANNUAL REPORT



FIRST NATIONS OF QUEBEC
AND LABRADOR HEALTH
AND SOCIAL SERVICES
COMMISSION





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WORD FROM THE PRESIDENT OF THE BOARD OF DIRECTORS



Wat'kwanonweraton,

As President of the Board of Directors, it is my honour to present the 2016-2017 Annual Report of the First Nations of Quebec and Labrador Health and Social Services Commission (FNQLHSSC).

The year 2016-2017 was marked by action and inspiration, for all First Nations organizations and communities. As you read this report, you will see that our achievements of the past year reflect the vitality and constant evolution of the FNQLHSSC, the communities and the organizations.

As President, I am grateful to be supported by the other members of the Board; an experienced and committed team is central to the advancement of First Nations in our quest for self-determination, both locally and collectively.

The Directors of the Board contributed directly to the development of the new 2017-2020 Strategic Plan by encouraging that we take an objective look at all the factors which influence our success, including the internal and external environments of the organization, gauge the communities' needs, identify priority focus areas to improve the FNQLHSSC's service offer and enhance our organizational performance.

The Board often accomplishes its work through committees set up by the Board and over the past year, the Board members participated in: Nominations and Performance Evaluations for the Board of Directors Committee and its members; Hiring and Performance Evaluation of the Executive Director Committee; Risk Assessment and Management Committee; Verification of Policies Committee; Governance and Ethics Committee. This work resulted, among other things, in the adoption of a communication policy, the creation of an organizational vision, as well as a renewed mission.

The year 2016-2017 also allowed the FNQLHSSC to maintain, and create new, valuable partnerships and collaborations, including the continuation of the agreement with Avenir d'enfants, participation in the Early Childhood Week, work leading to the recognition of the effects of customary adoption in collaboration with First Nations, Inuit and provincial government representatives, meetings with the Committee of Partners as part of the health and social services governance process, etc.

In keeping with its mission, the FNQLHSSC has ensured that the rights and interests of First Nations are taken into account during the many federal and provincial consultations that have taken place this year.

I would like to thank the members of the Board of Directors for their involvement and their availability. A special thank you to Mr. Michel Paul for his involvement during the two terms where he served as President of the FNQLHSSC. Finally, I would like to acknowledge the commitment and essential contribution of the entire FNQLHSSC's team!

Derek Montour



MESSAGE FROM THE EXECUTIVE DIRECTOR

Ndio,

For more than 20 years now, I have had the privilege of participating in the realization of the FNQLHSSC's mission and witnessing its ever-expanding evolution. Being in contact with people from all walks of life is one of the most motivating aspects of my work. Their passion and commitment are elements that motivate the organization to excel and forge ahead.

The annual report presents the highlights of the activities carried out during the year 2016-2017. Major projects include continuing the work as part of the Quebec First Nations' health and social services governance process, coordinating the consultation process for the reform of the First Nations Child and Family Services (FNCFS) Program and the Early Learning and Child Care (ELCC) engagement process, providing training and support to those working in the communities and organizations and creating customized tools as well as projects related to the development and implementation of information management systems and the use of new information technologies to improve access to health and social services for First Nations.

To guide the FNQLHSSC over the next three years, a strategic plan was developed in collaboration with representatives of the communities and organizations. The plan contains five priority focus areas and 15 strategic objectives that will be presented at the annual general assembly. The 2017-2020 strategic plan will serve to enhance the FNQLHSSC's service offer to better meet the expectations and needs of the First Nations communities and organizations through personalized support.

In closing, I would like to take this opportunity to thank you for your continued collaboration, commitment and expertise. On behalf of the members of the Board of Directors and the entire FNQLHSSC team, I wish you a wonderful summer full of activities with family and friends!

Eskonyen!

Marjolaine Sioui



PRESENTATION OF THE FNQLHSSC

The FNQLHSSC is a non-profit organization founded in 1994 following the adoption of Resolution 3/1994 by the Chiefs of the Assembly of First Nations Quebec-Labrador (AFNQL). Since its founding, it has been entrusted with many mandates to improve the health and wellness of First Nations populations according to their specificities and realities.

ORGANIZATIONAL VALUES

Organizational values are the foundation and constitute the key elements necessary to mobilize the employees of any organization. To achieve its mission and meet the needs of its clientele, the FNQLHSSC relies on the expertise and experience of a vigorous and committed team. The values it promotes are:

respect
collaboration
defense of interests
integrity
culture

MISSION

The FNQLHSSC's mission is to promote and monitor the physical, mental, emotional and spiritual well-being of First Nations and Inuit people, families and communities while improving access to comprehensive and culturally-sensitive health and social services programs designed by First Nations organizations that are recognized and sanctioned by local authorities, all the while respecting their respective cultures and local autonomy. The FNQLHSSC also assists communities that so desire, to set up, develop and promote global health and social services and programs that are adapted and conceived by First Nations organizations.

FNQLHSSC'S SERVICE OFFER

The FNQLHSSC's services fall into four categories:

- **Accompaniment**
The FNQLHSSC provides accompaniment that helps its clientele develop skills and empower themselves.
- **Training**
Several training programs have been developed or adapted for local needs. The training is given in the community or regionally, according to request.
- **Tools**
At the request of health care, social service and other service providers, directors and professionals, many tools have been developed to support these people in their administrative, professional and clinical practices.
- **Information management**
This includes conducting population surveys and taking part in projects that involve using information technology to improve access to services. Characterized by support and knowledge transfer, the services the FNQLHSSC offers aim to reinforce access to information and protect privacy. The collected data is used for social and health indicators and to strengthen the governance of First Nations.



BOARD OF DIRECTORS

The FNQLHSSC is governed by a Board of Directors comprised of seven members elected by the General Assembly. The Board of Directors has all the powers granted to it by the General Assembly as well as all associated duties. The Board is accountable to the Chiefs of the AFNQL and to the general assembly of the FNQLHSSC.



To ensure the organization's proper governance, the Board of Directors has adopted administrative processes to keep its strategic orientations at the fore. Over 2016–2017, the Board held five regular meetings, a *lac à l'épaule* strategic planning session, as well as a strategic planning session aimed mainly at guiding the development of the 2017–2020 Strategic Plan and the health and social services governance process.

Committees

Various committees have been formed to increase the participation of Board members and to support the Board of Directors and the Executive Director in reaching the organization's strategic objectives and accomplish the mandates entrusted to the FNQLHSSC.

The work done by the committees included developing or reviewing internal policies, including drafting the Process Specifications: Succession Plan for the Executive Director Position, developing terms of reference for each of the existing committees, reviewing the communication policy and developing a business continuity plan to maintain operations in the event of a disaster.

Annual General Assembly

In accordance with the FNQLHSSC's *Charter and General By-laws*, the President of the Board of Directors convened an Annual General Assembly, held on July 14, 2016.

Other achievements

In addition to its usual activities and responsibilities, the Board of Directors also accomplished the following:

- Attended several representation meetings of a political, relational or other nature, including those of the AFNQL Chiefs and the Committee of Partners for the health and social services governance process;
- Supported the health and social services governance process by, among other things, attending a meeting with Health Canada's First Nations and Inuit Health Branch and presenting the draft of the tripartite memorandum of understanding to the AFNQL Chiefs;
- With the AFNQL, drafted and submitted a brief with Quebec's National Assembly on Bill 113 (*An Act to Amend the Civil Code and Other Legislative Provisions as Regards Adoption and the Disclosure of Information*);
- Validated the recommendations of the Committee on the Administration of Bill 21 in Aboriginal communities pertaining to *An Act to Amend the Professional Code and Other Legislative Provisions in the Field of Mental Health and Human Relations*;
- Attended meetings of the Monitoring Committee during the development of the FNQLHSSC's 2017–2020 Strategic Plan;
- Attended the meeting with Ms. Cynthia Wesley-Esquimaux as part of the engagement process for the reform of the First Nations Child and Family Services Program of Indigenous and Northern Affairs Canada (INAC); and
- Validated the recommendations resulting from the engagement process for the reform of the Child and Family Services Program and the Early Learning and Child Care Program.

COMMITTEES COORDINATED BY THE FNQLHSSC

The current structure requires the participation and collaboration of many stakeholders in the communities and organizations. These forums make it possible to share expertise and promising practices, gather information, network and, at the same time, influence decision-making and the identification of annual priorities.

GOVERNANCE: In addition to the Committees of the Board of Directors, four committees support the advancement of the health and social services governance process: the Chiefs' Advisory Committee, the Committee of Experts, the Committee of Partners and the Monitoring Committee.

HEALTH: Quebec First Nations Communities Health Directors Network and Non-Insured Health Benefits Regional Advisory Committee (NIHBRAC).

SOCIAL SERVICES: First Nations Child and Family Services Regional Round Table, network of workers involved in the National Native Alcohol and Drug Abuse Program (NNADAP), support for the network of treatment centre directors and network of workers in first-line services.

SOCIAL DEVELOPMENT: Income Security Framework Policy Adhering Communities Committee and First Nations Social Economy Regional Table.

EARLY CHILDHOOD: First Nations Early Childhood Regional Committee; Nishkat network – childcare services.

INFORMATION RESOURCES: Advisory Committee on First Nations Infrastructure and deployment committees.

RESEARCH: Advisory committee of The Common Surveillance Plan of Health Status and its Determinants among First Nations of Quebec, advisory committees on population surveys and ad hoc committees for research projects.

ADMINISTRATIVE ORGANIZATION

The FNQLHSSC now employs some 80 people whose expertise is highly varied. It applies a multi-sectoral approach and provides personalized support that promotes joint action and complementarity.

Senior management is responsible for strategic and organizational development, for reaching the organization's objectives and for seeing to its day-to-day administration. Assisted by a team of experienced managers with diverse expertise, senior management supports and coordinates the work of the Board of Directors and ensures that Board members maintain close ties with FNQLHSSC staff, the AFNQL, regional commissions and organizations, communities and partners.

