

Northern Healthy Communities Partnership

Framework Document



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Table of Contents

Overview.....	4
NHCP Vision, Mission and Values.....	5
Population Health Promotion.....	6
Structure.....	8
Core Group.....	8
Action Teams.....	10
Current NHCP Action Teams.....	11
NHCP Coordination.....	13
NHCP Strategies.....	13
Financial Accountability And Reporting.....	15
Funding Sources.....	15
Funding Provisions and Principles.....	15
Appendix A - Current NHCP Partners.....	17
Appendix B - Historical Background.....	18
Appendix C - Financial Accountability.....	19



Overview

The Northern Healthy Communities Partnership (NHCP) is a network of organizations working proactively to improve the health of people in the region by influencing the conditions in which they live, learn, work and play. Working together using a population health promotion approach, NHCP partner organizations are able to have a greater impact on the populations they serve, building healthier communities together.

NHCP partner organizations, through the Core Group, jointly identify priority areas for action based on challenges facing their organizations and impacting the health of northern Saskatchewan residents. NHCP Action Teams are formed around these priority areas, composed of representatives from interested partner organizations. With guidance and support from the Core Group, NHCP Action Teams choose, plan, implement and evaluate population health promotion strategies and projects aimed at addressing the upstream causes of their action area and improving the health of the northern Saskatchewan population. As part of NHCP teams, professionals from partner organizations across northern Saskatchewan and the province develop connections, motivation and specialized tools to help them be more effective in their everyday work.

The Northern Healthy Communities Partnership was established in 2004 after evolving from the Northern Diabetes Prevention Coalition and adopting a broader population health promotion focus. NHCP partners include provincial and First Nations health organizations, as well as early childhood, recreation, education, provincial and community based organizations.



NHCP Vision, Mission and Values

Vision

Healthy people, vibrant communities.

Mission

Working collaboratively with communities to maximize their strengths and achieve wellness.

Values

Collective Impact – We recognize that we are stronger together and work to leverage our relationships for the greatest benefit of the people of northern Saskatchewan. We seek opportunities to reinforce and celebrate efforts of each partner, through both collective and independent endeavours.

Engagement – We are true partners, sharing ownership of and actively contributing to joint initiatives. We invest in the individual, community and organizational relationships that are critical to successful partnership. We practice open, honest and frequent communication.

Respect – We demonstrate through our interactions the value we see in every person and partner, their unique gifts and roles. We seek to create an environment that enables and encourages participation from members. We make time to honour the history, culture and traditions of our communities and partners.

Accountability – We are accountable to each other, taking responsibility for our actions and decisions, and meeting our commitments. We are accountable to our partner organizations, representing their interests openly and promoting the work of the group with our colleagues.

People-centred – We pursue initiatives that are respectful of and responsive to the needs of the people we serve, with a focus on building wellbeing, equity and resilience. We seek perspectives from northern Saskatchewan communities and welcome the participation of community members in the partnership.

Health promotion – We aim to influence the conditions which are the source of health for people and populations, empowering individuals and communities to improve their health. We understand health in a wholistic way, encompassing physical, mental, emotional, social and spiritual dimensions.



Population Health Promotion

Health is more than the absence of disease. Health is a wholistic concept and includes physical, social, emotional and mental well-being. Health is thought of as a resource, for having health allows a person to cope with change, contribute to the world around them and achieve their goals and dreams. When health is thought of in this way it is clear that good health is about much more than good health care. In fact, every organization and sector bears some responsibility for the health of those they serve and interact with just as they benefit from a healthy population.

Population health promotion is an approach to improving health that focuses on changing the conditions in which people live, learn, work and play to make it easier for people to make healthy choices. While biology and genetics influence the health of individuals, living and working conditions like income, education, employment and social supports have been shown to have an even greater impact on the health of both individuals and populations. These conditions or factors are known as the “social determinants of health.” Improving the conditions which determine health can help make people healthier by default. Reducing the societal barriers to good health also increases the decision-making power of individuals, providing those individuals greater opportunity for choice and more control over their own health.

Addressing “upstream” determinants of health, like housing and early childhood development, requires the input and contribution of many sectors. As such, employing a population health promotion approach requires working in partnership with people and organizations from a variety of agencies, organizations and fields that also have an interest in health, its determinants and in vibrant northern Saskatchewan communities. The complexity of the way in which living conditions interact to influence health status means that efforts to improve health through population health promotion also need to be multi-faceted and long-term to be effective.

