Making it Happen...Making it Matter

Jordan's Principle Enhanced Service Coordination:
Annual Report 2020-2021
About The Cover And Featured Illustrations

Our Cover and other featured illustrations are the result of our annual art competition. Artwork was chosen by the FNHC panel with input from designers and First Nations artist Kyle Charles. We’re thankful for all the wonderful submissions. This year’s cover winner is by Angelina Ross. She generously allowed us to use her design as a starting point, and have our designers adapt it to fit the format and colour scheme of this annual report.

Angelina Ross - Artist Statement

I was very excited to do this piece! My art piece shows four people. The first is a mom or a grandmother with a baby on her back in a moosbag, she is wearing more traditional clothing to show our connection to traditional ways. She and the child next to her are holding a teddy bear.

The teddy bear is a unique symbolism to the First Nations Heath Consortium, Jordan’s Principle and children in general. The child in the middle is carrying a backpack to show the significance of education or going to school. Making it happen and making it matter is possible for children that need supports in school to help them succeed. Then I have a child in a wheelchair to also show the symbolism of Jordan’s Principle and meeting the needs of every child and physical disabilities.

They are walking down a red road with hearts and on the road is sweet grass and sage on either side. This is to show how our medicines keep us on a good path and keeps us living a balanced life.

I also put in trees on either side both in rows of four to signify the importance of four in our culture -the trees represent: growth, strength and independence. And in the foreground it is showing the foothills and the rocky mountains -Alberta landscape. The sunrise with a Dreamcatcher represents individuals going towards their dreams or making their dreams happen with a bright future.
Jordan’s Principle Enhanced Service Coordination:
Annual Report 2020-2021
Acknowledgements

Making it Happen… Making it Matter. This is our commitment to First Nations children and their families across Alberta. You are the reason we are here.

The First Nations Health Consortium (FNHC) is pleased to present its 2020-2021 annual report. Our report speaks to our work, our commitment: that every First Nations child deserves the same level of services and supports as those provided to non-First Nations children. We are committed to making that happen… and making it matter so every child’s potential can be realized.

Our values reflect our passion and commitment… making it happen, making it matter! We will do all we can to improve the quality of the lives of First Nations children across Alberta. This report demonstrates the difference we can make in children’s lives through strong leadership, effective management, capable staff, and service providers, all in collaboration with our many valued stakeholders.

We are about people. People with strong values who put those values to work every day in supporting the needs of First Nations children. We extend our gratitude and heartfelt thank you to all who contribute to improving children’s lives:

- Families and their children who put their trust in us
- Frontline staff who work diligently and with compassion to meet children’s needs
- Service providers and vendors representing an array of multiple disciplines and industries who respond quickly to our requests to address children’s needs
- Management team members who guide and support staff in doing competent work
- First Nations Chiefs and their Councils in Alberta who encourage, guide, and promote our work
- FNHC Board of Directors for their dedicated leadership in creating the conditions that enable FNHC to be the best it can be
- Government of Alberta, especially the Ministries of Health and Children’s Services, and Indigenous Services Canada, especially the First Nations Inuit Health Regional Office in Edmonton, for their support and collaboration in working towards the best outcomes for First Nations children

With the above strong and committed cadre of people working on behalf of the needs of First Nations children, we can make things happen and make those things matter in promoting the health and wellness of all First Nations children in Alberta.

G. Barry Phillips,
Executive Director
First Nations Health Consortium
On behalf of the Board of Directors
Message From The Chairman

Oki,

As the year began none of us could have predicted the devastating impact of COVID-19 throughout the world. Countries, governments, industries, businesses, families, and individuals have been decimated and disrupted by this insidious virus.

We have also seen the remarkable resilience of the human and community spirit. Overall, we have demonstrated admirable cooperation and commitment to supporting the people and First Nation communities we love.

We learned a great deal about ourselves as an organization and our capacity to respond quickly and effectively to the many challenges we encountered on the journey through 2020. We were once again reminded of, and extremely grateful for, the support of friends, colleagues, people, and communities throughout Alberta who while facing their own challenges held out the hand of friendship in our times of need. I would like to take this time to thank the staff and our partners with Bigstone Cree Nation, KTC and Maskwacis.

We thank you all most sincerely for your ongoing support for the work we are so proud to undertake for future generations to come.

Yours in Health,

Tyler White,
CEO Siksika Health Services
Chair, First Nations Health Consortium
Welcome to this year’s annual report. We’re glad you stopped by to read what we’ve been up to over the last year. While COVID was a force to be reckoned with, we did not let it stop the important work we do at the First Nations Health Consortium… helping our First Nations children and their families.

Too many First Nations children cannot count on having their basic health, educational and social needs met so they can reach their full potential and enjoy a good quality of life.

They deserve to overcome a disability without pain or hardship, but with happiness and wellbeing. They have a right to quality, accessible and culturally appropriate services that close the gaps in having their needs met.

They deserve to live in an environment that provides, promotes, and sustains their health and safety. Our commitment to fulfilling the promises made under Jordan’s Principle is unwavering. That’s why we work hard… Making it Happen... Making It Matter.

At the First Nations Health Consortium, we have a strong board and management team that oversees our commitment to serve First Nations across Alberta. Our staff are among the best in the country in carrying out Jordan’s Principle, and in knowing our First Nations culture, communities and the needs of the families and children who live in them. They work hard in collaboration with service providers and vendors, to help First Nations families and their children overcome the challenges they experience in having their basic needs met.

I am grateful to the board for their leadership, to the management team for their guidance and direction and to all staff who give meaning to the work we do. Thank you for your dedication, courage and diligence over the past year, a year unlike any other.

We are the First Nations Health Consortium, and we believe that Every Child Matters, and No Child should be 4gotten.

