



**QUEBEC FIRST NATIONS'
HEALTH AND SOCIAL SERVICES
GOVERNANCE PROCESS**

SUMMARY
REPORT
REGIONAL
MEETING

DECEMBER 2021



REPORT PRODUCED BY



**FIRST NATIONS OF QUEBEC
AND LABRADOR HEALTH
AND SOCIAL SERVICES
COMMISSION**

**QUEBEC FIRST NATIONS
HEALTH AND SOCIAL SERVICES
GOVERNANCE PROCESS**

SUMMARY REPORT
REGIONAL MEETING
DECEMBER 15, 2021

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This document is also available in French and can be downloaded from the governance process website at gouvernance.cssspnql.com/en/.

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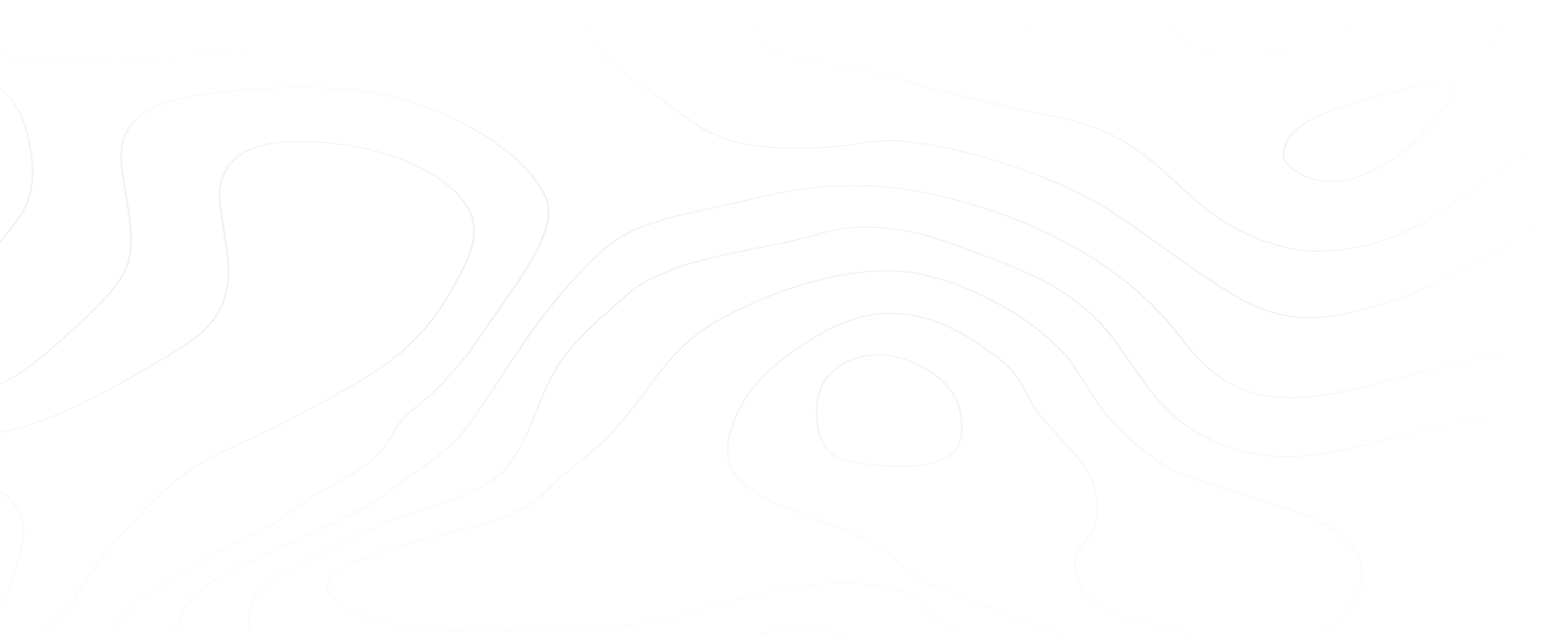
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EKUANITSHIT

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ASSEMBLY OF FIRST NATIONS QUEBEC-LABRADOR

REGROUPEMENT DES CENTRES D'AMITIÉ AUTOCHTONES DU QUÉBEC

TREATMENT CENTRES: MAWIOMI, WALGWAN, WANAKI, AND WAPAN

FIRST NATIONS EDUCATION COUNCIL

FIRST NATIONS OF QUEBEC AND LABRADOR SUSTAINABLE DEVELOPMENT INSTITUTE

CONSEIL DE LA NATION ATIKAMEKW

REGROUPEMENT MAMIT INNUAT

HIGHLIGHTS OF THE MEETING

- This regional meeting had three objectives:
 - 1 To continue the co-development work on the new health and wellness governance model;
 - 2 To present the evolution of the work and an update of the environmental elements that influence the governance process;
 - 3 To improve the work on the future regional body's service offer and to guide future work.
- The **57 guidelines** developed based on the co-development work with First Nations communities and organizations were reviewed. These guidelines inspired the creation of the new health and wellness governance model.
- The results obtained during the workshop indicate that the suggested services are all important or very important for First Nations communities and organizations offering direct services to the population. The importance of the services as determined by the participants, in decreasing order, is as follows:
 - 1 Quality improvement service for professional and organizational activities
 - 2 Information service
 - 3 Advisory service
 - 4 Skills development and training service
 - 5 Health and wellness planning service
 - 6 Community strategy development service
 - 7 Liaison service
 - 8 Community engagement service
 - 9 Implementation service
- There are still some concerns about the postures used by the regional health and wellness body, which may be reminiscent of those of government authorities. The local context of each First Nation community and organization as well as capacity-building must guide the service offer.

1 WELCOMING REMARKS AND OPENING PRAYER

Jane Gray, facilitator of this virtual meeting, welcomed everyone and called on Deborah Delisle, a Kahnawake Elder, for the opening prayer.

Ms. Delisle spoke in the Mohawk language. Her prayer expressed gratitude to all the elements of nature that surround us and to which we are all connected. She wished all the participants a good meeting..

Ms. Gray highlighted the participation of the communities and organizations in attendance and noted that there was good representation. She presented the agenda (Appendix A) as well as the objectives of the meeting and explained that, as in previous meetings, the focus was on co-development of the work surrounding the health and social services governance process.

OBJECTIVES OF THE MEETING:

- 1 To continue the co-development work on the new health and wellness governance model.
- 2 To present the evolution of the work and an update of the environmental elements that influence the governance process.
- 3 To improve the work on the future regional body's service offer and to guide future work.

2 OPENING ADDRESS

DEREK MONTOUR,

President of the Board of Directors of the First Nations of Quebec and Labrador Health and Social Services Commission (FNQLHSSC) and Health Director for the community of Kahnawake

Mr. Montour thanked Ms. Gray and Ms. Delisle for their words. He also thanked the participants for attending at this busy time of the year and in the context of a pandemic.

He began by welcoming the recent adoption of the first community legislation under *An Act respecting First Nations, Inuit and Métis children, youth and families* by the community of Opitciwan. This is a major step forward in the affirmation of our rights and a demonstration of the constant evolution and the many steps taken toward our self-determination. He hopes that this example will be a source of inspiration for our collective mobilization and our commitment to continuing the work on the health and social services governance process.

