



This annual report covers the period from April 1, 2024, to March 31, 2025 – referred to as 2024–2025 in this document.

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TABLE OF CONTENTS

About the FNHMA	4
Mission and Vision	5
Message from the Board President and CEO	6
Certified First Nations Health Manager Program	7
Pathways to Certification	8
Professional Examination	9
2024 Certified First Nations Health Managers	10
Health and Wellness Planning	11
Membership	13
Partnerships	14
Relationships	15
Representation	16
Projects	17
12th Annual National Conference	22
Communications	25
Milestones	27
Our Team	31
Financial Statements	33

ABOUT

Created in 2010, the First Nations Health Managers Association (FNHMA) is a national association committed to excellence in expanding health management capacity for First Nations organizations. The FNHMA provides training, certification, and professional development opportunities in health management.

We are a professional association exclusively serving the needs of individuals working for or aspiring to positions with First Nations organizations. The FNHMA prepares individuals to work with new knowledge and skills and assists its members and their organizations to set strategic goals, successfully implement business plans, and deliver quality health service programs.

Our certification program leads to the Certified First Nations Health Manager (CFNHM) professional designation.

To learn more, please visit our website at fnhma.ca.





Our Mission

To provide leadership in health management activities by developing and promoting quality standards, practices, research, certification and professional development to expand capacity for members and First Nations.

Our Vision

We are the leaders expanding health management capacity for First Nations.

MESSAGE FROM THE BOARD PRESIDENT & CEO

As we reflect on the 2024–2025 year, we are proud to share that FNHMA has remained steadfast in our mission to support and strengthen First Nations health management across Turtle Island. This year has been one of meaningful engagement, growth, and renewed commitment to First Nations-led health transformation.

At the heart of everything we do is our membership. The voices, experiences, and knowledge of our members have guided our work throughout the year. Through regional engagements, advisory circles, and direct conversations, our members have directly and indirectly helped shape our priorities to ensure that our programs remain responsive and grounded in the realities of First Nations health leadership. Our members' contributions continue to inspire our collective efforts and shape the path forward.

The FNHMA remains committed to building opportunities that uplift and empower the First Nations health workforce in Canada. Whether it's through collaborative projects, new funding opportunities, or research-informed programming, our focus remains on ensuring First Nations health leaders and their communities have access to the tools, knowledge, and leadership supports they need to thrive.

As we look ahead, we remain grounded in our shared purpose and guided by our values. Thank you for walking this path with us and for continuing to champion excellence in First Nations health management.

In health and partnership,

David McLaren, CFNHM, CIL President, Board of Directors

Marion Crowe, CFNHM, CAFM, CAPA, CIL Chief Executive Officer



Mario Rowe.

CERTIFIED FIRST NATIONS HEALTH MANAGER PROGRAM

In 2008, the Chiefs-in-Assembly discussed the importance of supporting capacity development and education for First Nations health managers, and from Resolution 58/2008, the FNHMA's Certified First Nations Health Manager Program (CFNHMP) was developed. The CFNHMP is the credential that builds health management capacity for communities. The certification program provides individuals with new knowledge and skills and assists its members and their organizations in strategic management, successfully implementing business plans, and delivering quality health service programs.

The CFNHMP, based on the First Nation Health Managers Competency Framework, consists of the following five courses:

- 100 The First Nations Health Landscape
- 200 High Performing Strategic Organizations
- 300 Effective Programs and Services
- 400 Efficient Organizations
- 500 Professionalism, Ethics and Cultural Awareness

114

Hybrid learners in 2024-2025 In 2020, FNHMA introduced the hybrid education program, replacing previous online courses and offering an alternative to intensive courses that were on hold due to the pandemic. This model combines real-time interactive sessions with online work, eliminating the need for travel or time off. Each 12-week course includes an orientation, online postings, group chats, weekly discussions led by experienced instructors, and ongoing guidance with capacity development officers. This format allows CFNHM students to engage weekly with instructors and peers and provides flexibility for completing online tasks at their convenience.

63

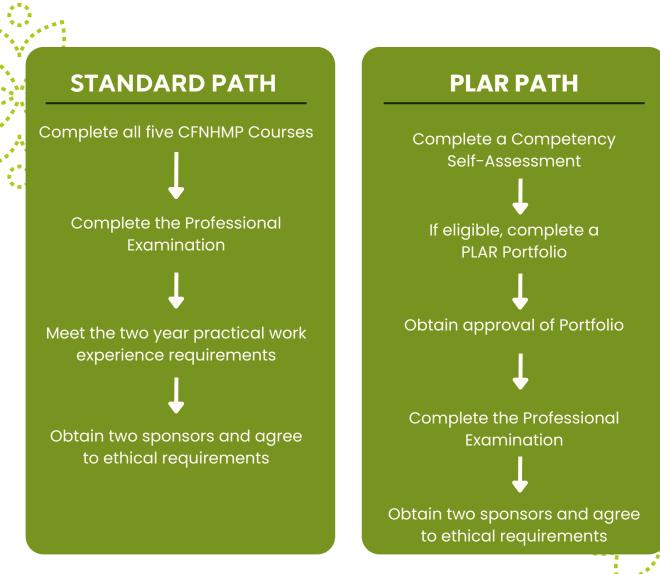
Intensive learners in 2024-2025 FNHMA's Intensive courses are 5-day in-person sessions that offer immersive learning with expert instructors, interactive activities, group discussions, and valuable networking opportunities. Learners complete two final assignments and are encouraged to continue their journey toward the Certified First Nations Health Manager designation (CFNHMP).

PATHWAYS TO CERTIFICATION

There are two pathways available to earn the Certified First Nations Health Manager (CFNHM) professional designation: the Standard Path and the Prior Learning Assessment and Recognition (PLAR) path.

The Standard Path takes a candidate member through all five courses in either the hybrid or intensive format.

The PLAR path to certification is available to health management professionals with over seven (7) years of experience in a First Nations health role, and who meet additional eligibility criteria. More information on the PLAR process can be found at fnhma.ca.