Annual planning process

The FNQLHSSC's strategic planning supports the 2007–2017 Blueprint. Each year, the FNQLHSSC team proposes activities based on priority focus areas and on priorities identified by the Board of Directors, taking into account the needs of the clientele and the information collected from them. This year, the Board adopted a new planning cycle for the purpose of developing and implementing the 2017–2020 Strategic Plan.



AREAS OF INTERVENTION OF THE FNQLHSSC

The FNQLHSSC's organizational growth is influenced by the mandates entrusted to it and the priorities and needs arising in the field. An increase in the services managed at the community level significantly affects the definition of the FNQLHSSC's service offer in all areas.

With a view to reaching greater local and regional autonomy, the entire team works toward supporting and accompanying the First Nations with a personal approach.

The current governance requires the participation and collaboration of many partners and stakeholders. These forums make it possible to share expertise and promising practices, gather information, network and, at the same time, contribute to decision-making.

Senior management and administrative services

Senior management ensures that the organization is properly managed and that its mandates are carried out in accordance with strategic orientations. Senior management also assists the FNQLHSSC Board members and maintains links with the AFNQL and its regional commissions and organizations, as well as with communities, First Nations organizations and external partners. The administrative team provides administrative follow-up with clients, suppliers and financial partners, in addition to providing financial, advisory, technological, logistical and communications support to FNQLHSSC employees.

Health

The 1988 policy on transferring health services to the First Nations and Inuit put forward a framework for the First Nations to take control of health services and a progressive approach inspired by the principle of self-determination in the health sphere. In Quebec, most communities worked with Health Canada to transfer health services to ensure they had control over all the responsibilities related to health programs.

The health sector team provides technical support and helps develop strategies to support community initiatives that are adapted to the needs and cultures of First Nations. It develops culturally adapted prevention, promotion, awareness and information tools as well as health-related training. These training programs enable interveners to gain new knowledge and to update their knowledge, to share their successes and experiences, and to identify effective and sustainable solutions.

Research

The research sector team conducts population surveys as well as evaluations of projects, programs and initiatives. It also defends the interests of First Nations in the area of ethics as per the established priorities. In addition to focusing on knowledge transfer and providing community and organizational support, the team collaborates on research projects, plans and implements the projects assigned to it while working in close collaboration with the other sectors of the FNQLHSSC and other concerned bodies.

Early childhood

The early childhood team helps develop strategies for the development and learning of children ages 0 to 6. When required, it assists communities in developing and implementing programs and projects at the local, regional and national levels. In order to support capacity building for those who work with young children and their families, the team offers specialized training and develops and adapts various tools. Financial decentralization to the communities and organizations is also done in the First Nations and Inuit Child Care Initiative (FNICCI) and for projects funded by Avenir d'enfants.

Social services

The social services team works to develop new strategies and adapted models, and provides expertise and support to community interveners and organizations. The team has offered a number of training sessions and organized various meetings to enable interveners to share not only their successes with each other, but also the challenges they face every day. These are opportunities to propose solutions to improve their clinical practices and interventions, and to gain greater autonomy.

Social development

The social development team supports communities and organizations in applying the Income Security Framework Policy. The team also supports them in achieving their priorities, and provides advice on orientations and decisions in social development according to their delegated responsibilities. It assists interveners in these areas: well-treatment of elders, socio-professional integration, fight against poverty and social exclusion, capacity building and social economy.

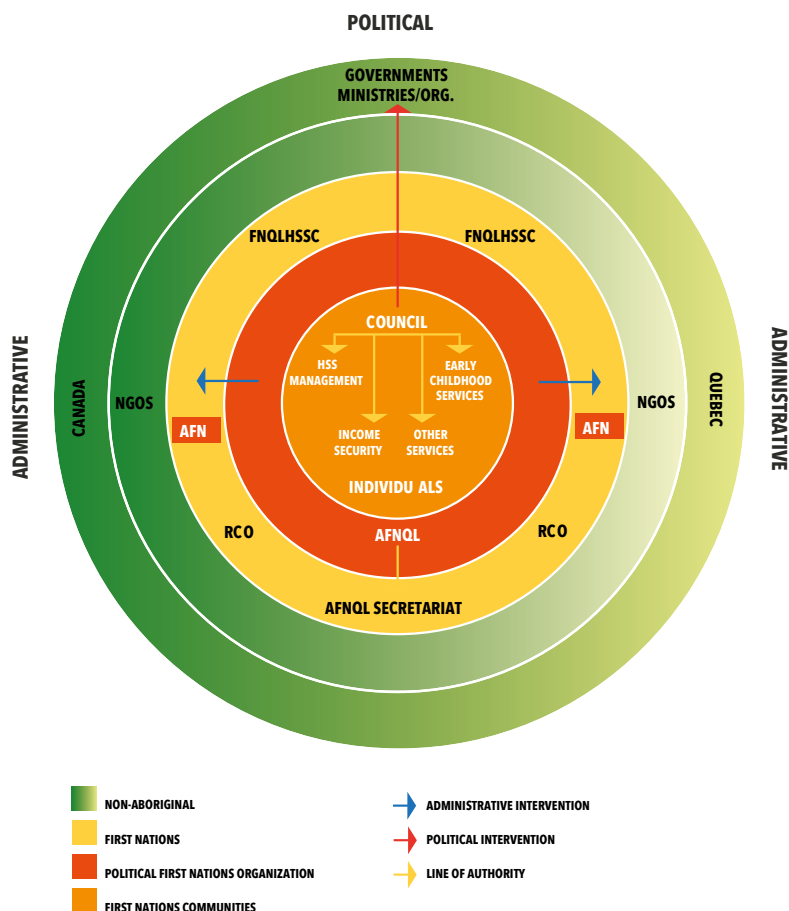
Information resources

The information resources team is involved in projects dealing with the installation, use and maintenance of information technologies to improve First Nations' access to health and social services-related data. These services typically involve providing support to the communities and organizations involved, and facilitating knowledge transfers. The projects aim at increasing access to information and improve the protection of personal information. The data collected are used to determine specific health and social indicators for First Nations in Quebec.



THE ENVIRONMENT OF THE FNQLHSSC

The FNQLHSSC works closely with the AFNQL and its regional commissions and organizations (RCOs) and establishes ongoing partnerships with governments, community organizations, universities, hospitals, associations and professional orders as well as with other First Nations organizations, both regionally and nationally.



CLIENTELE, PARTNERS AND COLLABORATORS

The FNQLHSSC serves community interveners and staff under the mandates entrusted to it. It regularly works with First Nations political authorities and regional organizations, as well as with representatives of the federal and provincial governments. In addition to helping fund activities, a number of partners collaborate in the implementation of these activities.

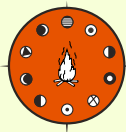
Over the course of its mandates, the FNQLHSSC is sometimes called upon to address the media and uses these opportunities to further educate various audiences on the reality experienced by First Nations in Quebec. It also informs them of the latest data, since its primary objective is to improve the health of First Nations.

The FNQLHSSC's progress and results are largely due to its excellent collaborative work with communities and organizations, as well as the support and financial assistance of its partners.

ACHIEVEMENTS IN 2016–2017

Several activities were added to the FNQLHSSC's regular duties in the last year: engagement process for the reform of the First Nations Child and Family Services (FNCFS) Program (whose main objective is to help children and their families access high-quality culturally adapted services that meet their needs); participation in the watch committee for the self-initiated order on Aboriginal women's living conditions as affected by sexual assault and domestic violence, led by the Committee on Citizen Relations; announcement that a public inquiry commission will be held on relations between Aboriginal peoples and certain public services in Quebec (Viens commission); participation in a special consultation on Bill 99 (*An Act to Amend the Youth Protection Act and Other Provisions*); filing of Bill 113 (*An Act to Amend the Civil Code and Other Legislative Provisions as Regards Adoption and the Disclosure of Information*); creation of a network of coordinators from the communities for the adoption of Jordan's Principle; and the Early Learning and Child Care (ELCC) program engagement process.

The year 2016–2017 also marked the inaugural First Nations Gathering on the Social Economy; the creation of a partnership with Fondation Lucie et André Chagnon and several other organizations to organize the first Early Childhood Week; coordination of the team Eastern Door and the North (EDN); continuation of work on the health and social services governance process; development of the 2017-2020 Strategic Plan; and promotion of the FNQLHSSC's service offer.



SUPPORT TO THE ASSEMBLY OF FIRST NATIONS QUEBEC-LABRADOR (AFNQL)

The FNQLHSSC receives its orientations from its Board of Directors and General Assembly delegates. It also receives specific mandates from the AFNQL Chiefs. In 2016–2017, the FNQLHSSC attended the Chiefs' assemblies in April, June, September (twice) and November 2016, and in February and March 2017 to present the status of the mandates and certain priority matters. The FNQLHSSC also supported the AFNQL during Ms. Cynthia Wesley-Esquimaux's visit as part of the engagement process for the reform of the First Nations Child and Family Services (FNCFS) Program.

Support from political authorities is vital for advancing mandates and defending First Nations' rights to health and social services. A resolution and motion concerning the FNQLHSSC's mandates were adopted by the AFNQL Chiefs during the last year:

Resolution No. 10/2016

Health and Social Services Governance Process

Support to continue the current mandate for another four years. An approach will be taken to agree on the process for transitioning to a new model of governance that will give the First Nations in Quebec greater autonomy in health and social services in view of improving their wellness.

Motion

Patient services (transportation for medical reasons) offered by Mamit Innuat¹

Communities that so desire will be exempted from the obligation to use Mamit Innuat's services when patients from their communities require health services in Québec City, Montréal or Sept-Îles.