G. Barry Phillips,
Executive Director
First Nations Health Consortium
On behalf of the Board of Directors
# Table of Contents

**Inside**
- Acknowledgements
- Message from the Chairman
- Message from the Executive Director
- Copyright
- Maria Feather Farahat - Artist Statement
- Overview title page
- Our Beginnings: What is Jordan’s Principle?
- Who is Jordan River Anderson?
- Our Mission Vision and Values
- How we Help
- Chataya Holy Singer - Artist Statement

**Part 1: Introductions**
- Family Testimony 3
- Family Testimony 4
- Family Testimony 5
- Family Testimony 6
- Monica Thom - Art
- Personal Stories As An Employee Working For FNHC
- Personal story as an Employee 1
- Personal story as an Employee 2
- Personal story as an Employee 3
- Personal story as an Employee 4
- Personal story as an Employee 5
- Philip Haynes - Art

**Part 2: Management Team reports**
- Enhanced Service Coordination
- Human Resources Report
- Organizational Snapshot
- Roxy Boucher - Artist Statement

**Part 3: Stories**
- Family and Staff Stories
- Family Story 1
- Family Story 2
- Family Story 3
- Family Story 4
- Family Story 5
- Family Story 6
- Family Story 7
- Family Story 8
- Family Story 9
- Michelle Soto - Artist Statement
- Family Testimonies
- Family Testimony 1
- Family Testimony 2
- Family Testimony 3
- Family Testimony 4
- Family Testimony 5
- Family Testimony 6
- Monica Thom - Art
- Personal Stories As An Employee Working For FNHC
- Personal story as an Employee 1
- Personal story as an Employee 2
- Personal story as an Employee 3
- Personal story as an Employee 4
- Personal story as an Employee 5
- Philip Haynes - Art

**Part 4: Special Initiatives**
- FNHC SARF Pilot Project
- Contributing to the National Knowledge Base on Jordan’s Principle
- Communication and Connection Project
- Building on a Community’s Strengths
- Sandra Wiltzen - Art

**Part 4: Our Partners**
- Maskwacis Health Services Message
- Kee Tas Kee Now Tribal Council Administration
- Bigstone Health Commission
- Siksika Health Services
- Oshana Christiansen née Brave Rock - Artist Statement

**Part 5: Five Years Forward... Building a Strong Future**
- Looking to the future
- Highlights of progress to date
- Appendix: Key 2020-21

**Enhanced Service Coordination Statistics**
- Percentage of Children Served
- On Reserve and Off Reserve
- Needs Requested through Jordan’s Principle
- Education requests
- About our designers
The theme of this contest was making it happen...making it matter. To illustrate this, I chose to draw a mother and child walking toward the sun. I portrayed that every child should have a chance to live their life to the fullest by knowing their values, culture, etc. without worrying about themselves or other’s safety. Everyone can help make this a reality by being aware and educated about Canada’s history of indigenous culture and residential schools. Every child matters.
Overview of FNHC
Our Beginnings

What is Jordan’s Principle?

Jordan’s Principle is a Child-First Initiative created in Jordan River Anderson’s honour. It ensures that First Nations children have equal and fair access to services available to other Canadian children.

Jordan’s Principle shields First Nations children from government disputes.
We’re Continuing The Legacy of Jordan River Anderson

Who is Jordan River Anderson?

Jordan River Anderson was a First Nations boy from Norway House Cree Nation in Manitoba, who was born with a rare neuromuscular disease. Because his complex medical needs could not be treated on reserve, Jordan was transferred to a hospital in Winnipeg, far from his community and family home.

In 2001, a hospital-based team decided that Jordan’s needs would best be met in a specialized foster home closer to his home community. However, federal and provincial governments argued over financial responsibility for Jordan’s proposed in-home services. During these conflicts, Jordan remained in hospital, even though it was not medically necessary for him to be there.

Jordan died in 2005 at the age of 5, never having had the opportunity to live in his family’s home.
Our Mission, Values And Vision
For All That We Do

Who we are

The Alberta First Nations Health Consortium is a province-wide organization developed to improve access to health, social, and educational services and supports to First Nations and Inuit Children throughout Alberta, both on and off reserve, through a single Enhanced Service Coordination model.

The enhanced service coordination model uses a multidisciplinary approach, combining staff knowledge, experience and skill sets to help make the right decisions for the child.

Our children and families now have a direct point of contact with appropriate services when they are needed. The First Nations Health Consortium helps families find service providers in the health, social and educational systems.

Because we care, First Nations Health Consortium will help to restore and sustain our Peoples’ health and wellbeing for generations to come.

Our Mission

Working together, honouring, advocating, and enabling equitable access, to meet the needs of our First Nations People
Our Values Driving Our Vision

**Respect**
We value and honour the diversity of First Nations cultures, languages and aspirations.

**Compassion**
We seek to understand each other's individual and community experience.

**Love**
We have love and affection for our People.

**Fairness**
We are fair and equitable in all our actions and decisions.

---

Our Vision

Our Rights

Our People

Our Quality of Life
Support Comes In Many Forms

We are the link. We support families in getting access to services and supports their children need. Children may have health, educational, and social needs that affect their ability to have a better quality of life and realize their potential.

Providing families information so they can help themselves

Working with governments to get the services and supports children need

Referring families to professionals for supports and services

When you call, you’ll be connected to an Access Worker who will listen to your concerns and work with you to determine the type of supports and services you need. From there you might be referred to another person called a Regional Service Coordinator who will work with you and other professionals to get the services and supports you need.

We Are Only A Phone Call Away

1-844-558-8748
Making A Difference In Children’s Lives

Our purpose is clear; our passion is strong: enhancing the quality of lives of First Nations children.
I made this work with my nephew who I am helping raise along with my sister who is his mother.

I want this work to represent children and the importance of our future which lay in the responsibilities of raising the next generation which is what the handprints symbolize in the color of the medicine wheel. I also painted the rocks orange in honour of the children of Residential Schools whose bodies were found in mass graves across Canada. This tragedy marks yet another devastating truth about the impacts of colonialism, and how it affects our children through intergenerational trauma.

