

ANNUAL REPORT



FIRST NATIONS & INUIT CONTROL

2000 - 2001

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2000/2001

Health Canada
First Nations and Inuit Health Branch

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INTRODUCTION

This annual report covers the period of April 1, 2000 - March 31, 2001, providing highlights on the accomplishments and activities related to First Nations and Inuit Control. Also included are the challenges and a report on the accountability requirements.

Health Canada

First Nations and Inuit Health Branch

Program Policy, Transfer Secretariat and Planning

Health Funding Arrangements Division

<http://www.hc-sc.gc.ca/fnihb/pptsp/hfa/index.htm>

ACCOMPLISHMENTS

Policy Papers

During the fiscal year 2000/2001, the Branch dealt with new issues as well as revisiting existing policies to ensure that they reflected the current fiscal and health services delivery environment:

Treaty Land Entitlement

The Branch has developed plans to ensure that it will have a process to deal with Treaty Land Entitlement (TLE) issues as they arise.

Criteria on accepting the creation of a new community

This new policy is a guideline for regions to use when approached by First Nation groups wanting to be considered a community by Health Canada. Communities must demonstrate that they meet the policies predetermined criteria before the First Nations and Inuit Health Branch (FNIHB) will establish them as an official new community and before it will determine resources required for the new community based on FNIHB's resourcing policies for care programs.

Publications/Other Documents

A Guide for First Nations in Developing a Community Health Needs Assessment

This guide was developed for use by First Nation communities, Band Councils, Tribal Councils, Inuit organizations and associations. The guide will assist

First Nations in determining what health programs and services are needed and how they will work best in their community.

The guide promotes the integration of community beliefs and values into the design of a community's health program.

Health Plan Demonstration Project

Health Funding Arrangements (HFA) developed a health plan process and related tools to test a new approach to community health planning and accountability processes. The Demonstration Project consists of a number of sites of various First Nation community profiles. The information gathered during the project, will facilitate decision making about the suitability of Health Planning process to meet the FNIHB and First Nations communities' planning, capacity and accountability requirements.

CONTRIBUTION AGREEMENTS

FNIHB implemented the revised Treasury Board Transfer Payment Policy on Contribution Agreements by revising all of its contribution agreements to meet these accountability requirements.

COMMUNICATION

Our website,

<http://www.hc-sc.gc.ca/fnihb/pptsp/hfa/index.htm> has a new design and has been updated to include valuable information to assist Regions as well as communities on the transfer of control of health programs to First Nations and Inuit communities. Some publications / information of interest are:

- Transfer Handbooks;
- A Guide for First Nations on Evaluating Health Programs;
- A Guide to Health Management Structures;
- Transfer Status;
- Auditing & Reporting Guidelines; and,
- Outside Links page.

- Meadow Lake Tribal Council (Saskatchewan); and,
- Sioux Valley (Manitoba)

Health Canada has also been actively involved in the tripartite negotiations, referred to as the “Made-in-Saskatchewan” process, with the Province of Saskatchewan and the Federation of Saskatchewan Indian Nations (FSIN). Initiated in 1996, the “Common Table” provides a forum for developing new governance and fiscal relationships, based on the treaty relationship, between Canada and First Nations in Saskatchewan, with Saskatchewan. It is supported in its work by the bilateral (FSIN/Canada) Exploratory Treaty Table, the Fiscal Relations Table and the Governance Table, all of which involve Health Canada representatives.

The Fiscal Relations Table, compiled data on First Nations expenditures and demographics, and developed models of funding mechanisms to move funds to First Nations Governments. At the Governance table, the FSIN tabled its preliminary report outlining a unified vision of governance.

This served to achieve common understandings on a number of important issues, including: common interests, principles of intergovernmental relations, and options and models for First Nations governance. Sectoral agreement negotiations in health are planned to begin in 2002/03.

