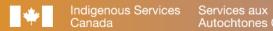




# Making a Request Through Jordan's Principle

**Alberta Information Package** 2021-2022







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### **NEED HELP WITH A REQUEST?**

Contact the First Nations Health Consortium (FNHC), an agency in Alberta dedicated to assisting and supporting you in navigating and completing submissions under Jordan's Principle. Please see <a href="https://www.abfnhc.com/">https://www.abfnhc.com/</a> or contact: 1-844-558-8748.

To submit a case under Jordan's Principle in Alberta, or for more information please contact:

Indigenous Services Canada- Jordan's Principle Alberta at (780) 495-8340 or <a href="mailto:iordansprincipleab@canada.ca">iordansprincipleab@canada.ca</a>

~ OR~

For request and resources support, the First Nations Health Consortium is available at 1-844-558-8748

Completed Requests Can Be Submitted To: <a href="mailto:jordansprincipleab@canada.ca">jordansprincipleab@canada.ca</a>



# What is Jordan's Principle?

Jordan's Principle makes sure all First Nations children living in Canada can access the products, services and supports they need, when they need them. Funding can help with a wide range of health, social and educational needs, including the unique needs of First Nations Two-Spirit and LGBTQQIA children.

Jordan's Principle is named in memory of Jordan River Anderson, a young boy from Norway House Cree Nation in Manitoba.

## **Eligibility/Who Can Apply?**

First Nations children from birth until date of 18<sup>th</sup> birthday in Alberta are considered for products, services and supports if they meet any of the following:

The child is registered or eligible to be registered under the Indian Act (as amended
from time to time).
The child has one parent/guardian who is registered or eligible to be registered under
the Indian Act (as amended from time to time).
The child is recognized by their Nation for the purposes of Jordan's Principle; or
The child ordinarily resides on reserve

### There are two streams to make a request:

# A) Individual Request

Requests for products, services and supports to meet the specific needs of **a child** can be made by:

- Parents or guardians caring for the child as identified above,
- A First Nations child above 16 years of age, who meets the eligibility criteria, can apply for themselves.
- An authorized representative of the child, parent or guardian.

# B) Group/Community-Managed Request:

Requests for products, services and supports to meet the collective needs **of a group of children** from one or multiple families/guardians, or from the same community or organization can be made by:

- > Any of the above
- A community or service provider
- A Service Coordinator, Case Manager, or Navigator.

# What Can be Covered under Jordan's Principle?

Jordan's Principle aims to ensure there are no gaps in health, social and education programs, services and supports for First Nations children. All requests, whether for an individual child or for a group of children, are **reviewed on a case-by-case basis**, with an understanding that each situation is unique. Products, services and supports may range from **health**, **social**, **cultural**, **and educational needs**. The following provides some examples of products and services that may be funded through Jordan's Principle (Note: approvals are case-specific, based on the unique circumstances identified to support the request). For more information on what's covered under Jordan's Principle, we encourage you to reach out the Alberta Jordan's Principle Team at (780) 495-8340/jordansprincipleab@canada.ca or FNHC at **1-844-558-8748**.

### Case Example #1 (Individual)

A child resides on reserve but does not have a Status number. They have a medical appointment that they must travel to Edmonton for. Travel expenses, including mileage, meals, and accommodation, would be eligible through Non-Insured Health Benefits (NIHB) if the child/escort had a Status number. By identifying this gap in accessibility, this case may be covered under Jordan's Principle to ensure the **normative standard of care** is provided to the child (see pg.7 for more information).

### Case Example #2 (Individual)

A child has a medical appointment that they must travel to Edmonton for. NIHB provides for the cost of the trip, including bus fare, meals and accommodation for the child and their escort. The child has a 3-year-old sibling, and the child's guardian is a single parent without a wide support network. The child has missed several appointments, as the parent is unable to find childcare for the younger sibling. With supporting documentation, Jordan's Principle may be applied to cover the bus fare and meals for the sibling to attend the trip under the provision of ensuring **Substantive Equality**, above the normative standard of care for the child (see pg. 7 for more information).

### Case Example #3 (Group/Community-Managed)

A First Nation Organization, on reserve, has identified a desire to support language revitalisation for a group of children in their community from an Elder or Language Instructor. To ensure the children have access to their ancestral language, Jordan's Principle would cover the hourly rate for an Elder or Language Instructor to teach the group of children. With supporting documentation, this case may be covered under the provision of ensuring **Substantive Equality**, above the normative standard of care for the children (see pg. 7 for more information).

### Case Example #4 (Group/Community-Managed)

A First Nation's band operated school has identified a group of children with academic concerns, requiring psycho-educational assessments to assess each child's educational needs. This is a support typically accessible to other children in Alberta. With supporting documentation, including the number of children served and identifying a gap in accessibility normally provided to other children, this case may be approved under Jordan's Principle to ensure the **normative standard of care** is provided.

