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Subject: Innu Round Table Meeting Notes Dec 4th
Date: Wednesday, December 11, 2013 10:12:00 PM
Attachments: [IRT Mtg Dec 2013 Attachments.zip](#)
[IRT Mtg 4 Dec 2013 - Draft Record of Decisions.pdf](#)
[IRT Mtg - 4 Dec 2013 - List of Participants.pdf](#)
[IRT Sec Phone-Fax List Dec 2013.pdf](#)

Attached for your review are the draft Meeting Notes/Record of Decisions for the IRT Meeting in St John's, NL on Dec 4th. Please direct any comments or corrections to either Marcel Ashini or myself by Jan 10th, 2014.

Attached is a copy of the List of Participants at the meeting and revised contact information for the IRT Secretariat.

Also included, in a separate zip folder, are the numerous attachments to the Meeting Notes:

- IRT Sec Workplan (Updated Dec 2013)
- IRT Sec Revised Contact Information
- Status Report Capacity Development Projects
- IMC Terms of Reference
- IMC Summary Report
- HiM Advisory Committee
- LCCM Block 1 Report
- FSR Mandate and Role

For planning purposes, please note that the next IRT Meeting is planned for March 19/20th, 2014 in Goose Bay, NL.

Steve Joudry
IRT Secretariat

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Innu Roundtable Meeting
December 4, 2013 - Delta Hotel, St. John's NL
Record of Decisions

Dec 11th, 2013

1. Opening Remarks

Prote Poker noted that at the Innu Nation recent AGM the two main issues were Child apprehension and Education, particularly the lack of post-secondary resources. He asked that all parties come together to address these and other healing matters.

MIFN Chief Gregory Rich indicated that the community is aware that change is coming and that they are prepared for it. But he still had 60 people arrive seeking help for food and fuel. He is committed to helping his people and will be a productive partner in healing efforts, but needs the help of others around the table to succeed.

Mary Jane Nui on behalf of SIFN, Dougal MacDonald for AANDC, Debra Keayes-White of Health Canada, and Brian Harvey for the province, all provided positive remarks on progress and the need to work together on complex issues.

2. Review Agenda

The proposed agenda was reviewed. The IS/CYFS Integrated Case Management services pilot project was added to the CYFS update item. It was noted that there may be a lunch meeting for Innu leadership with the provincial Minister of CYFS and that further adjustments may be made to the agenda.

3. ACTION ITEM UPDATES

All Actions Items from the October 2nd IRT Meeting in Halifax were reviewed.

Previous Action one: Completion of incorporation and adoption of bylaws by Board of Directors.

On agenda today.

Previous Action two: Distribution of the IRT Organization Chart and revised contact information.

S. Joudry provided copies of the Secretariat's workplan and noted each key item (Attached). The contact information for the IRT Sec staff was revised to include a change in Fax #.

Previous Action three: FSR Appointment and meeting.

This item is on today's agenda.

Previous Action four: Review IRT Terms of Reference for next meeting.

This will be done after the FSR mandate is clarified today.

Previous Action five: The IRT organizational chart will include an outline of the IS Devolution project team.

Completed.

Previous Action six: AANDC/Dougal will begin upfront work on getting general assessment underway and funding agreement drafted.
Underway.

Previous Action Seven: The IS Devolution Plan will be presented at the next IRT meeting and the parties will determine if the April 2014 date for Project start can be met.
On the agenda today.

Previous Action eight: Terms of reference for new health committee to be tabled at next IRT meeting for approval.
On Agenda today

Previous Action nine: CYFS Committee to provide updates on Enhanced Prevention as soon as possible.
On the agenda today

Previous Action ten: IRT/CYFS Coordinator (Wendy White) will put this (care and custody data) on the Planning Circle agendas and report back on a regular basis.
On the agenda

Previous Action eleven: The 2014-2015 health funding agreements for MIFN and SIFN will show what is regular funding and what is incremental healing funding to ensure clarity.
This will be contained in the new agreements.