Mr. Montour recalled that the work started in 2014 is aimed at developing our own governance model to enable the repatriation of the health and social services responsibilities intended for us. He presented a brief history of the progress made to arrive at the design of a concrete governance model. In particular, he demonstrated that the last few years have made it possible to determine the roles and responsibilities of a new regional body, as well as its composition and operation.

Mr. Montour added that everyone has their own path. We speak various languages and use colonizing languages. This new model allows us to reflect our respective values and languages while positioning ourselves as distinct peoples. He once again thanked everyone for attending and wished everyone a good meeting.

PRESENTATION 1: CONTEXTUALIZING AND UPDATING THE GOVERNANCE PROCESS

MARJOLAINE SIOUÏ,
Executive Director, FNQLHSSC

Goal of the process

Work together to develop a new model of governance whose structure and functioning impart real decision-making powers to First Nations, as well as autonomy and the freedom to act needed to improve their health status and their local and collective wellness.

WHY A GOVERNANCE PROCESS AND ORIGINS OF THE INITIATIVE

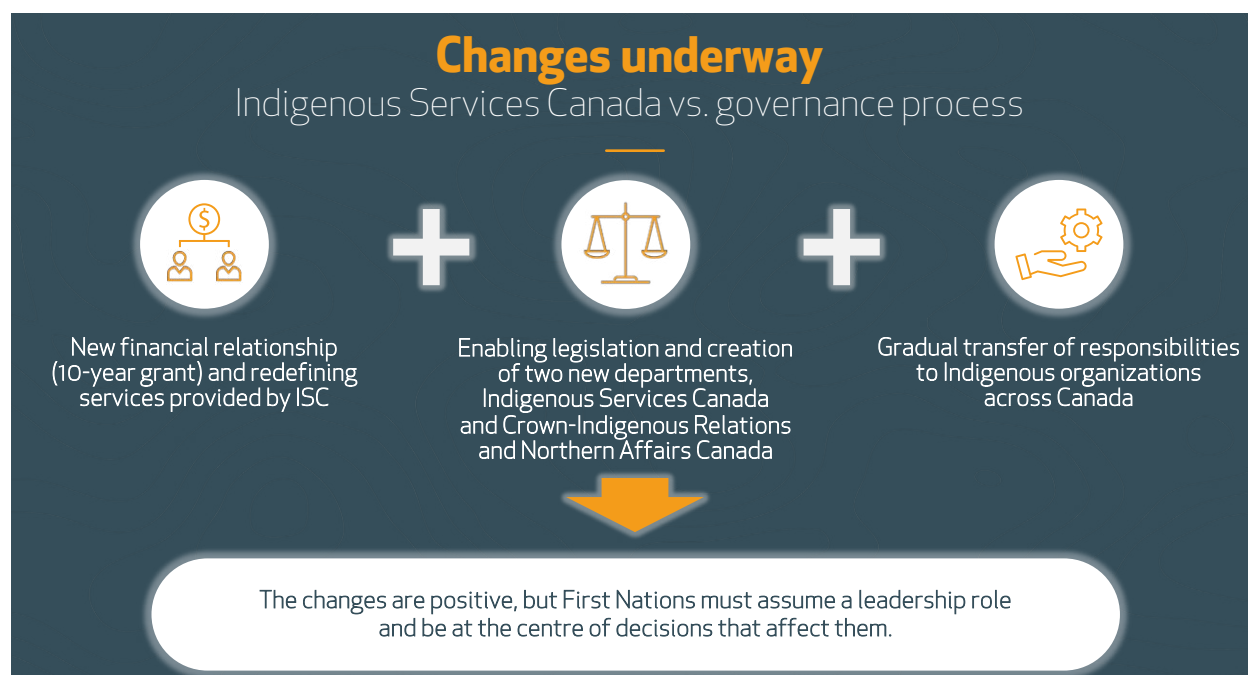
Ms. Sioui reviewed the history of the governance process and recalled that, from the outset, the realization that the current model was not working helped start the work to define the desired service offer, in complete autonomy. The governance process is also in line with the Truth and Reconciliation Commission of Canada, which supports the full autonomy of First Nations. In 2014, the Chiefs of the Assembly of First Nations Quebec-Labrador (AFNQL) voted for a motion to reflect and define a vision. The FNQLHSSC was mandated to coordinate the work.

LAST YEAR IN REVIEW

Ms. Sioui recalled that the initiative started as a project that later turned into a process, with two essential elements at the forefront: health and wellness. With the pandemic that has been going on for almost two years, there is a sense of urgency. It was thus agreed that decision-making on certain issues could begin immediately, even prior to the establishment of the new regional body. In connection with her remarks, Ms. Sioui mentioned the establishment in 2018 of the Working Group on the Decision-Making Process: reciprocal and joint planning cycle. This is an example of a concrete impact resulting from the governance process, which has notably allowed for the distribution of federal funds according to a formula agreed upon by all. In addition, the support offered by the FNQLHSSC promotes fairer access to these funds for all parties concerned.

The tour of the communities, which was supposed to be done in person, was nevertheless carried out virtually. Six communities were visited and received clarifications on the governance process. This tour, which is still ongoing, allows the FNQLHSSC governance team to verify whether the work carried out to date meets local needs. The response has been very favourable thus far, and the commitment of the First Nations communities and organizations is a good demonstration of this. Moreover, several meetings have been held with various organizations to discuss the roles and responsibilities they could assume as part of the new regional body. It is essential that the continuum of services be ensured with these organizations.

Meetings with government partners also continued in 2021. Following the signing of the tripartite memorandum of understanding, work is still underway to implement it. With respect to the new financial relationship, Indigenous Services Canada (ISC) is continuing to work on getting more communities to sign on to the 10-year grant, as well as the enabling legislation to repatriate responsibilities to First Nations, Inuit, and the Métis Nation. A report will be released shortly.



ENVIRONMENTAL UPDATE

Several mobilization and legislative reforms, both at the federal and provincial levels, have taken place over the past year and more are to come. These changes in the environment of the governance process have to be taken into consideration because they have an impact on the service offer within the communities and collectively. The coming into force of the *Loi de la protection sociale atikamekw d'Opitciwan* [Atikamekw of Opitciwan Social Protection Act], for example, required the establishment of a new range of services. The same is true for income assistance reform, the implementation of the Indigenous Early Learning and Child Care strategy, and others. New investments will be required to ensure the establishment of new services.



A national mobilization for the recognition of Indigenous rights is taking place. In Quebec, the Chiefs have called for the *United Nations Declaration on the Rights of Indigenous Peoples Act* to be implemented. An *Act respecting First Nations, Inuit and Métis children, youth and families* is also very important because it has had a significant impact on local governance and the health and wellness governance process.

Finally, several other elements have had an impact on current work, such as the establishment of a political table between the AFNQL and the Government of Quebec since March 2021, which has allowed for common issues to be discussed. A health and social services technical committee has also been created to find lasting solutions.