1 Motion presented by the Chief of the Listuguj community

REPRESENTATION ACTIVITIES

These are the main political and administrative events the FNQLHSSC was invited to take part or collaborate in:

New Pathways Foundation benefit event
Interdepartmental round table on
homelessness – MSSS

Consultation of the *Ministère de l'Emploi,
du Travail et de la Solidarité sociale*
(MTESS) on labour – *Rendez-vous national
sur la main-d'œuvre*

Regional and joint meeting of the
Framework Policy Adhering Communities

Meeting with the MTESS to renew the
governmental action plan in the fight
against poverty and social exclusion –
brief filed by the FNQLHSSC

National meeting of the First Nations
Information Governance Centre (FNIGC)

Partageons nos savoirs (sharing our
knowledge) conference

Day of reflection: *De l'exclusion sociale
à la participation citoyenne : des défis
inspirants pour les aînés* (from social
exclusion to citizen participation: *inspiring
challenges for seniors*)

Organizing committee for Early Childhood
Week with Fondation Lucie et André
Chagnon

Presentation during the hearings in
Sept-Îles – Coroner's report on the suicides
at Uashat mak Mani-Utenam

Participation in the watch committee –
Self-initiated order on Aboriginal women's
living conditions

Consultation of the *Secrétariat à la
condition féminine – Ensemble pour
l'égalité entre les femmes et les hommes*
(together for equality between men and
women)

Press conference – support for the
Manawan community – ambulance services

Special consultation at Quebec's National
Assembly – Bill 99 (*Youth Protection Act*)

*Colloque sur les plantes agricoles
autochtones ancestrales* (conference on
ancestral Aboriginal crops)

Conference of the *Commission des droits
de la personne et des droits de la jeunesse*

First Nations of Quebec Nursing Directors
Committee (FNQNDC)

Working group on Bill 21 (*An Act to
Amend the Professional Code and Other
Legislative Provisions in the Field of Mental
Health and Human Relations*)

Summit on Urban Aboriginal Youth
Leadership

Community economic development
panel – Concordia University

Quariera's employability conference

Conference on research priorities and the
launch of a research laboratory – UQAT

Global Social Economy Forum

Filing of a brief and participation in
the consultation on the Government
Action Plan for the Social and Cultural
Development of the First Nations and
Inuit – SAA

Participation in the network of dental
hygienists – Children's Oral Health
Initiative (COHI)

Committee on Institutions – Presentation of
a joint AFNQL-FNQLHSSC brief (Bill 113)

Conference: *Vieillesse et politiques
sociales : enjeux d'aujourd'hui, défis
pour demain* conference (aging and
social policies: today's issues, tomorrow's
challenges)

20th anniversary of the FNHRDCQ

Meeting with Dr. Gilles Julien – social
pediatrics projects

MAIN MEETINGS AND COMMITTEES COORDINATED BY THE FNQLHSSC

Meetings of the Health Directors Network

First Nations Child and Family Services Regional Round Table

Regional meeting on perinatal and early childhood

Regional meeting of adult care establishments

Meeting of childcare centre (CPE) directors

Regional meeting to transfer expertise to first-line preventive services

Regional meeting on the fight against smoking

Meetings of the Income Security Framework Policy Adhering Communities

Pre-AGA on the health and social services governance process

Meeting of the First Nations Early Childhood Regional Committee (FNECRC)

Meetings of the network of directors of addiction treatment centres and working groups (NNADAP workers)

Meetings of the Non-Insured Health Benefits Regional Advisory Committee (NIHBRAC)

Meeting of the committee on healthy lifestyles, sports and physical activity

Meeting of childcare service managers

Regional meeting of the coordinators of projects funded by Avenir d'enfants

ORGANIZATIONAL PROJECTS

2017-2020 Strategic plan

Taking into account emerging needs, the FNQLHSSC put together a new strategic plan setting out the priority focus areas and objectives it will be pursuing from now to 2020. The new 2017-2020 Strategic Plan will guide the FNQLHSSC and its Board of Directors when choosing the strategies and initiatives it will use to fulfil the organization's mission.

The 2017-2020 priority focus areas were formulated drawing on the results of consultation sessions and surveys of FNQLHSSC staff members and First Nations communities and organizations. In addition to reflecting the progress already made, these results made it possible to embark on the 2017-2020 strategic planning process with a sense of assurance and determination. These efforts were supported by the adoption of a renewed vision and mission.



The five priority focus areas are meant to unify and mobilize, since they are based on the First Nations' clearly stated desire to assert their identity and culture, together with the principles and values that distinguish them as First Nations, and since the priority focus areas were designed collectively with a view to laying out a common vision.

Service offer



Over the years, the FNQLHSSC has created a highly interesting service offer, which has continued to evolve and be adapted to the community's ever-growing needs. The service offer was officially launched at the 2016 Annual General Assembly (AGA); an electronic version of it is now available on the FNQLHSSC's website.

Internal policies and procedures

These policies support sound management of the FNQLHSSC's human, material and financial resources. In the past year, the Communication Policy was revised and various procedures were drafted to improve internal processes. In addition, work began on drafting an information management policy that will be adopted in the coming year.



Documentation centre

The FNQLHSSC's documentation centre contains over 1,500 titles focusing on a range of issues. The centre is in a constant state of evolution and is updated daily. In addition, the catalogue of the FNQLHSSC's publications² is reviewed annually and a print copy is distributed at the AGA; it is also available on the FNQLHSSC's website.

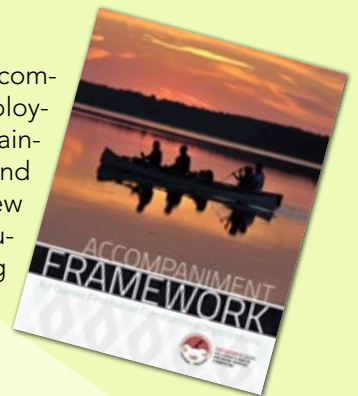


Newsletter

The electronic version of the newsletter (*The Rising Sun*) is published every two months. A special issue is also distributed each year at the AGA.

Accompaniment Framework for Quebec First Nation Communities/Organizations

The FNQLHSSC continues to implement its Accompaniment Framework in order to support its employees in their accompaniment practices. An initial training session was organized for all employees, and further sessions are being developed with a view to standardizing tool design and ensuring continuous improvements to the accompaniment being provided.



THE EARLY CHILDHOOD WEEK

Project management

Thanks to the concepts acquired in the area of project management, staff members share their expertise and the tools at their disposal so all can benefit from them. Project management covers all techniques, methods and practices that enable the teams to coordinate and harmonize the stages of each project in order to meet stated needs.



Partnerships and collaborations

In addition to its existing partnerships, the FNQLHSSC collaborated with new partners to organize *Early Childhood Week*,³ which aims, among other things, to support Universal Children's Day and serves as a reminder that all children have the right to grow up in an environment that helps them develop their full potential. In addition to shedding light on certain initiatives, this event seeks to promote the *Declaration of the Rights of First Nations Children*.⁴ Among the partnerships developed, several research collaborations are underway (these are discussed in greater detail in the following section).

² http://www.cssspnql.com/docs/default-source/centre-de-documentation/cataloguepublic_imp_2017_eng_web.pdf?sfvrsn=2

³ <https://www.youtube.com/embed/Za1cXn1F9Vo?rel=0&wmode=transparent&autoplay=1>

⁴ http://www.cssspnql.com/docs/default-source/centre-de-documentation/cadre_11x17_apnql_droits_enfants_eng_web3E691EB500F7F40E39084316.pdf?sfvrsn=2

COMPLETED PROJECTS AND ACTIVITIES

Health and social services governance process: collective reflection continues

Developing the health and social services governance model continues to occupy a significant place in our efforts. Based on the foundations, principles and concepts selected, representatives of the communities and organizations shared their opinions on culture, planning and accompaniment. This process continues to be supported by the Committee of Partners and the Chiefs' Advisory Committee. Over the past year, a communication plan was implemented and two regional meetings were held.

In addition, information and promotional documents were designed to showcase the project and kick off a reflection process about the essential elements that should be included in the new health and social services governance model.

From a policy perspective, these efforts led to the development of a Tripartite Memorandum of Understanding, primarily aimed at working in concert to make significant changes to the health and social services programs and to social services geared toward First Nations in Quebec, in addition to consolidating and clarifying a tripartite partnership for collaboration and coordination, and developing and implementing a health and social services governance model. All reports are available on the FNQLHSSC's website.⁵

North American Indigenous Games

The FNQLHSSC continued to coordinate team Eastern Door and the North (EDN), made up of some 300 young athletes aged 12 to 19. This team will represent the Quebec region in the North American Indigenous Games (NAIG) in July 2017. Over the past year, the mission staff was selected and trained, the coaching team was finalized, and athlete selection camps were held. A website, a Facebook page, a Twitter account and an Instagram account were created to bring together the relevant information, not only for the athletes and their parents, but also for coaches and all those interested in this event.

Projects completed under the FNQLHSSC / Avenir d'enfants partnership agreement

In 2012, the FNQLHSSC and Avenir d'enfants, a child support organization, entered into a partnership agreement, which is extended until March 31, 2020, thus providing First Nations with an opportunity to continue their projects. This partnership seeks to foster cross-sector mobilization and collaboration in the areas of early childhood development (children aged 0–5) and family development in 25 communities. In connection with their early childhood projects, the communities organized various regional mobilization and concertation tables. A number of these initiatives support family participation and involvement by giving a voice to parents and elders.

In 2016–2017, 10,512 children, 10,669 parents and 1,570 care providers were reached thanks to these initiatives.



AVENIR D'ENFANTS
DES COMMUNAUTÉS ENGAGÉES



⁵ <http://www.FNQLHSSC.com/champs-intervention/governance>

Child and family support

A significant amount of time was devoted to the specific consultation on the bill on youth protection (Bill 99) and to the work that followed the tabling of the *Act to Amend the Civil Code and Other Legislative Provisions as Regards Adoption and the Disclosure of Information* (Bill 113). The FNQLHSSC and the Assembly of First Nations Quebec-Labrador jointly submitted a brief on Bill 113.



A number of other activities were carried out, including the drafting and distribution of a practical guide pertaining to Section 37.5 (with numerous modifiable appendices); an overview of the realities surrounding the evaluation and monitoring of foster families; and consultations with participants in the First Nations Child and Family Services Regional Round Table with a view to obtaining their opinions on topical issues.