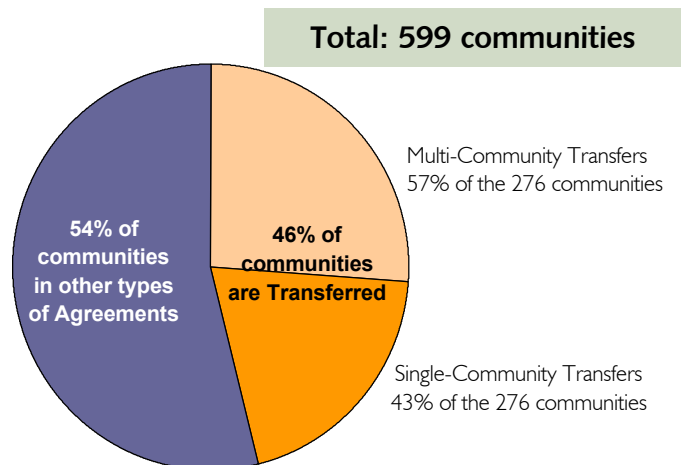
FIRST NATIONS SELF-GOVERNMENT INITIATIVES

Health Canada actively supports negotiations involving health. To-date, over 80 framework agreements have been signed across the country. During 2000/2001, two Agreements-In-Principle (AIPs), involving health programs and services, were concluded, forming the basis for negotiation of final agreements.

The following AIPs are tripartite (i.e., involving the province):

FIGURE 1: SINGLE AND MULTI-COMMUNITY TRANSFERS

This figure shows that as of March 31, 2001, 276 (46%) out of the 599 communities, across Canada that are eligible for Transfer, have signed Health Services Transfer agreements, 158 (57%) were multi-community transfers and 118 (43%) were single-community transfers.



PRIORITIES 2001/2002

Priorities for 2001/2002 included the following:

RESPONSE TO THE AUDITOR GENERAL'S FOLLOW UP REPORT, OCTOBER 2000

The Follow-up Report of the Auditor General of Canada, Health Canada - First Nations Health, Chapter 13 was released in October 2000. This report examined the progress made by Health Canada in taking the necessary action required with respect to observations and recommendations made in the 1997 report on First Nation and Inuit Health.

An action plan was developed to respond to the recommendations and is being implemented by the Branch.

Implementation of the action plan on Transfer related items will commence in 2001/2002.

INFORMATION SYSTEMS

Phase III of the Community Planning Management System (CPMS) is still under construction. Once completed, the Community Profile (CP) and Finance and Forecasting Components will provide information to program managers to facilitate the transfer of existing health programs to communities. The first component, Community Workload (CW) Component, was completed in May 2000. The remaining two components are expected to be completed by March 2002 with full implementation by fall of 2002.

All FNIHB staff are able to access the system online and are able to view and print reports generated by the system.

FNIHB has maintained the system to monitor population growth and workload impacts, provide analysis for core programs and to track additional resources for core programs if and when resources become available.

POLICY/ISSUES

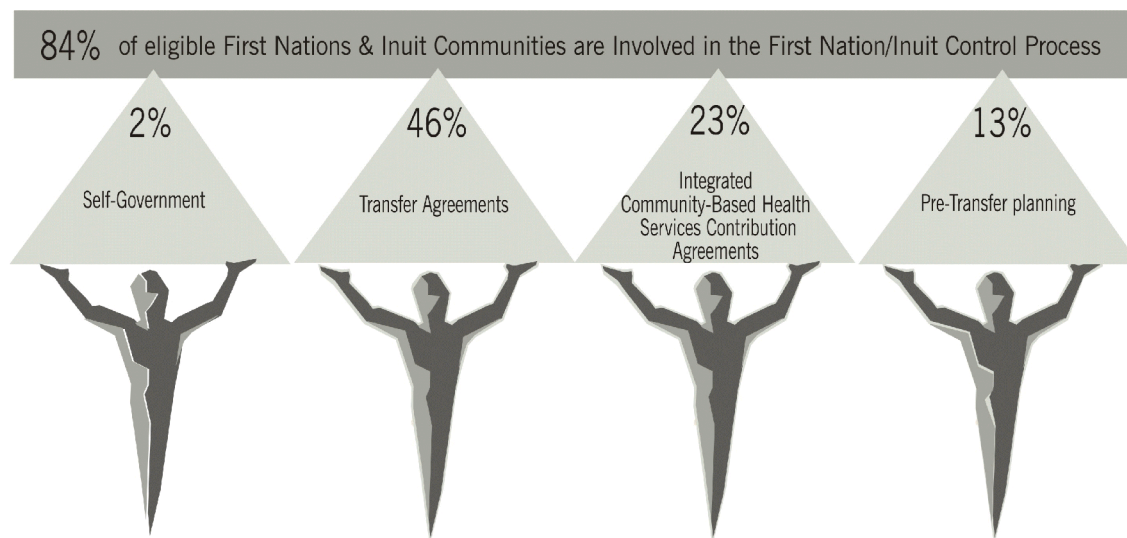
The following policy/issues are planned:

- Treaty Land Entitlement: Resource Impact;
- Moveable Assets Reserve (MAR); Policy for 2nd & 3rd Level Services;
- Unionization and Health Care in transferred communities; and,
- Pensions/Benefits Guidelines.