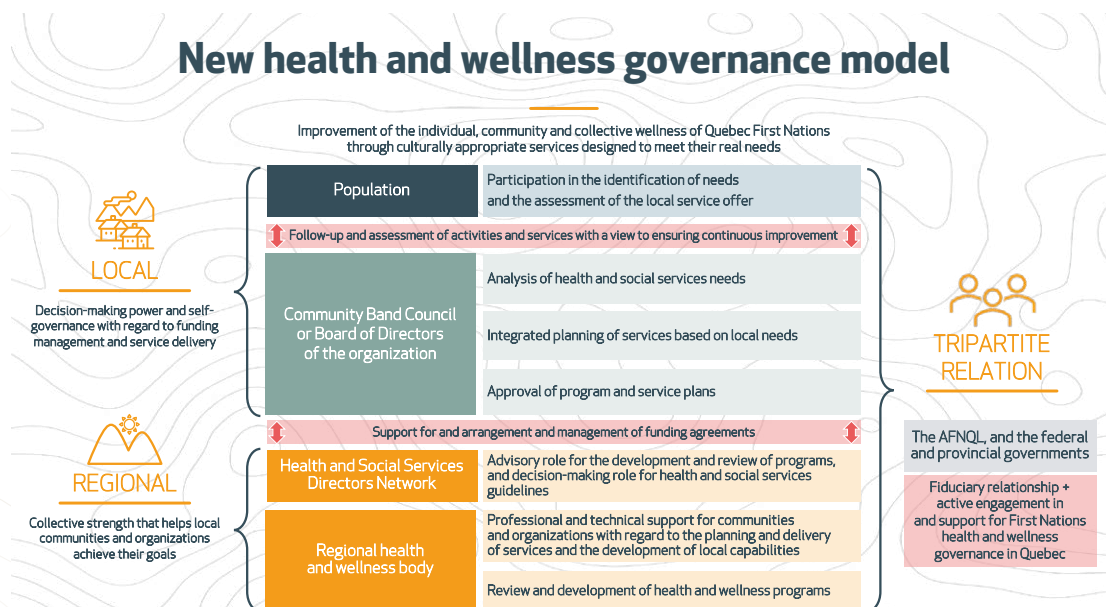
The co-development of federal health legislation and the progressive transfer of responsibilities from ISC to Indigenous organizations, will also affect all First Nations, Inuit, and Métis in the years to come.

NEW GOVERNANCE MODEL

NATACHA HERVIEUX,

Health and Social Services Governance Process Project Manager, FNQLHSSC

Ms. Hervieux explained that in the second phase of the process, three regional meetings were held and led to the adoption of 57 guidelines for the development of the new model: 15 for the Health and Social Services Directors Network, 14 for health and social services planning, 17 for support, and 11 for decision-making and accountability.

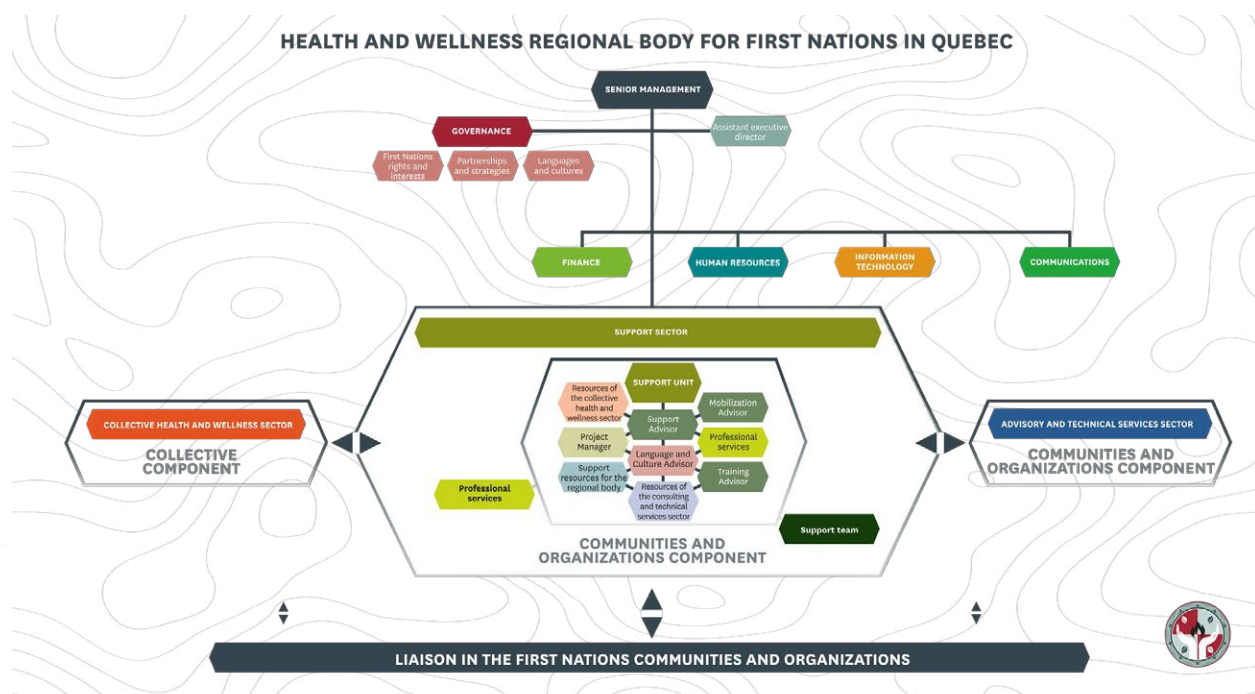


The desired changes were integrated and a new health and wellness governance model was developed. Among the changes made, the new model reflects a more holistic posture rather than a top-down approach and the communities are at the heart of the model. Improving individual, community, and collective well-being remains the ultimate goal.

With this new model, the community is responsible for providing services and being accountable to its population. At the regional level, coaching would be a central lever for capacity building and the achievement of local objectives. The tripartite relationship is supported by the establishment of a tripartite agreement. Once the new governance model is implemented, the fiduciary relationship between First Nations and the federal government as well as the provincial government's service delivery responsibilities will continue.

Ms. Hervieux presented the proposed organization chart of the Quebec First Nations regional health and wellness body. It provides a schematic of the major sectors, their functions, and the relationships between them. In addition to the management team, the regional body will include a liaison mechanism in the First Nations communities and organizations and three main sectors: health and collective wellness, support, and advisory and technical services.

This is the same schematic presented at the October 2020 regional meeting. Ms. Hervieux stressed that, this organization chart can be further improved, if necessary,



At the end of the presentation participants were given the opportunity to ask questions. No questions were asked.