The FNQLHSSC took part in the work of the framework committee organized by Quebec's *Ministère de la Santé et des Services sociaux* (MSSS) focusing on life plans for Aboriginal children. The framework will be completed in 2017 following the adoption of Bill 99. The FNQLHSSC also took part in the work of the Committee on the Administration of Bill 21 in Aboriginal Communities. On September 29, 2016, this committee submitted a report (including recommendations) to the Minister responsible for justice and Minister responsible for Aboriginal affairs.

To obtain a clearer picture of current services and to identify sexual-abuse training needs, a survey was administered to stakeholders working in First Nations communities and organizations. The questionnaire was developed in collaboration with the First Nations Child and Family Services Regional Round Table and first-line service coordinators.

The pilot project of the Intersectoral Action for Children's Development and Safety (IACDS) initiative was implemented in two communities. Over 50 people received training, together with 13 "multiplier agents," who went on to train 35 more people. The community of Uashat reported positive results in terms of collaboration and dialogue between the various services. In addition, the "Honouring Fathers" project and the pilot projects involving family homes continued.

A number of communities received support for the creation or renewal of bipartite agreements or for the creation of a First Nations Child and Family Services (FNCFS) agency. In addition, a life plans reference framework specific to First Nations was developed.

The FNQLHSSC also coordinated and implemented the regional engagement process for the reform of the FNCFS Program. More specifically, the reform is primarily designed to enable First Nations children and families to benefit from high-quality culturally adapted services that effectively meet their needs and, most importantly, respect their rights. This initiative included community consultations and engagement sessions (Montréal, Val-d'Or, Sept-Îles, Listuguj, Québec City), as well as an online questionnaire. The final report, including recommendations, has been submitted on June 30, 2017.

The FNQLHSSC's early childhood service offer is highly diversified. Activities in 2016–2017 included writing a perinatal policy; holding a coaching session after the training program for doulas to improve accompaniment through at-home visits; developing training on how to create parenting skills development workshops; and reviewing the parent-child activity calendars. The FNQLHSSC also began drafting terms of reference on perinatal and early childhood.

The implementation of the agreement between the *Ministère de la Famille* and the FNQLHSSC led to the development of several processes, including issuing permits to childcare and daycare centres, processing complaints, the ethics committee, inspecting the services, supporting healthy management, providing support for the production of the childcare centres activity reports, receiving said reports, and supporting the Boards of Directors and Board members. The FNQLHSSC also assisted in the opening of two new childcare centres and developed training on budgeting and applying budgeting rules.



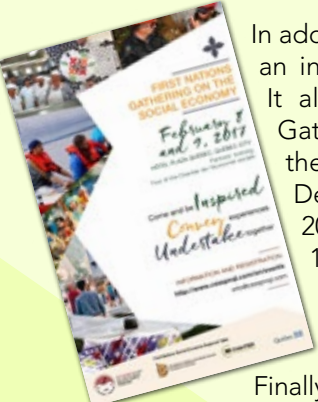
Income security

An advisory committee, made up of two community members, a representative of the First Nations Human Resources Development Commission of Quebec (FNHRDCQ) and a representative of the FNQLHSSC, was established to provide service continuum to the beneficiaries of these two clientele. The committee identifies the existing tools and clarifies the need to design new forms or training. It holds a joint regional meeting each year.

In the capacity development project on the compliance and improvement of income security services, the communities continued to receive accompaniment and follow-up regarding the implementation of the recommendations in their action plan to ensure program compliance. They also received accompaniment in a one-stop service project on income security and employability.

Social economy and the fight against poverty and social exclusion

To better counter poverty and social exclusion, the FNQLHSSC began developing an overview of the social economy situation in the First Nations, to identify priority socioeconomic issues and needs. It also continued promoting and supporting the creation of collective and social entrepreneurship projects with several communities.



In addition to the situation overview, the FNQLHSSC created an inventory of First Nations social economy enterprises. It also organized the first edition of the First Nations Gathering on the Social Economy, in partnership with the First Nations of Quebec and Labrador Economic Development Commission (FNQLEDC). Held in February 2017, the event was a resounding success, attracting 190 people from different areas. It also revealed that social economy enterprises are becoming increasingly popular.

Finally, an inventory of best practices and active measures in the area of employment and pre-employability was conducted in concert with the relevant ministries and organizations, to facilitate access to educational and career guidance, counseling and employment.

Access to services

Several activities were carried out to improve service continuity with the Quebec network. Even if the difficulties encountered are too often of a jurisdictional nature, longer-term solutions must be found so that all citizens can access the services to which they are entitled.

In 2016–2017, the FNQLHSSC received and processed 106 support requests for the services provided under the Non-Insured Health Benefits (NIHB) program and attended national meetings on the joint review process. Begun in October 2014 and completed in March 2017, this process was supported by the Non-Insured Health Benefits Regional Advisory Committee. A regional meeting was held to validate the recommendations and a final report was tabled. The recommendations will be implemented over the course of the next year.

An internal committee was created to monitor work on Jordan's Principle. Tools have begun to be developed, including a Web page, to enable the people concerned to access the information and submit a support request according to the eligibility criteria.

The Committee of Partners formed in the context of the health and social services governance process committed to addressing jurisdiction conflicts, aiming to find lasting solutions through the implementation of jurisdictional conflict resolution mechanisms.

Wellness



The 2017 edition of the First Nation Wellness Day was themed “My wellness: It’s up to me and I foster its growth!” As a gift, the FNQLHSSC gave out seeds of sage, a sacred plant used by many First Nations during their ceremonies. Packets of seeds were also given to all the community members.

The FNQLHSSC began organizing a regional Forum on Wellness. The Forum, which will be held November 7–9, 2017, is meant to promote wellness and encourage participants to share traditional and cultural knowledge and practices.

On the topic of suicide and domestic violence prevention, work is underway to adapt the Quebec suicide prevention training guide.

Other projects are ongoing, including creating a profile of the justice data and developing a standardized guide on best practices and prevention in the area of addictions. Support for the development of mental health and addiction protocols continued to be offered to the communities.

As for training, the FNQLHSSC offered the Buffalo Riders early intervention program for young people aged 11 to 14, which is implemented in schools. It is now offered in eight communities and one treatment centre.

Healthy lifestyles

Adopting healthy habits through a holistic approach is a determining factor for health. For greater mobilization and awareness and to encourage healthy actions early in life, the healthy lifestyles initiative was supported by the following activities:

- Creation of a physical skills development program for young people.
- School nutrition program offered in seven schools (total of 133 workshops) and program information kit reprinted.
- Continued implementation of the Kirano program.
- Coordination of activities to support the delegation of team Eastern Door and the North (EDN) during the next North American Indigenous Games (NAIG).
- Participation and cooperation in regional activities, namely, the Inter-School Games, Aboriginal Science Fair, Youth Forum, First Nations Youth Leadership Camp organized by the New Pathways Foundation, and more.

Quebec First Nations and Inuit Faculties of Medicine Program (QFNIFMP)

This program encourages and helps First Nations and Inuit become doctors. Over 40 Quebec First Nations students have been recruited since its creation, and the first Inuit student will soon be attending one of Quebec’s four faculties of medicine. The program paved the way for preclinical internships in communities and certain organizations. Already, three of the students have become doctors, one specialized in pediatrics. Next year, nine First Nations students are expected to graduate from medical school. A promotional video was created and is available on ibecomeadoctor.com.



Public health

The Committee of Experts on public health has completed its work. The results will be used to develop an action plan to support the public health service offer.

As for sexual health, reflection on sex education in schools was begun with the First Nations Education Council (FNEC). The Sexual Health Toolbox was created and distributed to instructors.

Elders' health and continuing care

Several activities were carried out as part of the Action Plan to Counter Elder Abuse and the Québec ami des aînés (QADA) project. These included two instructor training sessions on countering First Nations elder abuse, a detection-intervention training session and a workshop on elder wellness.

A portrait of palliative care was produced from the results gathered from First Nations communities and organizations. The report results will be used to support the development of a policy framework on continuing care.

The FNQLHSSC also conducted a feasibility study and developed a project organization handbook, in partnership with the *Ministère de la Santé et des Services sociaux*, with a view to accessing the *Réseaux de services intégrés pour les personnes âgées* (RSIPA). It is important to specify that this system includes the multi-client assessment tool.

The FNQLHSSC began developing terms of reference for the process to certify and issue lodging resource permits for adults in First Nations communities in Quebec. This work will continue in 2017–2018.

Population surveys

The FNQLHSSC continued its partnership with the First Nations Information Governance Centre (FNIGC), conducting population surveys, carrying out information governance activities and promoting OCAP[®] principles.

A new labour and employment survey was created, the first to document the job market, employment and employability in communities. The aim is to identify employment needs and obstacles, document economic disparities and skills development, and examine the relationship between the communities' economic indicators and employment results. The work will be carried out through 2021.

Concerning the Regional Early Childhood, Education and Employment Survey (REEES), a total of 17 booklets were developed on early childhood, education, employment, language and culture. As for the Regional Health Survey (RHS), the data collected from the 21 participating communities was analyzed and interpreted. The reports are being written and the results are expected to be available in 2018.

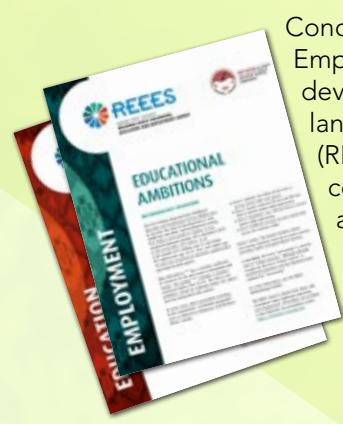
Information management

The FNQLHSSC continued providing support in the deployment of I-CLSC (integration of local community service centres). The normative framework (health component) is now complete and available to care providers. A total of 14 communities signed the confidentiality agreement and 22 communities subscribed to the online care methods (OCM) tool of the Centre d'expertise en santé de Sherbrooke (CESS).