DEVELOPMENT/REVISION OF PUBLICATIONS AND OTHER DOCUMENTS:

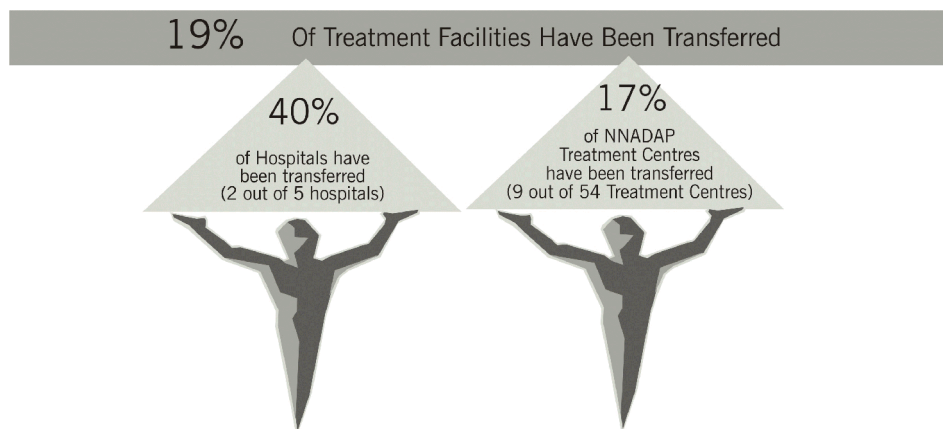
- Develop Health Plan Guide and training materials.

FIGURE 2: STATUS OF FIRST NATIONS AND INUIT CONTROL ACTIVITY



Agreement Type	# of Agreements	# of Communities
Self-Government	9	12
Transfer Agreements	137	276
Integrated Community-Based Health Services Contribution	118	139
Pre-Transfer	56	75

FIGURE 3: TRANSFER OF TREATMENT FACILITIES



Agreement Type	# of Agreements
National Native Alcohol and Drug Abuse Program (NNADAP)	9
FNIHB Hospitals*	2

*Note: As of March 31, 2001, First Nation & Inuit Health Branch operates 3 hospitals: (Sioux Lookout Zone Hospital, Norway House Hospital and Percy E. Moore Hospital).

CHALLENGES

First Nation and Inuit peoples and the First Nations and Inuit Health Branch will face significant challenges ahead including Health System Renewal, Accountability, the development of a Health Plan concept for communities, and the transition to Self-Government.

HEALTH SYSTEM RENEWAL

Priorities include identifying a strategic long-term approach to improving health and seeking additional resources to address critical health sustainability issues. Budget 2000 provided an initial short term step towards the renewal process through the infusion of \$50 million for both the current and next fiscal year to address fiscal pressures caused by a First Nation and Inuit population growth rate, twice that of the Canadian population, and rapidly rising health care costs.

In the longer term, discussions will be undertaken with stakeholders to identify options and strategies for change in areas such as integration, sustainability, capacity development and accountability. This will be followed by a process involving:

- broad-based consultations;
- identification of innovative models; and,
- the creation of long-term strategies for renewed health systems.

This portion of the process will conclude with development of a multi-year framework for a renewed full health system and implementation plan.

ACCOUNTABILITY

Accountability is the obligation to take and demonstrate responsibility for performance based on agreed expectations and within the limits of budgets and existing authorities. Essentially, accountability is about ensuring a formal commitment to responsibilities by FNIHB and First Nations and Inuit

community members. As program delivery moves from federal direct delivery through General Contribution, Integrated Contribution, Transfer Contribution and Self-Government Agreements, other perspectives on accountability become important: the accountability of Chief and Council to community members; the accountability of Chief and Council to the Minister of Health; the accountability of the Minister of Health to the First Nation and Inuit communities; and, the accountability of the Minister of Health to Parliament. It is evident that accountability is an important issue for all levels of government, including First Nations and Inuit, and for the Canadian public.