I aim to “break the cycle” by continuing to use my art as a medium to help inspire the youth to continue going to school, and participating in their community. My nephew encourages me to provide a better example for him, simply by being involved in his life, and being the aunty that I have never received in my life. I aim to do better for him.

This work is just an example of how much I love doing what I love which is to be an Indigenous artist, while striving to achieve my education to be a better role model for the youth in my community.
Management

Team Reports
The significant impact of COVID-19 affected First Nations families needing to find ways to access supports and services for their children and presented new barriers with our ability to engage families living in remote communities. Building and maintaining respectful relationships, trust and connection are vital to our service delivery. Our FNHC Team discussed the challenges throughout Alberta and what we could do to let the families know we were still here and committed to supporting their children.

Over the past year and half, we’ve used innovative ways to engage with families to try and address the lack of service providers and organization closures. Our involvement with various initiatives has been successful in delivering our message of ongoing support to our families, resulting in a steady increase in referrals from service providers in the education, social and health sectors.

The pandemic deeply impacted our ability to gather, mourn and grieve. Many within our FNHC family experienced personal and community losses. It is important to us as an organization to ensure a level of flexibility, support, and empathy to both our colleagues and the families that we are here to serve.
Over the past year we received considerable feedback from families and want you to know that we heard you.

In April FNHC will welcome an Education and Elders Coordinator to provide support and guidance to grandparents in need of assistance in seeking services for their grandchildren. This position will help to increase awareness and provide guidance to educators seeking services to assist students in their school.

FNHC will also be adding Registration and Youth in Transition Coordinators. The Registration Coordinators will support families in navigating the process of treaty registration for their children. The Youth in Transition Coordinators will be working with families needing to get connected to services for young adults. These positions will offer further assistance to First Nations families to access the services needed by their children.

Our dedicated team continues to provide compassionate and quality service to families in need of assistance because every child matters.

Submitted by:

Lorinda Patterson
Enhanced Service Coordination Manager
Human resources are the backbone of any organization. The First Nations Health Consortium is no exception. Human Resources (HR) play an important role by helping First Nations Health Consortium employees successfully navigate through a variety of changes and challenges. Our first and central priority is supporting and responding to the needs of First Nations children and their families. To do our jobs well, we focus on building a competent and healthy workforce.

Glenda Galger
Manager, Human Resources

A Year Of Change

The Impact of COVID

This past year, like others, we witnessed a lot of change throughout our organization. The most significant changes that impacted our organization resulted from the COVID-19 pandemic. We had to come up with quick and focused action, ensuring all employees were safe both in and out of the workplace. We tried to stay flexible for employees while working from home. It made things increasingly difficult for many of us as we tried to figure out what the right thing was for the organization and all staff. Mid-year became a bit erratic when working from home was declared mandatory, then reverting to re-opening and then shutting down again. It hasn’t been easy, yet each one of us must be acknowledged for our patience, cooperation, and perseverance. Most importantly, we made sure that the needs of our First Nations children and their families came first.
Staff Changes

We also experienced changes in staffing over the past year that brought about some uncertainty and turbulence. Since the beginning of the fiscal year, we had some employee turnover, internal structural changes and onboarded 10 new employees. When things start to ease on the pandemic front, we will have more time to adjust and overcome day-to-day disruptions. But we are also reminded that change is constant!

New Staff, New Perspectives

With all the new faces joining the FNHC team, it’s exciting to add their new perspectives. This is an opportunity to learn something new, consider promising changes and intervene when the change may not so good. Below is a look at the onboarding and growth of FNHC in the past 6 months, which is impressive for a company that only had 10 employees in its first year! We’re pleased with our growth as that means more staff to increase the accessibility of our services to First Nations children and their families.
An Organizational Snapshot

By March 31, 2021, FNHC had 34 active employees

1 HR Administrator
2 Receptionist/Administrative Assistants
3 Team Leads
1 Executive Assistant
22 SARF Employees
4 Access Workers
19 Regional service Coordinators
Indigenous/Non-Indigenous Ratio

A breakdown of the 34 current employees (includes all hires & staffing changes up to March 31, 2021):

- Indigenous: 33%
- Non-Indigenous: 67%

Looking Ahead

Human Resources continues to coordinate First Nations Health Consortium’s benefit plan, oversee fleet vehicle administration, satellite office agreements, as well as post, recruit & hire for new positions, and oversee organizational effectiveness and employee relations. It’s a busy and fulfilling job!

HR is also pleased to see some staff utilizing the Canada-Alberta Job Grant (CAJG). The CAJG is a training program where the employer applies on behalf of their employees for eligible training costs. The employer is required to contribute 1/3 of total training costs and the Government will contribute 2/3 of the cost. This program helps to keep our employees up to date in their areas of expertise and other job responsibilities.
Goals For Human Resources

Three goals are important to Human Resources:

1. Focusing on employees by determining if employees working at FNHC feel they matter. How do we make a difference in the lives of our employees, and have employees really love their jobs and the organization they work for?

2. Continuing to improve HR efficiencies and processes.


Conclusion

This report provides important insights into the development and growth of FNHC Human Resources over the past fiscal year. With the new staff joining our team, we are entering an exciting time. We will all continue to do the important work we do for the coming year. We make things happen… because they matter for the First Nations children we serve.

Submitted by:
Glenda Galger
Manager, Human Resources
Roxy Boucher - Artist Statement

The feather symbolizes the honour and the connection between our people and our families and the supports First Nation Health Consortium helps provide. The different colours the feather is made up of, symbolizes all the different ways families and children are supported. Each heart feeds the colours of the feather. Different kinds of love is always needed to help things grow.

The feather casts a shadow of a family. Symbolizes that families is what is being helped.