Support for income-security workers continued to be provided through the PING system. The database now contains over 15,000 client records archived since 1999 and over 6,541 active records for 2016–2017. A call for tenders was recently launched for the creation of a new platform that will provide new functionalities and better performance, while protecting the data it contains.

The number of communities now offering diabetic retinopathy screening now totals 23. Seven educational video clips on retinopathy, a video on diabetic retinopathy screening and a guide on implementing telehealth services were developed. The FNQLHSSC also organized the very first conference for current and future care providers in diabetic retinopathy screening clinics. To ensure that screening services continue to be offered in the communities for many years, refresher training will be given annually so that clinic staff is up-to-date on the required knowledge and skills. The *Teleconsultation Room Design Guide* was also made public.

The immunizing product management module (Panorama) is now used in the Pikogan, Lac-Simon, Kahnawake, Wendake, Opitciwan, Mashteuiatsh, Listuguj, Gesgapegiag, Manawan, Wemotaci and Odanak communities. The deployment plan for the rest of the communities is still being developed.



Common surveillance plan of health status and its determinants among First Nations in Quebec

To improve the surveillance portal and its use, the FNQLHSSC focused on producing 16 new indicators, promoting the portal and preparing workshops on the use of statistical data. A survey was also conducted on the needs and satisfaction of portal users. The results will shape future improvements.

Research and assessments

A range of research and assessment work was undertaken or continued in 2016–2017.

- Research was conducted on the analysis of the Trajectories of First Nations Youth Subject to the *Youth Protection Act* (Component 3) and an explanatory document was produced. The complete reports for Components 1, 2 and 3 and a summary report are now available in French and English on the FNQLHSSC's website.
- Data was collected for the Food Services and Practices for Children Aged 0 to 5 research project, in collaboration with Extenso. The presentation of the results and creation of promotional posters is underway.
- A portrait of homelessness in First Nations communities in Quebec was developed. This project is part of the Quebec government's *Plan d'action interministériel en itinérance 2015–2020* and was carried out in collaboration with participating communities and organizations. An expert committee was created to support the process, made up of stakeholders with expertise in homelessness, poverty, mental illness and addiction.
- The evaluation of the health and social services governance process will continue in 2017–2018.
- The report on the evaluation of the mental health and addiction protocol development process is now available.
- The evaluation of the projects carried out under the agreement the FNQLHSSC signed with Avenir d'enfants will continue in 2017–2018.

TRAINING

The FNQLHSSC's service offer includes nearly 50 training sessions. These are mainly given by qualified FNQLHSSC personnel. Here is a list of the main courses offered in 2016–2017:⁷

Case management and interdisciplinarity training to help clients with loss of autonomy; Health Management Services Training—(Module 300 and Module 400), First Nations Health Managers Association—Health

Smoking cessation training

Training on the clinical examination of adults and elders

Foot care training

Kirano training

Diabetes refresher for healthcare professionals

Training on the creation environments conducive to healthy lifestyle habits

Workshop as part of the school nutrition program

Workshop on sexual health in schools

Training on the *Guide on the Procedures for Accessing Services in the Area of Health* (GPS)

Training on the use of the multi-client assessment tool

Elder well-being workshops

Training to raise awareness and develop prevention, detection and intervention measures to counter older adult mistreatment

Training on income security regulations as they apply to First Nations

Mieux communiquer pour mieux collaborer (better communication for better collaboration) training

Initiation to meeting facilitation

Community organization and action training

Training on socio-professional integration (SPI)

Training on the Wiggle Box (children 0–6 years)

Nursing toolkit training

Case management training

Parenting skills development and family follow-up training

Training on the Minipally prosocial skills program

Doula training

Demystifying Ages and Stages Questionnaires (ASQs)

Clinical training – Methadone and childhood illnesses

Personalized training for nurses working in mother and child health

Behaviour management training

Regional training for daycare centre food managers

Fetal Alcohol Spectrum Disorder (FASD) prevention training – Intervening with children

⁷ A detailed description of the training is available at <https://services.cssspnql.com/en/training>.

Training on motivational interviewing practices

Charlie 1, 2 and 5 training (to help develop intervention skills)

Sexual diversity training

Introduction to youth protection and parental rights workshop

Training on working with men in a family context

Suicide prevention training: Best practice in intervening with a suicidal person

Regional domestic violence prevention training

IACDS training (Intersectoral Action for Children's Development and Safety)

Clinical teleophthalmology training

Training for imagers on the use of new camera models

TOOLS AND PUBLICATIONS

The FNQLHSSC designs tools to support and facilitate the work of professionals and staff working with First Nations. The FNQLHSSC's *Catalogue of Publications* was designed to gather and promote, in one document, all the tools and publications the organization produces. Below are a few of the 31 new tools and publications:

- Regional Early Childhood, Education and Employment Survey (REEES) Report
- Video on screening for diabetic retinopathy remotely
- Brief submitted jointly by the AFNQL and FNQLHSSC—Bill 99: An Act to Amend the Youth Protection Act and Other Provisions – Culture: The Key to First Nations Wellness
- So Many Things We Can Do Together – parent-child activity booklets
- Brief – Poverty and Social Exclusion Among First Nations – Summary Portrait and Recommendations
- Quebec First Nations' Health and Social Services Governance Process: Descriptive of Phase II

You can consult all the FNQLHSSC's publications in its documentation centre at <https://centredoc.cssspnql.com/>



OUR WORK



174 community visits:

- Abenaquis 4%
- Algonquins 17,8%
- Atikamekw 13,2%
- Crees 0,6%
- Innus 35,1%
- Mi'gmaq 10,3%
- Mohawks 10,9%
- Naskapis 2,8%
- Inuit 0,6%
- Hurons-Wendat 5,2%

23 communities offering the diabetic retinopathy screening service



PING⁸ system implemented in **23** communities.
6,541 active files in 2016-2017

24 First Nations communities and organizations using I-CLSC⁹.



197  requests for support in using I-CLSC.

40 First Nations and Inuit students enrolled in the QFNIFMP¹⁰ since 2008.

106 requests for support in using the NIHB program.



IN NUMBERS...



18

booklets

3 themes:

Early

Childhood

Education

Employment

830 regulation interpretation
activities carried out regarding
income security and

135 biopsychosocial assessment
recommendations made.

31 new tools
and publications



25 communities presented a project in the framework of the agreement signed with *Avenir d'enfants*. The communities implement these project with the FNQLHSSC's support. **10,512** children, **10,669** parents and **1,570** care providers **were reached thanks to these projects.**

Main types of activities:

- 24%** direct interventions with children and their parents
- 13%** cultural activities
- 12%** training and skills development for parents or interveners
- 11%** information, awareness-raising and promotion
- 11%** support to mobilize partners

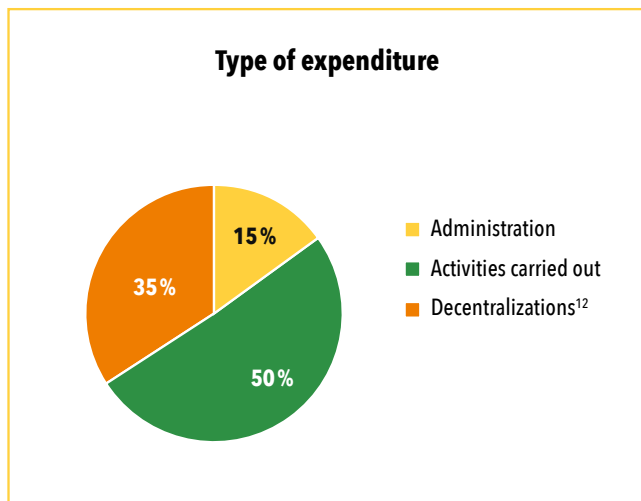
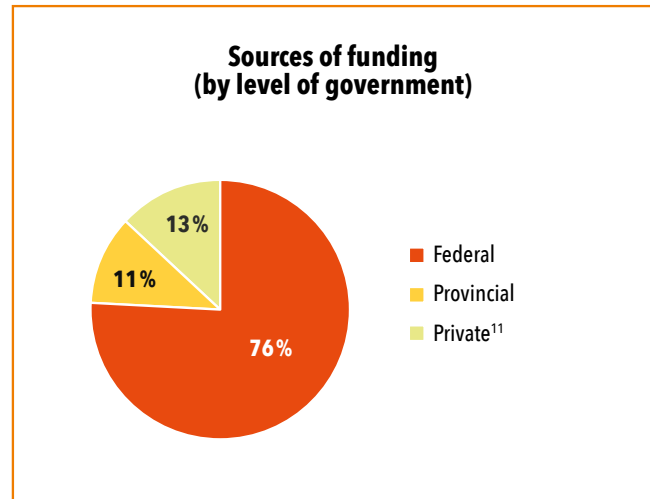
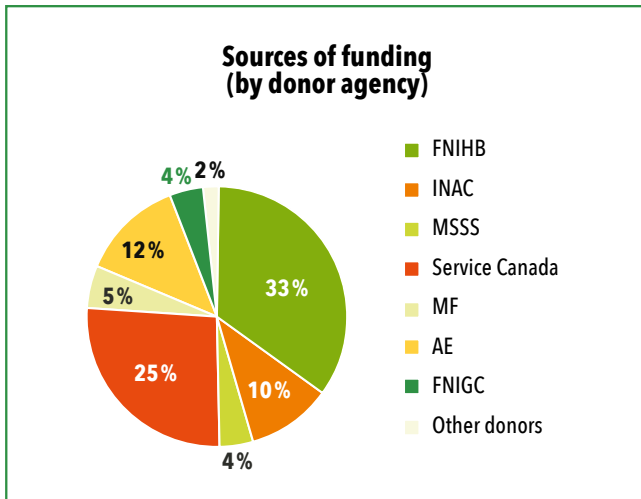
8 Information management system – Income security.

9 Information system – First Nations – enabling the management of clinical and administrative information from the Centres locaux de services communautaires (CLSCs) and some of the hospitals' outpatient clinics.