4 PRESENTATION 2: PROPOSED DEFINITIONS OF THE FUTURE REGIONAL BODY'S SERVICES

SUZIE NEPTON,

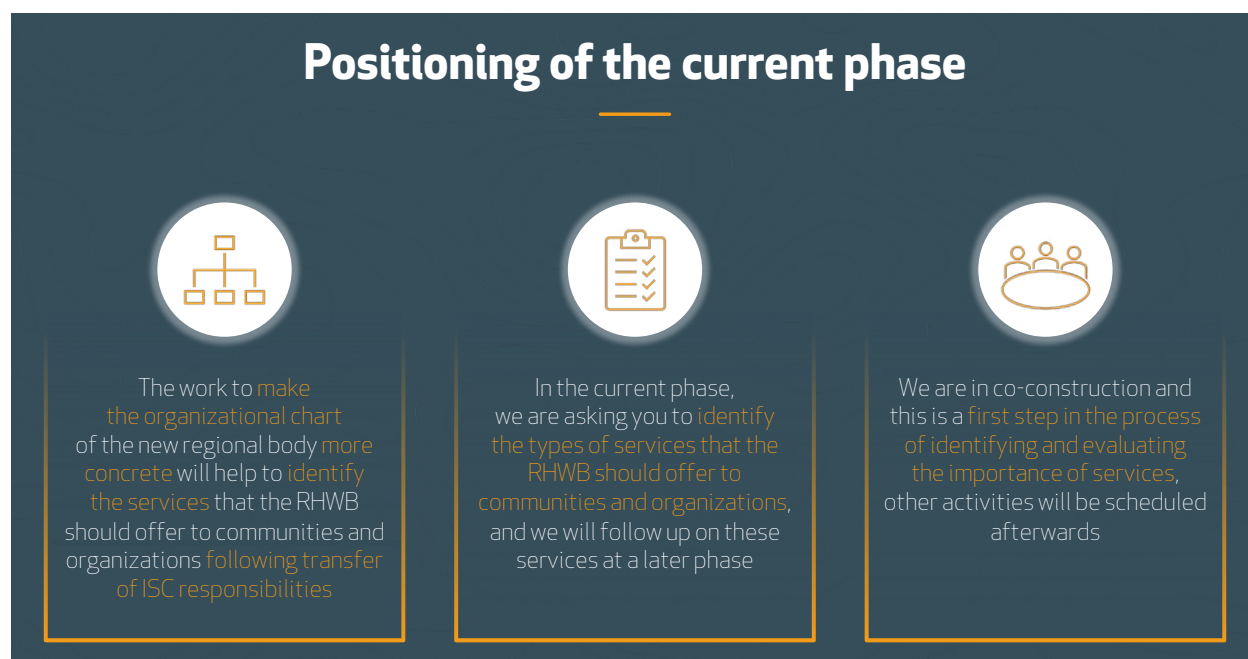
Governance Sector Manager and Senior Management Assistant, FNQLHSSC

JEAN-DENIS GILL,

Governance Sector Team Leader, FNQLHSSC

Ms. Nepton started by stating that the governance team is continuing the work begun in 2020 to make the service offer of the governance model increasingly concrete. Several meetings have been held and others are to come to continue the work, and improvements will continue to be made.

These services and their definition are the result of the work carried out to date and are based on the 57 guidelines discussed above.



Still in keeping with co-development, the current meeting serves to continue the reflection on the services that the regional body will make available to communities and organizations that offer services directly to First Nations.

Ms. Nepton and Mr. Gill took turns in presenting the nine types of services that the future regional body will offer, namely:

- Quality improvement service for professional and organizational activities
- Information service
- Advisory service
- Skills development and training service
- Health and wellness planning service
- Community strategy development service
- Liaison service
- Community engagement service
- Implementation service

Proposed services identified for the future regional body

Information service

The purpose of an information service is to provide the most relevant information possible in response to a question and, if necessary, to explain the answer in plain language to ensure that it is easily understood and usable by the person who asked the question.

The information covers various areas, such as health issues, approaches to child and family services, etc.

Advisory service

The purpose of an advisory service is to provide specific recommendations on what to do or how to act in a given situation.

The quality of an advisory service depends on the expertise of the advisors and their ability to correctly analyze complex situations and provide alternatives.

The advisory service deals with various issues, such as interventions in health, community organization, capacity building, etc.

Health and wellness planning service

A health and wellness planning service provides communities and organizations with technical support to develop integrated health and wellness planning to guide all interventions in the community or organization.

Support will be provided throughout the planning process using simplified tools.

At the end of the presentation, Ms. Nepton and Mr. Gill ensured that the information shared was complete and well understood. There were no questions.

¹ For the full presentation of the nine services and their definitions, see Appendix C.

Proposed services identified for the future regional body

Community strategy development service

A community organizational strategy development service helps communities develop strategies to improve the quality of services offered in the community.

Organizational strategies concern prevention, intervention from screening to treatment, worker and community member training strategies, and the establishment of networks to support the population.

Implementation service

Under an agreement with the communities and the RHWB, the service is responsible for implementing comprehensive services in the community by proposing the organizational structure of the service, building the capacities the community needs to ensure the services, monitoring activities to support the objectives and, if necessary, intervening to remedy situations where services have broken down.

Skills development and training service

A skills development and training service is responsible for organizing various types of training (personalized or regional) for workers and community members based on needs identified through integrated planning, to encourage the development of all individuals in various fields.

Proposed services identified for the future regional body

Community engagement service

The purpose of a community engagement service is to support community stakeholders with a view to helping different stakeholders coordinate their efforts.

The service offers guides and processes for community engagement and, upon request, intervenes in communities to support discussions and community engagement activities.

Liaison service

There are two components to a liaison service.

The first is related to the RHWB single window, with liaison officers in the communities to respond to requests for services, to follow up on those requests, and to evaluate responses.

The second involves implementing agreements and arrangements between communities, the CISSSs or CIUSSSs or other organizations, and the RHWB to ensure the quality and fairness of the services.

Quality improvement service for professional and organizational activities

A quality improvement service for professional and organizational activities supports health and wellness professionals as they continuously improve their practices.

5 WORKSHOP ON DEFINING THE REGIONAL BODY'S SERVICES

Participants were invited to discuss in small groups and provide feedback on what had been presented.

Nearly twenty people took part in the workshop (n=17), divided into five groups, three French-speaking and two English-speaking. Participants were given 45 minutes to:

- Rate the importance of each type of regional body service to their community or organization by assigning a value between 1 and 4 where
 - 1 = Not important;
 - 2 = Slightly important;
 - 3 = Important;
 - 4 = Very important.
- Provide examples of areas of intervention or services in their communities or organizations where h the nine services are deemed necessary.

The purpose of the workshop was not to work on defining the services or agreeing on their wording at this time, but to give participants the opportunity to express their views on the relevance and necessity of the future regional body's nine services.

The following are the services presented in descending order according to the importance attributed to them during the workshop.²

Table 1: Services according to the importance attributed to them	
4.0	Quality improvement service for professional and organizational activities**
3.9	Information service
3.7	Advisory service
3.6	Skills development and training service*
3.4	Health and wellness planning service
	Community strategy development service
	Liaison service**
3.0	Community engagement service*
2.7	Implementation service

* One group did not have enough time to comment on all services.

** Two groups did not have enough time to comment on all services.

² Based on the total average value assigned by the participants.

All services were deemed very important or important by participants. Several services, such as the information service, the advisory service, and the skills development and training service, will affect several sectors and services. In addition, various stakeholders will be able to benefit from these services, both the field teams (interventions) and the managers (strategic decisions). Only the implementation service was assigned a value slightly below 3. Participants perceived this service as hand-holding. Coaching would be more appropriate than a service structure as presented.