Love, support, diversity all coming together. My way of saying Making it Happen and Making it Matter.
Family And Staff Stories
Children are our passion. Our team of Access Workers and Regional Service Coordinators along with the service providers, work hard to ensure that children’s needs are understood and met as quickly as possible. Sometimes the process happens quickly when a child’s needs are relatively straightforward. Sometimes the process takes longer when a child’s needs are more complex. At the end of the day, every child matters and no child is forgotten.
The following are some heartwarming stories as told by families whose children’s needs were successfully met. Joy and satisfaction in seeing a child thrive and grow are some of the rewarding aspects of parenting. For some children and their families, it means happiness and hope for a promising future, believing that their children can now do something that they may have felt impossible before.
Family Story 1: as told by Tammy Island, Regional Service Coordinator


NOT ONLY WAS THEIR CHILD SICK BUT THEY WERE ALSO GOING THROUGH OTHER STRESSES RELATED TO COVID AND BEING LAID OFF WORK. THEIR CHILD WAS LOSING BLOOD AND IT WAS DIFFICULT TRYING TO DETERMINE THE CAUSE.

FINALLY, IT WAS DETERMINED THAT THE CHILD REQUIRED A BONE MARROW TRANSPLANT. FORTUNATELY, THE FATHER WAS A MATCH TO BE A BONE MARROW DONOR. NOT ONLY DID THE CHILD HAVE NEEDS BUT NOW THE FATHER AS A DONOR ALSO HAD NEEDS.

THE SITUATION WAS FURTHER COMPOUNDED AS THE FAMILY LIVED IN A NORTHERN ISOLATED COMMUNITY, SEVEN TO NINE HOURS AWAY FROM WHERE THE TREATMENT WOULD TAKE PLACE IN CALGARY. THE TREATMENT AND RECOVERY WERE GOING TO OCCUR OVER EIGHT TO NINE MONTHS.

MANY QUESTIONS HAD TO BE ANSWERED: WOULD THE FAMILY OF SEVEN (THE PARENTS AND FIVE CHILDREN, INCLUDING A BABY), WANT TO AND BE ABLE TO STAY TOGETHER? WHAT KINDS OF SERVICES AND SUPPORTS WOULD THEY NEED?

THE FAMILY DECIDED THAT THEY WANTED TO STAY TOGETHER. I WORKED CLOSELY WITH A TEAM OF PEOPLE TO HELP THEM GET THE SERVICES AND SUPPORTS THEY WOULD NEED. NIHB ASSISTED WITH TRANSPORTATION, MEALS, TRAVEL, AND ACCOMMODATION EXPENSES FOR BOTH THE CHILD AND FATHER. WITH A SUCCESSFUL APPLICATION THROUGH JORDAN’S PRINCIPLE, WE WERE ABLE TO GET THE OTHER SERVICES AND SUPPORTS THE WHOLE FAMILY NEEDED SO THEY COULD BE TOGETHER.
Following the transplant, which was successful, the family was able to transition back to Edmonton with follow-up happening at the Stollery. I was very appreciative of the social worker at the Stollery.

We were able to see this family transition home to the north and get back into their routine. Seeing the child grow and being able to return home was wonderful. I just closed the file this month.

I really appreciated the relationships, how everybody came together to support the family. The social worker, service providers and their First Nations community all helped to meet the family’s needs. Personally, as a service coordinator, I experienced a lot of growth with this family and situation. Many of the situations I deal with, only involve a single need. Once that need is approved, the file is closed, and you move onto the next situation. But this was a long-term situation that showed what can be accomplished when we all work together to help a family with complex needs over an extended period of time.

You need to build a trusting relationship. In the end the children and the families are placing their trust in us, FNHC, to be a safe place for them. I enjoy this work; it’s important to me. Each family situation is unique and with patience and understanding, we can help meet their needs.

This included exploring all the options for housing in Calgary and finding an option that allowed not only the immediate family to be together, but also one of the parent’s mothers to assist the family, along with other services needed by the family. Throughout the process, we made more successful applications to Jordan’s Principle to ensure that the family’s needs would continue to be met while the child was recovering.
I had a kokum from the Alexis Reserve who is the guardian of three of her grandchildren. COVID had been really bad on the reserve, so the grandchildren hadn't been going to and from school. They'd been at home learning.

She struggled a lot with the technology and figuring things out and said her grandkids were working off her cell phone. She ended up applying through Jordan’s Principle for three laptops and getting them for her grandkids. I phoned her and said, “You were approved so you can come and pick them up or they’ll mail them to you.”

She phoned me to say, “I wanted to call you and let you know that they got their laptops. They’re so happy.” She was so excited to phone me back and say thank you so much for helping with this. They’re using them. They each got their own.
She was so sweet about it and for her to phone me back and tell me how happy and how helpful it was. We do so many of these requests, but she just appreciated it. It just brought the kids happiness to be connected back with their school and not having to share anything.

Lisa was the access worker. The grandmother said, “You and Lisa took the time to listen to my concerns and I felt like you guys were really willing to put in the effort to help my grandkids.” She said, “I’ve gotten a lot of no’s...they’ll send you here and there to help you and you just hit a lot of dead ends.” She appreciated the whole thing coming through.

People are always like ‘oh, if it’s approved thank you.’ But she really wanted to make sure that I knew I helped her and they were so happy.

That was great for me.

It made me feel really good about my job and what I’m doing.
Family Story 3: as submitted by Michele Edwards, Regional Service Coordinator

One of the common stories I’d like to highlight are children, on and off reserve, who don’t have Treaty status. Often, for families to obtain Treaty status is a barrier in itself, especially since COVID has started.

If they don’t have Treaty status, the children don’t have access to NIHB coverage, which means they don’t have coverage for their dental care or prescriptions.

It has been very difficult for families to access their Band membership because the offices have been closed due to Covid, and Treaty registration offices have been quite far behind as well.

I’ve submitted several requests for dental care, especially for dental surgery for little ones such as two and three year olds, who have abscessed teeth and infected gums.

