

MEMORANDUM OF UNDERSTANDING

BETWEEN:

SOUTHERN CHIEFS' ORGANIZATION INC. (SCO)

AND

THE GOVERNMENT OF CANADA (CANADA)



Canada

Section 1: Principles and Values

- 1.1 Health for Anishinaabeg and Dakota Peoples encompasses the physical, spiritual, mental, economic, environmental, social and cultural wellness of the individual, family and community;
- 1.2 The Anishinaabeg and Dakota Peoples wish, over time, to take greater control over the design and delivery of federally funded health programs and services as part of reconciliation;
- 1.3 SCO represents the common interests of the 34 Anishinaabeg and Dakota communities in southern Manitoba and has been mandated by the Chiefs-In-Summit to support the creation of a new First Nations health governance structure(s) that will assume greater control over design, delivery, funding, management, of health programs and services to improve the quality of life for the First Nations people;
- 1.4 The Parties agree that First Nations must have equitable access to health services.
 - a) With respect to federally funded and delivered health services for First Nations, Canada is committed to ensuring their availability in First Nation communities, the provision of non-insured health benefits throughout Canada and to working with First Nations to fundamentally improve health outcomes.
 - b) With respect to provincial services, the Canada Health Act (“CHA”) requires that insured health services delivered by provinces and territories (primarily hospital and physician services) be reasonably accessible to all residents, including First Nations people, on uniform terms and conditions.

- 1.5 The Parties recognize that the *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP) emphasizes the importance of Indigenous rights to maintain and strengthen Indigenous institutions, cultures and traditions and to pursue self-determination, in keeping with Indigenous needs and aspirations;
- 1.6 The Parties acknowledge the Truth and Reconciliation Commission of Canada's Calls to Action and the final report of the National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG) Calls for Justice, which in relation to health, calls upon governments to implement actions to improve First Nations health;
- 1.7 The Parties recognize that there is a fiduciary relationship between Canada and the Anishinaabeg and Dakota Peoples in southern Manitoba;
- 1.8 The Parties recognize that Treaty rights and Aboriginal rights are protected by section 35 of the *Constitution Act, 1982*. Further, the Parties agree that this MOU will not abrogate or derogate from any Treaty, Aboriginal or Inherent rights;
- 1.9 This MOU is without prejudice to any claim to a Treaty right to health by any First Nation that is a member of the Southern Chiefs' Organization;
- 1.10 This MOU is also not intended to create, recognize, implement or alter any legal rights or obligations on the part of SCO, its member First Nations, or Canada, or to be a treaty, or self-government agreement.
- 1.11 The Parties commit to respecting the autonomy and diversity of tribal councils and communities.

Section 2: Purpose

2.1 The purpose of this MOU is to:

- a) Formalize the commitment of the Parties to sustain a working relationship to promote equity in health care for the Anishinaabeg and Dakota Peoples in southern Manitoba; and,
- b) Formalize the commitment of the Parties' desire to achieve a revitalized, responsive and system-wide approach to health for the Anishinaabeg and Dakota Peoples of southern Manitoba.

Section 3: Roles and Responsibilities

3.1 The Parties will seek to remove impediments to progress to improve increased access to quality health services that meet the needs of the Anishinaabeg and Dakota Peoples by establishing innovative and effective working relationships with health partners.

3.2 The Parties shall work together to develop a new health system governance model in which Anishinaabeg and Dakota individuals, families, and communities are central to decision-making.

3.3 The Parties recognize the importance of engaging the expertise of First Nations communities and health care professionals in developing and implementing a detailed First Nations governed health system.

3.4 Canada will offer contribution funding in an amount to be agreed by both Parties to support the implementation work associated with this MOU.

Section 4: Priorities and Actions

- 4.1 Establish a senior oversight structure that ensures actions and decisions of all officials are consistent with the commitments made herein.
- 4.2 Establish a jointly developed plan of action which will ensure the priority of health transformation and sets out how work will be achieved in a deliberate, planned, and measurable way.
- 4.3 Commit to a joint process to discuss any required policy reform and negotiation mandates required by the Parties to conclude any agreements needed to implement the key commitments set out in this MOU.
- 4.4 The Parties commit to a sustained working relationship with the goal of implementing a new First Nations health structure(s) that will assume greater control over design, delivery, funding, management, of health programs and services.

We, the undersigned, hereby agree to the terms of this Memorandum of Understanding between the Southern Chiefs' Organization and the Government of Canada.

Signed on June 18, 2020.

**Grand Chief Jerry Daniels
Southern Chiefs' Organization**

**Chief Karen Batson, Pine Creek First Nation
Chair, Chiefs' Health Action Table**

**Honourable Marc Miller
Minister of Indigenous Services**

**Marie Doyle
Director General, Strategic Policy
Indigenous Services Canada**

Witnessed by:

**Chief Eugene Eastman
O-Chi-Chak-Ko-Sipi First Nation**

**Chief Sheldon Kent
Black River First Nation**

**Chief Cornell Mclean
Lake Manitoba First Nation**

**Chief Eric Pashe
Dakota Tipi First Nation**

**Chief Lance Roulette
Sandy Bay First Nation**

**Dr. Pam Smith
Regional Executive Officer, Manitoba
Indigenous Services Canada**