Population health promotion strategies fall into five broad categories which reflect the diversity of actions and actors that can influence health: building healthy public policy, creating supportive environments, strengthening community action, developing personal skills and reorienting health services. Using a population health promotion approach means not only employing these strategies to influence the upstream determinants of health, but prioritizing strategies that will reduce the disadvantages some groups of people experience due to the conditions in which they live, learn, work and play. Health equity refers to equal opportunities for everyone to achieve and experience good health. Improving health equity, or giving everyone a fair chance at good health, is one of the goals of population health promotion.

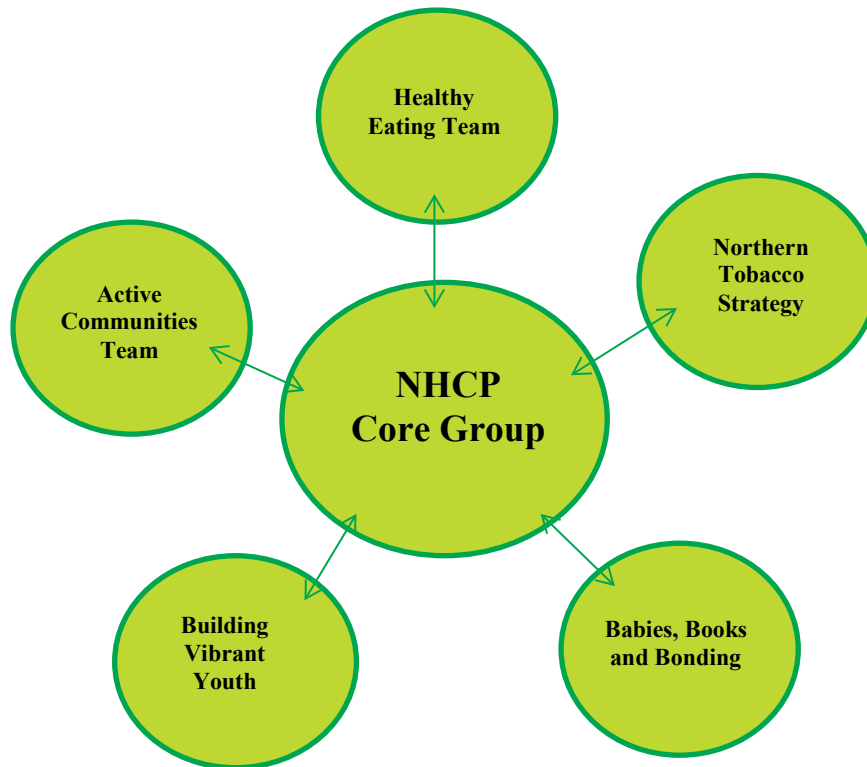


Building healthy public policy	<ul style="list-style-type: none">• Establishing health as the responsibility of policy makers in all sectors and organizations and part of all policy making
Creating Supportive Environments	<ul style="list-style-type: none">• Ensuring the places and spaces where people spend their days support and encourage health and wellbeing
Strengthening Community Action	<ul style="list-style-type: none">• Engaging and empowering communities to take control of and improve their own health
Developing Personal Skills	<ul style="list-style-type: none">• Enabling learning and development , including information and skills, across all dimensions of health
Reorienting Health Services	<ul style="list-style-type: none">• Expanding the role of health services beyond clinical care to creating and championing conditions which promote health



Structure

The Northern Healthy Communities Partnership (NHCP) partners representation a variety of organizations and sectors. Membership is open to organizations interested in supporting and participating in population health promotion approaches to improving the health of northern Saskatchewan. The NHCP partner organizations designate representatives to participate in the Core Group and NHCP Action Teams.



Core Group

The Core Group of the NHCP is composed of leaders and managers from NHCP partner organizations. The Core Group meets quarterly, including one in-person meeting per year. The Core Group is responsible for identifying population health promotion priorities for northern Saskatchewan, to providing guidance and strategic direction to the partnership and supporting the work of NHCP.