There are a number of families we support whose children don’t have Treaty status because of various barriers such as lack of transportation, lack of funding, no birth certificates, and the extensive required documentation.
The other aspect of this, is prevention - families can apply to Jordan’s Principle to have the initial exams covered and the cleanings when they’re young, so that it doesn’t get to the point where the teeth are rotting and the children are in pain.

What I’ve been able to do for a lot of these families is have their prescriptions covered, as well as the emergency dental surgery covered, so that these little babies aren’t suffering anymore.

This is something I don’t think a lot of people are aware that Jordan’s Principle can support them with.

Sometimes these requests are very time sensitive, because the children have been suffering for quite a while.

The other aspect of this, is prevention - families can apply to Jordan’s Principle to have the initial exams covered and the cleanings when they’re young, so that it doesn’t get to the point where the teeth are rotting and the children are in pain.
Family Story 4: as submitted by Michele Edwards, Regional Service Coordinator

I was able to support a 10 year old child who was in a permanent foster placement. He has complex needs due to severe ADHD to the point where it’s not treatable through medication.

After sitting and listening to the various people involved, I realized that the gap was that no one was able to pay for the speech language and OT therapy that this little guy desperately needed.

There were various service providers involved: FSCD (Family Supports for Children with Disabilities), Supports for Permanency Child & Family Services, Hull Services, and Alberta Children’s Hospital Treatment Center for ADHD.

This little guy was really struggling and was falling through the cracks at school. He was acting out at home with his behaviors and his violence and frustration levels were escalating. The support team held a case conference, myself included, to figure out what were the needs and what were the gaps in services.
I suggested we apply to Jordan's Principle for him to receive speech language and occupational therapy until FSCD was able to be approved for those specialized allied health services. It was a stop gap to address the need so that he could get that support and hopefully relieve his frustration that he was having with his communication at school and at home. That was approved. FSCD Specialized Services hadn't been approved yet and Child and Family Services Supports for Permanency had a pool of money, but that didn't cover everything that was needed. He had extensive needs beyond the capacity of any one organization. We were able to provide six months of bridge funding until FSCD will be able to kick in and continue supporting him with those needs. That's one example of when a situation can be very complex with a lot of people at the table, and nobody knows what to do. I was very pleased I was able to say 'OK, let's solve this problem and move forward.'
Family Story 5: as submitted by Michele Edwards, Regional Service Coordinator

Through my work as a Regional Service Coordinator, I was able to help a 12-year-old boy who has autism, possible FASD and has experienced significant trauma. He was raised by his grandparents, but unfortunately both his grandparents passed away within a year.

His aunt took over guardianship, despite her own personal struggles and the loss of one of her legs due to cancer. His aunt was having difficulties getting him to school due to his anxiety about COVID, as well as her mobility issues and lack of transportation.

I remember the first time I talked to her on the phone. My heart just went out to her. After they’ve been through so much with the loss of his grandparents.

You could tell she [aunt] loved him so much, but she just didn’t know where to turn.
I was able to apply for a Psych-Ed assessment, transportation costs to get him to and from school, as well as some help with cleaning and sanitizing the home, as his aunt was having great difficulty keeping up with the home maintenance, cleaning and his behavioral issues that added to these issues.

For both cases, I’ve been working with them since September, so it’s been a long process, especially when we’re working with various service providers and support systems.

Part of the challenge is identifying where the gaps are and how we can support the family.

Tutoring is typically done in the home, but due to Covid, most tutoring companies are only offering online supports. Online learning is challenging for many of the children we work with, as a lot of them also have attention challenges such as ADHD, autism, and learning disabilities. If they can build a relationship with an adult sitting with them, tutoring is much more effective in many instances.
Family Story 6: as told by Veronica Marlowe, Regional Service Coordinator

In my role as a Regional Service Coordinator, it makes me feel really good knowing my work is having a positive impact on the families, especially the children of the families we work with.

I wanted to share some positive feedback from a parent I was previously working with. In one of our conversations, over the phone, she mentioned, "I really want to commend the First Nations Health Consortium and the employees on the great work that you’re doing because each person that I’ve spoken with has been so friendly and so helpful and it really makes things easier for us as parents to communicate our kid’s needs.”

This comment alone is a reflection of the work we do at the First Nations Health Consortium.
Our team works together in providing supports, resources and advocating on behalf of the children and families at FNHC. I believe teamwork is very important; I am happy to work with such a supportive and hardworking team; it shows in the work we do, especially when parents have positive feedback.

As regional service coordinators, our job is to listen to the families we work with, to show compassion and understand the needs of the families because parents are sometimes apprehensive to openly share their personal stories.

We’re just another person on the other line, so to them, we’re a stranger but when we are actively working to meet the needs of the children, this means the world to these parents. It makes us feel good knowing we are making a difference in the lives of the children in Alberta.
Katari is a 16 year old girl from Siksika Nation that was able to succeed in life through the support and love of her grandparents, Mitchell and Delores. Katari was able to find resiliency in the face of her biggest obstacle...her smile.

In a conversation with her grandmother, Delores, Katari was an outgoing child when she was young. She excelled in powwow dancing and carried the honour of representing her school as princess.

As she grew into her teens, she started to isolate into shyness and wouldn’t smile. She would spend her time alone doing crafts and drawing, activities that could be done without social interaction. Her grandmother reported she would cover her mouth a lot and avoided group family gatherings due to her teeth. The grandmother worried for Katari’s self-esteem and wellness.

They provided numerous pieces of documentation and even went back to NIHB for a second request for coverage based upon pain. Unfortunately, the submission to NIHB was denied again. The family was supported through the submission process and an application was sent to the focal point, however, it was denied at the national office of Jordan’s Principle.

The file was received for Katari in February 2020 and I proceeded to reach out and support the family for Katari’s request to Jordan’s Principle for orthodontic assistance. The dental office was onboard to support the application.
Fast forward to the recent months. Katari has had many honours. She was chosen to represent Alberta as the Indigenous participant dancing at the National Liberal Convention in May 2021.