Today, First Nations and Inuit manage a large portion of program funds and Chiefs and Councils have a dual accountability for its use. This primary accountability is towards their own membership for the effective management of programs and funds to meet community needs. They are also accountable to the government, for the use of those funds to meet community needs.

As FNIHB continues to transfer services and resources to First Nations and Inuit, there is a need for both parties to take a closer look at how they are adapting to this change. There is a need to demonstrate stronger accountability for services and resources.

The current accountability mechanisms for community-based programs, NNADAP Treatment programs and Solvent Abuse centres are as follows:

- Community Health Plan & Updates;
- Community Emergency Preparedness Plan;
- Annual Report;
- Audit Report;
- Training Plan;
- Evaluation Plan;
- Evaluation every five years;
- Intervention in emergencies when the responsible health authority cannot or does not act;
- Accreditation of Treatment Centres*;

- Annual Mandatory Program Report;
- Participation in National First Nation & Inuit Treatment Program Network*; and,
- Management Information System for treatment programs, (currently it is the “Substance Abuse Information System”)*.

* only applicable to Treatment/Solvent Centres

TRANSITION TO SELF-GOVERNMENT

There are many challenges for First Nations and Inuit and FNIHB during the transition from administrative agreements to Self-Government agreements. Some of these challenges are the accountability mechanisms, understanding of the treaty relationship, jurisdiction and program authorities, and the financial and administrative capacity of First Nations.

SYNTHESIS OF COMMUNITY EVALUATION REPORTS: TRANSFER OF HEALTH SERVICES

A synthesis of the community evaluation reports conducted for 13 transfer projects involved in Transfer from 1994 - 1999, raised issues relating to the standardization of data collection and reporting. The majority of the community evaluation reports, commented on the effectiveness of transfer and could be construed as positive or highly positive.

From this synthesis it was found that the reports varied markedly in scope, comprehensiveness and scientific rigour, which made it difficult for comparison. The

Branch’s strategic direction towards improved accountability and standardized reporting, opens the door for a more standardized evaluation reporting model which communities can follow.

An important observation made in the report was that most communities were able to implement their community health activities in accordance to the priorities of their health plan.

FIGURE 4: FUNDING TO SUPPORT FIRST NATION AND INUIT CONTROL

As of March 31, 2001 FNIHB has provided FN/I communities and organizations with \$87.7 million for planning, capacity building and start-up costs involved with the Transfer and Integrated approach. Ongoing funding in the amount of \$52.0 million was spent globally by FNIHB to support Transfer and Integrated Agreements.

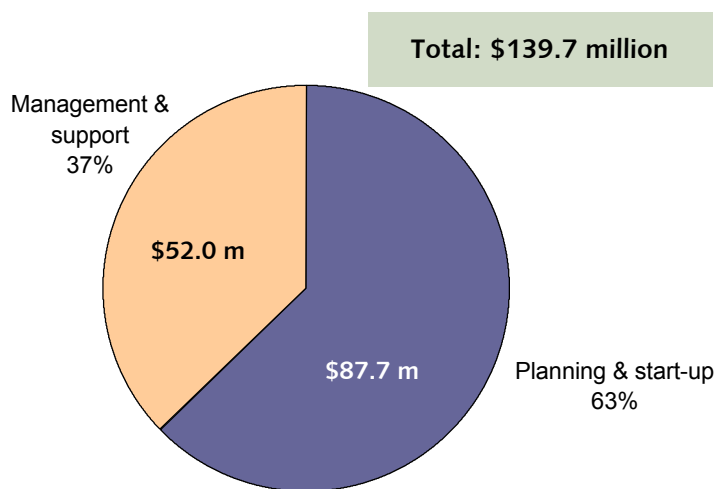


FIGURE 5: TRENDS IN FIRST NATION AND INUIT CONTROL

This figure shows the trend over the years of the steady decline of direct service delivery by the Branch, as First Nations and Inuit assume greater control of health services, through self-government, transfer, integrated and other contribution agreements. As of March 31, 2001, the total amount of funding under First Nation and Inuit control was \$588.6 million. FNIHB direct delivery costs include: salaries; operating; and, minor capital. (Fiscal Years 1999/2000 and 2000/2001 experienced increases in budgets for direct service delivery due to the infusion of new programs resources announced in the 1999 and 2000 budgets).