The key functions of the NHCP Core group are to:



- Identify new or emerging population health promotion issues and work together to maximize resources, reduce duplication and identify common goals and strategies.
- Collaborate and contribute to the direction of the NHCP work.
- Provide overall coordination, strategic support and guidance to NHCP Action Teams, including by approving annual work plans and budgets.
- Make recommendations for and approve NHCP documents, policies and procedures.
- Build and strengthen partnerships with northern communities, sectors and organizations as they relate to the NHCP and population health promotion.

Core Group Membership:

- The NHCP Core Group has at least one representative from each NHCP partner organization, from their leadership or management team. This representative should have knowledge of the population health promotion priorities of their organization, the ability to make decisions on behalf of their organizations and the ability to communicate NHCP strategies and decisions to their entire organization including their organization's leadership.
- Core Group members should be from organizations that represent northern Saskatchewan, defined as any organization within the 3 northern health regions or NITHA partner organizations or provincial organizations that are northern population health promotion stakeholders.
- The chairs of each of the NHCP Action Teams are members of the NHCP Core Group.
- The NHCP Coordinators are members of the NHCP Core Group.

Core Group Member Responsibilities:

- Attend meetings and teleconferences to represent and make decisions on behalf of their organization at the NHCP Core Group table.
- Bring forward population health promotion priorities on behalf of their organization to discuss with the Core Group and make decisions regarding strategic action.
- Communicate decisions and information from the NHCP back to their organization.
- In consultation with their organization, identify Action Team members from their organization and communicate their Action Team representatives to the NHCP Coordinators.
- Support the work of Action Team members from their organization.
- Work with the NHCP Chairs and Coordinators to address any concerns regarding Action Team members from their organization.



- Facilitate official commitment from their organization for Action Team projects through the NHCP Commitment Process, when required.

NHCP Co-Chairs

The NHCP Core Group is co-chaired by the Medical Health Officers (MHO) from the Northern Saskatchewan Population Health Unit (NSPHU) and the Northern Inter-Tribal Health Authority (NITHA).

NHCP Co-chair responsibilities:

- Review and approve agendas set by NHCP Coordinators and chair Core Group meetings.
- Support the NHCP Coordinators.
- Liaise with leadership of Core Group organizations.
- Problem solve with the Action Teams and Core Group.
- Identify issues and opportunities for NHCP based on connections to other organizations and Ministries.
- Provide overall strategic direction.

Action Teams

The NHCP action teams plan, implement and evaluate population health promotion strategies and projects related to the focus area of their action team. Action Teams meet eight to 12 times a year as is appropriate for their workplans, including one or two in-person meetings. Temporary Action Teams may be formed for special, short-term northwide projects. The Action Teams include representatives from NHCP partner organizations who are responsible for actively participating in the work of the Action Team and for leading the implementation of Action Team projects within their organizations and communities.

Key Functions of the NHCP Action Teams:

- Identify new or emerging population health promotion issues relevant to their action team.
- Draft a yearly work plan and budget for approval by the NHCP Core Group.
- Collaborate to plan, develop, implement and evaluate the work plan and projects.

NHCP Action Team Membership:

- The NHCP Action Teams have representation from the various NHCP partner organizations. Representation for the Action Teams is determined by the NHCP Core Group organizational representative, in consultation with their organization.



- Action Team membership should include at least one representative from each partner organization who has the ability to lead implementation of the Action Team’s collaborative activities and projects throughout their organization and communities. Other organizational representation is also encouraged.
- Action teams may include members from organizations outside of the NHCP Core group organizations with consideration to the following:
 - Unless otherwise agreed, NHCP funding must be spent within the northern Saskatchewan, as per the NHCP financial guidelines.
 - Care should be taken to maintain the interests and voice of the northern Saskatchewan.
- Partner organizations may choose not collaborate on project development and/or may choose not to implement the project within their organization, where, occasionally, strategies and projects do not align with current priorities for the organization.

NHCP Action Team Member Responsibilities:

- NHCP Action Team representatives participate actively and contribute to the collaborative work of the Action Team.
- Implement the collaborative strategies and projects developed by the Action Teams within the organizations and communities that they represent.
- Regularly attend meetings and represent their organization at Action Team meetings and relay information to and from their organizations.