Katari was a headline in the news and when she was on camera… she smiled with new braces on her teeth. Who knows what successes in life lie ahead for Katari with her new confidence? I applaud the support network that came together for one smile.

Through patience and perseverance, the family obtained more documentation to support an appeal and in February 2021, Katari won! The appeal was overturned and she was granted an approval to proceed with braces. She had them put on soon after.

To add to her success, a painting of Katari dancing was chosen for the Calgary Stampede Poster for 2021 and most recently Katari was chosen to be the parade marshal in the famous Calgary Stampede Parade.

Katari was a headline in the news and when she was on camera… she smiled with new braces on her teeth. Who knows what successes in life lie ahead for Katari with her new confidence? I applaud the support network that came together for one smile.

I hope they all know how they have impacted this child’s life.
The family had approached FNHC with about five or six needs for his children.

He said housing issues was the highest priority for him.

With this house, there was black mold, really, really bad.

His boys were really getting sick all the time. Three of his boys had severe asthma and were always going to the hospital all the time to get treatment because of the black mold. He was very motivated.

One of the things they required was a specialist in environmental, air quality. He was able to track somebody down to do an air quality test in his home and do a real structured report. As the gentleman was able to gather up all the findings in his house his readings were really high. He was even saying it’s amazing how this family has to live in this type of environment, it’s a shame they had to live in this type of home with no help whatsoever.

It was escalated to National because the house would need to be totally renovated, for everything to be up to par again. I got three quotes for three different construction companies but the cheapest one we found was $144,000, just under $145,000, to do all the work that was required.

In the meantime, there were a few other things the dad had requested for his boys. The boys had to do home schooling, that’s when home schooling first started [per the pandemic]. They had no computers to work on.

We submitted an application to Jordan’s Principle for the boys for the laptops and we were approved for that. Then, I got an email from the focal points saying that National had made a decision and they denied the request for his house renovation.
When I got back to him, he was in total disbelief that all the hard work he had done and myself and focal points, had not been successful. I told him, you have a chance to appeal this which goes to an independent board.

The one focal point I was working with, she was very helpful as well. She said I can talk to the father and let him know what other things would help him to make his application a little bit stronger to help him in the appeal process.

We were successful in appealing the decision for a little under $145,000 for that family to get their house renovated.

He said, “If it wasn’t for Jordan’s Principle, chances are my boys would have never survived.” I’ve heard that a few times from different families I worked with in the last two and half years.

Hearing those words of encouragement sometimes is hard to describe. The type of support we get, I’ve never had that before in any kind of work I’ve ever done. With that kind of support, it only makes you try to work harder, to be more successful with each file you work with and each file we have is never the same. Each one is unique.
As an Access Worker we are the first contact that families have with the First Nations Health Consortium. Sometimes families are at the end of their rope and feel as though there is no where to turn, they feel abandoned and unheard.

One particular intake had a huge affect on me. The mother was looking for support with her son. The son had behaviours that could be harmful to his siblings and the mother did not want to have to give her son up to Child Services in order for him to receive the help he needs. While doing the intake mom broke down several times and was clearly exhausted and defeated. My heart was breaking for this family.

I completed the intake and went to speak to my college RSC Michele Edwards in regard to the sensitivity of the intake. Michele was able to reassure me that as always she would do her very best to help support the family and the child.
Michele has since then kept me updated on the progress that has been made in regard to the file and which supports the family and child have received.

Being able to depend on my colleagues after a difficult intake as well as know that everything will be done for the family and child is just one of the many reasons, I love working at the First Nations Health Consortium.
My painting is a vision of what is to be my view of a traditional home land.

The beauty of knowing where our ancestors sit.

Gives me courage to keep going in a good way for my children. Our children. And future generations. Our world is sacred.
Family Testimonies
Family Testimony 1: as submitted by Leonda Solway, Regional Service Coordinator

To Whom It May Concern,

I want to thank Leonda Solway for the tireless work she has done in assisting me in obtaining funding from Jordan’s Principle.

My husband and I are white and we have 2 adopted indigenous children who, after 4 years in our family, appear to have some needs that require us to build our village even broader, in order to ensure they’re taken care of in a manner they deserve.

Leonda has gone over and above for us, and has thought out of the box in order to get us the help we need. Nothing has seemed to be too much for her to look into.

She has been intentional at getting to know us as a family, and has offered to help us in the future, not just with the financial needs that may arise, but also in offering to send us resources on how to help our kids (and us!) access and learn their culture better.

Every conversation I have had with Leonda has set my mind at ease, and has given me the confidence to be able to move forward, knowing it’s ok to ask for help where we need it. I will happily tell anyone I know — whether they qualify to access help from Jordan’s Principle or not — what an amazing experience this has been for us.

Sincerely,
Sheralyn Achesen
Family Testimony 2: as submitted by Paris Gauthier, Regional Service Coordinator

We were able to get info both through our elementary school outreach a couple years back and on a friend’s Facebook page, but our kids did not have treaty status (yet) and we were also off reserve so we did not meet the parameters to utilize this program, (both our boys do now have their Status Cards).

Once they passed the new required criteria we were able to get started in on the FNHC program. They were able to help us with Sawyer in providing a change table and swing for us to use at his new middle school.

The process once aided was very simple and everyone we had to deal with were both very friendly and easy to talk too. This program is amazing and helpful in our daily life routines for Sawyer.

I think it will be also more beneficial to us as both Sawyer and Oliver start into their coming years. Both Erin and I shared the same feeling of your group’s assistance! We both appreciated the direction and insight provided to us.

Thank you again for your help! Junior (Rodney) Flett
Family Testimony 3: as submitted by Paris Gauthier, Regional Service Coordinator

My son was diagnosed with ADHD when he was 6 years old. With being diagnosed he was prescribed medication to help with his ability to focus. We worked with his teacher throughout the summer for tutor sessions to have him be ready for grade 2.