Previous Action twelve: The Community-based Healing Strategies/Plans will be finalized through the Capacity Development Projects this year.
Update on agenda today

Previous action thirteen: MIFN Council to submit signed BCR on support for the LCCM to complete the submission for AANDC finding support.
Completed.

Previous Action fourteen: The IRT will try to supplement travel costs through IRT budget for Block 1.
Ongoing.

Previous Action fifteen: Jeff Brant, will develop a revised schedule of training locations to include Natuashish with a view to reducing travel costs for MIFN.
On Agenda.

4. Federal Special Representative (FSR)

Ray Andrews spoke of his appreciation for the role of FSR and described the learning curve he had been on since appointment. He then laid out the FSR's six main functions:

- 4.1 Provide Key linkages between ongoing Healing processes and land claim self-government negotiations.
- 4.2 Represent the Minister at round table and sub-committee meetings.

- 4.3 Provide political oversight and liaison to the IRT process, involving three levels of government: Innu, Provincial and Federal.
- 4.4 Encourage necessary federal departments and agencies to participate in the IRT process and provide feedback as required.
- 4.5 Support the Innu in their efforts, providing advice as requested and available.
- 4.6 Strategic emphasis on Outcomes and Sustainability, assisting all parties to move things forward if obstacles and long delays are encountered.

5. IRT Incorporation & Bylaw

Incorporation documents have gone back and forth between the lawyers and final approval from NL is imminent. As soon as complete, the initial three founding members of the Board of Directors will meet to finalize the Board membership, adopt a By-law on its structure, and adopt a policy on its accountability mechanisms and corporate procedures.

ACTION: Advise of incorporation completion and operational status.

6. Income Support Devolution update

J. Higham provided a historical background noting work evolved from facilitating and encouraging applications to the province; a demonstration project under provincial laws; provincial Minister's five conditions for a project; to most recently-- the Transition to Devolution proposal.

Dougal McDonald noted that AANDC supports the process as pragmatic with good provincial support, but that a couple of matters had arisen—the nature of the MOU itself, the nature of a funding agreement for it, and the program and funding authorities involved. He explained that these matters were not “show-stoppers” and would be resolved soon.

Mark Nui noted that at the land claims table, some were considering MOU's as impacting self-government direction. He asked that any IRT documents include clauses about being without prejudice to land claims or self-government

ACTION: A conference call between AANDC contacts and IRT representatives should take place as soon possible to better identify issues and resolutions to them. [Note: Completed Dec 9th, 2013].

ACTION: Subsequent to the above a follow-up call with full IS Committee members can take place to determine next steps. [Note: Planned for Dec 13th, but cancelled].

ACTION: IRT Documents of an MOU or agreement nature to add without prejudice wording.

B Webber provided an IS workplan and described its main parts.

Joudry noted that the IS committee also had a role in addressing certain IS matters including Active Measures/Enhanced Services. A. Drover suggested a good starting point was the tool kit the province has developed for active measures.

ACTION: IS Committee strike a working group to begin design of active measures.

7. Health Committee (IMC)

As per the action item the Committee tabled a revised terms of reference (attached) for their activities. The TOR were explained and a final review requested by NL in order that a final version can be prepared for IRT approval.

ACTION: B Harvey will coordinate provincial comments and provide to Joudry.

ACTION: Other parties to undertake a review of the Terms of Reference and supply any additional comments to Joudry with a view to being able to approve them at the next IRT meeting.

8. CYFS Operations and MOU's

Higham provided background on CYFS devolution history leading to the recent MOU's between the Bands and the province on improving service delivery, and of the Enhanced Prevention Funding Agreement (EPFA) work.

EPFA efforts are to the point where a draft agreement and a draft endorsement letter is ready but has yet to be circulated for approvals. Innu also expressed concern over:

- where the costing model stands and if timing of a resourcing request will be met;
- that costing should contain eligible-to-be-registered members and;
- costing should also include the pro-rated costs of the new fly-in fly-out staffing model introduced this year by NL for MIFN services.

If all went well an EPFA would be in place for next fiscal year and one step toward devolution accomplished.

ACTION: AANDC to provide final agreement and letter for distribution

ACTION: AANDC to address the Innu's costing concerns.