Current NHCP Action Teams

The five Action Teams of the NHCP focus their work in the areas of: promoting and enabling active living to maximize health for all ages and abilities; supporting early literacy to improve lifelong mental wellbeing; building resilient young people to reduce substance abuse and risk taking; fostering nutrition through healthy food environments, and; reducing commercial tobacco use while respecting the region’s rich traditions.

Currently the NHCP has five Action Teams that work collaboratively to plan, develop, implement and evaluate population health promotion strategies and projects related to the focus are of the Action Team.





Active Communities Team (ACT) – The Active Communities Team plans and implements projects meant to build capacity in northern Saskatchewan communities to create environments that support physical activity. The team collaborates across sectors to provide information about and advocate for the physical, social and policy conditions that enable individuals to lead physically active lives.

Babies, Books and Bonding (BBB) – The Babies, Books and Bonding team supports early literacy to improve lifelong learning, achievement and mental wellbeing. The team provides direction and program development for the Babies, Books and Bonding early literacy program, which provides age appropriate board books to children and families along with education on the importance of reading and telling stories through nurses who provide childhood immunizations at well-child clinics.



Building Vibrant Youth (BVY) – The NHCP Building Vibrant Youth Team works to empower northern Saskatchewan communities to respectfully engage, mentor and build relationships with all youth and to support a healthy environment where the dreams and gifts of all northern youth are realized.



Healthy Eating Team (HET) – The Healthy Eating Team fosters nutrition by supporting and rewarding the creation of healthy food environments, such as those in northern Saskatchewan schools and restaurants, to prevent chronic disease. The team also works on projects to support pre- and post-natal nutrition for mothers and infants and projects to support food security in northern Saskatchewan.



Northern Tobacco Strategy (NTS) – The Northern Tobacco Strategy works to build environments that are resistant to commercial tobacco use while being respectful of the traditional use of tobacco. The work of the NTS focuses on two target populations: pre and post-natal mothers and youth.



NHCP Coordination

The Northern Healthy Communities Partnership has two Coordinators, the Health Promotion Advisor with the Northern Inter-Tribal Health Authority and the Population Health Promotion Coordinator from the Northern Saskatchewan Population Health Unit. The NHCP Coordinators provide ongoing support to the Northern Healthy Communities Partnership.

NHCP Coordinator Responsibilities:

- Provide ongoing support to the NHCP Action Teams to plan, develop, implement and evaluate their work plans and budgets.
- Provide orientation and support to the NHCP Action Team chairs.
- Develop and update NHCP documents and policies to be reviewed and approved by the Core Group.
- Build population health promotion capacity within the Action Teams and NHCP partnership.
- Oversee the financial tracking and reporting for Action Teams.
- Develop and lead special projects.
- Monitor and support member engagement.
- Manage partnership communication and facilitate communication between Action Teams and the Core Group.

NHCP Strategies

Northern Healthy Community Partnership strategies and projects are prioritized collaboratively. NHCP partner organizations bring forward population health promotion issues and priorities. The following criteria are used to determine if a population health promotion issue and proposed strategies will be NHCP priorities.

Focus is on north-wide strategies

- Strategies and related projects focus on the entire northern Saskatchewan region and are relevant to the majority of the member organizations of the NHCP partnership.
- Occasionally strategies and projects may not be a current priority for an organization. Organizations may choose not collaborate on project development and/or may choose not to implement the project within their organization.

Focus is on upstream population health promotion strategies



- Strategies and related projects utilize the population health promotion strategies:
 - **Building healthy public policy** by supporting organizations and sectors to consider the health impact of their policies.
 - **Creating supportive environments** where people live, work, learn and play to make it easy to make healthy choices.
 - **Strengthening community action** by developing and supporting the capacity of communities to participate in and take action on issues that affect their health.
 - **Developing personal skills** regarding health and life skills, including decision making, problem solving, coping with emotions and strong relationships with others.
 - **Reorienting the health care system** from focusing primarily on health care delivery to those who have risk factors or who are ill, to including a population health promotion approach.

Focus is on collaboration

- Members work collaboratively to plan and implement north-wide strategies and projects.

Focus is on building capacity

- Capacity is developed in Action Team members who in turn build capacity in their organizations and communities.
- Individual Action Team members implement NHCP projects and resources within their own organizations and communities.

Focus is on evidence based approaches

- When selecting strategies and related projects, Action Teams use established best practices and evidence-based decision making.