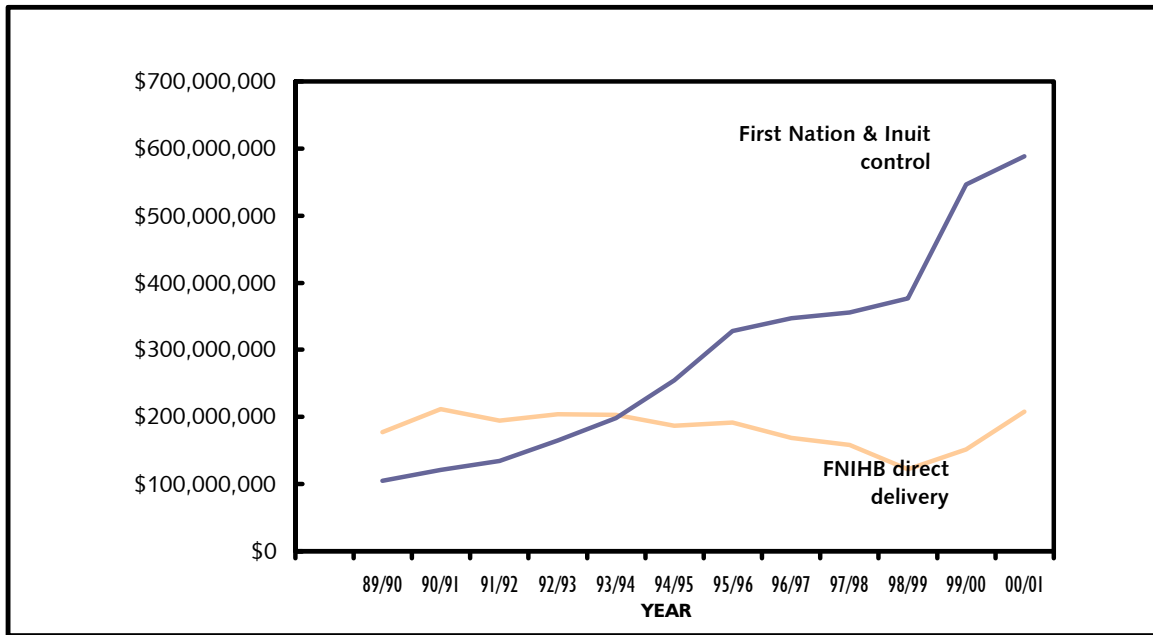
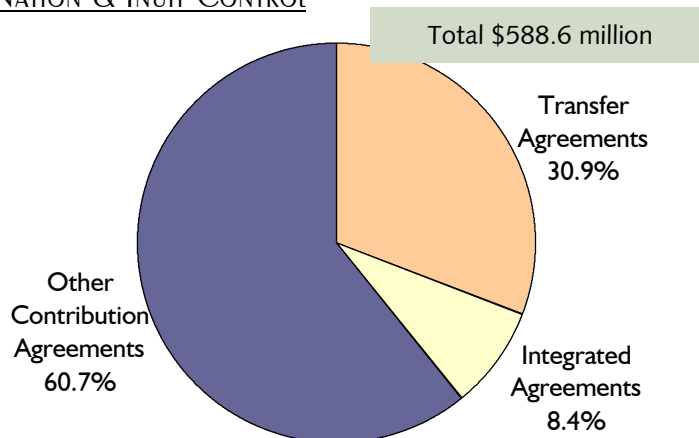


FIGURE 6: RESOURCES UNDER FIRST NATION & INUIT CONTROL

This figure shows the total amount of funding in FN/I control as of March 31, 2001 (\$588.6 million). "Other Contributions" include Non-Insured Health Benefit (NIHB) contributions and NIHB pilots. As more FN/I move towards Transfer and Integrated the "Other Contributions" percentage should decrease.



STATISTICAL OVERVIEW - FIRST NATIONS AND INUIT CONTROL

The following tables/charts provide a more detailed summary of the status of First Nations and Inuit control activity.

TABLE 1: FIRST NATIONS AND INUIT CONTROL ACTIVITY - FIRST NATIONS/INUIT COMMUNITIES

(as of March 31, 2001)

Region	Self-Government	Transfer	Pre-Transfer	Integrated	Other*
Atlantic	0	20	3	11	6
Quebec	0	23	0	4	1
Ontario	0	38	17	40	29
Manitoba	0	33	19	3	7
Saskatchewan	0	60	5	9	9
Alberta	0	4	14	36	4
Pacific	5	98	17	29	55
Yukon	7	0	0	7	1
Total	12	276	75	139	112

* Other, not currently participating in transfer or integrated process.