ACTION: AANDC to advise on the status of the costing model and timing of resourcing request.

W White described the purpose of the two CYFS Planning Circles and that terms of reference were under development for both. Donna O'Brien suggested that there may have been combined meetings to deal with many common start-up issues, but that the intent was clearly for two Circles that could deal with specific issues in each community. D. McDonald suggested that the terms of reference consider if there is a role for AANDC in supporting them or not.

ACTION: NL to confirm their view of one or two Planning Circles

ACTION: Terms of reference drafting process to consider what, if any, role AANDC may play in support of the Circles.

W White and B Webber described that they had begun design and planning work on an integrated services project linking Income Support and CYFS-based services in each community. It is hoped that this can support both Circles and active IS measures in both communities, and that the model can be expanded with other band services and new EPFA services soon after.

ACTION: White/Webber to update IRT on progress of the Integrated Case Management Services Model.

It was noted the Minister meeting over lunch was postponed and may take place later that day.

LUNCH BREAK

Bart Jack addressed the group over the lack of attention to the justice file at the IRT and that Chief Penashue felt significant items impacting families were not getting results. S Joudry explained that Justice and Policing were in the IRT organizational plan as a sub-committee and that Canada and NL had already agreed to the idea/concept, but were waiting for the Innu to describe the mandate and objective on such a wide subject. NL and Canada confirmed their commitment to bring other departments/staff to the table once the Justice & Policing issue was defined. Joudry committed that IRT Secretariat would take steps needed to bring an Innu outline of justice and policing issues for IRT discussion.

ACTION: IRT to bring an outline of Innu Justice and Policing issues to the next IRT meeting.

9. Capacity projects

Joudry supplied a status report updating the capacity development projects for FY 2013-14 (attached). Higham summarized the Connecting the Pieces project (Innu Strategic Health Plans). He had found and reviewed 42 documents relating to Innu healing since 1992. They revealed a twenty year consistency in:

- the definition of multiple causes;
- of the approach needed to heal;
- that healing is individual and family based;
- that healing occurs when individuals are ready;
- that country and culture is part of the solution;
- of common visions of healthy communities and;
- of priority healing areas needing attention.

But the documents also show that differences in the experiences within communities and in the families therein, demanded different timing of priorities, different services and plans tailored for healing needs. In short, that they provide sound basis for a planning framework.

Brant provided a presentation of the LCCM program – Block 1 Summary report. In the planning function, the course will focus on production, implementation, monitoring and refinement of annual workplans for each participating department and program area.

Discussion revealed that with the larger strategic elements laid out in common, and work about to begin on specific workplan elements, what is missing from two comprehensive community –based healing plans are the middle pieces of such plans like shorter term objectives (5 years) and measurements of progress.

ACTION: The review is to be turned into a draft of the common foundations of an Innu Healing strategy for Innu planners to work with.

ACTION: IRT will develop an outline for each community healing plan with a draft of the “middle pieces” in each which will be based on the most recent documents and planning work, plus informed by current capacity development projects and IMC agenda.

ACTION: The draft plans will be taken to the health planning group in January and the Innu leadership will review the outline plan at a Leaders Forum/Meeting on February 11/12th. The framework will be the basis for the participants in the LCCM program as context for their community and program workplans.

New Business

None

Next Steps

Innu Leaders Forum – Feb 11/12th in the Goose Bay area.

Next IRT Meeting is planned for March 19/20th, 2014, in Goose Bay, NL.

Meeting closed at 3:30 pm so Innu leaders could travel to the legislature to meet Minister Davis.

Prepared by: John Higham, Chignecto Consulting

Reviewed by: Steve Joudry, Interim Chair

INNU ROUND TABLE PHONE/FAX LIST**December 1st, 2013**

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Wendy White	CYFS Transition Coordinator	233
Natasha Hurley	Health Coordinator	234
Simon P. Gregoire	Health Liaison Officer-Navigator	234
Bernice Webber	Income Support – Client Service Manager	236
Stella Rich	Income Support – Senior Client Service Officer	235
Winnie Gregoire	Income Support – Client Service Officer	237