Financial Accountability And Reporting

Currently the Northern Healthy Community Partnership is funded through a variety of sources. Partners are encouraged to provide both financial and in-kind support.

Funding Sources

Northern Saskatchewan Population Health Unit

The North Saskatchewan Population Health Unit, on behalf of Mamawetan Churchill River Health Authority, Keewatin Yatthé Health Authority and Athabasca Health Authority, provides annualized funding for NHCP. This funding supports the development and implementation of NHCP strategies and projects for on- and off-reserve communities within the boundaries of the three northern health authorities.

Northern Inter-Tribal Health Authority

The Northern Inter-Tribal Health Authority provides funding as appropriate for NHCP strategies and projects in the NITHA partner communities that fall outside of the boundaries of the three northern health authorities.

External Funding

External funding is available through a variety of grants and partnerships. In most cases, external funding supports the NHCP strategies and projects for the communities served by the Northern Saskatchewan Population Health Unit and Northern Inter-Tribal Health Authority.

Funding Provisions and Principles

Funding for NHCP activities is held within the Population Health Unit budget, under the Mamawetan Churchill River Health Region as the accountable partner.

Three financial principles were established to help ensure NHCP financial activities are transparent, equitable systematic and understood by partner. These principles, which serve as the foundation for budget-related decision making and processes, are:

- **budget** - common understanding of revenue generation;
- **budget allocation** - expenditure plan and approval, and;
- **financial accountability** - reporting and responsibility.



Further information on these principles and how they are operationalized can be found in Appendix C.

Annualized funding for NHCP activities is available to Action Teams to support the implementation of their annual work plan. Funding can be accessed via requests to the Core Group. The Core Group has decision making authority for allocation of this funding.



Appendix A - Current NHCP Partners

Athabasca Health Authority
Keewatin Yatthé Health Region
Kelsey Trail Health Region
KidsFirst North
Lac La Ronge Indian Band
Mamawetan Churchill River Health Region
Meadow Lake Tribal Council
Ministry of Justice
Northern Human Services Partnership
Northern Inter-Tribal Health Authority
Northern Lights School Division #113
Northern Saskatchewan Population Health Unit
Northern Sport, Culture & Recreation District
Northern Teacher Education Program
Peter Ballantyne Cree Nation
Prince Albert Grand Council
Saskatchewan Cancer Agency
Saskatchewan Heart and Stroke Foundation
Saskatchewan Prevention Institute

* Some agencies may have been inadvertently missed



Appendix B - Historical Background

In 1999 – 2000 the Northern Diabetes Prevention Coalition (NDPC) was formed to collaborate to promote healthy eating and physical activity for northern Saskatchewan people as a prevention strategy to address the increased incidence of type 2 diabetes. The NDPC was a coalition of both on and off reserve partners. The coalition used a slogan called “Making the Healthy Choice the Easy Choice”.

At this time, the northern Saskatchewan health regions were one of seven provincial demonstration projects that received prevention-gearred funding for a three year project from the Saskatchewan Ministry of Health. As well, First Nations health organizations were also working on diabetes prevention through the Aboriginal Diabetes Initiative. The decision was made to form the NDPC to work together with other sectors such as recreation and education to improve health and well-being with the aim of reducing diabetes rates.

In 2004, the Saskatchewan Ministry of Health introduced their population health promotion strategy, “Healthier Places to Live, Work and Play”. The coalition membership met to discuss ways to enhance actions and expand work within the provincial strategy. There was agreement to continue to work collaboratively to achieve better health in Northern Saskatchewan. There was a funding recommitment from the Ministry of Health to support population health promotion work. In 2004, the NDPC changed its name to the Northern Healthy Communities Partnership.

The NHCP continues to build upon the Northern Diabetes Prevention Coalition’s foundation and success. The NHCP continues work collaboratively on north-wide population health promotion strategies that aim to enhance the health and well-being of communities and citizens in northern Saskatchewan.



Appendix C - Financial Accountability

The following table details financial accountability and reporting processes as reviewed and recommended by the Co-management Advisory Group of the three northern health authorities.