Table 2: FIRST NATION AND INUIT POPULATION by COMMUNITY TYPE

This table shows the distribution of population by community type, and under transfer. The total population of eligible FN/I communities is 397,211, of which 193,687 or 49% are living in transferred communities.

Nationally	Total # of Communities	Population of Communities	Total # of Communities Under Transfer	Population Under Transfer	% of Communities Transferred	% of Total Population Transferred
Non-Isolated	400	261,283	196	129,120	49%	49%
Semi-Isolated	86	40,672	40	20,907	46%	51%
Isolated	93	88,005	38	40,663	41%	46%
Remote-Isolated	20	7,251	7	2,997	46%	41%
Total	599	397,211	281	193,687	47%	49%

Note: in 200/2001 4 communities moved from transfer to self-government.

Table 3: CURRENT AND PROJECTED TRANSFERS - COMMUNITIES

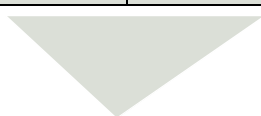
This table shows the status of transferred communities as of March 31, 2001, and the projected uptake to the year 2006. As of fiscal year end 2000/2001, 276 (46%) of these communities have signed a Health Services Transfer Agreement.

Transfers by Region/Communities					
Region	Total Eligible	Transferred as of March 31, 2001		Projected to March 31, 2006	
	Communities Number	Number	% Total	Number	% Total
Atlantic	40	20	50	37	92
Quebec	28	23	82	28	100
Ontario	124	38	31	47	38
Manitoba	62	33	53	52	84
Saskatchewan	83	60	72	69	83
Alberta	58	4	7	9	16
Pacific	204	98	48	137	67
Total	599	276	46	379	63

Table 4: TRANSFER AGREEMENTS AS OF MARCH 31, 2001

Table 4 summarizes the total number of transfer agreements to date, and includes the new transfer agreements signed in fiscal year 2000/2001. This include: 3 single community transfer agreements; 1 multi-community transfer agreement, and 1 treatment centre agreement, for a total of 5 new transfer agreements by the end of the fiscal year 2000/2001.

Region	New Agreements 2000-2001	Total # Transfer Agreements to Date	# of COMMUNITIES REPRESENTED	TOTAL # of FIRST NATIONS AND INUIT COMMUNITIES ELIGIBLE
Atlantic	0	15	20	40
Quebec	1	24	23	28
Ontario	0	24	38	124
Manitoba	3	30	33	62
Saskatchewan	0	22	60	83
Alberta	0	5	4	58
Pacific	1	32	98	204
Total	5	152	276	599



Type of Transfer Agreement	Quantity
AFA/Health Transfer Agreements (DIAND/FNIHB)	2
FTA/Health Transfer Agreements	7
Canada First Nations Funding Agreement (CFNFA)	8
Community-Based 1 st Level Transfer Agreements	120
2 nd & 3 rd Level Transfer Agreements	3
3 rd Level Transfer agreement	1
National Native Alcohol and Drug Abuse Program (NNADAP)	9
Hospitals	2
TOTAL	152

Table 5: PRE TRANSFER ACTIVITY AS OF MARCH 31, 2001

Region	Total # of Pre-Transfer Projects to date	Total # of First Nations & Inuit Communities represented
Atlantic	4	3
Quebec	3	0
Ontario	15	17
Manitoba	13	19
Saskatchewan	4	5
Alberta	10	14
Pacific	7	17
Total	56	75

Table 6: INTEGRATED AGREEMENTS AS OF MARCH 31, 2001

Region	Total # Integrated Agreements to date	Total # of First Nations & Inuit Communities Represented
Atlantic	11	11
Quebec	4	4
Ontario	38	40
Manitoba	3	3
Saskatchewan	9	9
Alberta	22	36
Pacific	24	29
Yukon	7	7
Total	118	139

Table 7: NEW TRANSFER AGREEMENTS - FISCAL YEAR 2000 - 2001

Band Name/Authority	Community Name	Community Type	Band #	Transfer Date	# of Communities Represented
Quebec Region					
La Centre Miam Upukun Inc. (Treatment Centre)	n/a	n/a	n/a	October 1, 2000	n/a
Manitoba Region					
Garden Hill	Garden Hill	Isolated	297	April, 2000	1
Keeseekoowenin First Nation	Keeseekoowenin	Non-Isolated	286	June 1, 2000	1
Rolling River	Rolling River	Non-Isolated	291	October 1, 2000	1
Pacific Region					
Three Corners Health Services Society (Cariboo Tribal Council Society)	Canoe Creek/Dog Creek, Soda Creek, Williams Lake	Semi-Isolated Non-Isolated Non-Isolated	723/ 716/ 719	June 1, 2000	3

