



Your file Votre référence

Our file Notre référence

**ONTARIO HEALTH SERVICES INTEGRATION FUND
CALL FOR LETTER OF INTENT (LOI)**

December 19, 2011

We are pleased to invite you to submit a letter of intent, based on the following criteria, to indicate your interest and readiness to develop a multi-year proposal to implement a health service integration project beginning in FY 2012-13 and ending in March 2015.

As you know, the Health Services Integration Fund (HSIF) is a five-year, \$80 million National initiative supporting collaborative planning and multi-year projects aimed at better meeting the health care needs of First Nations and Inuit peoples. First Nations and Inuit Health Branch Ontario Region's (FNIHB OR) allocation is \$6,771,153 from April 1, 2012 to March 31, 2015. HSIF is meant to capitalize on the lessons learned and partnerships established among First Nations and Inuit, provincial and federal representatives from both the Aboriginal Health Transition Fund as well as other successful integration partnerships.

The objectives of HSIF are to improve the integration of federally and provincially funded health services; build multi-party partnerships to advance the integration of health services that are better suited to the health needs of First Nations and Inuit people; improve access to health services; and improve the participation of First Nations and Inuit people in the design, delivery and evaluation of health programs and services. In order for a project to be eligible for funding under HSIF it must be supported by partnerships between First Nations organizations and provincial and federal organizations.

It is important to note that while HSIF is the successor program to the Aboriginal Health Transition Fund (AHTF), it is not a renewal of the AHTF or a roll-over of funding to support the continuation of activities undertaken under AHTF. HSIF is intended to enhance existing First Nations health services by building on successful partnerships established under AHTF. In Ontario Region, our HSIF Advisory Committee agreed that HSIF will fund First Nations led projects.

It is also important to note that in contrast to the majority of programs funded by the First Nations and Inuit Health Branch, HSIF is not intended to be community based universal funding. It is not a source of funds for community programs, capital projects, e-health, infrastructure, permanent staff or service contracts to sustain HSIF.

The Ontario HSIF Advisory Committee comprising participants from First Nations organizations and provincial and federal governments, is responsible for receiving, reviewing and recommending HSIF proposals and monitoring and evaluating project activities to further the integration of health services. FNIH Ontario Region is a member of the Advisory Committee and has responsibility for overall secretariat function and financial oversight of HSIF.

The focus of HSIF projects in Ontario will be guided by the direction and evidence-based priorities set out by the First Nations. These could include any of the four priorities for action on First Nations health in Ontario identified by a senior level trilateral committee: mental health and addictions (including prescription drug abuse); diabetes prevention and treatment; public health; and data management; or other emerging evidence-informed priorities.

The Letter of Intent should identify the primary contact for further proposal development, and should clearly outline how the proposed project would meet the following criteria and ensure project readiness:

- Applicant eligibility (First Nation/First Nation organization in Ontario, eligible for federal funding and working in partnership with provincially funded health organizations, federal partners and other First Nations)
- Intended project meets HSIF objectives; aims to improve integration of federal and provincially funded health services; build on multi-party partnerships to advance the integration of health services that are better suited to the health needs of First Nations; improve First Nations access to health services and improve the participation of First Nations communities in the design, delivery and evaluation of health programs and services.
- Intended project aligns with one of the four priorities noted above or other emerging evidence-informed priorities for First Nations health in Ontario
- Applicant's readiness and capacity to undertake and manage an integration project (staff identified to develop and manage the project; infrastructure in place; available space; financial management and reporting capacity)
- Intended project enhances existing First Nations health services by building on successful partnerships established under AHTF and AHTF lessons learned but is not a continuation of previous AHTF project activities e.g. is a new activity and does not replicate previous AHTF project activities.
- Intended project builds on lessons learned from other successful federal, provincial and First Nation partnership initiatives that would have relevance to HSIF.
- Community support for HSIF initiative (Tribal Council Resolution (TCR) and/or Band Council Resolution (BCR)/letter of support)
- Intended project undertakes activity to improve the continuity of health services in First Nations communities, linkages between services, and/or access to other local health services.
- Indication that relationships would be built through the support and participation of other internal and external partners (First Nations, provincial, federal)
- Indication of how the project would be sustainable beyond HSIF

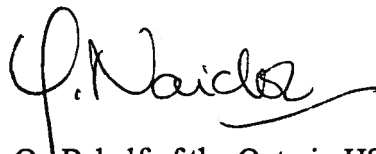
- Significance in terms of advancing improved integration of health services to improve delivery and access to First Nation communities
- An evaluation plan would be developed to monitor and measure project outcomes related to HSIF objectives and the improvement of First Nations health outcomes.
- Proposed multi-year project costs would not be more than \$850,000 in total

Two regional information sessions are being organized in January to provide more information and to encourage ideas for proposal development and partnership. The southern regional information session will be held on **January 17 and 18 in Toronto**, Ontario, to be hosted by the Association of Iroquois and Allied Indians with the support of the Union of Ontario Indians and the Independent First Nations. The northern regional information session will be held on **January 30 and February 1 in Thunder Bay**, Ontario, to be hosted by Grand Council Treaty #3 with the support of Nishnawbe Aski Nation. More details and invitations will follow.

The LOI must be submitted by **February 17, 2012**. As this call for LOIs is **time sensitive**, we will be unable to consider letters received after this date. A separate call for proposals will be issued in February, 2012.

The HSIF Advisory Committee will review submitted LOIs and recommend LOIs that require funding for proposal development. (Please note that the receipt of funding for proposal development is not a guarantee of project funding.) Following recommendations from the Advisory Committee, First Nation communities, organizations and/or other eligible organizations who have been selected will be contacted.

Sincerely,



On Behalf of the Ontario HSIF Advisory Committee:

Jamie Restoule (Union of Ontario Indians)
 Susan Pilatzke, (Local Health Integration Networks)
 Tracy Antone (Chiefs of Ontario)
 Sheila Parekh (Ministry of Health & Longterm Care)
 Harmony Rice (Grand Council Treaty #3)
 Ida Cornelius (Association of Iroquois & Allied Indians)
 Leonor Tavares (Ministry of Health & Longterm Care)
 Yeshodara Naidoo (First Nations & Inuit Health OR)
 Robin Koistinen (Independent First Nations)
 Deborah Wild (First Nations & Inuit Health OR)
 Jason Beardy (Nishnawbe Aski Nation)