PROFESSIONAL EXAMINATION

Upon successful completion of all five courses in the CFNHMP, a candidate member is eligible to write the professional examination. The purpose of the exam is to ensure candidates have the necessary knowledge base required to become a professional member. The professional exam is comprehensive and based on the FNHMA competency standards.

FNHMA Core Competencies:

- Leadership and Governance
- Professionalism
- Advocacy, Partnerships and Relationships
- Human Resources Management
- Financial Management and Accountability

- Health Services Delivery
- Quality Improvement and Assurance
- Planning
- Communication
- Cultural Awareness

Number of Exam Writers 12

Number of Successful Exam Writers 12

Holders of the CFNHM designation are considered highly qualified health management professionals with the essential competencies required to face the current challenges of managing healthcare in First Nations communities.

To achieve certification, candidates must successfully complete CFNHMP courses and the professional examination, and demonstrate at least two years of practical, relevant work experience, and ethical standards.



2024 CERTIFIED FIRST NATIONS HEALTH MANAGERS

As a testament to their dedication to lifelong learning, all Certified First Nations Health Managers (CFNHMs) are required to fulfill a Maintenance of Certification (MOC) requirement. This involves engaging in 20 hours of continuing professional development annually, focused on topics relevant to First Nations health management. Reporting of these activities takes place during the annual membership renewal. The certification process, including MOC, ensures that CFNHMs remain current with the latest issues and practices in First Nations health management.

The 2024 convocation and awards ceremony at the 12th Annual National Conference celebrated the following 12 newly designated Certified First Nations Health Managers:

- Evelyn Pratt, Birdtail Sioux Health Centre, MB
- Ginny Heilman, Giiskaandago'lkwe Health Services, ON
- Gretchen Bunting, Wabshki Binay Seek Calai Memorial Health Centre, ON
- Heather Downie, Maskwacis Health Services, AB
- Kenneth Hazell, Nipissing First Nation, ON
- Larry Burgess, La La Ronge Indian Health Services LLRIB, SK
- Maggie Copeland, Mississaugas of the New Credit First Nation, ON
- Sekwun Ahenakew, Ahtahkakoop Health Center, SK
- Sharidy Desnomie, Star Blanket Health Services, SK
- Tarra Peterson, Giishkaandago'lkwe Health Services, ON
- Lori McGavin, STC Health & Family Service Inc, SK
- Samara Lewis, First Nations Health Managers Association, ON



HEALTH AND WELLNESS PLANNING

FNHMA's Health and Wellness Planning: A Guide for First Nations provides an easy-to-follow health and wellness planning approach supporting a community-guided process. The Guide represents and honours the voices of hundreds of First Nations Health Managers who have contributed to the content. Since publication of The Guide and the accompanying Toolbox, the FNHMA has developed and delivered workshops to support its use and uptake.

FNHMA released CORE Essentials as part of its health and wellness planning resources in 2022. This installment offers straightforward activities to navigate each module in the Guide, supporting communities in earlier planning stages. It leverages the Guide's materials to emphasize essential planning elements crucial for developing comprehensive strategies. FNHMA also introduced a CORE Essentials workshop based on Guide content, focusing specifically on these core stages.

In 2023, FNHMA launched FOCUS on Wellness: A Strength-Based Indicator Tool for First Nation Health. This tool took a strengths-based approach to health and wellness by defining indicators, highlighting their significance, outlining effective qualities, and offering numerous examples. It also introduced the FOCUS process—an acronym that guided users through each stage with clearly defined activities. FOCUS on Wellness was made available through the FNHMA online store.



HEALTH AND WELLNESS PLANNING

FNHMA continues to collaborate with the First Nations and Inuit Health Branch, Indigenous Services Canada (FNIHB/ISC), on Health and Wellness training opportunities both with First Nations communities and ISC employees. The FNHMA has presented the Guide in multiple workshops to both national and international delegations, introducing FOCUS on Wellness to audiences across Turtle Island.

In the 2024-2025 year, FNHMA hosted the following Health and Wellness Planning workshops for First Nations health leaders:

- 22 participants in Edmonton, AB, April 23-24, 2024.
- 12 participants in Brunswick House, ON, October 22–24, 2024.
- 12 participants in Lac Seul, ON, November 18-21, 2024.





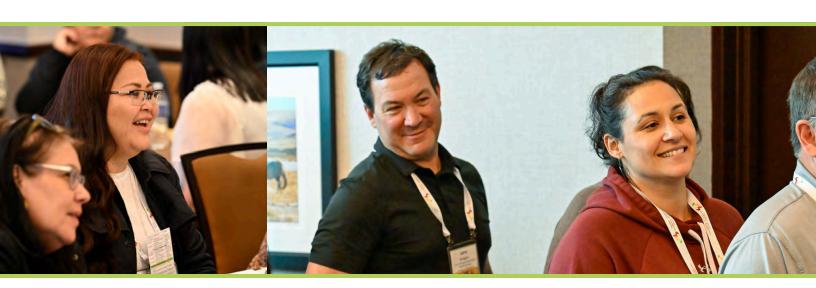
MEMBERSHIP

FNHMA offers three memberships for individuals: **Certified** for those who hold the CFNHM designation; **Candidate** for individuals who work in or around First Nations health management and might be looking to become certified; and the individual **Associate** membership for those who wish to be a member and may not be interested in holding the CFNHM designation. FNHMA also offers membership options for organizations, associations, and government entities.

All FNHMA memberships are beneficial and help build a more robust network of health management professionals. Members receive discounted rates for all courses, workshops, the annual national conference and gain access to resources, including the new First Nations Health Leaders Network, engagement opportunities, and tools to help them succeed in their health management role.

The FNHMA continues to create and seek out new opportunities for networking and learning for members. In partnership with Healthcare Excellence Canada, the First Nations Health Leaders Network hosted both virtual and in-person learning exchanges throughout the reporting year.

As of March 31, 2025, FNHMA has 297 members in good standing.



PARTNERSHIPS

Cultivating and strengthening relationships with other organizations is essential to advancing FNHMA's mission and amplifying the impact of our work. By fostering meaningful partnerships across sectors, we are able to share knowledge, leverage resources, and collaborate on initiatives that support capacity building in First Nations health management. These relationships not only enhance our ability to deliver high-quality programming and training, but also ensure that First Nations perspectives are reflected and respected in broader health system conversations.

