

**Department of Indigenous Services Canada DETAILED ACTION PLAN  
to the recommendations of the Report 4: Oral Health Programs for First Nations and Inuit of the Fall 2017 Reports of the Auditor General of Canada**

When the Audit was undertaken by the Office of the Auditor General, the authority and responsibility of First Nation and Inuit Oral Health Programs fell under the purview of the First Nation and Inuit Health Branch (FNIHB) within Health Canada. The columns entitled “OAG Recommendations” and “Departmental Response” refer to Health Canada because they are pulled directly from the audit published November 21, 2017.

Due to an Order-in-Council dated November 30, 2017, FNIHB is now under the purview of the Department of Indigenous Services Canada. The action plan refers to the responsible department as “Indigenous Services Canada”.

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Para 4.30	Health Canada should finalize and implement a strategic approach to oral health for Inuit and First Nations people, along with a detailed action plan with specific timelines, and monitor implementation.	Agreed. Health Canada has already developed oral health service delivery plans to guide the delivery of oral health programs in each region. The expansion of the Children’s Oral Health Initiative (COHI), announced in Budget 2017, is currently the subject of planning discussions with First Nations and Inuit partners in all regions. This work will lead to the finalization of the Integrated Oral Health Approach (IOHA) in the coming months.	The finalized IOHA will provide strategic guidance for a holistic and collaborative approach between FNIHB, Regions, Indigenous partners, other departments.	June 30, 2018	Input has been provided by the Assembly of First Nations, departmental Regions and the Public Health Agency of Canada (PHAC). The Inuit Tapiriit Kanatami will become more involved during implementation.  Feedback from Regions, PHAC and partners was reviewed, discussed and was incorporated in January 2018.	Jean-François Tremblay, DM, ISC tel 819-956-5524	
			Senior Management Committee approval of revised Regional Oral Health Service Delivery Plans. These plans will have a specific focus on regional health human resources planning.  The Department will ensure that foreseeable shortages are addressed through contingency plans developed by regions facing such a challenge.	September 30, 2018	From December 2017 to January 2018, the department was engaging with each respective Region to discuss their Budget 2017 Implementation Plans.  Since the announcement of Budget 2017, Regions have engaged with stakeholders such as chiefs and councils within their respective jurisdictions to discuss implementation plans for funding for years 2-5.		
Para 4.37	Health Canada should develop a concrete plan to determine how much of a difference its oral health services are making on the oral health of Inuit and First Nations people. This plan should use all the relevant information the Department collects, and should include a collaboration among all of	Agreed. Health Canada agrees that understanding the impact of these programs on the oral health of First Nations and Inuit is important, and will continue to work with its partner organizations towards the goal of completing the population-level oral health surveys. Health Canada has well-established processes and methodologies in place to monitor the data it collects, and will engage the Non-Insured Health Benefits Oral Health Advisory Committee (NOHAC) to provide advice on the First Nations and Inuit Health Branch’s	To ensure that the Department has population-level oral health data, the Public Health Agency of Canada, Statistics Canada and First Nations and Inuit partners will be engaged to explore a population-based oral health survey approach.	December 31, 2017 (completed December 21, 2017)	On December 21, 2017, the Department sent a letter to PHAC to determine the possibility of conducting a Canadian population oral health survey.	Jean-François Tremblay, DM, ISC tel 819-956-5524	
				January 31, 2018 (completed)	Follow-up discussions between Statistics Canada and Indigenous Services Canada have taken place on advancing the surveys.		