He was keeping up by the minimum and then Covid happened forcing him to be home schooled by me. And that was not fun. I questioned the school if we should keep my son back a grade to let him catch up however, they insisted that he proceed to grade 3 to keep up with his peers.

Once my son was in mid-session of grade 3, he was falling behind rapidly. This caused an alert to the school administrator Mr. Varughese to set up a meeting with myself and my son’s father to further see what our options were.

Mr. Varughese had mentioned that he could apply for a one-time school assessment with the Northern Lights Psychologist. My son was able to meet with the psychologist and was suggested to increase his medication.

After increasing his medication for one month, we all found that the dosage was not making a difference. I suggested to the school to inquire about Jordan’s Principle for help for a teachers aide.
Mr. Varughese had made the contact and within a month we got answers and approval. The school put the ad out to hire a qualified teachers aide for my son and another indigenous student.

Not only did the school find a qualified person, but they also found a certified teacher who has clicked with my son to increase his learning. What I mean by "clicking" is my son is very shy and closed off. He does not like to show people that he has a weakness of reading and writing.

Mrs. Surkan broke through that shell of his and he wants to work hard on his own with no assistance from me. He has made so many improvements with his one-on-one help from Mrs. Surkan.

I am so grateful for the speedy response from our FNHC worker Paris Gauthier has provided. Also, the ability to rely on the Jordan’s Principle service to aid my son on his academics.

I too work with indigenous families and will be pointing them in the direction of the Jordan’s Principle act if their case fits.

To be able to have assistance so fast is remarkable and appreciated.
Family Testimony 4: as submitted by Michele Edwards, Regional Service Coordinator

Two years ago our lives were turned upside down when our son was diagnosed with muscular dystrophy. Aside from the mental burden this created, we were also faced with a great financial burden.

We both work full time jobs and have what we thought were good benefits packages. But when it comes to accessibility and disability we soon discovered that our benefits did not cover much when it came to our son’s needs.

Jordan’s principle made our son’s (and our lives) life a lot easier by providing us with the necessary equipment needed for everyday life. The wheelchairs and an accessible van have made it possible to get our son to all his classes, appointments and extracurricular activities.

It has allowed us to continue living our lives as normal as possible.

Thank you for your help and support!
Family Testimony 5: as submitted by Leonda Solway, Regional Service Coordinator

To Whom It May Concern:

I called the FNHC on a referral from Foothills Fetal Alcohol Society in High River seeking some clarification and information regarding my adopted First Nations daughter and the possibility of some financial support for another psychological assessment.

I first spoke with Michelle Jones, who was very helpful and who then referred me onto Leonda Solway for more guidance. Leonda is a very personable individual who gave me hope as well as advice and education.

I did not know much of what she shared with me and she went above and beyond hunting down information and direction for me to support my daughter.

She encouraged me to advocate for my daughter and connected a lot of services together for me and not feel embarrassed to ask for help. No one so far on my journey has helped me as much as her in this way.

She helped guide me to collect the information I needed regarding finances and also called University of Victoria and opened a dialogue with indigenous services who were very helpful which also opened the door to connecting with the Centre for Learning Accommodations.

I don’t know that I would have been able to get all these connections had it not been for her and I am very grateful for her help.

Thank you,

Barbara Forster
Family Testimony 6: as submitted by Peggy Minde, Regional Service Coordinator

I would like to let you know just how much you have improved my little boy’s and girl’s life, from a grandmother now raising them both. Both children are FASD children so they will have a long road ahead of them, but with your help things are most certainly improving for them both. As I stated I am their grandmother/mom I became their guardian too quickly, so I was denied kinship support for these two First Nations special needs children.

When they received their very own ipads they both cried. First my son who is 8 and now my little girl who just turned 7.

She was so overwhelmed that the tears were just running down her face. She said “mom, are you sure this is just for me?” I smiled and said “yes, mom received support once again from the incredible place called First Nations Health Consortium and with their help, you were lucky enough to receive your very own iPad, just like your brother.”

She hugged me more tightly than ever before and told me that she was so happy she didn’t have to try to use her brothers as he received one before her and she would not miss any more school because this iPad will work just for her and she will pick the right class every time now.
Today I also told them both that the special teacher that is helping them was also from the First Nations Health Consortium. My son that is severely delayed was not so happy to hear this. His response was more like a regular child’s response of ‘oh great, they are the ones that are making me do extra work.’ I laughed. My little girl said ‘they must think we are very special to help us with our school learning too.’

With our most sincere gratitude, thank you so much for everything you have done and will be doing to help these children succeed in life’s journey.

She will do her best work on her new iPad and of course then it was mom who set up all my school classes and put my name on it right away so that everyone will know this is my school iPad. So an hour later I finally had everything added and she took her iPad and showed her brother and then went upstairs to show all her stuffed animals.

It was the kind of moment that makes a person’s heart hurt because it was so greatly appreciated from an incredible First Nations girl with special needs.

So, this is what you have done for all these little children right now. You have given them the extra support that they needed most to become more successful in their education. As we all know, these years are the building blocks for tomorrow.

With our most sincere gratitude, thank you so much for everything you have done and will be doing to help these children succeed in life’s journey.
Illustration by Monica Thom

Monica Thom - Artist
Personal Stories As An Employee Working For FNHC
Personal story as an Employee 1: as submitted by Marcella Schnurr, Northwest Team Lead

Although I have been with the First Nations Health Consortium only a short time, I feel the strength and love for the families that we advocate, support and assist.

Since commencing my duties, I have been championed by my supervisor, manager and every staff member within the Consortium, we are a family supporting children and their families.

Every meeting, it is reinforced that we need to help children and families bridge that gap in services, we need to “Make it Happen” and we need to “Make it Matter”.

I have been inspired by the FNHC organization and the Child-First Initiative, and seeing children and families receive services as a result of the caring persistence of the F.N.H.C. staff.