The local context of each First Nations community and organization as well as capacity-building must guide the service offer. These environments have mechanisms, strengths, and ways of doing things that need to be worked with. Since each community aspires to self-determination, the regional body will have to refrain from adopting the undesirable postures currently used by government authorities. All comments collected during the workshop are in Appendix B.

6 CONCLUSION

MARJOLAINE SIOUÏ,
Executive Director, FNQLHSSC

Ms. Sioui thanked the participants for giving their time during this very busy and challenging period. A summary report will be produced so that everyone has access to the results, including those who were not present. She reiterated that the tour to introduce the governance process and ensure community and organizational involvement is ongoing.

She also noted that, based on the workshop results, the liaison service was not among the three most prioritized services. Yet, this is an essential aspect suggested in previous consultations and will be the subject of one of the next steps to be discussed, namely, how to ensure this liaison. Work continues, as does the monitoring of the various changing elements of the environment with a view to proposing an even more developed governance model in 2022.

7 CLOSING PRAYER

Deborah Delisle closed the meeting. She recounted a dream she had had and drew attention to the importance of informing young people of this crucial process. In her closing prayer, she gives thanks to the elements of nature and the wisdom of the ancestors.

The background of the page features a close-up photograph of two hands gently cradling a small globe. The hands are positioned on the right side of the frame, with fingers spread to support the globe. The entire image is overlaid with a semi-transparent blue filter. Faint, light-colored topographic contour lines are visible across the lower half of the page, suggesting a map or geographical theme.

APPENDIX

AGENDA

DATE: DECEMBER 15, 2021
PLACE: VIRTUAL MEETING
ZOOM LINK

WEDNESDAY, DECEMBER 15, 2021

1:15 p.m.	Welcoming of participants
1:20 p.m.	Instructions on the simultaneous interpretation service and logistics of the meeting
1:30 p.m.	Opening prayer
1:40 p.m.	Welcoming remarks
1:45 p.m.	Opening speech – Derek Montour, President of the FNQLHSSC Board of Directors
1:50 p.m.	Presentation of the contextualization and update of the governance process – FNQLHSSC
2:20 p.m.	Break
2:35 p.m.	Presentation of the proposed services identified for the new regional body – FNQLHSSC
3:10 p.m.	Workshop
3:50 p.m.	Plenary session
4:20 p.m.	Conclusion – Marjolaine Sioui, Executive Director of the FNQLHSSC
4:30 p.m.	Closing prayer

RESULTS OF THE WORKSHOP ON DEFINING THE REGIONAL BODY'S SERVICES

RATE THE IMPORTANCE OF EACH SERVICE TO YOUR COMMUNITY. 1 = Not important; 2 = Slightly important; 3 = Important; 4 = Very important						
	Average for each group					
	Group 1	Group 2	Group 3	Group 4	Group 5	Total average
Information service	4.0	4.0	4.0	4.0	3.5	3.9
Advisory service	4.0	4.0	3.7	4.0	3.0	3.7
Health and wellness planning service	2.8	3.0	4.0	4.0	3.0	3.4
Community strategy development service	4.0	3.0	4.0	3.3	2.5	3.4
Implementation service	3.0	3.0	3.3	2.5	1.5	2.7
Skills development and training service	4.0	3.0	4.0	N/A *	3.5	3.6
Community engagement service	3.0	3.0	4.0	N/A	2.0	3.0
Liaison service	4.0	3.0	3.3	N/A	N/A	3.4
Quality improvement service for professional and organizational activities	4.0	4.0	4.0	N/A	N/A	4.0

* Missing data - the exercise was not completed due to time constraints.



COMMENTS COLLECTED FOR EACH SERVICE

INFORMATION SERVICE

The purpose of an information service is to provide the most relevant information possible in response to a question and, if necessary, to explain the answer in plain language to ensure that it is easily understood and usable by the person who asked the question. The information covers various areas, such as health issues, approaches to child and family services, etc.

Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
This service is of the utmost importance, as it is the basis of everything according to the participants. It must make essential information easily and quickly available, in understandable language. It must be cross-cutting in many areas (health, social services, etc.), address various subjects (issues, services, approaches, etc.) and target different levels of stakeholders (directors, community, etc.). In addition, concerns were raised about the communication models used. Saturation must be avoided. It is necessary for communities and organizations to have an information service that is adapted to their needs, challenges, and realities, but it is also important to standardize the information exchanged between the communities. For example, certain general aspects regarding the regional body must be clarified. The following questions were raised during the workshop: • Will the regional body be overseen, evaluated, and reflected upon by external authorities? • What is the context of this large organization (the regional body)? • Will it be a mixture of information decentralized by nation? Discussions between organizations are recommended to share best practices for the information service.	Public health as well as community health services in general. To be more specific: • Non-Insured Health Benefits (NIHB) • Mental health services • Addiction services • Vaccination clinic services (pandemic in general) Other: • Situations of jurisdictional issues with the province (e.g., jurisdiction of Québec City and our health centres) • Data and research • Strategy and fundraising • Calls for tenders (to have them in advance) Some mediums are more effective, such as social networks (Facebook), community radio, and Band Council sites.

ADVISORY SERVICE



The purpose of an advisory service is to provide specific recommendations on what to do or how to act in a given situation. The quality of an advisory service depends on the expertise of the advisors and their ability to correctly analyze complex situations and provide alternatives. The advisory service deals with various issues, such as interventions in health, community organization, and capacity building.

Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
Participants felt that it is important for this service to avoid adopting a “hand-holding” posture which promotes “dependence” on the service. The advisory service must foster capacity building and the development of autonomy. The advisors must be competent and versatile. Experts within communities must also be recognized. This service will be useful in supporting the decision-making of health centre managers (interpretation of program guidelines, among other things).	The advisory service can be tailored to a particular nation. This service is needed in all sectors. The following sectors or services were specifically named: • Childcare services • Youth protection services • Emergency services (pandemic) • Nursing care (deployment of collective prescriptions) • NIHB • Medical transportation Other: • Legal notices • Field teams (for situations beyond their skills or knowledge) • Budget management • Mobilization process



HEALTH AND WELLNESS PLANNING SERVICE

A health and wellness planning service provides communities and organizations with technical support to develop integrated health and wellness planning to guide all interventions in the community or organization. Support will be provided throughout the planning process using simplified tools.

Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
Not all participants see this service as a priority. Some pointed out that community strategies are already present in the communities. For others, this service would be helpful for all services, especially to • establish a better continuum of services (e.g., services in the community following a stay in a treatment centre); • avoid working in silos; • coordinate local actions; • reduce overwhelming workloads of workers. Each community has a specific context. This service would help identify potential shortcomings, including the obligations of the provincial government.	This service is especially needed for the following groups and services: • Substance abuse Justice • Mental health • Informal caregivers (seniors) • Special needs • Culture and territory • Children and youth • School • Poverty • Health services (community and public health), including dental care, medical transportation, and NIHB

COMMUNITY STRATEGY DEVELOPMENT SERVICE

The community strategy development service develops, with the communities, strategies allowing to improve the quality of services offered in the communities. These organizational strategies relate, among other things, to prevention, interventions from screening to treatment, training strategies for workers and community members and the networks to be established in the communities to support the population.



Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
Not all participants see this service as a priority. Some pointed out that community strategies are already present in the communities. For others, this service would be helpful for all services, especially to • establish a better continuum of services (e.g., services in the community following a stay in a treatment centre); • avoid working in silos; • coordinate local actions; • reduce overwhelming workloads of workers. Each community has a specific context. This service would help identify potential shortcomings, including the obligations of the provincial government.	This service is especially needed for the following groups and services: • Substance abuse Justice • Mental health • Informal caregivers (seniors) • Special needs • Culture and territory • Children and youth • School • Poverty • Health services (community and public health), including dental care, medical transportation, and NIHB



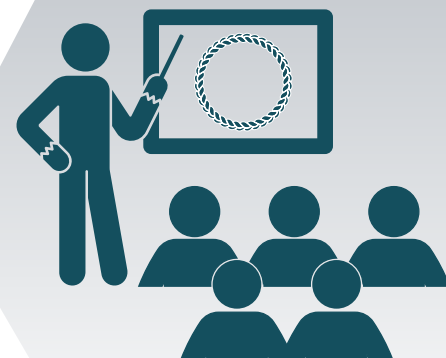
IMPLEMENTATION SERVICE

Under an agreement with the communities and the regional health and wellness body, the service is responsible for implementing comprehensive services in the community by proposing the organizational structure of the service, building the capacities the community needs to ensure the services, monitoring activities to support the objectives and, if necessary, intervening to remedy situations where services have broken down.

Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
Participants were critical of this service. It was seen as handholding that could place the regional body in an undesired position. In addition, some participants wondered whether this agreement with the regional body would override existing agreements in their communities. Several participants believed it was not necessary to offer an implementation service and that support should be more in the form of coaching. Capacity building would be more appropriate, especially for communities facing major challenges. The local context will need to be considered. Coaching would probably be more important at the beginning. When a community expresses needs, the regional body must be able to respond quickly.	• Human resource support • Funding opportunities • Accreditation Canada • Better use of available funding • Support for project implementation • Long-term vision

SKILLS DEVELOPMENT AND TRAINING SERVICE

A skills development and training service is responsible for organizing various types of training (personalized or regional) for workers and community members based on needs identified through integrated planning, to encourage the development of all individuals in various fields.



Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
All participants considered this service to be very important or important. The importance of support and coaching for communities with specific needs, such as the development of workers' skills, was emphasized. Furthermore, it will be necessary for this service to include strategies for determining which skills need to be developed and for verifying whether they have indeed been developed. Training offered by First Nations trainers should be given priority.	Capacity building is a priority in the following areas: • Addictions • Mental health Agreements with post-secondary institutions should be made, particularly to promote graduation in social work and to allow a greater number of First Nations members to access the Ordre des travailleurs sociaux et des thérapeutes conjugaux et familiaux du Québec. In addition, the regional body will have to play an advocacy role and have First Nations skills recognized in existing training programs, such as the mental health and addictions program. Also, steps should be taken to have the Indigenous Certification Board of Canada recognized. It was also pointed out that certified training for English-speaking workers is needed.



COMMUNITY ENGAGEMENT SERVICE

The purpose of a community engagement service is to support community stakeholders with a view to helping different stakeholders coordinate their efforts. The service offers guides and processes for community engagement and, upon request, intervenes in communities to support discussions and community engagement activities.

Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
Participants who had the time to discuss this service were divided in their opinion. The majority felt that this service was very important or important because it would help break down silo work and foster engagement and collaboration across sectors. Others found it unimportant and felt that community engagement is personal to each community and should not be the responsibility of the regional body.	This service is deemed necessary for: • Access to technical resources (e.g., research) • Supporting the engagement of local people to be independent in their work

LIAISON SERVICE

There are two components to a liaison service. The first is related to the regional health and wellness body single window, with liaison officers in the communities to respond to requests for services, to follow up on those requests, and to evaluate responses. The second involves implementing agreements and arrangements between communities, the CISSSs or CIUSSSs or other organizations, and the RHWB to ensure the quality and fairness of the services.



Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
This service is deemed necessary by all participants. The communities want to have only one person to communicate with through a single window. They want this process to also apply to agreements arrangements as well. In addition, this person will need to be familiar with the agreements and arrangements of the community that contacts him or her. One issue that was raised was the limited negotiating power that liaison officers will have. They will not have the authority to negotiate and defend agreements.	The community liaison service is a good thing. It can help inform what is happening in other communities.



QUALITY IMPROVEMENT SERVICE FOR PROFESSIONAL AND ORGANIZATIONAL ACTIVITIES

A quality improvement service for professional and organizational activities supports health and wellness professionals as they continuously improve their practices.

Step 1: Assess the importance of each service for your community.	Step 2: Give examples of areas of intervention or activity in your community or organization where this service is deemed necessary.
All participants felt that this service is very important. It is proposed that there be a sharing of services between communities in case of need.	This service is considered necessary for: • Nurses • Professionals

PRESENTATION OF THE CONTEXTUALIZATION AND UPDATE OF THE GOVERNANCE PROCESS

QUEBEC FIRST NATIONS HEALTH AND SOCIAL SERVICES GOVERNANCE PROCESS

A renewed approach to governance
fostering self-determination

REGIONAL MEETING
December 15, 2021



FIRST NATIONS OF QUEBEC
AND LABRADOR HEALTH
AND SOCIAL SERVICES
COMMISSION

Objectives of the meeting

01

**Continue the co-construction work
on the model and further mobilize
communities and organizations.**

02

**Present the progress made and an update
on environmental aspects that affect
the development of the governance process.**

03

**Enhance the work done on the service offer
of a future regional body and guide
the continuation of the work.**

Agenda

1:30 p.m.	Opening prayer and welcoming remarks
1:45 p.m.	Opening speech of Derek Montour, President of the FNQLHSSC Board of Directors
1:50 p.m.	Presentation 1: Contextualization and update of the governance process
2:20 p.m.	Break
2:35 p.m.	Presentation 2: Proposed services identified for the future regional body
3:10 p.m.	Workshop in sub-groups
3:50 p.m.	Plenary session
4:20 p.m.	Conclusion and closing prayer



Welcome!

Presentation 1

Contextualization and update of the governance process

Why a governance process?

Finding:

The current health and social services system does not adequately meet the needs of First Nations and does not sufficiently take their realities into account.

Desire:

- ✓ Obtain recognition of our jurisdiction and self-governance capacity
- ✓ Redefine the current governance structure to assume responsibility for the health and wellness services developed for First Nations
- ✓ Have greater autonomy and take back the responsibilities that were taken away
- ✓ Play a central role in First Nations decision making
- ✓ Improve the quality and accessibility of services for the population



Goal of the process

Work together to develop a new model of governance whose structure and functioning impart real decision-making powers to First Nations, as well as autonomy and the freedom to act needed to improve their health status and their local and collective wellness.

