



MUSHKEGOWUK COUNCIL

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Mushkegowuk Council 30th Annual Mamowihitowin

Resolution No. 2015-10-24

Mushkegowuk Health System Review Working Group

Attawapiskat
First Nation

Moved by:
Sheperd Wynne, Elder
Kashechewan First Nation

WHEREAS health and wellness is a fundamental aspect of the life of the people and the First Nations of Mushkegowuk Nation; and

Kashechewan
First Nation

Seconded by:
Agatha Nakogee
Fort Albany First Nation

WHEREAS the representatives of the British King expressed to the representatives of the Mushkegowuk Nation in 1905/1906, as part of the negotiations for Treaty No. 9, that a priority for the Crown was the "happiness and prosperity" of the Mushkegowuk; and

Fort Albany
First Nation

Moose Cree
First Nation

Carried

WHEREAS the federal government has a continuing Treaty obligation to the Mushkegowuk people regarding the fundamental health system aspects of "happiness and prosperity"; and

Taykwa Tagamou
Nation

Chapleau Cree
First Nation

Certified copy of a resolution passed
on October 22nd, 2015

WHEREAS in 1984 the Mushkegowuk First Nations began a process intended to lead to an integrated health care system in Mushkegowuk Territory under the control of the Mushkegowuk First nations, which resulted in the Partners in Change process and the founding of Weeneebayko Health Ahtuskaywin, and the eventual unification of the health care system in Mushkegowuk Territory, and intended to be under the control of the Mushkegowuk People through their Chiefs and Councils, with associate partners such as Moosonee, MoCreebec, and Peawanuck; and

Missanabie Cree
First Nation

Jonathan Solomon, Grand Chief

October 22nd, 2015
Missanabie Cree First Nation

WHEREAS the health unification process allowed for a role for the Province of Ontario in assisting with funding and in other ways, and maintained a fundamental role for the Federal Government in providing funding and capital facilities; and

WHEREAS the agreement attempting to bring about the unification of the health care system in Mushkegowuk Territory has turned out to be a major failure in various important ways, including in failure of governance, level of services, and financial deficits and inadequate funding, and as a result a new arrangement and agreement is necessary; and

WHEREAS at Chiefs meetings in the fall of October 2014 and October 2nd, 2015, involving detailed review of the problems of the present health system in Mushkegowuk Territory, and of Weeneebayko Area Health Integration Funding Agreement (WAHIFA), and the various and urgent issues that need to be addressed, the Chiefs decided to create a Mushkegowuk Health System Working Group intended to begin the urgent process of addressing the systemic deficiencies of the present health care system; and

WHEREAS the Chiefs decided to create a working group consisting of the Grand Chief, with alternate Deputy Grand Chief, Chief Norm Hardisty with alternate Chief Jason Gauthier, and Chief Andrew Solomon, with support from advisors Pat Chilton and Murray Klippenstein;

THEREFORE BE IT RESOLVED that the Chiefs and delegates of this Mamowihitowin approve and authorize a Mushkegowuk Health System Working Group to conduct a review of the systemic and specific deficiencies of the present health care system in Mushkegowuk Territory, including in particular the Weeneebayko Area Health Integration Agreement, based on the attached Terms of Reference; and

BE IT FURTHER RESOLVED that the Mushkegowuk Health System Working Group consists of Grand Chief Jonathan Solomon, with Deputy Grand Chief Rebecca Friday as alternate, Chief Norm Hardisty, with Chief Jason Gauthier as alternate, and Chief Bruce Shisheesh, and Chief Andrew Solomon as alternate, with support from advisors Pat Chilton and Murray Klippenstein.

Terms of Reference

Mushkegowuk Health System Review Working Group

1. Purpose

The Working Group will review all aspects of the health system in Mushkegowuk Territory, including the implementation of WAHIFA and possible revision or replacement of WAHIFA.

The Working Group will provide strategic direction and leadership to the Province of Ontario and Health Canada from the perspective of the people and communities of Mushkegowuk Territory.

The Working group sets out to improve the health care delivery in the Mushkegowuk Territory.

The Working Group will meet only with high level representatives, and those with decision making powers, from the Province of Ontario and Health Canada.

2. Term

The term of the Working Group will take effect upon the approval of a Resolution of the Mushkegowuk Council's 30th Annual General Assembly, and will be on-going until terminated by agreement of the Mushkegowuk Council's Board of Chiefs.

3. Membership

The membership and their alternates will be determined/approved by Annual General Assembly and may be changed by decision of the Board of Chiefs.

4. Roles and Responsibilities

The Roles and Responsibilities of the Working Group will include, but not necessarily be limited to:

- a. Determine that the Treaty and Aboriginal Rights are addressed to the extent possible, in particular the role of the federal government
- b. Review the provincial and health integration initiatives in other jurisdictions, specifically the Sioux Lookout Four Party Agreement, and the British Columbia First Nation Health Authority
- c. Undertake a complete review of WAHIFA, including the immediate intervention of the Health Canada/WAHA 5 year evaluation, and the NE LHIN Operational Review
- d. Review previous AGA resolutions to determine the record of support of the creation of a new health care system, and to ensure that all decisions are included in the process.
- e. Preparatory work on the Special Act that creates WAHA, as per the Agreement.
- f. Ensure that the implementation truly reflects the "unique and cultural appropriateness" as per the WAHIFA
- g. Review the role of Health Canada
- h. Review the role of the Province of Ontario, and their designate (NELHIN)
- i. Undertake a review of the governance of WAHA, and make recommendations for change,
- j. Review the role of management and governance of WAHA
- k. Review the roles and responsibilities of the Province of Ontario and Health Canada, specifically their fiduciary and resourcing responsibilities
- l. Capital review, including construction of new facilities and transportation requirements

- m. Review and make recommendations regarding the improvement of the membership of WAHA.

5. Meetings

- a. The meetings will be chaired by the Grand Chief.
- b. Decisions will be determined by consensus.
- c. Meeting agendas and supporting documents will be the responsibility of the Mushkegowuk staff and the Advisors named by resolution.
- d. Meetings will be held at the call of the Grand Chief.

6. Amendments

The Terms of Reference may be amended, varied or modified by the Mushkegowuk Board of Chiefs.

Approved by Resolution No. 2015-10-24 at the 30th Annual Mamowihitowin Assembly on October 22nd, 2015 at Missanabie Cree First Nation.