# What Do I Need To Submit an Individual Request?

# The following information is needed for your submission (See Appendix A & B for more details)

~Please review and ensure that the following is provided in your submission~

Note: The personal information collected by Canada provided in making a Jordan's Principle submission is protected in accordance with the *Privacy Act*.

Child Name, Date of Birth, Indian Status Number (if registered/or parent's number), Address of Residence/Mailing Address
<ul> <li>(NEW-If Applicable)- Confirmation of Recognized Membership by a First Nation; or Consent to Communicate with a First Nation on your behalf to confirm membership:</li> <li>*The parent or guardian can confirm (or provide consent to ISC or FNHC to seek confirmation) eligibility through membership recognition from a Nation for the purposes of Jordan's Principle.</li> <li>If applicable, please contact the Jordan's Principle Alberta Team to request the applicable forms at (780) 495-8340 or jordansprincipleab@canada.ca</li> </ul>
If the child lives on or off reserve
Parental/Guardian Consent: This includes consent to submit the application (if not the parent/guardian) with the child's personal and/or health information, as well as consent to share information with the First Nations Health Consortium (FNHC) for post-approval and payment support. For verbal consent, please provide the parent/guardian's full name, address, and phone number and guardianship documentation where applicable.
Funding information (i.e. proposed budget/cost estimates, invoices, receipts) and timeline for service delivery (See Appendix A for more information)
Assessments or recommendations previously completed for the child that link the requested services to the identified needs of the child
Letters of support from educational, social, health professionals  The professional directly working with the child should clearly state, specific to their area of expertise/scope of practice, the diagnosis(es) or identified need, recommended intervention and treatment plan (where applicable), and how there is a gap in services.
History of the request: Has other funding been accessed prior to request? Is the funding insufficient, if so, how? Have you previously submitted to another program/service?
Information/documentation to support substantive equality, culturally appropriate service provision, and/or safeguarding best interest of the child (See pg.7 and Appendix A/B for details).  Examples of supporting information could include:  a letter of support provided by a health/social/education professional directly involved in the child's circle of care

- a verbal statement/testimony or letter of support from a family member/ Elder/community member; and/or
- a verbal statement/testimony or letter describing the cultural significance of a requested product/service/support.

# What Do I Need to Submit a Group/Community-Managed Request?

### The following information is needed for your submission (See Appendix A & B for more details):

~Please review and ensure that the following is provided in your submission~

Note: The personal information collected by Canada provided in making a Jordan's Principle submission is protected in accordance with the *Privacy Act*.

A summary of the group request: including a general overview of the needs of the group of children, the context of the request, and details of the items being requested;
<ul> <li>The number of children benefitting from the request, and the child-specific information for each child's eligibility, including:         <ul> <li>Child Name or identifier, Date of Birth, Indian Status Number (if registered/or parent's number)</li> <li>[NEW] If Applicable- Confirmation of Recognized Membership by a First Nation or Consent to Communicate with a First Nation on your behalf to confirm membership:</li></ul></li></ul>
Parental/Guardian Consent: Confirmation that the requestor has obtained consent for all children who have personal and/or health information submitted with the request.
Funding information (i.e. proposed budget/cost estimates, invoices, receipts) and timeline for service delivery (See Appendix A for more information)
Letter of support or email from an official representing the Band Council or Nation
Assessments or recommendations previously completed for specific children identified that link the requested services to the identified needs of each of the children
Letters of support from educational, social, health professionals summarizing, within their area of expertise/scope of practice, the identified need for a group of children which:  • links the requested intervention to the identified needs of the group of children, and that;  • includes an attestation that assessments/referrals/prescriptions/letters for the specific children included in the request are available for provision, if applicable/necessary;
History of the request: Has funding been accessed prior to request, or is the funding insufficient, if so, how? Have you previously submitted to another program/service?
Information to support provisions for substantive equality, culturally appropriate service provision, and/or safeguarding best interest of the child (See Pg 7 and Appendix A/B for details).  Examples could include:  • a letter of support provided by a health/social/education professional directly involved in the

- a letter of support provided by a health/social/education professional directly involved in the child's circle of care
- a verbal statement/testimony or letter of support from a family member/ Elder/community member; and/or describing the cultural significance of a requested product/service/support.

## What is Substantive Equality and When/How Do I Include It?

When a request for products, services, or supports is beyond the normative standard of care (beyond what is normally available to other children in the province), if applicable, it may be requested through substantive equality, the best interests of the child, and/or culturally appropriate services.