The following is a rolling list of FNHMA partnerships throughout its history:

- Aboriginal Financial Officers Association (AFOA)
- Assembly of First Nations (AFN)
- Canadian Indigenous Nurses Association (CINA)
- Canadian Institute for Health Information (CIHI)
- Canadian Partnership Against Cancer (CPAC)
- Canadian Red Cross
- Chiefs of Ontario (COO)
- Federation of Sovereign Indigenous Nations (FSIN)
- First Peoples Wellness Circle (FPWC)
- First Nations Housing Professionals Association (FNHPA)
- Healthcare Excellence Canada (HEC)
- Indigenous Certification Board of Canada (ICBoC)
- Nishnawbe Aski Nation (NAN)
- Northern Inter-Tribal Health Authority (NITHA)
- Thunderbird Partnership Foundation (TPF)



RELATIONSHIPS

FNHMA's knowledge, expertise, and experience remain highly sought after. We position ourselves as a leading membership-based professional association dedicated to advancing First Nations health service training and professional development. Through active participation in advisory roles and focus group sessions, FNHMA contributes to shaping healthcare services on Turtle Island. We acknowledge the valuable insights and experiences of CFNHMs and strive to involve them in co-presentations where possible.

In this reporting year, FNHMA has cultivated and strengthened several key relationships with organizations, including:

- Assembly of First Nations (AFN)
- Canadian Institute for Health Information (CIHI)
 - o Cultural Safety Measurement Collaborative
- Canadian Medical Association (CMA)
 - CMA apology a first step toward healing medical harms against Indigenous people, advocates say | CBC Radio
- Canadian Partnership Against Cancer (CPAC)
- Canadian Public Health Association
- First Nations and Inuit Health Branch (FNIHB)/Indigenous Services Canada (ISC)
 - o Anti-Racism Advisory Circle
 - o Vaccine Preventable Disease Working Group
- First Nations Housing Professionals Association (FNHPA)
- First Nations Information Governance Centre (FNIGC)
 - Health Data Clearinghouse Table
- First Nations Mental Wellness Data Working Group
- First Peoples Wellness Circle (FPWC)
- Heart and Stroke Foundation
- HealthCareCAN
- Healthcare Excellence Canada (HEC)
 - o First Nations Health Leaders Network
- Health Workforce Canada
- Southern Chiefs' Organization (SCO)
- The Ottawa Hospital
- Thunderbird Partnership Foundation (TPF)

REPRESENTATION

Throughout this reporting year, the FNHMA made significant strides in representing and promoting our mission across Canada. Our team has been actively engaged in a variety of national gatherings and conferences.

These engagements not only allowed FNHMA to share valuable information and innovative health planning tools but also provided opportunities for meaningful dialogue with First Nations health leaders from across the country.

By participating in these events, FNHMA continues to strengthen its role as a leader in First Nations health management capacity building and ensure that our resources are accessible to those who need them most.

This reporting year featured a range of conferences, gatherings, and speaking engagements, including:

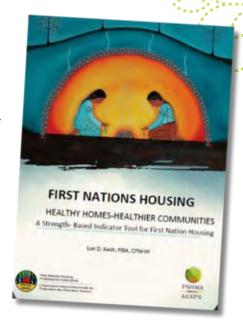
- Assembly of First Nations (AFN) Homelessness and Mental Wellness Forum
- AFN Towards a Cultural Safety and Humility Standard Meeting
- Canadian Medical Association Health Summit 2025
- Chiefs of Ontario 18th Annual Health Forum
- First Nations Health Data Clearing House Table
- First Nations Housing Professionals Association (FNHPA) 3rd Annual National Conference
- First Nations Mental Wellness Data Working Group
- First Peoples Wellness Circle (FPWC) National Mental Wellness Workforce Summit
- FNHMA FNIHB Advisory Circle on Health and Wellness Tools
- Health Workforce Canada Connects: Advancing Health Workforce Solutions
- HealthCareCAN Canadian Patient Safety Program Virtual Presentation
- Indigenous Services Canada (ISC) FNHMA Health Transformation Symposium
- ISC National Summit on Indigenous Mental Wellness
- ISC Saskatchewan Health Emergency Management and Mental Wellness Gathering
- MIHCEMI Housing Conference
- MNP Workshop on Advancing Reconciliation
- Southern Chiefs' Organization: Southern First Nation Health Directors Association Working Group Meeting
- The Walrus Leadership Luncheon on Reimagining Health Reconciliation

PROJECTS

Shared Project with the First Nations Housing Professional Association - Bridging Health and Housing: A Collaborative Toolkit for Needs Assessment and Integration

The First Nations Health Managers Association (FNHMA) and the First Nations Housing Professionals Association (FNHPA) entered into a strategic partnership in 2022 to advance healthy housing for First Nations across Canada. Together, they are working to address this critical social determinant of health.

Through funding received from Indigenous Services Canada (ISC), FNHMA collaborated with FNHPA on a project aimed at developing tools and resources that promote healthy housing and strengthen connections between First Nations health and housing professionals.



Recognizing the importance of breaking down western silos, the organizations co-developed a toolkit that fosters collaboration between these sectors—supporting a more wholistic approach to wellness in First Nations communities.



Supporting Data Literacy for First Nations Health Leaders

While many First Nations communities and health leaders are reclaiming their space and building confidence in the use of health data and research, there remain others who have less familiarity or comfort with Western approaches to data. This can present challenges in developing comprehensive health plans, evaluating programs, implementing strength-based data collection across communities, and creating meaningful indicators to measure the health of their populations.

As a complement to FNHMA's FOCUS on Wellness: A Strength-Based Indicator Tool, this project aims to enhance data and research literacy among First Nations health and mental wellness leaders. The goal is to build community capacity and readiness to support the transition of health services from government control to First Nations governance.

The project is informed by the collective knowledge and contributions of the First Nations Mental Wellness Data Working Group (FNMWDWG), which plays a central role in the development of training materials and resources, as well as in promoting their uptake.