Table 8: NEW PRE-TRANSFER AGREEMENTS - FISCAL YEAR 2000-2001

Band Name/Authority	Community Name	Community Type	Band #	# of Communities Represented
Ontario Region				
Beausoleil	Christian Island	Non-Isolated	141	
Ogemawahj Tribal Council	Alderville *	Non-Isolated	160	* New Community added to existing agreement
Shibogama First Nation Council	Kasabonika	Isolated	210	
Walpole Island First Nation	Walpole Island	Non-Isolated	170	
Constance Lake First Nation	Constance Lake	Non-Isolated	182	
Manitoba Region				
Little Black River	Little Black River	Non-Isolated	260	
Pine Creek	Pine Creek	Non-Isolated	282	
Pacific Region				
Inter-Tribal Health Authority Society	Beecher Bay * Squirrel Cove *	Non-Isolated Semi-Isolated	640 553	* New Community added to existing agreement
Nak'Azdli Band	Necoslie	Non-Isolated	614	on hold

Table 9: NEW INTEGRATED AGREEMENTS - FISCAL YEAR 2000-2001

Band Name/Authority	Community Name	Community Type	Band #	# of Communities Represented
Atlantic Region				
Whycocomagh	Whycocomagh	Non-Isolated	29	1
Quebec Region				
Kitcisakik	Kitcisakik	Isolated	62	1
Long Point	Winneway	Semi-Isolated	67	1
Ontario Region				
Poplar Hill First Nation	Poplar Hill	Remote-Isolated	236	1
North Spirit Lake First Nation	North Spirit Lake	Remote-Isolated	238	1
Saskatchewan Region				
Ocean Man Band	Ocean Man Band	Non-Isolated	408	1
White Bear	White Bear	Non-Isolated	365	1
Pacific Region				
Alexis Creek First Nation	Redstone Reserve	Semi-Isolated	710	1
Gwa'sala Nakwax Da'Xw Indian Band	Tsulquate	Non-Isolated	724	1
Hagwilget Village Council				
Inter-Tribal Health Authority Society	Beecher Bay *	Non-Isolated	640	1
	Squirrel Cove *	Semi-Isolated	553	1
Kitkatla	Kitkatla	Isolated	672	1
Kitsumkalum Band	Kitsumkalum	Non-Isolated	681	
Lower Simikameen Indian Band	Lower Simikameen	Non-Isolated	598	1
Quatsino Band	Coal Harbour	Non-Isolated	633	1
Squamish Nation	Squamish	Non-Isolated	555	1
Taku River Tlinget	Atlin	Semi-Isolated	501	1
Upper Nicola	Upper Nicola	Non-Isolated	697	1
Westbank First Nation	Westbank	Non-Isolated	601	1

Table 10: NATIONAL SUMMARY REPORTING REQUIREMENTS FOR THE PERIOD OF APRIL 1, 2000 - MARCH 31, 2001

Summary of Reports	Atlantic	Quebec	Ontario	Manitoba	Sask.	Alberta	Pacific	National Total
Audit Report								
Total Reports Due	15	23	23	28	22	5	29	145
Reports Received	15	22	23	28	21	5	28	142
Reports Outstanding	0	1	0	0	1	0	1	3
Annual Report								
Total Reports Due	15	23	23	28	22	5	29	145
Reports Received	15	23	23	28	13	5	25	132
Reports Outstanding	0	0	0	0	9	0	4	13
Evaluation Report								
Reports Due	2	1	7	2	5	0	2	19
Reports Received	2	1	6	2	2	0	1	14
Reports Outstanding	0	0	1	0	3	0	1	5
Transfer Agreements/Communities								
Total # of Agreements	15	24	24	30	22	5	32	152
Total # of communities	20	23	38	33	60	4	98	276

