

## **HEALTH PROTECTION SUB-COMMITTEE TERMS OF REFERENCE**

### **1. MISSION**

The Mission of Co-Management is:

To improve the health and well-being of First Nations' Peoples and communities in Alberta through partnership in the delivery of holistic health and human services by:

- Protecting the existing Alberta region envelope
- Providing for equitable resource distribution
- Ensuring that programs and services are delivered with the highest standards in the most cost effective manner

Pursuant to the political objective of the Chiefs in Alberta, as defined in the Summit Resolution, the technical objective of the Alberta Regional Co-Management Committee, consisting of one Chief from each of the signatories of the Co-Management Agreement and the Regional Director FNIH, is to increase the effective participation of First Nations in assessing, analyzing, planning and managing programs and services funded / offered by FNIH Alberta Region.

### **2. GUIDING PRINCIPLES**

All decisions made by the Health Protection Sub-Committee shall be in keeping with the following guiding principles of the over-arching Co-Management agreement:

1. **Equity/Fairness:** Future program decisions shall be based on maximizing equity and achieving fairness for all communities without creating undue advantage of community or groups of communities over the others.
2. **Transparency:** All decisions shall be made in an open and transparent manner that shall be visible to all interested parties, appropriately documented, and accessible to all First Nations in Alberta and their respective officials.
3. **Accountability:** The Health Protection Sub-Committee shall operate in a fiscally responsible manner and not commit funds beyond the limit of the Alberta Regional Envelope. All decisions shall be made within the scope of the funding allocated within the envelope.
4. **Accountability to Programs:** The Health Protection Sub-Committee shall make decisions regarding health programming to First Nations in a responsible manner taking into account all other guiding principles found within the Co-Management Agreement Terms of Reference.
5. **Timeliness:** The Health Protection Sub-Committee shall operate in such a way that will allow informed decisions to be made jointly and in a timely manner.

6. **Appropriateness:** The Health Protection Sub-Committee shall involve itself only with issues common to First Nations, and make decisions relevant to its mandate to co-manage the FNIH-Alberta Region envelope.
7. **Legality:** The Health Protection Sub-Committee shall operate within mutually agreed application of the rules, regulations or directives, which govern FNIH and its operations.

### 3. **MANDATE**

Pursuant to the mandate of the First Nations (Alberta) – FNIH Alberta Regional Health Co-Management Committee, the Health Protection Sub-Committee shall consider issues and make decisions on matters relating to the following :

- Oversight and guidance of the Health Protection programs which include;
  - **Communicable Disease Control (CDC)**, Blood Borne Pathogens and Sexually Transmitted Infections (BBP & STIs), Tuberculosis (TB), Infection Prevention and Control (IPC), Communicable Disease Emergencies (CDE), Immunization and CD Surveillance
  - **Environmental Public Health (EPH)**, Drinking Water Safety Program, Housing Inspection, Program, Food Sanitation and Hygiene, Solid Waste Disposal, Contaminant Research, Sewage, Facility Inspection, Air Quality and Emergency Response, Water Borne, Vector Borne and Food Borne CD Program
- Related program allocations and management of resources
- Issues that affect the quality of program delivery and/or physical infrastructure
- Identify and monitor strategic priorities for the related programs

### 4. **VISION**

Healthy Treaty First Nations Peoples, living in culturally strong, thriving and self-reliant communities

### 5. **ROLES & RESPONSIBILITIES OF THE HEALTH PROTECTION SUB-COMMITTEE**

The Health Protection Sub-Committee shall:

1. Share all relevant data and information needed to support productive deliberations
2. Jointly assess, analyze, plan and monitor with respect to issues within the mandate
3. Advocate and liaise with other Co-Management Sub-Committees and stakeholders to address common health issues
4. Prepare joint briefings, advise, provide options and make recommendations to the Co-Management Committee
5. Report to the Co-Management Committee on a quarterly basis and submit an Annual Report to the Co-Management Committee within sixty (60) days following the end of each fiscal year

## **6. MEMBERSHIP**

Total Voting Membership: Four (4)

- 1 - Yellowhead Tribal Council
- 1 - Treaty 7 First Nations
- 1 - Treaty 8 First Nations
- 1 - Lead staff, FNIH Alberta Region

### **6.1. Appointment**

First Nations signatory will designate their representation and be able to appoint two representatives plus their designated Co-Management Liaison. In case of the representatives being unable to attend meetings, designated alternates will not be allowed.

Sub-committee members will only be allowed to miss three consecutive meetings before a request for a new member be issued by the Co-Chairs. Notice in writing will be given to the absentee member, the appropriate signatory and to the Co-Management Committee.

FNIH membership will include the Director and Team Leader.

### **6.2. Chairpersons**

The Sub-Committee will be co-chaired by a designated First Nation signatory representative and FNIH Program Director. Co-Chairs will be determined on a fiscal year basis.

### **6.3. Observers / Guests**

Non-Committee members may attend all or portions of the Committee meetings. Observers / guests shall request permission from the Co-Chairs to speak, shall not bring an issue / item to the table that is not on the agenda and shall not participate in the decision-making process.

### **6.4. Quorum**

A quorum shall be a majority of the total voting Sub-Committee membership with at least a member representing FNIH and two members representing First Nations signatories.

## **7. DECISION-MAKING**

The Sub-Committee will strive to reach consensus regarding relevant issues and decisions that it considers as part of its mandate. If consensus cannot be reached, a simple majority vote will occur.

## **8. DISPUTE RESOLUTION**

If dispute arises within the Sub-Committee with members unable to come to a settlement on their own, the issue shall be brought to the Secretariat for guidance within ten (10) working days.

## **9. FREQUENCY AND NOTIFICATION OF MEETINGS**

The Sub-Committee shall meet on pre-determined dates as mutually agreed upon by the members, a minimum of three times a year. Additional meetings via teleconferences, video and virtual conferences may be called as required.

At least one of the scheduled meetings may occur within a First Nations community or tribal council.

In order to allow for pre-consultation of agenda items, all background materials and resources (as per briefing note template) required to make an informed decision must accompany or be available with the written reminder of the meeting date which should be issued at least five (5) working days prior to the meeting, except in exceptional circumstances.

## **10. WORKING GROUPS**

Ad hoc, issue-focused, time-limited working groups would be established only if and as needed. The working groups would be responsible for advising and making recommendations to sub-committees.

## **11. CONFLICT OF INTEREST**

All members of the Health Protection Sub-Committee will ensure that their personal interests and gain do not benefit in any form from their official actions as part of the committee. Any member whose participation in a discussion could lead to a conflict of interest will declare the potential conflict of interest and excuse himself/herself from the discussion and decision.

## **12. REMUNERATION**

Travel expenses for members shall be paid as per Treasury Board guidelines and approved by the Co-Management Committee.

## **13. AMENDMENT OF TERMS OF REFERENCE**

These terms of reference shall not be amended without the written consent of the Co-Management Committee.

On behalf of the Health Protection Sub-Committee, we hereby certify that these Terms of Reference have been reviewed and approved by the Sub-Committee on [insert date]:

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Co-Chair

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Co-Chair

Reviewed and approved by the Co-Management Committee on [insert date].

