

## **PREVENTION PROGRAMS 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 Prevention Programs 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 Prevention Programs 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 Prevention Programs 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 Prevention Programs 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 Prevention Programs 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 Prevention Programs 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 Prevention Programs Sub-Committee shall consider issues and make decisions on matters relating to the following:

- Oversight and guidance of the Prevention programs and services which include Chronic Disease, Aboriginal Diabetes Initiative, Community Health Representatives (CHRs), Home and Community Care, Injury Prevention, Nursing and Nutrition
- On the prevention programs allocations and resources
- Issues that affect the quality and infrastructure of services including but not limited to: capacity building in communities, health research and evaluation, quality assurance and information management.

### 4. VISION

First Nations people in Alberta living wholistic, healthy lifestyles, with access to the highest standard of health & related services.

### 5. ROLES & RESPONSIBILITIES OF THE PREVENTION PROGRAMS SUB-COMMITTEE

The Prevention Programs Sub-Committee shall:

1. Share all relevant data and information needed to support productive deliberations (e.g. information on policies, programs and services, human and financial resources, community needs and concerns).
2. Jointly assess analyze and plan with respect to issues within the Prevention Sub-committee mandate.
3. Advocate and liaise with internal and external stakeholders to address common health issues.
4. Based on deliberations, prepare joint briefings, advise, provide options and make recommendations to the Co-Management Committee

5. Be responsible for monitoring progress and providing regular status reports to the Co-Management Committee, Health Secretariat, Treaty organizations, First Nations communities and FNIH
6. Report to the Co-Management Committee on a quarterly basis
7. Prepare a report and submit 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 - FNIH Alberta Region

### **6.1 Appointment**

First Nations signatory will designate their representation and be able to appoint two representatives. Designated Co-Management liaisons will also be appointed to sit as ex-officio and allowed to participate in meeting discussions.

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 Treaty area representative and FNIH representative. Co-Chairs will be determined on a fiscal year basis.

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

Non-Committee members may attend all or portions of the Sub-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 voting members representing First Nations.

**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 quarterly on dates mutually agreed upon by the members of the Sub-Committee. Teleconference, video and virtual conferences may be called as required.

Pre-set dates will be determined at the start of each fiscal year. At least one of the scheduled meetings will occur within a First Nations community or tribal council.

The Sub-Committee will draw up a schedule of meetings and shall provide it to all Sub-Committee members, Co-Management Liaisons and the Health Secretariat.

In order to allow for pre-consultation of agenda items, all background materials and resources required to make an informed decision must accompany or be available with the written notice 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 Prevention Programs Sub-Committee will ensure that their personal interests do not benefit in any form from their official actions as part of the Sub-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 agreed guidelines established 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 Prevention Programs Sub-Committee, we hereby certify that these Terms of Reference have been reviewed and approved by the Sub-Committee on May 19, 2009:

Sandra Shade  
Co-Chair

Heather Young  
Co-Chair

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