10 Quebec First Nations and Inuit Faculties of Medicine Program (QFNIFMP)

2016-2017 FINANCIAL REPORT

To successfully carry out its mandates, the FNQLHSSC receives funding from the following ministries and organizations: First Nations and Inuit Health Branch (FNIHB) of Health Canada; Indigenous and Northern Affairs Canada (INAC); *Ministère de la Santé et des Services sociaux* (MSSS); Employment and Social Development Canada (ESDC); *Ministère de la Famille* (MF); Avenir d'enfants (AE); First Nations Information Governance Centre (FNIGC); *Secrétariat aux affaires autochtones* (SAA); *Justice Québec*; and others.



The funding received is used to coordinate and support projects and activities resulting from the annual priorities and mandates, such as holding regional events, meetings and committees, creating tools and publications, launching promotional campaigns, providing training, producing strategic documents and maintaining the FNQLHSSC's basic operations.

35% of the funding received is redistributed to the communities and organizations.

¹¹ Avenir d'enfants, First Nations Information Governance Centre (FNIGC).

¹² Projects funded by Avenir d'enfants, First Nations and Inuit Child Care Initiative (FNICCI).

INDEPENDENT AUDITOR'S REPORT

To the members of the
First Nations of Quebec and Labrador
Health and Social Services Commission

We have audited the accompanying financial statements of First Nations of Quebec and Labrador Health and Social Services Commission, which comprise the balance sheet as at March 31, 2017, and the statements of income, changes in net asset and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for Not-for-Profit Organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.

MALENFANT DALLAIRE, S.E.N.C.R.L.

Société de comptables professionnels agréés

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Basis for the Qualified Opinion

As described in note 2, the First Nations of Quebec and Labrador Health and Social Services Commission presents the fixed assets and intangible assets acquisitions in the various programs as expense in order to facilitate the follow-up of the budgets on an annual basis and to comply with the obligations required within the scope of financial agreements with lessors. Moreover, the depreciation is directly deducted in the statement of changes in net asset and does not affect the income of the year. Respecting the same objective to facilitate the follow-up of budgets on an annual basis, the grant funding adjustments or reimbursements from previous years are considered in the net asset and not in the income of the year. The possible effects of these matters on the financial statements for the years ended March 31, 2017 and 2016 were not determined. Our audit opinion on the financial statements for the year ended March 31, 2016 was modified accordingly because of the possible effects of these situations.

Qualified Opinion

In our opinion, except for the possible effects of the matters described in the Basis for the Qualified Opinion paragraph, these financial statements present fairly, in all material respects, the financial position of First Nations of Quebec and Labrador Health and Social Services Commission as at March 31, 2017, and its financial performance and its cash flows for the year then ended in accordance with the Canadian accounting standards for Not-for-Profit Organizations.

Malenfant Dallaire, S.E.N.C.R.L.¹

Quebec (Quebec)
June 22, 2017

¹ CPA auditor, CA, public accounting permit No. A119553



INCOME FOR THE YEAR ENDED MARCH 31, 2017

			2017	2016
	Revenues	Expenses	Surplus (deficit) for the year	Surplus (deficit) for the year
Core Funding	\$2,450,438	\$2,435,446	\$14,992	\$ -
NNADAP	191,818	191,818	-	-
Aboriginal Diabetes Initiative	113,039	113,039	-	-
HIV/AIDS Strategy	93,980	93,980	-	-
E-Health	357,460	357,460	-	-
Summit on Addictions	-	-	-	(12,352)
Regional Health Survey (RHS)	455,209	455,209	-	-
Research Coordination	108,615	108,615	-	-
Surveillance Plan	121,724	121,724	-	-
Suicide among First Nations and Communities in crisis	138,151	138,151	-	-
First-Line Services	500,000	500,000	-	(63,547)
First-Line Engagement Process	96,160	96,160	-	-
First-line services I-CLSC	292,338	329,900	(37,562)	(89,477)
Non-Insured Health Benefits (NIHB)	182,279	182,279	-	-
Joint Review on NIHB	53,007	53,007	-	-
Maternal Child Health (MCH)	230,326	230,326	-	(1,155)
Canadian Prenatal Nutrition Program (CPNP)	83,403	83,403	-	-
Balance carried forward	\$5,467,947	\$5,490,517	(\$22,570)	(\$166,531)

The accompanying notes are an integral part of the financial statements

INCOME (CONTINUED) FOR THE YEAR ENDED MARCH 31, 2017

			2017	2016
	Revenues	Expenses	Surplus (deficit) for the year	Surplus (deficit) for the year
Balance brought forward	\$5,467,947	\$5,490,517	(\$22,570)	(\$166,531)
Mental Health - HSIF	82,252	82,252	-	-
Governance - HSIF	413,325	413,325	-	-
Continuing care project - HSIF	80,144	80,144	-	-
Infostructure	363,092	363,092	-	-
First Nations and Inuit Child Care Initiative (FNICCI)	3,576,083	3,576,083	-	-
Maltreatment of Elders	100,000	92,243	7,757	-
Social Development Office	366,000	413,426	(47,426)	(27,918)
First Nations Head Start Program (FNHSP)	195,549	195,549	-	-
Meeting on Violence among Men	26,005	31,026	(5,021)	-
Home and Community Care	225,148	225,148	-	-
Annual Meeting of the Residential Care Centers for Senior Citizens	24,200	22,932	1,268	10,507
Income security capacity development	130,900	177,534	(46,634)	8,167
First Nations Child and Family Services Regional Round Table	30,000	30,000	-	-
Meeting on Accreditation	24,910	24,910	-	-
Québec ami des aînés (QADA)	45,012	34,505	10,507	-
Balance carried forward	\$11,150,567	\$11,252,686	(\$102,119)	(\$175,775)

The accompanying notes are an integral part of the financial statements

INCOME (CONTINUED) FOR THE YEAR ENDED MARCH 31, 2017

			2017	2016
	Revenues	Expenses	Surplus (deficit) for the year	Surplus (deficit) for the year
Balance brought forward	\$11,150,567	\$11,252,686	(\$102,119)	(\$175,775)
Faculties of Medicine	128,282	128,282	-	-
Health Directors Meeting	247,025	247,025	-	-
Sports and Leisure	174,132	174,132	-	-
Québec en forme	1,381	1,381	-	-
Early childhood Services training evaluation Project (FCP)	-	-	-	224,491
Avenir d'enfants	1,628,521	1,628,521	-	-
Social Economy Project	77,796	77,796	-	-
Transfer of expertise from FQOCF and RVP	10,969	10,969	-	-
Tobacco control project	174,307	174,307	-	-
Tobacco control project - MSSS	5,191	5,191	-	-
First Nations Social Economy Regional Table	250,000	250,000	-	-
Adaptation of the OPHQ's Guide	7,302	7,302	-	-
MFA Agreement	494,669	494,669	-	-
Justice project	52,450	52,450	-	-
Research project on homelessness in First Nations communities	34,226	34,226	-	-
Nursing practice	17,205	17,205	-	-
Balance carried forward	\$14,454,023	\$14,556,142	(\$102,119)	\$48,716

The accompanying notes are an integral part of the financial statements

INCOME (CONTINUED) FOR THE YEAR ENDED MARCH 31, 2017

			2017	2016
	Revenues	Expenses	Surplus (deficit) for the year	Surplus (deficit) for the year
Balance brought forward	\$14,454,023	\$14,556,142	(\$102,119)	\$48,716
Home care nurses training	158,842	158,842	-	-
Training on protecting personal information	115,342	115,342	-	-
Mental health prevention and promotion	81,092	81,092	-	-
First Nations Labour and Employment Development (FNLED) Survey	81,816	81,816	-	-
Jordan's Principle	10,000	10,000	-	-
ELCC meeting	30,000	30,000	-	-
Family violence project	1,100	1,100	-	-
	\$14,932,215	\$15,034,334	(\$102,119)	\$48,716

The accompanying notes are an integral part of the financial statements

CHANGES IN NET ASSET FOR THE YEAR ENDED MARCH 31, 2017

	2017	2016
INVESTED IN FIXED ASSETS AND INTANGIBLE ASSETS		
Balance, beginning of year	\$494,392	\$407,640
Acquisition within the revenues	243,274	224,414
	737,666	632,054
Depreciation	197,211	137,662
Balance, end of year	\$540,455	\$494,392
INVESTED IN PROGRAMS (note 9 and 13)		
Balance, beginning of year		
Balance previously reported	\$991,326	\$952,583
Adjustments to prior years net asset		
Accounts receivable write-off	-	(33,165)
Grant funding reimbursement	(33,909)	(4,404)
Accounts payable write-off	23,081	27,596
Adjusted balance	980,498	942,610
Surplus (deficit) for the year	(102,119)	48,716
Balance, end of year	\$878,379	\$991,326

The accompanying notes are an integral part of the financial statements

BALANCE SHEET AS AT MARCH 31, 2017

	2017	2016
ASSETS		
Current assets		
Cash	\$1,981,146	\$1,538,753
Redeemable term deposits, 0.75% to 1.35% (0.85% to 1.30% in 2016)	2,616,958	2,590,126
Accounts receivable (note 3)	214,781	180,790
Grants receivable (note 4)	1,020,298	1,263,802
Prepaid expenses	26,173	23,701
	5,859,356	5,597,172
Fixed assets (note 5)	415,998	455,410
Intangible assets (note 6)	124,457	38,982
	\$6,399,811	\$6,091,564

The accompanying notes are an integral part of the financial statements

BALANCE SHEET AS AT MARCH 31, 2017

	2017	2016
LIABILITIES		
Current liabilities		
Accounts payable (note 7)	\$2,290,480	\$2,860,548
Deferred grants funding (note 8)	2,690,497	1,745,298
	4,980,977	4,605,846
NET ASSET (note 13)		
Invested in fixed assets and intangible assets	540,455	494,392
Invested in programs (note 9)		
Unrestricted	761,004	750,136
Ongoing programs	117,375	241,190
	878,379	991,326
	1,418,834	1,485,718
	\$6,399,811	\$6,091,564

On behalf of the Commission

The accompanying notes are an integral part of the financial statements

CASH FLOWS FOR THE YEAR ENDED MARCH 31, 2017

	2017	2016
Cash flows from operating activities		
Surplus (deficit) for the year	(\$102,119)	\$48,716
Item related to net asset		
Grant funding reimbursement	(33,909)	(4,404)
	(136,028)	44,312
Net change in non-cash working capital items		
Accounts receivable	(33,991)	(13,273)
Grants receivable	243,504	935,406
Prepaid expenses	(2,472)	(4,561)
Accounts payable	(546,987)	47,426
Deferred grants funding	945,199	(174,031)
	469,225	835,279
Net increase in cash and cash equivalents	469,225	835,279
Cash and cash equivalents, beginning of year	4,128,879	3,293,600
Cash and cash equivalents, end of year (note 10)	\$4,598,104	\$4,128,879

The accompanying notes are an integral part of the financial statements

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

1. STATUTES AND NATURE OF OPERATIONS

The mandate of the First Nations of Quebec and Labrador Health and Social Services Commission was ratified by the Assembly of the First Nations of Quebec and Labrador by a resolution on April 14, 1994.