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	Health Canada's programs involved in oral health.	<p>approach to analyzing all the relevant information it collects. Annually, over 300,000 clients access the evidence-based oral health services covered by the Non-Insured Health Benefits Program (NIHB). Over the five-year period ending in the 2015–16 fiscal year, approximately 551,000 clients accessed the program's dental benefit (64 percent of clients overall).</p> <p>NOHAC is an independent body composed of clinical and academic experts, including First Nations and Inuit dental professionals. Its mandate is to provide Health Canada with impartial, expert, professional advice on a variety of topics identified by NIHB (that is, current and evolving best practices, evidence-based oral health disease prevention and treatment, and the program's oral health policy).</p> <p>Health Canada will continue to refine its approach to analyzing all the relevant information it collects for the COHI to determine the extent to which Health Canada's oral health services contribute to maintaining and improving the oral health of its First Nations and Inuit clients.</p>	<p>Approved Strategies to Improve Oral Health Data Collection, Analysis and Reporting for the NIHB, COHI and Dental Therapy oral health programs, in collaboration with national and regional stakeholders.</p> <p>To ensure that the data collected by the Department is being analyzed and reported on in a robust and reliable manner, the Department engaged the NOHAC to review the data collected.</p>	<p>October 31, 2018</p> <p>June 30, 2018</p> <p>December 12, 2017</p>	<p>The Department is engaging with partners on approaches for conducting surveys.</p> <p>A Data Improvement Strategy Working Group including officials from the Regions, departmental HQ officials, and PHAC, has been established and its first meeting was held in September 2017.</p> <p>The COHI and Dental Therapy oral health programs data strategy (collection, analysis and reporting) was presented to the FNIHB Oral Health Forum. This forum consists of 39 departmental officials and officials from PHAC.</p> <p>On December 12, 2017, NOHAC provided recommendations pertaining to the FNIHB data.</p> <p>Due to the nature of the data collected, the NIHB Program will improve its data analysis and reporting. Work has been initiated internally.</p>		
Para 4.47	Health Canada should improve its analysis of data, including the information that is collected and recorded in its dental database, so that its information on the Children's Oral Health Initiative is accurate and comprehensive enough to contribute to the Department's overall management of its oral health	Agreed. Health Canada will continue to improve its data analysis by implementing the Strategies to Improve Oral Health Data Collection, Analysis, and Reporting for First Nations and Inuit Health Branch's dental programs to inform program management decision making in alignment with the Oral Health Integrated Approach.	Approved Strategies to Improve Oral Health Data Collection, Analysis and Reporting for the NIHB, COHI and Dental Therapy oral health programs.	June 30, 2018	<p>The Data Improvement Strategy Working Group including officials from the Regions, departmental HQ officials, and PHAC, has been established and its first meeting was held September 2017, to initiate a draft strategy for improving the data for the COHI program.</p> <p>Due to the nature of the data collected, the NIHB Program will improve its data analysis</p>	Jean-François Tremblay, DM, ISC tel 819-956-5524	

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	programs.				and reporting. Work has been initiated internally.		
			The Department will collaborate with partners to identify priority action items from the Strategies to Improve Oral Health Data Collection, Analysis and Reporting	October 31, 2018	Priority actions were identified and included a review of current and potential future indicators for the COHI program. This took place during the Oral Health Forum face-to-face in November 2017.		
Para 4.63	Health Canada's process for making changes to its list of oral health services covered by the Non-Insured Health Benefits Program should <ul style="list-style-type: none"> <li>include which elements should be considered,</li> <li>include requirements to document when and how decisions are made,</li> <li>specify who has final approval for all such decisions, and</li> <li>include quickly updating providers and clients on changes.</li> </ul>	Agreed. Health Canada has detailed documentation in place, such as its Dental Benefits Policy Framework: NIHB and evidence-based guidelines, to govern decision making related to dental benefits. One of these documents—the Policy Review and Development Process for Dental Benefits—has been revised in light of the findings of this audit to be more specific about the elements that must be considered when making policy changes. Additionally, NIHB will adapt the process for updating clients and service providers of changes in a timely manner.	To ensure that the Department's Policy Review and Development Process for NIHB Dental Benefits documented the necessary level of detail, an internal review was undertaken to update the aforementioned document in order to revise the decision making process.	Process map (completed July 21, 2017)  Appendix (completed November 27, 2017)	The evergreen Decision Making Process Map and Governance documents have been revised.  The Decision Making Process Map was approved by the NIHB Director General July 21, 2017.  The Governance document was approved by the FNIHB Senior Assistant Deputy Minister November 27, 2017.  Documents are currently in use.	Jean-François Tremblay, DM, ISC tel 819-956-5524	
			As with any public program, communication with clients and providers is paramount. As such, the Department will strive to ensure that clients and providers are informed in a more timely manner, and develop a client provider communications process map.	April 30, 2018	Evergreen NIHB client and provider communication process maps are being developed.  Departmental meetings have taken place in January 2018 to ensure this process is underway.		
Para 4.72	To improve its program management for the Non-Insured Health Benefits Program dental benefit, Health Canada should	Agreed. Health Canada will review its program management processes and will develop communications for clients, partners, and providers regarding its timelines for reviewing predeterminations and appeals. Furthermore, the Department will	The definition of service standard for pre-approvals (pre-determination) is under review and will be communicated at large.	April 30, 2018	The revised and clarified service standards for dental predeterminations were recently approved by the NIHB DG.	Jean-François Tremblay, DM, ISC tel 819-956-5524	

