



FNIGC | CGIPN

First Nations Information Governance Centre
Le Centre de gouvernance de l'information des Premières Nations

Transforming the Community-Based Reporting Template (CBRT)

Presentation to the First Nations Health Managers Association
November 15, 2017

Rene Dion

First Nations & Inuit Health Branch

Maria Santos, Lyndsy Gracie & Alana Roscoe

First Nations Information Governance Centre

Workshop Objectives

- Quick overview of the CBRT
- Goals of CBRT transformation
- Ideas for transformation
- Proposed next steps

CBRT Overview

- The CBRT collects health program information from entities that have contribution agreements with FNIHB.
- The CBRT covers the following program areas:
 - Healthy Child Development
 - Healthy Living
 - Mental Wellness
 - Communicable Disease Control
 - Home and Community Care
 - Clinical and Client Care
- **Problems:** A high response burden on communities, misalignment with community needs, poor question design, and overlap with other data collection tools impact the quality, efficiency and relevance of the CBRT.

FNIHB's Use of the CBRT

- Health Canada's First Nations and Inuit Health Branch uses CBRT results for:
 - Departmental reporting
 - Program planning and evaluation
 - Program funding renewals
 - Corporate planning
 - Support Policy briefings and presentations

Goals of Transformation

- Reduce response burden on communities
- More closely align the instrument with community needs and priorities
- Improve question design so as to improve data quality
- Reduce overlap with other data collection tools
- Better align with communities' and FNIHB's performance measurement needs
- Support community access and utilization of administrative and program data to support community planning and evaluation activities
- Ensure that First Nations data is protected and that communities have access to their own data

First Nations-Led Transformation

- The FNIGC is leading the engagement with First Nations and the re-design of the CBRT instrument.
- The results of the engagement and draft instruments will be presented to the AFN-FNIHB Joint Forum (a sub-committee of the AFN Health Technicians).
- Vision: FNIGC will administer the revised instrument, house the data, and provide FNIHB access to rolled up results through a data request process.

Examples of Data Needs and Uses

Data Needs:

- Program activities:
 - Type of Program Activity provided
 - Program attendance
 - Information on program participants
 - Number of program sessions run
- Human Resources/Staffing
- Health Status Information
- Program Expenditures
- Program Costs
- Health Behaviours
- Etc.

Data Uses:

- Program planning
- Reporting back to community members
- Evaluation
- Reporting to funders
- Service provision
- Research
- Etc.

How useful is this question?

- *Do I ever use this information in my job (e.g., for health planning, program implementation, etc.)?*
- *Do we collect this information in my community for a purpose other than simply reporting it on the CBRT?*
- *Would I use this information for my job if I had access to high quality data?*

How difficult is this information to collect?

- *How much time/resources/capacity does it take to collect the information requested in this question?*
- *Do we have access to good quality data that can be used to answer this question?*

New content

- *What program information do I need for my community health planning?*

Next Steps

- Continue to solicit feedback on the CBRT using the feedback form
- Design a new draft instrument and send to the AFN-FNIHB Joint Forum for review & further feedback
- Integrate all feedback and prepare a final draft instrument
- AFN-FNIHB Joint forum and FNIGC Board of Directors to approve revised instrument
- Field test revised CBRT
- Final revisions based on field test results
- Final review and approval by FNIHB
- FNIGC to implement revised instrument and house the data