### Normative Standard of Care

The Normative Standard of Care is the average or **standard level of provincial** health, social and education programs/services provided to support the health of the population. It is a guide for identifying **the minimum level** of care that a First Nations child is entitled to receive in relation to any other child. This means that **a gap in a government service/product/support exists** when it is:

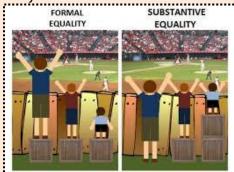
- available to all other children; and
- is not accessible by a First Nations child

Case Example #1 and #4 on pg. 4 demonstrates examples of approved cases under the 'normative standard of care', showing a gap in a service/support that is normally available to other children.

## Substantive Equality

Requests under Jordan's Principle that are "beyond the Normative Standard of Care" (beyond what is normally available to other children) may be approved when the case is applied through the lens of 'substantive equality'. This is the understanding that not all children start off from the same position in life due to the unique circumstances they may face, making it more difficult for some to reach the same level of success as others.

Treating everyone the same is only fair if they start from the same position. This lens takes into account the unique



needs (and the unique services/supports to meet those needs) of a First Nations child given circumstances such as historical disadvantage; inequalities; the lack of on-reserve or surrounding services etc.

### **Supporting Substantive Equality in a Request:**

### This may include identifying if and how any of the following applies:

- Would failure to provide the service continue the disadvantage experienced by the child or ethnicity?
- Would failure to provide the service result in the child needing to leave the home or community for an extended period of time?
- Does the child have increased needs for the service because of a historical disadvantage (i.e. impact of Indian Residential Schools, 60's Scoop, etc.)?
- Would failure to provide the service result in the child being placed at a significant disadvantage in terms of ability to participate in educational activities?
- Is the provision of support necessary in maintaining family stability (i.e. risk of child being placed in care; caregivers being unable to assume caregiving responsibilities)?
- Is the provision of support necessary to ensure access to culturally appropriate services or to avoid a significant interruption in the child's care?
- Does the child's circumstance of health condition, family, or community context (geographical, historical or cultural) lead to a different or greater need for services as compared to other children?
- Would the requested service support the community/family's ability to serve, protect and nurture its children in a manner that strengthens the community/family's resilience, healing and self-determination?

### **APPENDIX A: Additional Details for Required/Supporting Documentation**

#### 1) Documentation/Information for Child

To support your request, it is important to include all **child specific information** identified on pg. 3 (for an individual request) or pg. 4 (for a group/community-managed request) of this guide. This includes **providing ONE or more of the following** that links to the requested need for each child identified in the request:

- Health/education/social assessment, evaluation, report or summary (i.e. psychoeducational assessment, behavioural assessment, Occupational therapist report, Elder or Cultural Teacher etc.)
- Referral
- Prescription
- Official diagnosis with treatment plan
- Letter of recommendation from health/social/education professional involved in the child's/children's life that indicates the diagnosis(es) or identified need and directly recommends the requested product/support/service.\*

Note: Please include confirmation that you have obtained consent from parent/guardian to share information for each child with personal and/or health information submitted with the request, as it is required by ISC and FNHC to process any request.

Please see **Appendix B** for an example of how to include the required and supporting information for each child being served within the submission:

#### Types of Health/Social/Educational Assessments, Evaluations or Reports

- Autism Assessment
- Behavioural Therapy Assessment
- Dental/Orthodontic Treatment Plan
- Developmental Assessment Report
- Educational Support Plan/Intervention
- FASD Assessment
- Hospital Report
- Individual Education Plan (IEP)
- Neurodevelopmental Assessment
- Neuropsychological Assessment
- Mental Status Exam
- Treatment Plan/Progress Report

- Occupational Therapist Assessment/Report
- Orthodontic Evaluation Summary
- Physiotherapy Report
- Psycho-Educational Assessment
- Psychological Assessment/Report/Evaluation
- Psychology Record of Service
- Rehabilitation Report
- Report Card
- Speech and Language Assessment/Report
- Student Support Plan
- Trauma-Informed Safety Plan

To support all requests, **signed documentation is required** from a health, social, or education professional *directly working* with the child/children that **clearly indicates the diagnosis(es)** or **identified need**, directly recommends the requested intervention, as well as the recommended frequency/duration (treatment plan), if applicable. This documentation should:

- be within the professional's area of expertise/scope of practice (i.e. requests for a
  medical or health intervention must be recommended by a health professional,
  whereas a child or family social service can be recommended by a social worker),
  bearing in mind community context and access to professionals, as noted below\*;
- be from a professional within the child's circle of care (i.e. directly treating the child);
- include the registration/professional licensing number of the recommending professional, if applicable; and
- be consistent with the general care/wellness plan for the child, if applicable.

\* Please note that community health, social and education providers are considered as qualified in most cases to provide an initial assessment of unmet needs of the child (or children). This is especially important to consider in cases where communities/families do not have timely access to specialized or additional subject-matter expertise (e.g. a National Native Alcohol and Drug Abuse Program (NNADAP) worker can provide a substance abuse recommendation in the absence of a physician or psychologist).