Launched in January 2025, the project will continue into the next fiscal year.

Pathways to Building Cancer Education for First Nations Health Leaders

The First Nations Health Managers Association (FNHMA) has launched an exciting new initiative in partnership with the Canadian Partnership Against Cancer (CPAC), focused on equipping First Nations health leaders with knowledge and tools related to cancer care and prevention.

This project aims to strengthen the capacity of First Nations health leaders by developing and delivering a comprehensive public health workshop centred on the First Nations cancer journey. Workshop activities will address access to screening and preventive services, while incorporating regionally and jurisdictionally specific information to ensure relevance and impact.

The project was officially introduced at the FNHMA 2024 Annual National Conference, where members were given a preview of what's to come.

Andrea Aiabens joined the team as the Special Project Lead in January 2025. Since then, she has hit the ground running—conducting an initial sustainability assessment, supporting the hiring of a consultant to lead an environmental scan, and planning an in-person engagement session that brought together 35 Certified First Nations Health Managers in May 2025.

Three Sisters Organizations

FNHMA continues to work closely with and uplift the efforts of our sister organizations, First Peoples Wellness Circle (FPWC) and Thunderbird Partnership Foundation (Thunderbird), in alignment with our Reciprocal Relationship Agreement signed in 2023.

Over the past year, FNHMA was honoured to collaborate with FPWC on their Gathering Our Knowledge Bundles project. Grounded in culture, this initiative supports the First Nations Mental Wellness (FNMW) Workforce by helping to develop and mobilize community-owned, self-determined, and culturally relevant mental wellness tools and resources. As a member of FPWC's National Advisory Circle, FNHMA contributed insight and guidance rooted in lived experience, practical knowledge, and a deep understanding of the priority needs within the FNMW workforce.

In the spirit of partnership, all three organizations—FNHMA, FPWC, and Thunderbird—continue to support one another by attending each other's events, presenting to one another's delegates, and sharing expertise that advances our collective goals in First Nations health and wellness.

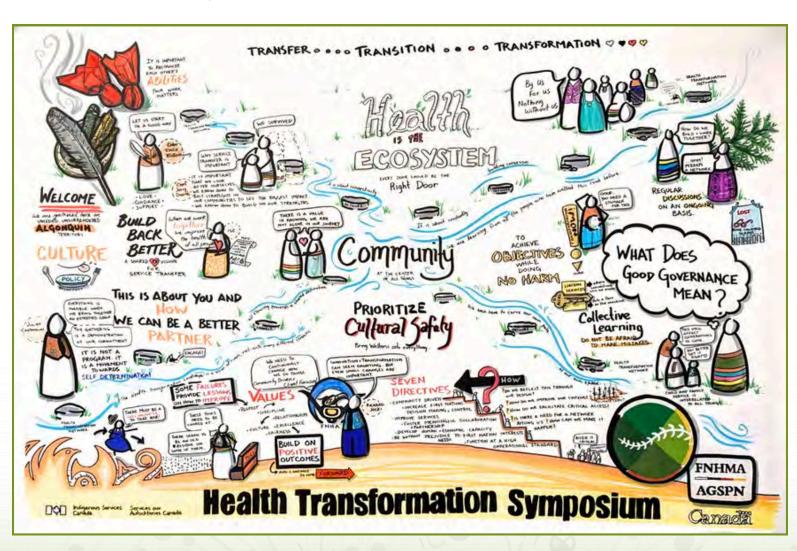


Health Transformation Symposium

FNHMA was proud to co-host the inaugural Health Transformation Symposium alongside Indigenous Services Canada (ISC), September 24-25, 2024, in Ottawa. This landmark event was designed to support the advancement of tripartite agreements in health and to further the transfer of federal funding and responsibility for health services to First Nations organizations.

The symposium brought together over 200 participants—including First Nations leaders, health professionals, and advocates—from across the country. The discussions focused on increasing First Nations control over healthcare, strengthening partnerships, and advancing the development of culturally safe, community–driven health systems.

The symposium created space for dialogue, learning, and relationship-building, contributing to the shared vision of self-determined, sustainable First Nations health systems.



2024 Pre-Budget Submission

FNHMA collaborated with the Assembly of First Nations, First Peoples Wellness Circle, and Thunderbird Partnership Foundation to develop aligned Pre-Budget Submissions. These joint submissions were presented to the Treasury Board as a unified advocacy tool, highlighting the shared priorities and funding needs of the First Nations health workforce.

FNHMA's submission specifically called on the federal government to:

- Increase investments in the Aboriginal Health Human Resources Initiative and Health Transformation
- Review and improve funding formulas to ensure they reflect community realities
- Support the determination of fair and equitable salaries across the sector
- Strengthen coordination among federal, provincial, and territorial governments
- Invest in sustained efforts to address anti-Indigenous racism in health systems

Through this collaborative approach, FNHMA continues to advocate for strategic, long-term investments that support a strong, well-resourced, and culturally safe First Nations health workforce.

FNHMA – FNIHB Advisory Circle on Health and Wellness Planning Tools

FNHMA and the First Nations and Inuit Health Branch (FNIHB) co-chaired the Advisory Circle on Health and Wellness Planning Tools, continuing their collaboration to enhance tools and resources that support community-led health planning. This partnership also ensured that community-level perspectives were reflected in FNIHB's guidelines and templates.

The Advisory Circle, composed of health leaders from across Turtle Island, provided valuable input throughout the year. Their contributions included feedback on FNIHB's Annual Report template for Block Funding Recipients, guidance on FNHMA's workshop focused on its strength-based indicator tool, and input into work related to health system accreditation.



12th ANNUAL NATIONAL CONFERENCE

FNHMA's 12th Annual National Conference took place from November 5–7, 2024, at the Hyatt Regency Hotel in Calgary, Alberta, on the beautiful lands of Treaty 7 Territory. The event welcomed nearly 500 delegates for two full days of workshops focused on building capacity and sharing best practices in First Nations health management.

The conference also featured two pre-conference workshops, numerous networking opportunities, and the celebration of 12 newly certified First Nations Health Managers.