The Commission's mission is to promote and ensure the physical, mental, emotional and spiritual well-being of the First Nations individuals, families and communities to foster access to comprehensive health and social services programs that are adapted to the First Nations and designed and recognized and sanctioned by the local authorities while respecting cultures and local autonomy.

2. SIGNIFICANT ACCOUNTING POLICIES

The financial statements were prepared in accordance with Canadian accounting standards for Not-for-Profit Organizations (ASNFPO) and include the following significant accounting policies:

Use of estimates

The preparation of financial statements in accordance with ASNFPO requires management to make estimates and assumptions that affect the reported amount of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reported period. These estimates are reviewed periodically and adjustments will be made to income as appropriate in the year they become known.

Financial instruments

Measurement of financial instruments

The organization initially measures its financial assets and financial liabilities at fair value, except for certain non-arm's length transactions.

The organization subsequently measures all its financial assets and financial liabilities at amortized cost, except for investments in equity instruments that are quoted in active market, which are measured at fair value. Changes in fair value are recognized in net income.

Financial assets measured at amortized cost include cash, term deposits, accounts receivable and grants receivable.

Financial liabilities measured at amortized cost include accounts payable.

The accompanying notes are an integral part of the financial statements

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

Financial instruments (continued)

Impairment

Financial assets measured at cost are tested for impairment when there are indicators of impairment. The amount of the write-down is recognized in net income. The previously recognized impairment loss may be reversed to the extent of the improvement, directly or by adjusting the allowance account, provided it is not greater than the amount that would have been reported at the date of the reversal had the impairment not been recognized previously. The amount of the reversal is recognized in net income.

Transaction costs

The organization recognizes its transaction costs in net income in the year incurred. However, the carrying amount of the financial instruments that will not be subsequently measured at fair value is reflected in the transaction costs that are directly attributable to their origination, issuance or assumption.

Revenues recognition

The Commission follows the deferral method of accounting for its contributions. Restricted contributions and other revenues are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Cash and cash equivalents

The organization's policy is to disclose bank balances under cash and cash equivalents, including bank overdrafts with balances that fluctuate frequently from being positive to overdrawn and temporary investments with a maturity period of three (3) months or less from the date of acquisition.

Fixed assets and intangible assets

Fixed assets are stated at cost. Depreciation is calculated on the declining balance method at the following annual rates:

Leasehold improvements	20%
Office equipment	20%
Computer equipment	30%

Intangible assets are stated at cost. Depreciation on software is calculated on the declining balance method at an annual rate of 30%.

The Commission has adopted the policy of recording the fixed assets and intangible assets as expense at the time of the acquisition to allow the follow-up of the budgets on an annual basis. Depreciation is directly deducted in the statement of changes in net asset and does not affect the income of the year.

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

Impairment of long-lived assets

Long-lived assets are tested for impairment whenever events or changes in circumstances indicate that their carrying amount may not be recoverable. An impairment loss is recognized when the carrying amount of the asset exceeds the sum of the undiscounted cash flows resulting from its use and eventual disposition. The impairment loss is measured as the amount by which the carrying amount of the long-lived asset exceeds its fair value.

Pension plan

The defined contributions accounting standards are applied to this multiemployer Benefit Plan as the organization doesn't have enough information to apply the defined benefits accounting standards.

3. ACCOUNTS RECEIVABLE

	2017	2016
Accrued interests	\$16,399	\$16,199
Sales taxes	191,414	158,184
Others	6,968	6,407
	\$214,781	\$180,790

4. GRANTS RECEIVABLE

	2017	2016
Indigenous and Northern Affairs Canada (INAC)	\$165,063	\$169,386
Assembly of First Nations (AFN)	130,000	-
Avenir d'enfants	-	242,796
The First Nations Information Governance Centre (FNIGC)	160,000	95,584
Employment and Social Development Canada (ESDC)	500	500
Ktunaxa Nation Council Society	24,000	-
Ministère de l'Économie, de la Science et de l'Innovation	25,000	50,000
Ministère de l'Éducation et de l'Enseignement supérieur	50,000	50,000
Ministère de la Famille	53,236	65,741
Ministère de la Santé et des Services sociaux	205,484	430,743
Secrétariat des affaires autochtones (SAA)	139,326	-
Université Laval	-	97,330
Others	67,689	61,722
	\$1,020,298	\$1,263,802

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

5. FIXED ASSETS

			2017	2016
	Cost	Accumulated depreciation	Net book value	Net book value
Leasehold improvements	\$97,221	\$63,403	\$33,818	\$33,326
Office equipment	338,194	268,273	69,921	81,057
Computer equipment	962,469	650,210	312,259	341,027
	\$1,397,884	\$981,886	\$415,998	\$455,410

6. INTANGIBLE ASSETS

			2017	2016
	Cost	Accumulated depreciation	Net book value	Net book value
Software	\$382,333	\$257,876	\$124,457	\$38,982

7. ACCOUNTS PAYABLE

	2017	2016
Accounts payable and accrued expenses	\$715,158	\$883,294
Decentralization to the communities	885,781	1,259,088
Salaries and vacation	632,367	594,154
Social benefits	57,174	124,012
	\$2,290,480	\$2,860,548

8. DEFERRED GRANTS FUNDING

	2017	2016
Health Canada Global Agreement	\$565,505	\$511,303
Regional Health Survey (RHS)	64,098	342,944
Research coordination	23,385	-
First-Line Engagement Process	103,840	-
Joint Review on NIHB	46,993	-
Balance carried forward	\$803,821	\$854,247

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

8. DEFERRED GRANTS FUNDING (continued)

	2017	2016
Balance brought forward	\$803,821	\$854,247
Governance - HSIF	-	229,756
Continuing care project - HSIF	29,526	-
First Nations and Inuit Child Care Initiative (FNICCI)	978,677	-
Meeting on Violence among Men	-	26,005
Québec ami des aînés (QADA)	-	12,067
Sports and Leisure	88,883	35,613
Québec en forme	7,699	9,080
Avenir d'enfants	35,509	-
Social Economy Project	-	44,890
Transfer of expertise from FQOCF and RVP	95,077	56,046
Tobacco control project	-	28,664
Tobacco control project - MSSS	194,809	-
First Nations Social Economy Regional Table	-	100,000
Adaptation of the OPHQ's Guide	-	7,302
MFA Agreement	50,752	62,550
Justice project	67,442	40,892
Research project on homelessness in First Nations communities	-	34,226
Home care nurses training	266,118	203,960
First Nations Labour and Employment Development (FNLED) Survey	72,184	-
	\$2,690,497	\$1,745,298

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

9. NET ASSET INVESTED IN PROGRAMS

	Net asset (deficit), beginning of year	Surplus (deficit) for the year	Adjustments to previous years and transfer to net asset of ended or existing programs	Net asset (deficit), end of year
Core Funding	\$370,439	\$14,992	\$ -	\$385,431
E-Health	236	-	(236)	-
First-line services I-CLSC	68,964	(37,562)	29,081	60,483
Non-Insured Health Benefits (NIHB)	2,145	-	(2,145)	-
Aboriginal Health Human Resources Initiative (AHHRI)	2,761	-	(2,761)	-
Governance - HSIF	849	-	-	849
Maltreatment of Elders	(2,123)	7,757	2,123	7,757
Social Development Office	64,407	(47,426)	-	16,981
Meeting on Violence among Men	5,124	(5,021)	-	103
Home and Community Care	13,260	-	(13,260)	-
Annual Meeting of the Residential Care Centers for Senior Citizens	10,507	1,268	(10,507)	1,268
Income security capacity development	59,699	(46,634)	-	13,065
First Nations Child and Family Services Regional Round Table Table	2,518	-	-	2,518
Meeting on Accreditation	8,634	-	(8,634)	-
Québec ami des aînés (QADA)	4,185	10,507	-	14,692
Sports and Leisure	(341)	-	-	(341)
Panorama	365	-	(365)	-
Net asset of ended programs	379,697	-	(4,124)	375,573
	\$991,326	(\$102,119)	(\$10,828)	\$878,379

The surplus (deficit) for certain programs has been transferred to the surplus of ended programs. Also, the unrestricted net asset of existing programs consists of surplus which come from unfinished programs, but will not be reinvested in the same project.

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

10. CASH FLOWS

	2017	2016
Cash and cash equivalents		
Cash	\$1,981,146	\$1,538,753
Term deposits	2,616,958	2,590,126
	\$4,598,104	\$4,128,879

11. PENSION PLAN

The employees of the organization participate in the Native Benefits Plan (NBP). The NBP is a defined benefits plan and is intended for all employees of the First Nations of Canada. The employer contributes 1.82 times of the employee contribution in the pension fund. The contribution for native employees are 8.5% of their salaries and non-native employees are 4.6% or 6.8% of their salaries.