#### Who Can Provide a Referral or Letter of Recommendation

- Aboriginal Disability Case Manager
- Assistive Technologist
- Audiologist
- Behavioural Consultant/Analysts
- Chiropractor
- Community Health Nurse
- Community Health Representative
- Counselling Services
- Dentist
- Early Childhood Interventionist
- Educational Professional
- Mental Health Nurse
- Mental Health Therapist
- Midwife
- Neuropsychologist
- Nurse/ Nurse Practitioner
- Elder/Cultural Teacher

- Occupational Therapist
- Ophthalmologist
- Optometrist
- Orthodontist
- Otolaryngologist
- Pediatrician
- Physical Therapist
- Physician/Doctor
- Physiotherapist
- Psychiatrist
- Psychological Associate
- Psychologist (Clinical/Social/Educational)
- Psychotherapist
- Recreational Therapist
- Speech-Language Pathologist
- Social Worker
- 2) Letters of Recommendation from a health, social, or educational professional involved in the child's/children's life should include the following:
  - It is preferable that the professional not use a generic letter. Given each child has unique needs, the letter of recommendation must speak directly about the child/children identified in the request.
  - Date
  - Professional's role in the child's life
  - Professional's licensing number/credentials (if applicable)
  - Nature of relationship to the child, including the length of time working with the child
  - Diagnosis(es) and/or identified need
  - Please include information to support evidence of a gap in services and/or **substantive equality** (See pg 7 of this document for more information).
  - Direct recommendation of the requested intervention, which:
    - o Indicates how provision of the request would directly address the child's health, social and/or educational identified need/diagnosis(es); and/or
    - o Identifies the potential impacts on the child should the request not be provided.
  - Giving an example is helpful to demonstrate how the request would address the child's need. The more specific the letter is, the better it demonstrates why the request is needed.
  - The recommended intervention or treatment should be directly named in the letter. For example, for a request for coverage of fees associated participation in a hockey team, the professional should not simply suggest that sports in general would be beneficial for the

child, but should specify how participation on a hockey team specifically would address the child's diagnosis (es) or identified need(s).

• Signature of the recommending professional

Example of an Incomplete Letter of Recommendation	Example of a Complete Letter of Recommendation
"I, recommend that this child participate in activities because it is beneficial for him to get exercise for both health and social reasons."	(Child's name) has been my patient/client since 2015. (Child's name) has been diagnosed with anxiety, which has worsened with age. He has already tried medication, and his parents have
*Unfortunately, this letter is very generic and vague with respect to the child, which makes it difficult for a reviewer to know what the link is between the child's needs and what is being requested	taken training to help him manage his anxiety on a daily basis, which has helped a lot, but there is still work to be done. As school psychologist, I have observed in working with (child's name) that since he has joined a soccer team and has been practising regularly, his anxiety has decreased considerably (ie. noting he is sleeping better, has a desire to engage others etc.), and he is concentrating better at school. This has also been noted by the case management team (i.e. teacher, medical professional, psychologist etc.) during regular case conferencing meetings. I strongly recommend that he continue participating in this activity. I have determined that it helps him manage his anxiety and do better in school.  Signature of Service Provider (Name and title of Service Provider). Letter signed September 1, 2019

### 3) Financial Information To Support Request

To support your request, please include:

- A financial budget, with cost estimates for each service/product/ support being requested (i.e. travel, accommodation, fees for professional per visit etc.)
- Any Invoices or receipts
- The expected timeline and frequency of service delivery (please also include an explanation as to how this model of service delivery benefits the child/children).

Example of an Incomplete Budget	Example of a Complete Budget			
[Requestor name] is requesting funding	[Requestor name] is requesting funding in the			
in the amount of \$X to provide	amount of \$X to provide Occupational Therapy (OT),			
Occupational Therapy and Speech	and Speech Language Therapy (SLP) services from			
Language Therapy services.	[Date to Date] for [#] of children. This funding includes the following:			
	Item	Description	Total Cost	
	OT	1 day/week at \$X per visit	\$X	
	SLT	1 day/week at \$X per visit	\$X	

# **APPENDIX B: Example Template for Child-Specific Supporting Information**

Please see the attached document for an example of including the required and supporting information for each child being served within the submission.

Note: This information may be provided in any format desired by the requestor; the template is simply provided as a potential option or guide.

To submit a case under Jordan's Principle in Alberta, or for more information please contact:

Indigenous Services Canada- Jordan's Principle Alberta at **(780) 495-8340** or **jordansprincipleab@canada.ca** 

~ OR~

For request and service navigation support, the First Nations Health Consortium is available at **1-844-558-8748** 

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