The pre-conference workshops were designed to strengthen participants' leadership skills. Both sessions incorporated a Two-Eyed Seeing approach, supporting performance management strategies that are culturally grounded, quality-driven, and aimed at enhancing workplace well-being.

The opening reception showcased the talents of champion hoop dancer and multidisciplinary artist Sandra Lamouche of Bigstone Cree Nation, and featured a performance by Cree singer-songwriter and multi-instrumentalist Walter MacDonald White Bear.



During the Convocation and Awards Ceremony, FNHMA CEO Marion Crowe and Nicole Robinson of Healthcare Excellence Canada (HEC) presented the Excellence in Health Leadership Award – Innovative Leaders to Muskow Kapow (Andrew Wood), Director of Regional Health Programs at Four Arrows Health Authority. Andrew Wood was recognized for his transformative contributions to advancing health services for First Nations communities in the Island Lake Anisininew territory in northeast Manitoba.

12th ANNUAL NATIONAL CONFERENCE

The conference program included powerful presentations from notable speakers such as Dr. James Makokis, who delivered "What Does the Future of Health Look Like?"; Dr. Santana Hernandez of the Canadian Medical Association; and Lori Kittelberg of The Ottawa Hospital, who offered insights on "Guiding Meaningful Change in Colonial Institutions.

12TH ANNUAL NATIONAL CONFERENCE SPONSORS















COMMUNICATIONS

Social media and email marketing continue to be FNHMA's most effective tools for reaching members, students, potential sponsors, and allies.

With a growing subscriber list of over 700 contacts and an impressive 55% open rate, our communications team regularly engages hundreds of readers through weekly health and wellness bulletins and timely news releases. FNHMA is also a trusted source for sharing news and opportunities on behalf of external partners and allies.

Stay connected by following @fnhma on all major social platforms and subscribing to our e-newsletter at fnhma.ca/subscribe.

1.2K
POSTS ACROSS

ALL PLATFORMS



117K

USERS REACHED The number of people who saw FNHMA posts on any of the listed accounts.

6.4%

AV. ENGAGEMENT RATE The average engagement rate for the posts published to FNHMA Pages.

294K

IMPRESSIONS

Impressions are the number of times any of FNHMA's posts appears on someone's screen.

6.9K
TOTAL FANS &
FOLLOWERS

The total number of people who follow any FNHMA social media account.

1,064

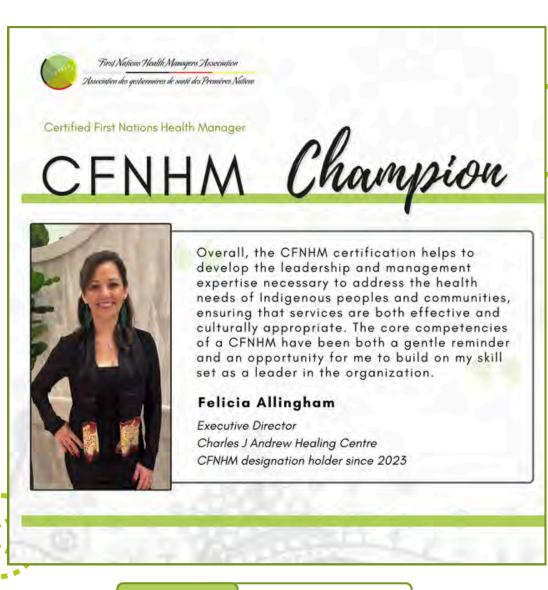
NEW FANS & FOLLOWERS

The number of new people who followed any FNHMA social media account.

COMMUNICATIONS CONT'D

In February 2025, FNHMA Communications launched the CFNHM Champions Campaign to spotlight Certified First Nations Health Managers (CFNHMs) and celebrate their achievements. The campaign showcases how the CFNHM designation has strengthened their leadership, enhanced their capacity in their roles, and contributed to their professional growth.

Stories are shared across FNHMA's social media platforms, website, and Health and Wellness bulletins, and the campaign will continue to be featured at future Annual National Conferences.





Scan here to view Felicia's CFNHM Champion profile.

2005	
2005	 At a joint Assembly of First Nations (AFN) and First Nations and Inuit Health Branch (FNIHB) meeting, senior management agree that increasing the capacity of First Nations Health Managers is key to improving First Nations health service delivery at the community level (March 2005)
2007-2008	 The National Aboriginal Health Organization (NAHO) completes a situational analysis and needs assessment. FNHMA completes a literature review of other competency frameworks. A First Nations Health Managers National Forum is held.
2000	 A First Nations Health Managers National Forum is held to review and discuss a draft competency framework (July 2008). Chiefs-in-Assembly support the continued work on a competency framework (December 2008).
2009	 A second First Nations Health Managers National Forum is held to review and discuss a draft competency framework (January 2009). The First Nations Health Managers Competency Framework is finalized.
2010	 The founding Board of Directors for the First Nations Health Managers Association is established on February 10, 2010.
2011	 FNHMA hosts 300 delegates at its first National Conference.
2012	 FNHMA releases the Governance, Strategy and Decision– Making Toolbox in English.
	 FNHMA releases the Human Resource, Programs and Support Services Toolbox in English. FNHMA signs a Partnership Agreement with AFOA
	Canada.

2013	- TNUINAA rologoos the Humann Descurses Drogrames and
	FNHMA releases the Human Resource, Programs and Support Services Teelbox in French
	Support Services Toolbox in French. • ENHMA releases the Governance Strategy and Decision-
	FNHMA releases the Governance, Strategy and Decision— Making Toolbox in French
	Making Toolbox in French.
2014	
	 FNHMA develops 10 new workshops to enhance services
	offered.
	 FNHMA signs a Statement of Partnership with the
	Assembly of First Nations.
2015	
2015	FNHMA takes control of association management and is
	100% Indigenous lead.
	FNHMA opens its office in Akwesasne, Ontario.
	FNHMA expands and begins hiring staff.
	The First Nations Health Services Integration Toolbox is
	released.
2016	ENUMAN I II II III O ' A III II
	FNHMA releases the Health Services Accreditation
	Toolbox.
	The Certified First Nations Health Manager Program
	earns accreditation with Athabasca University.
	FNHMA and Accreditation Canada reach an agreement
	offering Accreditation Canada Surveyors recognition
	towards the Maintenance of Certification for their CFNHM
2017	designation holders.
2017	 Athabasca University and FNHMA negotiate an
	Articulation Agreement for CFNHM course recognition.
	FNHMA and the Canadian Foundation for Healthcare
	Improvement (now Healthcare Excellence Canada)
	partner to produce a First Nations Health Service Delivery
	video.
	 FNHMA live-streams the Convocation and Awards

the first time.