12. FINANCIAL INSTRUMENTS

Risk and concentrations

The organization is exposed to various risks through its financial instruments, without being exposed to concentrations of risk. The following analysis provides a measure of the organization's risk exposure at the balance sheet date, being March 31, 2017:

Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The organization is exposed to this risk mainly in respect of its accounts payable.

Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The organization's main credit risks relate to its accounts receivable and grants receivable.

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risk : currency risk, interest rate risk and other price risk. The organization is mainly exposed to interest rate risk.

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017

12. FINANCIAL INSTRUMENTS (continued)

Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The organization is exposed to interest rate risk on its fixed interest rate financial instruments. Fixed-interest instruments subject the organization to a fair value risk.

13. CONTINGENCIES

Within the framework of some specific contributions' agreements, the organization may have to refund the contributions' surplus not used. As at March 31, 2017, the amount of the contributions' surplus which can be subject to a refunding is estimated at \$22,800.

14. CONTRACTUAL OBLIGATIONS

In accordance with long-term capital lease ending in April 2022, the organization rents offices for which the minimum lease payments until the end of the lease amount to \$1,065,200. The amounts required to be paid over the next five (5) years are approximately as follows:

\$209,500	in 2018
209,600	in 2019
209,600	in 2020
209,600	in 2021
209,600	in 2022

Moreover, in accordance with long-term capital lease ending in February 2020, the organization rents two photocopiers for which the minimum lease payments until the end of the lease amount to \$41,600. The amounts required to be paid over the next three (3) years are approximately as follows:

\$15,100	in 2018
15,100	in 2019
11,400	in 2020

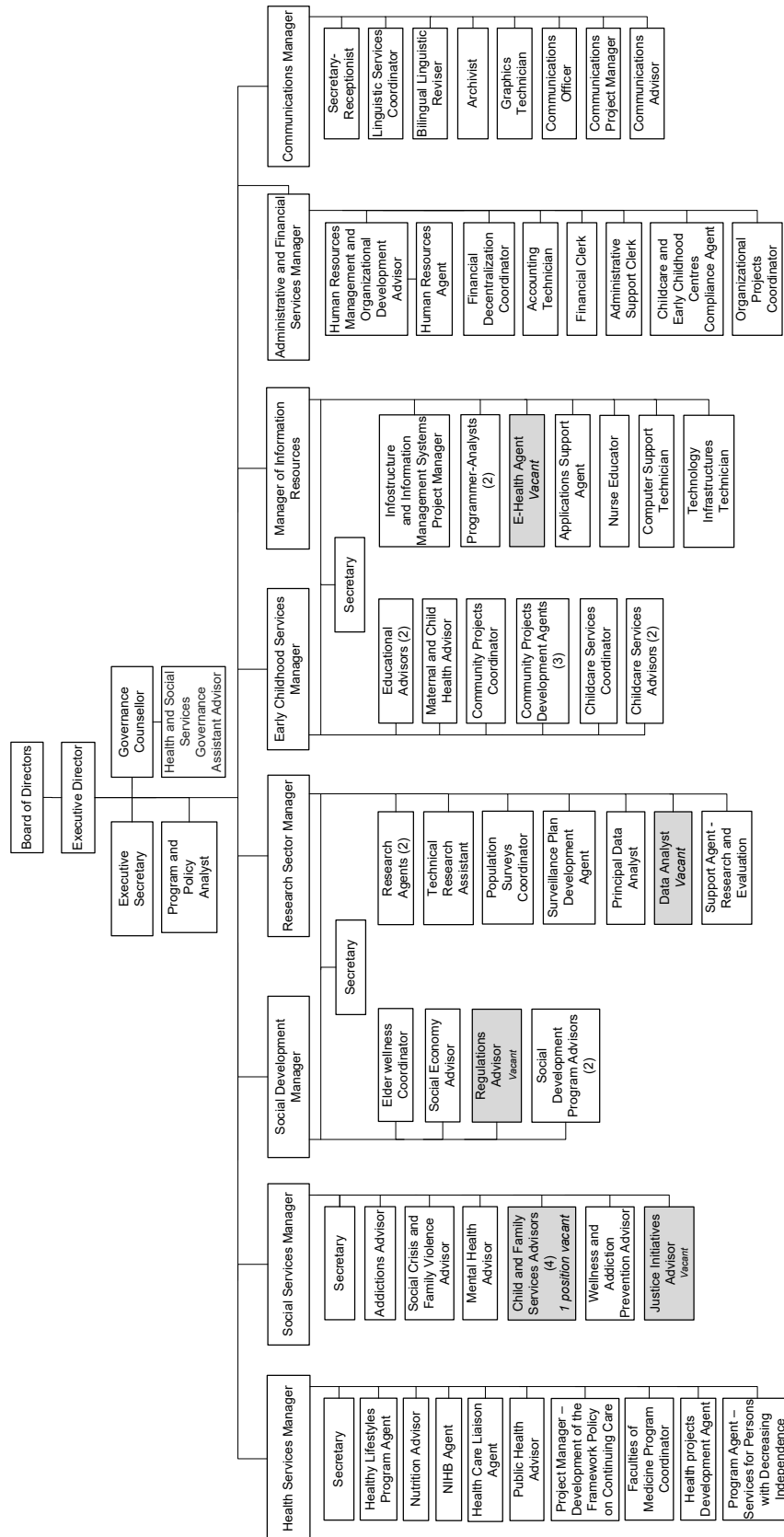
15. ECONOMIC DEPENDENCE

The First Nations of Quebec and Labrador Health and Social Services Commission receives the major part of its funding from federal governmental grants. The financial agreements are renewed yearly. In the event of the non-renewal of these agreements, the Commission's operations would be compromised.

APPENDIX 1 – FNQLHSSC ORGANIZATIONAL CHART

Update:
July 10, 2017

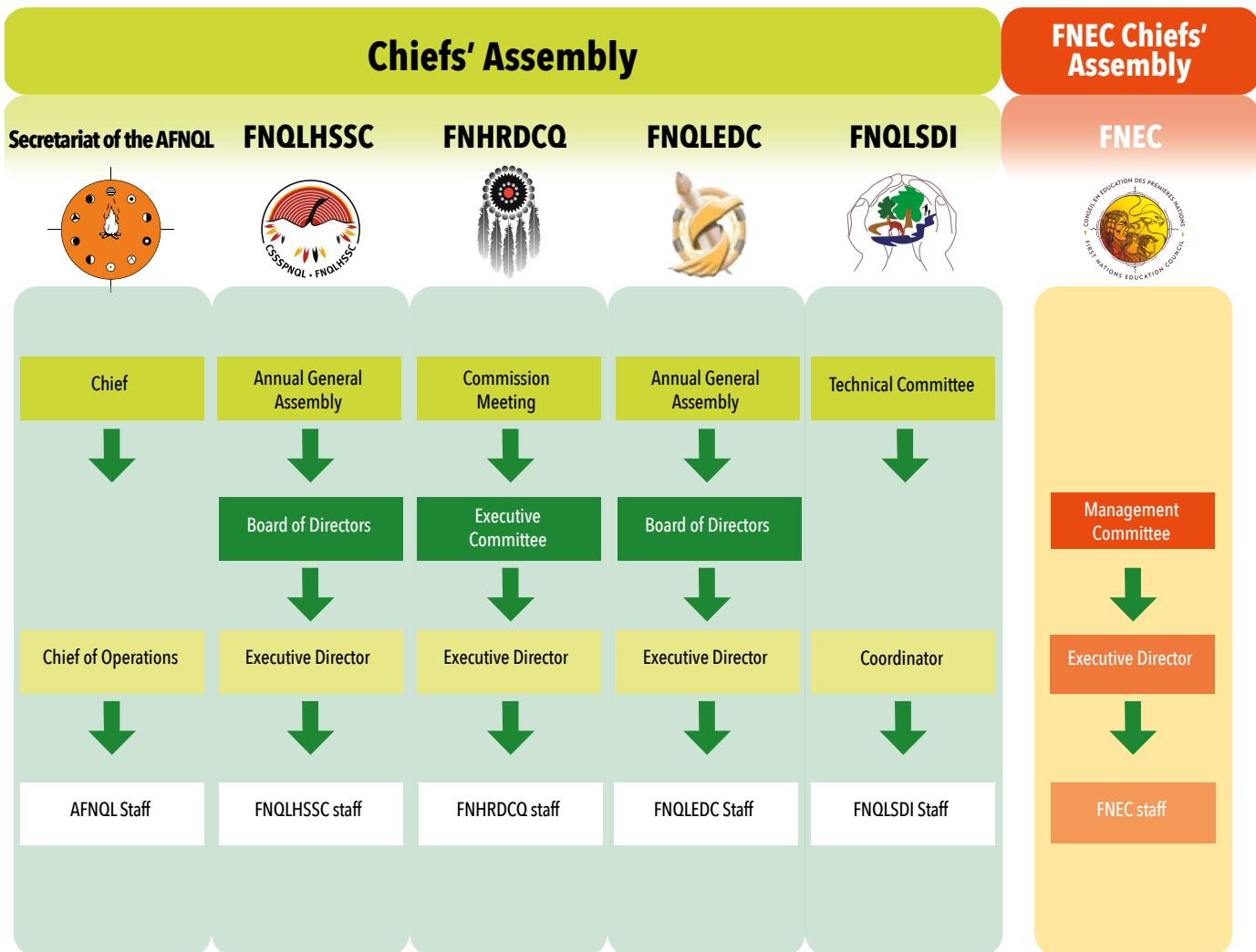
FNQLHSSC Flowchart



APPENDIX 2 – LINES OF AUTHORITY BETWEEN THE CHIEFS’ ASSEMBLY AND THE REGIONAL COMMISSIONS AND ORGANIZATIONS (RCOS)

Assembly of First Nations Quebec - Labrador

Table illustrating the links between the Assembly of Chiefs and regional institutions of the AFNQL









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