

April 6, 1995  
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The Union of New Brunswick Indians is pleased to present for your consideration the attached document. In it you will find information pertaining to the completion of Part One of Phase One of the health transfer process. These efforts by the UNBI to give ownership and responsibility of health care and services to its members has culminated in the establishment of the UNBI Commission on Health and Social Programs. This Commission has a broad mandate so as to be better able to take a pro-active role in shaping and influencing health policies and programs that affects the lives of First Nation peoples. Also included for your consideration is a proposal to complete Phase One of the health transfer process. Hopefully it will meet with your approval so as to allow our organization to further pursue this important issue.

Sincerely,

Darrell Paul  
Executive Director

## Introduction

The Union of New Brunswick Indians has been in existence for twenty-eight years and has been accountable to both First Nation members and various funding agencies. During this time period the UNBI has undertaken several projects in the health field so as to improve the physical well being of its members.

The Union of New Brunswick Indians has, for a number of years, been administering a number of health programs such as:

- health liaison officer
- community health nurses (2)
- C.H.R. Coordinator
- diabetic coordination services
- support services (2)
- tuberculosis control nursing services
- all chief meetings
- Brighter Futures
- \*Building Healthy Communities

Building Healthy Communities which will be included later this year. It is in this context that the UNBI wishes to examine the health transfer process.

The following will contain a brief description of the work related to transfer that has been accomplished so far. Also included will be a proposal to complete Phase One of the transfer process, as well as documentation related to the Union of New Brunswick Indians Commission on Health and Social Programs. Attached will also be a list of concerns that has been raised by various First Nations in regards to the transfer procedure. A further appendix will list the demographic patterns of the First Nation population serviced by the Union of New Brunswick Indians.

To date, Part One of Phase One has been completed by the Union of New Brunswick Indians. Six initiatives were undertaken which included:

- 1) **Development of work plans and establishments of time frames:** this task was the first to be completed. It involved consultation with the various parties involved in the project and resulted in a comprehensive plan that served as a guide throughout the entire undertaking.
- 2) **Consultations with member communities to determine the future direction and responsibilities of the Union of New Brunswick Indians in regards to health programs and transfer:** this task was accomplished through both formal and informal meetings with various members of the Board of Directors of the Union of New Brunswick Indians. These impromptu gatherings served the dual purpose of information sending/receiving sessions.

- 3) **Development of an administrative model to advance First Nations and UNBI control and delivery of health programs:** this exercise saw the formation of the Union of New Brunswick Indians Commission on Health and Social Programs. The Commission was established by a resolution of the UNBI and is mandated to investigate the entire range of health issues. (See Appendix A for further information regarding the Commission).
- 4) **Investigation of potential resources available for health care:** this process saw the investigation of several funding sources for the Union of New Brunswick Indians health-related endeavors. This area is in of constant flux as new initiatives are developed and existing programs are modified or phased out. Since the health field encompasses a wide range of issues, various agencies have and will continue to be investigated so as to utilize as may available resources as possible.
- 5) **Presentation of findings to First Nations for their support/ratification:** this task was completed through a presentation of findings to the Union of New Brunswick Indians Commission on Health and Social Programs and Board of Directors. Many of these sessions were ad hoc or informal information shared meetings.
- 6) **Presentation of final decision to Medical Services Branch regarding future directions of the UNBI:** this task will be completed at an information session with Regional Office scheduled for early April, 1995.

### **Co-ordination of Program Services (In-Direct Services)**

- Brighter Futures Programs - UNBI Role - The development of a 5 year plan based on information from all First Nations programs. This then is accumulated and forwarded to Regional Office. The co-ordination of funding for each First Nation was established by the UNBI Health Commission and Social Programs. Would be disbursed to each First Nation for programs they have identified in their 5 year plan. Reports received from First Nations are followed up and sent to Region for their reporting purposes for National requirements.
- Building Healthy Communities (In-Direct services) -The role of UNBI is coordination of funding and programs. Requesting this information from all First Nations and forwarding to Regional office and providing practical reports to Medical Services Branch. Other tasks assisting First Nations in development of programs.
  - Provide resource for First Nations
  - Set up training programs in mental health, home care nursing, solvent abuse.
  - Develop a manual and resource for each First Nation.
  - Co-ordinate meetings around the above programs for First Nations.
  - Work with other groups of health workers in First Nations.
- Clerical Support - (In-Direct Service)
  - The UNBI clerical support provides necessary support for all managers through typing, phone calls, set-up meetings, etc. Other clerical support provides services to MSB/N.B. Zone Office - typing, phone calls - setting up meetings, contacting First Nation people.

### **Status Report on Pre Transfer and Transferred Bands**

- Transferred Communities
  - St. Mary's
  - Tobique
  - Big Cove
- Pre-transfer
  - Kingsclear – negotiations, youth signing of transfer agreement – Dec 1995
  - St. John River Tribal Council (Lennox Island, Woodstock and St. Basile) – CHP being developed, anticipated date for signing of transfer agreement. March 1995.
  - Oromocto – pre-transfer second phase – development of Community Health Plan
  - Eel River Bar – completion of CHP
  - Eel Ground – completion of CHP