Ceremony from its 7th Annual National Conference for

2018	 FNHMA releases the Developing Health and Wellness Plans: A Guide for First Nations. FNHMA partners with Healthcare Excellence Canada (formerly the Canadian Foundation for Healthcare Improvement) for A Journey We Walk Together: Strengthening Indigenous Cultural Competency in Health Organizations project.
2019	 Health Organizations project. FNHMA completes the Health and Wellness video resource project. FNHMA expands with the hiring of 7 new staff members and 8 interchange employees from the First Nations and Inuit Health Branch.
2020	 FNHMA implements new technology to support the delivery of the Certified First Nations Health Manager Program. FNHMA launches hybrid courses in response to the COVID-19 Pandemic. FNHMA launches InfoPoint to support First Nations health managers across Canada with reliable information. FNHMA hosts more than 60 COVID-19 Virtual Town Halls – discussions covering how COVID-19 is affecting health managers, front line health workers, and First Nations
2021	 communities. FNHMA hosts a second season of COVID-10 Virtual Town Halls. FNHMA accepts the co-chair role of the Joint Forum on Administrative and Operational Tools from the Assembly
	of First Nations (AFN). Initially established in 2017, the
	Joint Forum is co-chaired with the First Nations Inuit and Health Branch - Indigenous Services Canada.

2022

- FNHMA releases Health and Wellness Planning: CORE Essentials. A Guide for First Nations.
- The FNHMA-ISC Joint Forum on Administrative and Operational Tools is renamed to the FNHMA-ISC Advisory Circle on Health and Wellness Tools to better reflect the intent and mandate of the group.
- 600 delegates attended FNHMA's 10th Anniversary National Conference in Victoria, BC, setting a new record for the association.

2023

- FNHMA releases FOCUS on Wellness: A Strength-based Indicator Tool.
- FNHMA brings back Intensive CFNHM courses.
- FNHMA and the First Nations Housing Professionals Association (FNHPA) complete the Housing Indicators Toolkit in collaboration.
- FNHMA presents for first time to an international delegation at Healing Our Spirit Worldwide: The Ninth Gathering, Indigenous health conference in Vancouver, BC. FNHMA was also a sponsor and exhibitor.

2024

- FNHMA shares the "Telling Our Stories First Nations Health Leaders Perspectives on Health Data and Indicators" video series.
- FNHMA receives funding to lead an Indigenous Health Navigators curriculum and training initiative.

BOARD OF DIRECTORS



David McLaren, President and Quebec Director, CFNHM, CIL



Lorraine Muskwa, Vice-President and Alberta Director, CFNHM



James Bone, Secretary/Treasurer and Manitoba Director, CFNHM



Darlene Anganis, Atlantic Director, CFNHM



Kimberly Fisher, Ontario Director, CFNHM



Mary Carlson, Saskatchewan Director



Cheyenne Joseph, AFN Director At Large



Donna Metallic, Chair, Professional Development and Certification Committee, CFNHM



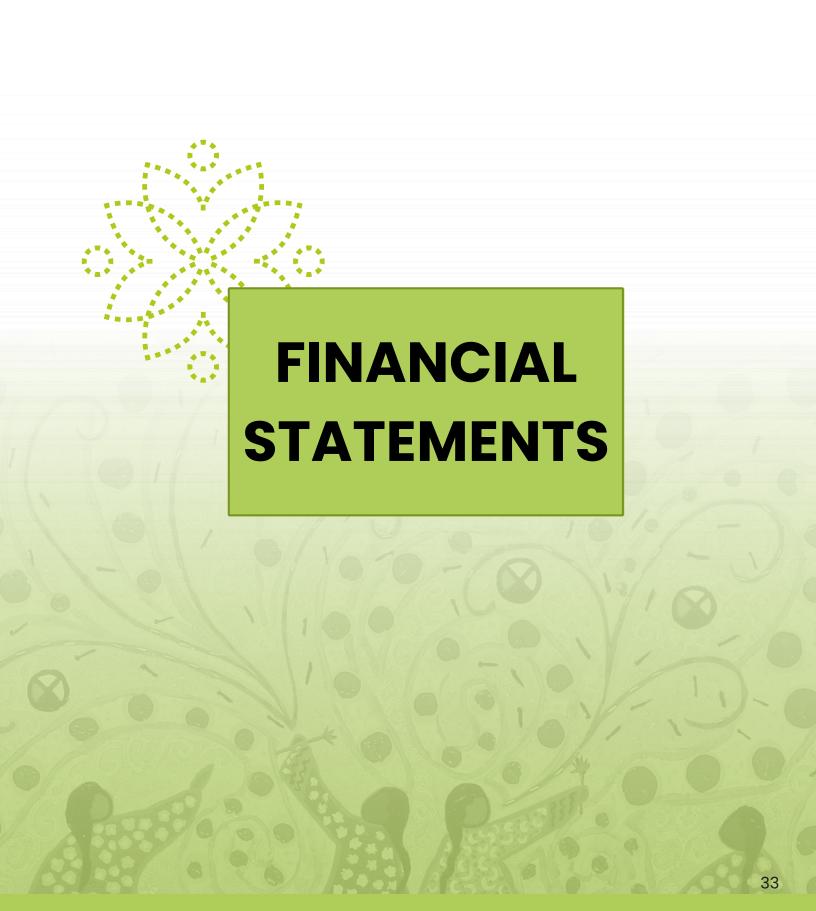
Calvin Morrisseau, Knowledge Keeper, CFNHM