Table II: TRANSFER AGREEMENT RENEWAL SCHEDULE - FISCAL YEAR 2001/2002

Band Name/Authority	Community	Band #
Atlantic Region		
Miawpukek Band of Conne River	Conne River	47
Kingsclear	Kingsclear	11
Labrador Inuit Health Commission	Hopedale Makkovik Nain Postville Rigolet Happy Valley - Goose Bay Northwest River	INUIT
St. Mary's Band	St. Mary's	15
Wagmatcook (FTA)	Wagmatcook	28
Woodstock First Nation	Woodstock	17
Quebec Region		
Le Conseil de la Première Nation Listuguj Mi'gmaq	Listuguj	51
Le Conseil des Montagnais de Natashquan	Natashquan	83
Le Conseil des Montagnais de Unamen Shipu	Unamen Shipu	84
Micmacs du conseil de bande de Gesgapegiag	Gesgapegiag	52
The Mohawk Council of Kahnawake (EHF)	Kahnawake Doncaster	70
Ontario Region		
Big Grassy Ojibwe First Nation	Big Grassy	124
Dilico Ojibway Child and Family Services	Fort William Long Lake #58	187 184

Band Name/Authority	Community	Band #
	Ginoogaming	185
	Pic Mobert	195
	Rockey Bay	197
	Whitesand	190
	Michipicoten	225
	Red Rock	193
Sagamok Anishnawbek First Nation	Spanish River	179
Mississauga First Nation	Mississauga	200
Mohawks Council of Akwesasne	Akwesasne (St. Regis)	159
M'Chigeeng First Nation (West Bay)	West Bay	181
United Chiefs and Councils of Manitoulin	Sheguiandah	176
	Sheshegwaning	178
	Sucker Creek	180
	Whitefish River (Birch River)	230
	Cockburn Island	173
Whitefish Lake First Nation	Naughton	224
Manitoba Region		
Mathias Colomb	Granville Lake	311a
	Pukatawagan	311b
Little Saskatchewan	Little Saskatchewan	274
Peguis Band	Peguis	269
Anishinaabe Mino-Ayaawin Inc.	Fairford First Nation	272
Wasagamack	Wasagamack	299
Saskatchewan Region		
Beardy's & Okemasis	Beardy's Okemasis	369
Carry the Kettle	Carry the Kettle	378

Band Name/Authority	Community	Band #
Cowessess	Cowessess	361
Lac La Ronge	Stanley Grand Bay Kitsaki Hall Lake Brabant Lake Nemeiben Little Red	353
James Smith	James Smith	370
Kawacatoose	Kawacatoose	393
Keeseekoose Band	Keeseekoose	367
Meadow Lake Tribal Council	Big C English River Buffalo River English River Canoe Lake Flying Dust Makwa Sahgaiehcan Ministikwan Mudie Lake Turnor Lake Waterhen Lake	401 400 398 400 394 395 396 397a 397a 403 402
Montreal Lake	Montreal Lake	354
Onion Lake	Onion Lake	344
Prince Albert Tribal Council	Black Lake Cumberland House Fond du Lac	359 350 351

Band Name/Authority	Community	Band #
	Red Earth	356
	Sioux Wahpeton	358
Piapot First Nation	Piapot	385
Saulteaux Band	Saulteaux	347
Sturgeon Lake First Nation	Sturgeon Lake	360
Shoal Lake of the Cree Nation	Shoal Lake	357
Thunderchild Band	Tunderchild	349
Pacific Region		
Old Massett Village Council	Old Massett	669
Skidegate Tribal Council	Skidegate	670
Tla'Amin Band	Sliammon	554
Spallumcheen Band	Enderby	600
TI'Azt'En Nation	Binchi	617
	Tache	
	Middle River	
Gitxsan Treaty Society	Gitanmaax	531
	Glen Vowell	533
	Kispiox	532
	Kitwancool	537
	Kitwanga	536
Heskw'En Scutxe Health Services Society	Skuppan	707
	Nicomen	696
	Cook's Ferry (Spences Bridge)	694
	Kanaka Bar	704
	Siska Indian Band	706
Sto:lo Tribal Council	Chawathil (Hope)	583
	Cheam	584

Band Name/Authority	Community	Band #
	Kwantlen (Langley)	564
	Shxw'ow'hamel (Ohamil)	587
	Popkum	585
	Scowlitz	568
	Seabird Island	581
	Cultus Lake	572
	Kilgard	578
	Yakwgakiwoose	576
	Kwawkawilt	580
	Lakahahmen	579
	Matsqui	565
	Skawahlook	582
	Skowkale	571
	Skway	570
	Squiala	574
	Tzeachten	575
	Aitchelitz	558