

First Nations and Inuit Home and Community Care Program (FNIHCCP)

General Information	
Lead Department	Health Canada
Partners	DIAND, First Nations, Inuit
Effective Date	February 1999
Expiry Date	Ongoing
Website	http://www.hc-sc.gc.ca/msb/fnihp/fnihcc
Purpose	<ul style="list-style-type: none"> • assist First Nations and Inuit living with chronic and acute illness and disabilities in maintaining optimum health, well-being and independence in their homes and communities, by having access to a comprehensive continuum of services within the community, where possible; • to build the capacity within First Nations and Inuit to develop and deliver comprehensive, culturally sensitive, accessible and effective home and community care services; • to facilitate the efficient and effective use of home and community care resources.
Roles and Contributions	<p>Planning and implementation processes are carried out jointly across the country involving DIAND, MSB, First Nations, Inuit and Territorial and some provincial governments. These processes include: preparation of planning materials, training activities, communications, annual reports, work planning, funding allocations.</p> <p>The federal government will: provide funding resources; ensure that appropriate authorities have been secured for the implementation of services; provide technical, professional and capacity building supports; and, work in partnership with First Nations and Inuit on the development and maintenance of standards of care and practice for home and community care.</p> <p>The First Nations and Inuit will: plan and deliver services; monitor and maintain quality of services; ensure training requirements are met; maintain performance accountability, liability and malpractice insurance, delegation of responsibility; work in partnership with federal government on development and maintenance of appropriate standards of care and practice.</p> <p>Some provinces and territories provide home care services on reserve and Inuit settlements. Activities may be coordinated with programs and services offered through the Home and Community Care program.</p> <p>Roles are communicated and processes are undergoing development and revision to facilitate the collaborative approach to program development and implementation. Updates on program developments & status are provided on the Web site and communicated in a mail out to all First Nation and Inuit authorities. An Annual report for 1999/2000 on program developments has</p>

	been widely distributed
Resources	
Funding	1999/2000: \$17 million; 2000/2001: \$45 million; 2001/2002: \$90 million; 2002/on-going: \$90 million (in 1999 dollars)
Tracking and Reporting	Tracking and documentation of federal spending is carried out through the departmental financial system with dedicated codes for the program as well as program specific reporting requirements. The information on spending is made public through annual reports. Annual reports are available on the web site.
Measurement and Reporting	
Outputs / Outcomes	<p>Outputs:</p> <ul style="list-style-type: none"> • Successfully established and funded home and community care programs; • Relevant policies, guidelines and standards; • Certified/trained personal care workers and home care nurses; • Structured, culturally defined and sensitive assessment processes to determine service needs of clients. <p>Outcomes:</p> <ul style="list-style-type: none"> • Comprehensive, culturally sensitive, accessible and effective home and community care services delivered by First Nations and Inuit; • Coordinated and integrated home and community care services; • First Nations and Inuit living with chronic and acute illness and disabilities able to maintain optimum health, well-being and independence in their homes and communities; <p>First Nation and Inuit communities, Tribal Councils and community-based home and community care programs will monitor their activities through the Performance Reporting and Program Evaluation Frameworks established for the program. Health Canada, through the National Steering Committee will assess the achievement of the program in the five Year Evaluation Report completed by March 31, 2005.</p>
Indicators	<p>Performance measures for outputs are being developed and may include:</p> <ul style="list-style-type: none"> • Number of: successfully established and funded home and community care programs; relevant policies, guidelines and standards developed; service needs assessment processes developed. <p>Performance measures for outcomes:</p> <ul style="list-style-type: none"> • Proportion of certified/trained personal care workers within the program; proportion of home care nurses with advanced home care training; data that indicates effective services are available; reduced hospital admissions/lengths of stays for chronic patients; reduced number of individuals requiring long term institutional care; physical health of clients; indicators of client satisfaction.

Comparable Indicators	<p>There are currently no commonly accepted, reliable, and valid outcome indicators for home and community care programs in Canada.</p> <p>When national indicators are established, they will then form the basis of outcome indicators for the FNIHCCP against which progress will be measured and compared with other home and community care programs throughout Canada.</p>
Evaluation/Third Party Assessments	<p>The First Nations and Inuit Home and Community Care Program will be evaluated at a community, regional and national level:</p> <ul style="list-style-type: none"> • Stage one will involve on-going program monitoring and data collection, according to the Performance Reporting Framework, at the community/Tribal Council/ structure level. • Stage two will involve ongoing and, at a minimum annual, evaluation and review at the local and regional levels of the home and community care program. This review will form the basis of the annual report. • Stage three will involve a comprehensive national program evaluation during the fifth year of the program and will result in a Five Year Evaluation Report. <p>An overarching evaluation framework will oversee the program evaluation.</p> <p>An audit strategy has yet to be determined.</p>
Shared Information and Best Practices	<p>Outcome measurements are under development; FNIHCCP has representation on the F/P/T home care committee-developing standards to facilitate use of comparable indicators.</p> <p>As the accountability framework is implemented, the evaluation questions and outcome measures will provide the foundation for ongoing research and documentation of best practices. The developmental work will be carried out with such federal departments as Health Canada's Home Care Unit and will be linked with the developments at the F/P/T on continuing care related developments. The role of the newly evolving 'Organization for the advancement of Aboriginal People's Health' may also have a role.</p>
Public Reporting	<p>Annual reports will provide information on program developments and a report will be prepared against the accountability framework outputs.</p> <p><i>Summary Report (Dec 1999): Information Sharing and Feedback Discussions - First Nations and Inuit Home Community Care Program is an example of such collaboration - see FNIHB (MSB) website.</i></p>

Involving Canadians	
Provisions for Citizens to Participate in Developing Social Priorities and Reviewing Outcomes	<p>The program is targeted for a specific population, which includes First Nations living on reserve or in a community North of 60 and Inuit living in settlements. The processes for planning, implementation and delivery are collaborative in nature and include potential clients, their families, community leadership, local health authorities, and provincial and territorial government representatives.</p> <p><i>Summary Report (Dec 1999): Information Sharing and Feedback Discussions - First Nations and Inuit Home Community Care Program is an example of such collaboration - see FNIHB (MSB) website.</i></p>
Feedback Mechanisms to the Public	<p>Consultation activities have been carried out throughout the country and analysis of feedback has been distributed widely.</p> <p>The involvement of First Nations and Inuit is reported through the Annual Report and documents on the web site.</p>
Service Commitments	
Public Availability of Eligibility Criteria	Program description and planning documents are available on the web site and clearly define program eligibility
Existence and Availability of Service Commitments	Under discussion at this time
Measurement and Public Reporting	Not applicable ¹ , see above
Appeals and Complaints	
Existence, Availability and Communication of Mechanisms	All programs will have an established client appeals process that is defined in program policy.
Tracking and Public Reporting	To be determined ² as program planning and implementation progresses.
Mobility	
Existence of Measures	Not applicable ¹ , FNIHCCP is targeted to Aboriginal populations. "Medical need" is the main eligibility criteria.

¹Not applicable: when the section does not apply.

²To be determined: when an approach or process is still being considered or is in the initial planning stages.