FNHMA STAFF

(During 2024-2025 reporting period)

Marion Crowe, CFNHM, CAFM, CAPA, CIL, Chief Executive Officer Connie Toulouse, CIL, Director of Corporate Services
Judith Eigenbrod, MSc, MPH, CIL, Director of Programs
Gail Boyd, Interim Executive Coordinator
Chelsea Thornton, Education and Membership Coordinator
Kylie Thompson, Marketing and Communications Coordinator
Samara Lewis, RN, MPH, Education Specialist
Vince Maracle, Finance Officer
Lori Keith, MBA, CFNHM, Special Advisor
Kelsey Thompson, Executive Coordinator (Maternity Leave)
Margaret Tims, CFNHM, Capacity Development Officer
Justin Penasse, Capacity Development Officer
Selena Willier-Schmidt, CFNHM, Education Specialist





FIRST NATIONS HEALTH MANAGERS ASSOCIATION AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2025

Independent Auditors' Report
Statement of Financial Position
Statement of Revenue and Expenses
Statement of Changes in Net Assets
Statement of Cash Flows
Notes to Financial Statements





INDEPENDENT AUDITORS' REPORT

To the Directors of: First Nations Health Managers Association

Opinion

We have audited the financial statements of First Nations Health Managers Association, which comprise the statement of financial position as at March 31, 2025, and the statement of operations, statement of changes in net assets and cash flows statement for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of First Nations Health Managers Association as at March 31, 2025, and the results of its operations and cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are described in the *Auditors' Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the entity in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Entity's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless management either intends to liquidate the Entity or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Entity's financial reporting process.

Auditors' Responsibilities for the Audit of Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high-level of assurance but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements. As part of an audit in accordance with Canadian generally accepted audit standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls.
- Obtain an understanding of internal control relevant to the audit in order to design audit
 procedures that are appropriate in the circumstances, but not for the purpose of expressing
 an opinion on the effectiveness of the Entity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the Entity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a matter that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Frouin Group Professional Corporation Ottawa, Ontario

From Crown

July 21, 2025





Authorized to practice public accounting by the Chartered Professional Accountants of Ontario

FIRST NATIONS HEALTH MANAGERS ASSOCIATION AUDITED STATEMENT OF FINANCIAL POSITION AS AT MARCH 31, 2025

	2025	2024				
ASSETS						
CURRENT ASSETS Cash GST/HST receivable Accounts receivable Prepaid expenses	\$ 1,840,984 78,606 309,793 <u>65,275</u> 2,294,658	105,877 458,951 85,167				
PROPERTY AND EQUIPMENT (Notes 2e and 7)	27,089	43,883				
TOTAL ASSETS	\$ <u>2,321,747</u>	\$ <u>1,708,629</u>				
LIABILITIES AND NET ASSETS						
CURRENT LIABILITIES Accounts payable and accrued liabilities Deferred contributions (Note 4) Deferred membership	\$ 23,366 550,348 29,173 602,887	\$ 92,141 0 18,395 110,536				
NET ASSETS Internally-restricted Education Fund Unrestricted	38,620 1,680,240 1,718,860	38,620 1,559,473 1,598,093				
TOTAL LIABILITIES AND NET ASSETS	\$ <u>2,321,747</u>	\$ <u>1,708,629</u>				

FIRST NATIONS HEALTH MANAGERS ASSOCIATION AUDITED STATEMENT OF REVENUE AND EXPENSES FOR THE YEAR ENDED MARCH 31, 2025

	2025	2024
REVENUE		
Indigenous Services Canada (Note 5) Annual conference Education revenue (Note 6) Membership Miscellaneous	\$ 1,202,278 485,235 687,312 72,575 312,100 2,759,500	\$ 1,518,175 451,698 482,651 76,980 66,135 2,595,639
EXPENSES		
Administration	471,515	337,259
Governance operations	36,729	86,645
Advertising and promotions	9,771	129,396
Consulting	231,803	323,112
Travel	166,404	171,750
Rent	203,539	180,991
Workshop expenses	5,126	2,060
Certification courses	935	2,001
Wages and salaries	1,083,658	1,242,215
Annual conference	429,254	378,750
	<u>2,638,734</u>	<u>2,854,179</u>
EXCESS/(DEFICIENCY) OF REVENUES		
OVER EXPENDITURES FOR THE YEAR	\$ <u>120,766</u>	\$ <u>(258,540</u>)

FIRST NATIONS HEALTH MANAGERS ASSOCIATION AUDITED STATEMENT OF CHANGES IN NET ASSETS FOR THE YEAR ENDED MARCH 31, 2025

UNDESTRUCTED NET ASSETS	2025	2024
UNRESTRICTED NET ASSETS, BEGINNING OF YEAR	\$ 1,559,474	\$ 1,818,013
Excess/(deficiency) of revenues over expenditures for the year	120,766	(258,540)
UNRESTRICTED NET ASSETS, END OF YEAR	\$ <u>1,680,240</u>	\$ <u>1,559,473</u>
INTERNALLY-RESTRICTED EDUCATION FUND,		
BEGINNING AND END OF YEAR	\$ <u>38,620</u>	\$ <u>38,620</u>

FIRST NATIONS HEALTH MANAGERS ASSOCIATION AUDITED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED MARCH 31, 2025

	2025	2024
CASH PROVIDED BY OPERATING ACTIVITIES		
Excess/(deficiency) of revenues over expenditures for the year Add: Amortization	\$ 120,766 <u>16,793</u> <u>137,559</u>	\$ (258,540) 31,815 (226,725)
Net change in non-cash working capital GST/HST receivable Accounts receivable Prepaid expenses Accounts payable and accrued liabilities Receiver general payable Deferred membership revenue	27,271 149,158 19,892 (68,773) 550,348 10,778 826,233	133,054 40,761 (38,868) 39,918 (245,275) (7,222) (304,357)
CASH FLOWS FROM INVESTING ACTIVITIES		
Redemption of investments	0	15,000
NET CHANGE IN CASH DURING THE YEAR	826,233	(289,357)
CASH - beginning of year	<u>1,014,751</u>	1,304,108
CASH - end of year	\$ <u>1,840,984</u>	\$ <u>1,014,751</u>
REPRESENTED BY:		
Cash	\$ <u>1,840,984</u>	\$ <u>1,014,751</u>

(See accompanying Notes to Financial Statements)

FIRST NATIONS HEALTH MANAGERS ASSOCIATION

NOTES TO AUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED MARCH 31, 2025

1. PURPOSE OF THE ORGANIZATION

The First Nations Health Managers Association ("the Association") has been established to provide leadership in health management by promoting quality standards, research, certification and professional development related to First Nations health service delivery at the community level. The Association was incorporated on March 19, 2010 under the Canadian Corporations Act as a non-profit organization without share capital and as such is exempt from income tax under current legislation.