#	TOPIC	BACKGROUND	Source	PURPOSE	PROCESS EXPLANATION
PRINCIPLE #1 – BUDGET					
1 -1	NHCP baseline budget	Annualized baseline funding is provided at \$46,356 per year to the Population Health Unit (PHU) for the three northern health authorities: Mamawetan Churchill River Health Region (MCRHR), Keewatin Yatthé Health Region (KYHR) and Athabasca Health Authority (AHA)	Ministry of Health	To provide north-wide (on- and off-reserve) population health promotion initiatives, that address each of the 4 pillars: active communities; accessible nutritious food; mental well-being and decreased substance use/abuse	The baseline budget was established in 2006. The funds are held within the PHU budget, under MCRHR.
1 - 2	Additional fundraising	Funds for targeted projects may be solicited and or received, over and above the baseline funds	Ministry of Health; northern Health Authority or other NHCP partner; Industry; Grant funding agency; other donations	For North-wide Population Health Promotion initiatives; may be targeted to one or more pillars	Requests for additional funds are deemed 'contracts' and are processed through MCRHR's contract approval process, following approval by NHCP financial decision-making processes.
1 -3	Revenue generated by NHCP	There is the potential to generate funds, such as through cost recovery for materials produced; for conference registration fees	PHU/NHCP	To allocate generated revenue to PHU/NHCP	Income generated in one year is to be identified as revenue in the following year's budget and assigned to the NHCP. This allocation requires a mechanism to be set up with MCRHR's finance office.
PRINCIPLE #2 – Budget Allocation					
2 - 1	Decision-Making	Previously decisions regarding		To determine approval body for	The NHCP Core Group will have authority to make allocation decisions.



#	TOPIC	BACKGROUND	Source	PURPOSE	PROCESS EXPLANATION
		spending NHCP funds were made to support directions supported by the Core Group, with discussions with the HP or Community Services Managers and the NHCP Coordinator at the PHU covering ad hoc decisions		NHCP budget allocation	Once the budget is determined, financial decision-making is in accord with MCRHR's accountability process and signing authority levels, with oversight by the PHU Director. See 3-2.
2 - 2	Funding allocation at the beginning of the fiscal year	Annual budget includes baseline of \$46,356, in addition to deferred NHCP and targeted funding	As for principle 1	To forecast and assign the budget at the beginning of the year for north-wide initiatives open for provision to all NHCP partners	NHCP funds are requested by each Action Team, based on their annual work plan. The baseline funds of \$46,356 will be divided equally amongst the Action Teams with the exception of those that receive core funds for their projects from other sources (e.g. Babies, Books and Bonding). The Core Group will have the authority to allocate deferred funds as requested for special and/or new projects or project expansions that help NHCP work towards its vision. Action Team work plans and associated budget projections/requirements will be submitted to the NHCP Coordinator on or before February 15th.
2 - 3	Funding requests during the year				The NCHP Coordinator will then convene the March meeting of the NHCP Core Group to review requests and approve budgets.
2 - 4	Scope of projects				Initiatives will have outcomes directly related to one or more of: Nutrition, Physical Activity, Mental Well-Being and Substance Use and Abuse. All initiatives funded by the NHCP must be open to all NHCP partners (meaning: be implementable or open for uptake in their communities). Partners and/or communities may choose not to participate in particular NHCP projects.



#	TOPIC	BACKGROUND	Source	PURPOSE	PROCESS EXPLANATION
PRINCIPLE #3 – FINANCIAL ACCOUNTABILITY					
3 - 1	Accountable partner	One of the Northern RHAs will be the accountable partner. KYHR held the NHCP funds until 2006, when MCRHR assumed this role.			The PHU manages the NHCP budget, following MCRHR's financial accounting processes.
3 - 2	Signing authority	MCRHR assigns signing authority based on levels of accountability.			The NHCP Coordinator may authorize expenses < \$500.00 that have been approved as part of the respective Action Team budget. Any expense over \$500 must be authorized by the PHU Director.
3 - 3	Coordination and tracking of NHCP expenses				The NHCP Coordinator will work with the PHU Director to track all expenses. Action Team chairs will track the expenses for individual teams under the guidance of the NHCP Coordinator.
3 - 3	NHCP fund deferral at fiscal year end	Unspent funds are deferred within the NHCP budget		Provide a consistent deferral process for surplus funds	Action Team chairs will: Provide a financial and activity report and reasons for over or under expenditure at Core Group meetings; if appropriate suggest options for unexpended funds.