Last year in review

Community tour

6 meetings

Stakeholders

4 meetings

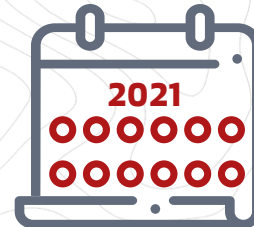
Committee of Partners

2 meetings

Working Group on the
Decision-Making Process

3 meetings

\$28.1 M in new funding



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Changes underway

Indigenous Services Canada vs. governance process



New financial relationship
(10-year grant) and redefining
services provided by ISC



Enabling legislation and creation
of two new departments,
Indigenous Services Canada
and Crown-Indigenous Relations
and Northern Affairs Canada



Gradual transfer of responsibilities
to Indigenous organizations
across Canada



The changes are positive, but First Nations must assume a leadership role
and be at the centre of decisions that affect them.

Environment update



INDIGENOUS SERVICES CANADA

- ✓ Reform on **child and family services**
- ✓ Implementation of **the reform of the Income Assistance Program**
- ✓ Indigenous Early Learning and **Child Care Strategy**
- ✓ Consultation and implementation of the new **- Indigenous Skills and Employment Training Program**
- ✓ Mobilization process on **long-term care**

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Environment update



CROWN-INDIGENOUS RELATIONS AND NORTHERN AFFAIRS CANADA

- ✓ Implementation of the **new fiscal relationship**
- ✓ National engagement on **the recognition of Indigenous rights**
- ✓ United Nations Declaration on **the Rights of Indigenous Peoples Act**
- ✓ An Act respecting First Nations, Inuit and Métis **children, youth and families**

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Environment update



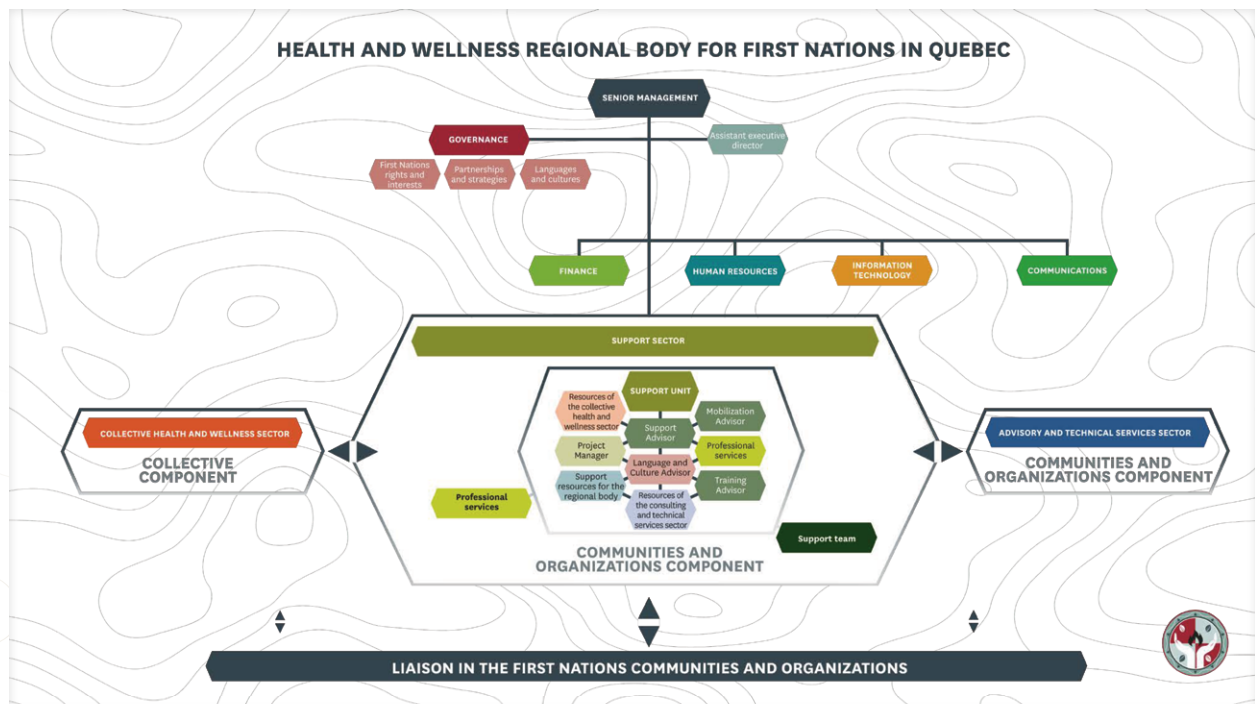
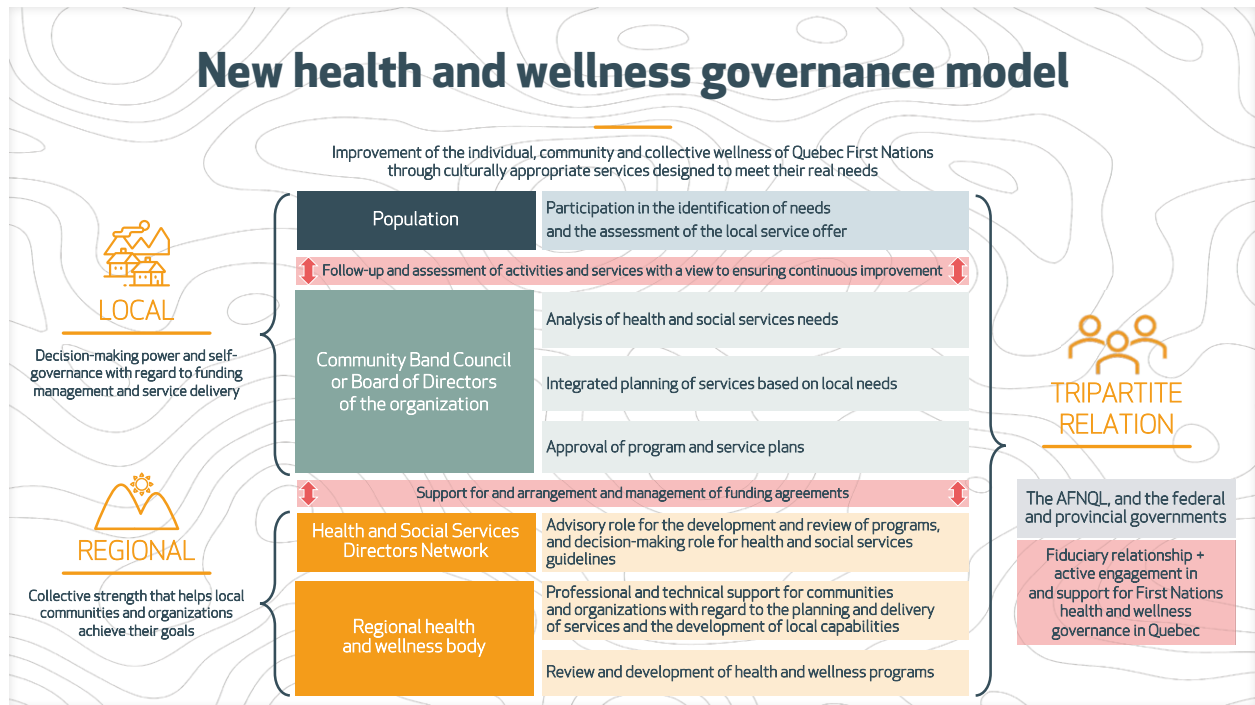
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Guidelines for the development of the health and wellness model



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New health and wellness governance model





Presentation 2

Proposed services identified for the future regional body

Positioning of the current phase



The work to **make the organizational chart** of the new regional body more concrete will help to **identify the services** that the RH-WB should offer to communities and organizations **following transfer of ISC responsibilities**



In the current phase, we are asking you to **identify the types of services** that the RH-WB should offer to **communities and organizations**, and we will follow up on these services at a later phase



We are in co-construction and this is a **first step in the process** of identifying and evaluating the importance of services, other activities will be scheduled afterwards

Services offered by the regional body

according to the guidelines

Information service:
– Health and social services
accompaniment must

A 14

Promote networking
and communication.