2. SIGNIFICANT ACCOUNTING POLICIES

The financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations and include the following significant accounting policies:

a. Short-term investments

Short-term investments are measured at fair value at each reporting date, with gains and losses recognized in the statement of revenue and expenses as part of investment income.

b. Revenue recognition

The Association follows the deferral method of accounting for revenue. Government contributions are recognized as revenue in the year which the related expenses are incurred. Course revenue is recognized when materials are shipped to the student. Conference revenue is recognized once the conference has taken place. Workshop revenue is recognized when the workshop has been completed.

c. Estimates and assumptions

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of income and expenses during the reporting period. Actual results may differ from those estimates. Those estimates are reviewed annually and as adjustments become necessary, they are recognized in the financial statements in the period they become known.

d. Allocation of expenses

The Association engages in projects funded by other agencies that are consistent with its organizational mission. The cost of these programs include the costs of the personnel and other eligible expenses that are directly related to the delivery of these projects. The Association incurs funding development and administration expenses, including corporate governance, general management and general support. These expenses are tracked and reported separately for the respective program(s) on an appropriate basis and consistently each year and are program specific in nature.

FIRST NATIONS HEALTH MANAGERS ASSOCIATION

NOTES TO AUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED MARCH 31, 2025

2. SIGNIFICANT ACCOUNTING POLICIES (continued)

e. Capital assets

Capital assets are recorded at cost and are amortized over their useful life as follows:

Leasehold improvements 5 years straight-line
Furniture & equipment 20% Declining balance
Computer equipment 55% Declining balance

Assets are amortized at 50% in the year of acquisition. Some capital assets have been purchased with government funding from Indigenous Services Canada, and in accordance with accounting standards, the funding received for these purchases has been netted against the costs.

3. FAIR VALUE OF FINANCIAL INSTRUMENTS

The carrying value of cash, accounts receivable, GST/HST receivable, accounts payable and accrued liabilities, and deferred revenue approximate their fair value because of the relatively short period to maturity of the instruments.

4. DEFERRED CONTRIBUTIONS

Deferred revenue represents funding received for various ongoing projects for which expenditures have not yet been incurred. The balance of deferred contributions consists of the following:

		2025		2024
Deferred contributions, beginning of year Grants and other funding received in the year Less: amounts recognized as revenue in the year		0 1,752,626 <u>1,202,278</u>)	\$	245,275 1,272,900 (1,518,175)
Deferred contributions, end of year	\$	550,348	\$_	0
DEFERRED PROJECTS		2025		2024
ISC Data Literacy Indigenous Health Navigators Joint Forum Toolkit	\$ 	13,351 360,400 40,197 136,400	\$	0 0 0 0
Deferred contributions, end of year	ֆ	<u>550,348</u>	Φ_	<u> </u>

FIRST NATIONS HEALTH MANAGERS ASSOCIATION NOTES TO AUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED MARCH 31, 2025

5. ECONOMIC DEPENDENCY

The Association receives funding from Indigenous Services Canada for project-based expenses as well as revenue from self-funded activities. During the year, Indigenous Services Canada revenue was \$1,202,278 (\$1,518,175 in 2024).

6. EDUCATION REVENUE

	2025	2024
Certification courses Workshops	\$ 657,473 29,724	\$ 409,872 72,779
Total education revenue	\$ <u>687,312</u>	\$ <u>482,651</u>

7. CAPITAL ASSETS

		Cost		mulated tization		2025 Net		2024 Net
Leasehold improvements Furniture and equipment	\$	0 83,113	\$ (5	0 58,602)	\$	0 24,511	\$	7,587 33,079
Computer equipment Total	\$ <u></u> 1	52,113 35,226	<u>(</u> 2	19,535) 08,137)	\$ _	2,578 27,089	\$ <u></u>	3,217 43,883

8. FINANCIAL RISK MANAGEMENT POLICY

The Association is exposed to various risks through its financial instruments. The following analysis provides a measure of the risks at the reporting date March 31, 2025:

Credit risk:

The Association is exposed to credit risk resulting from the possibility that parties may default on their financial obligations. The Association's maximum exposure to credit risk represents the sum of the carrying value of its cash and equivalents, investments and accounts receivable. The Association's cash and investments are deposited with Canadian Chartered banks and as a result, management believes the risk of loss on these items is remote. The accounts receivable are expected to be fully collected.

FIRST NATIONS HEALTH MANAGERS ASSOCIATION NOTES TO AUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED MARCH 31, 2025

8. FINANCIAL RISK MANAGEMENT POLICY (continued)

Liquidity risk:

The Association manages its liquidity risk by regularly monitoring forecasted and actual cash flow and by holding sufficient cash to meet any anticipated liabilities and commitments. Accounts payable are normally paid within 30 days.

Currency risk:

The Association's functional currency is the Canadian dollar. The Association does not enter into foreign currency transactions and does not use foreign exchange forward contracts. At March 31, 2025, the Association had no investments exposed to currency risk.

Interest rate risk:

The Association is exposed to interest rate risk with regard to its cash. The Association has no interest-bearing liability. Fluctuations in market rates of interest on cash do not have a significant impact on the organization's results of operations.

9. COMMITMENT NOTE

The Association is currently engaged in two lease agreements:

The Association has entered into an agreement with Doubletree By Hilton Montreal for accomodations related to the 2025 annual conference. The minimum obligation arising from this contract to date is \$134,283.