1.0 Introduction

The Union of New Brunswick Indians (UNBI) has been in existence for forty-one years and represents the New Brunswick bands in a number of areas related to the well being of its members including health.

On April 6, 1993, by resolution, the Union of New Brunswick Indians established the UNBI Commission on Health and Social services. In May 2008, by resolution UNBI changed the name of the Commission to the Commission on Health Programs to better reflect the objectives of the Commission with regard to health services and programs.

In August 1998, UNBI signed a five year Health Transfer Agreement with Health Canada to deliver second and third level services to twelve Communities which had passed Band Council Resolutions (BCR) in support of this initiative. The Transfer Agreement was renewed for another five year for the period 2003-2008 based on UNBI's success in the delivery of health programs and services and its financial and administrative capacity.

On April 29, 2008, the Chiefs of the Mik'kmaq and Maliseet First Nations as represented by UNBI authorized by resolution, that a new funding agreement be entered into with Health Canada. (Appendix A) A Letter of Intent was sent to First Nations and Inuit Health to undertake the necessary work to move from the current Transfer Agreement to a Flexible Agreement.

The UNBI Commission on Health Programs (UNBICH) aims to achieve the following:

1. Increase First Nations awareness of the benefits of a Commission on Health Programs
2. Ensure that Commission members are aware of the Flexible Agreement, which will replace the former Health Transfer Agreement.
4. Develop an administrative model that best serves the First Nations of N.B.
5. Increase life expectancy and quality of life of First Nations comparable to that of non First Nation people in New Brunswick.
6. Work collaboratively with other First Nations in New Brunswick who are not directly represented by the UNBICHP. E.g. Mawiw Tribal Council.

The mission of the UNBICHP is to work with First Nations people and others to attain the well-being of First Nations people by promoting self-sufficiency and personal responsibility for health. It is based on attitudes, beliefs and concepts of what a health care system should do to provide quality levels of holistic care without jeopardizing Aboriginal and Treaty Rights. This will be done within a traditional Cultural Context.

Overview of Service Delivery Plan:

UNBI aims to establish a current picture of health care for the First Nations of New Brunswick, and to develop an administrative model which best serves the identified needs and priorities of the New Brunswick First Nations.

The Service Delivery Plan provides details on the types of second and third level services delivered by UNBI. (Health Consultation and Liaison, Health Management and Support) as well as the Community Programs. (Aboriginal Diabetes Initiative, Aboriginal Headstart On Reserve and Home and Community Care Programs.) These three programs receive functional guidance from FNIHI staff and therefore report to them on their specific programs and results.

All programs and services have been included in the Service Delivery Plan regardless of funding source and regardless of which party assumes responsibility for their delivery. The plan indicates sources of funding for all programs and services as per the funding compendium. The goals and objectives for the health programs and services reflect the stated mission and philosophy of the UNBICHP and are realistic and reasonable given the nature of the organization and the amount of funding available.

The Service Delivery Plan was developed jointly with the UNBI Health Staff and also includes the health priorities and needs as provided by the Health Directors at the community health planning sessions held over the past two years.

A health planning template has been developed which outlines the goals and objectives for each program and also sets out indicators to measure the success of the programs in achieving the health priorities. Work plans are developed early in each new fiscal year and are updated as required throughout the year. Given the nature of UNBI’s organization, the identified administrative and supervisory priorities in the service delivery plan are multi-year subject to changes due to unforeseen changing priorities.

Included in the Service Delivery Plan are work plans for the Aboriginal Health Transition Fund and the First Nations Regional Longitudinal Health Survey as well as the funding allocations and sources. These initiatives are in addition to the core programs and services in the current health Transfer Agreement. Also contained in these work plans are initiatives being undertaken with the Province of New Brunswick. Appendix D

Although the position of Policy Analyst is not funded under the present Health Transfer Agreement, a work plan has been included to demonstrate the necessity of providing funding for this essential function.