A 12

Provide and present all necessary
information, including its analysis,
to communities and organizations
for decision-making purposes.

Advisory service:
– Health and social services
accompaniment must

A 9

Build a long-term perspective
and support interventions at different
levels such as the social determinants
of health.

A 15

Enable access to, development
and support of specialized resources.

**Health and wellness
planning service**

P 11

The results of the analyses of needs
and social determinants of health
should be included in the objectives
set by the health and social services
planning.

P 3

The community health and social
services planning should be designed
as a continuous improvement tool
for the community's activities and
services, allowing for ongoing review
according to the achievement
of objectives.

Services offered by the regional body

according to the guidelines

**Community strategy
development service**

N 5

The Health and Social Services
Directors Network must be strategic
and must be geared towards
the needs of the communities
and organizations.

A 5

Health and social services
accompaniment must support
traditional practices, medicine
and knowledge.

Implementation service

D 3

The governance structure
must be horizontal.

Local and regional organizations
must have clear mandates and
a common goal.

A 11

Health and social services
accompaniment must consider
the expertise of First Nations to
benefit from their local and collective
strengths. Accompaniment must use
a strengths-based approach
and capacity building.

**Skills development and
training service**

A 10

Accompaniment must adopt
an approach based on the
development of local knowledge
and skills.

N 12

The Health and Social Services
Directors Network must support
capacity-building and training.

Services offered by the regional body

according to the guidelines

Community engagement service

P 2

Planning should be a tool that mobilizes all actors, including the population, to actively promote the vision of the community or organization for health and social services, and give the community or organization objectives to improve wellness.

A 6

Health and social services accompaniment must promote and respect service partnerships with institutions.

Liaison service

A 7

The role of the guide (Liaison Agent) must be redefined by focusing on proximity, stability and expertise and ensuring access to cultural competence and corporate memory.

P 14

Indicators that make it possible to evaluate the achievement of each objective should be defined to allow activities and services to be assessed for the purpose of continuous improvement.

Quality improvement service for professional and organizational activities

Health and social services support must

A 13

Target service quality with a view to continuous improvement.

A 15

Enable access to, development and support of specialized resources.

Proposed services identified

for the future regional body

Information service

The purpose of an information service is to provide the most relevant information possible in response to a question and, if necessary, to explain the answer in plain language to ensure that it is easily understood and usable by the person who asked the question.

The information covers various areas, such as health issues, approaches to child and family services, etc.

Advisory service

The purpose of an advisory service is to provide specific recommendations on what to do or how to act in a given situation.

The quality of an advisory service depends on the expertise of the advisors and their ability to correctly analyze complex situations and provide alternatives.

The advisory service deals with various issues, such as interventions in health, community organization, capacity building, etc.

Health and wellness planning service

A health and wellness planning service provides communities and organizations with technical support to develop integrated health and wellness planning to guide all interventions in the community or organization.

Support will be provided throughout the planning process using simplified tools.

Proposed services identified

for the future regional body

Community strategy development service

A community organizational strategy development service helps communities develop strategies to improve the quality of services offered in the community.

Organizational strategies concern prevention, intervention from screening to treatment, worker and community member training strategies, and the establishment of networks to support the population.

Implementation service

Under an agreement with the communities and the RHWB, the service is responsible for implementing comprehensive services in the community by proposing the organizational structure of the service, building the capacities the community needs to ensure the services, monitoring activities to support the objectives and, if necessary, intervening to remedy situations where services have broken down.

Skills development and training service

A skills development and training service is responsible for organizing various types of training (personalized or regional) for workers and community members based on needs identified through integrated planning, to encourage the development of all individuals in various fields.

Proposed services identified

for the future regional body

Community engagement service

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The service offers guides and processes for community engagement and, upon request, intervenes in communities to support discussions and community engagement activities.

Liaison service

There are two components to a liaison service.

The first is related to the RHWB single window, with liaison officers in the communities to respond to requests for services, to follow up on those requests, and to evaluate responses.

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Quality improvement service for professional and organizational activities

A quality improvement service for professional and organizational activities supports health and wellness professionals as they continuously improve their practices.

Workshop



Objective

Evaluate the relevance and level of importance of certain types of services that the regional body could offer to support you in activities related to health and wellness.

1st step

Make groups of about 5 people

2nd step

Rate the importance of each main type of services for your community
(1 being "not important" and 4 being "very important")

3rd step

Provide examples of areas of intervention or services in your community or organization where this service is deemed necessary

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Conclusion



Next steps



Ongoing tour of communities



Ongoing co-construction, model improvement and conducting various analyses



Meetings with stakeholders



Adoption of the model by the AFNQL Chiefs

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THANK YOU!



FIRST NATIONS OF QUEBEC
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FOR MORE INFORMATION:
www.gouvernance.cssspnql.com
info@cssspnql.com

A RENEWED APPROACH TO GOVERNANCE FOSTERING SELF-DETERMINATION

The health and social services governance process is part of an effort aiming to develop the autonomy of First Nations.

Communities have found that the current health and social services governance model does not meet the needs of the First Nations in Quebec. Therefore, the Chiefs of the Assembly of First Nations Quebec-Labrador entrusted the FNQLHSSC with the mandate to coordinate the development of a governance model that is adapted to the needs and context of the First Nations in Quebec while also being conducive to self-determination. This model is called the health and social services governance process.

The process is guided by the vision that was adopted by the Chiefs of the AFNQL in 2014: Through our self-determination, a global and concerted approach, individual and collective commitment, we will be healthy people connected to Mother Earth and our physical, mental, emotional and spiritual well-being will be balanced.

For more information, please visit the website at gouvernance.cssspnql.com/en.

SUMMARY

The main objective of this meeting was to continue the reflection on the service offer of the future regional health and wellness body. To ensure consistency with the approach used to date, the co-development reflection method was used. In addition to updating the realizations and highlighting the environmental factors that currently influence the governance process, a prioritization workshop made it possible to make the following observation: all the services proposed to form the service offer of the regional body are perceived as being very important or important for First Nations communities and organizations. Overall, it is understood that the local context as well as capacity building must guide the service offer of the regional body.



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