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	<ul style="list-style-type: none"> <li>clarify what its service standard for pre-approvals is measuring;</li> <li>clarify the service standard for complex appeals; and</li> <li>improve its data entry, so that it has accurate and reliable information in its appeal database.</li> </ul>	<p>continue to improve data entry accuracy pertaining to its administrative appeals database. The procurement process for the new Health Information and Claims Processing Services system is looking to integrate the appeals process within this system.</p>	<p>The term “complex appeals” on the Government of Canada website and associated documents is under review.</p> <p>Any changes, along with further clarity around service standards will be communicated appropriately to clients and providers.</p>	<p>April 30, 2018</p>	<p>Internal discussions within NIHB benefit areas took place in January 2018 to ensure changes to the Program website, regarding the term “complex appeals”, are accepted.</p> <p>Prior to the end of January 2018, the Department revised the appeals section on its website, which includes clearly stated appeals service standards.</p> <p>The NIHB Dental Benefits Guide is currently under review. This revised version is expected to be published in March 2018.</p>		
Para 4.85	<p>Health Canada should implement strategies to ensure that it has the human resources it needs to deliver oral health programs and related services to First Nations and Inuit populations over the long term. These strategies could incorporate the use of a variety of professionals and adopt practices from other regions, where applicable.</p>	<p>Agreed. Health Canada relies on a variety of oral health professionals (such as dentists, dental hygienists, and dental therapists) to provide access to oral health services for its clients, and continues to work with partners and stakeholders to increase oral health provider enrolment. Additionally, Health Canada has participated in discussions with partners regarding opportunities to ensure and improve access to oral health care services in First Nations and Inuit communities over the long term.</p> <p>Health Canada will ensure that foreseeable shortages are addressed through contingency plans developed by regions facing such a challenge.</p>	<p>Contingency Plans included in Oral Health Services Delivery Plans for impacted regions.</p>	<p>October 31, 2018</p>	<p>Where there are vacancies or anticipated vacancies, Regions have developed Regional Service Delivery Plans to address potential human resources short and long term challenges. These plans have been approved by Regional Executives.</p> <p>The Department is supporting the Canadian Dental Hygienists Association to progress their work on the curriculum for an Oral Health Practitioner 4-year entry-to-practice dually qualified model. This model proposes to integrate the 3-year dental hygiene diploma and the former 2-year dental therapy</p>	<p>Jean-François Tremblay, DM, ISC tel 819-956-5524</p>	

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					diploma.		
			In efforts to ensure awareness of the Department's Oral Health Programs to oral health providers, departmental officials will have a presence at oral health professions conferences and educational institutions.	December 31, 2018	A draft travel and presentation schedule created for 2018 is awaiting approval. The department attended (for the second year) the Manitoba Dental Association Conference in January 2018.		