It is an honour to work with and for the families, and I am very proud to be a part of the Alberta First Nations Health Consortium Team.
Personal story as an Employee 2: as submitted by Peggy Minde, Regional Service Coordinator

Teamwork is vital in an organization as large as FNHC, as we serve all First Nation and Inuit children across Alberta. One of the ways we support each other is through sharing resources, this enables us to submit applications in a timely manner.

For me, this is more than a job, it has meaning and purpose.

Working for First Nations Health Consortium as a Regional Service Coordinator is meaningful and rewarding.

Being able to help our First Nations children and families is an honour. As a First Nations Regional Service Coordinator I am able to connect with families, hear their stories, and in turn assist them in completing their application to submit to Jordan’s Principle for funding.

Knowing when a child’s application has been approved, is very rewarding and heartfelt.
Personal story as an Employee 3: as submitted by Lisa Badger, Access Worker

I do this job solely for the connection with families and betterment of our children.

As a mother myself of a child with challenges, I know first-hand the struggles families can be faced with.

Often times when I am listening to a family tell their journey, I inform them about my child. Soon as I tell them, their first response is always a deep breath followed by, "oh so you get it!".

Yes, I do get it!

I am forever grateful that I am a big part of our families and children’s healing journey.

The best is when the same families return for support and are so pleased that they get to work with me again because we have built that strong connection already.

I take the time to listen with my heart and not my ears.

Most of our families have been through enough with their challenges and just want to be heard. I have always given families the space to be truly heard and acknowledged.

I have a huge heart for our elders. I will often move mountains for our elders and help them in any way possible.

One best memory I have is when I had first started and called a family back. The guardian was almost in tears because I called back when I said I would and that has never happened for them.

Connection is what moves people. For me, connection is everything! This job should be about making that connection with our people and families.
As a Regional Service Coordinator, I appreciate my role of helping First Nations children gain access to various products and services through Jordan’s Principle.

I enjoy connecting with families on a daily basis and letting them know that I am there to help and support them no matter what. It’s very important to make sure that the families we serve feel welcome and validated.

Often times our families face adversity, and experience systemic racism within public sectors. This is why it matters for me to advocate on behalf of the families I serve. As a Blackfoot woman, one of our main cultural values is to have empathy for one another. In Blackfoot we say KIMMAPIIYIPITSSINI.

This is something that I hold very close to me, and practice on a daily basis. No matter what situation an individual or family is in, there is always a story to be told, these stories encompass hardship, and resiliency and shape the way we do our jobs.

I am thankful to serve my community, and I look forward to continuing the work for a better future for our children.
Personal story as an Employee 5: as submitted by Erin Zasada, Regional Service Coordinator

I started with FNHC in November when COVID was happening. When I started, my team put in a lot of effort helping me to learn, especially when it was okay and we could be in the office a few days. Then we went back online, I really felt like they made sure that I knew what I was doing, that I was connected to someone; it was never an inconvenience.

I could call for any question or anything like that. Dyan was my team lead at the time, and she really made me feel like you’re important and your questions are important. All of your files, whatever you need, I’m here and always made the effort to phone me if we were at home for the week and making sure I was connected.

I feel honoured that I’m able to help First Nations children right now, especially with all the residential school history coming to light. When we talk, I think what can I be doing to help, to listen and learn so it really gives me some peace.

She puts so much effort in and I feel like if I needed help, I would love for her to be my RSC because I can just feel her connect with each person and file. She shared different parts of her indigenous culture and I felt really blessed that I was able to connect with someone like that and be able to get into her culture a little more.

I worked with Tammy for a little bit and she is such a beautiful person inside and outside even her smile. She’s so connected to the work. I would love to be her age and still be enthusiastic and want to do this.

We zoomed with our team twice a week and it really helped to build this connection. I’m not indigenous, I studied in university though, so I feel really blessed to have the opportunity to work with the people on my team. They have these incredible stories, their experiences through life, getting to listen to them.
I’ve really reflected on what it’s been like moving to this company. Even at Christmas they gave us a special little necklace. I’ve never been anywhere where they literally wanted to give each employee something.

For me to be able to help some Indigenous kids and being connected to all of these Indigenous people that I work with and their letting me into their culture and into their stories, the way they share stories and have such a connection to the earth really makes me feel grateful.

I’m actually helping First Nations kids now, to help them work through some of their generational trauma, being able to help provide them with counseling or extra medical equipment that they should be able to have access to.

I just feel like everybody matters and that’s our motto, every child matters. I love that we start with our own people.

I have really liked my experience so far.
Service Provider Stories
And Testimonies
The First Nations Health Consortium has been and continues to be an integral part of the Shawahnekiizhek Academy. They have supported the Academy in providing financial assistance to our students.

Financial assistance in funding for a counsellor for our students, buying Chrome books and providing funds for Teachers Assistants, the goal is clearly evident; they are clearly there for the children.
We are very proud to say that we are encouraged to have an organization that not only helps our school but helps our children.

Submitted by:
Pamela Brertton, Finance Director
Shawahnekizhek Academy
Service Provider Relationship Story 2: as submitted by Jerica Nykolushyn, Regional Service Coordinator

Part of my job is to stay connected and build relationships with providers of goods and services.

With this relationship we have monthly meetings to catch up on either complicated cases or if we just need to discuss possible scenarios for assistance.

An excellent example is with the Awasisak Team at the Stollery Children Hospital. They are located within the hospital to help serve Indigenous families with children admitted from out of town.

During this time, I would regularly hear stories of families coming to Edmonton with their children with special needs that have had to travel at great distance for the proper and specialized care they need. I would hear about stories and patterns that the Awasisak care team would encounter on a daily basis.

With this relationship we have monthly meetings to catch up on either complicated cases or if we just need to discuss possible scenarios for assistance.
I was always aware that many of these communities were somewhat isolated and struggled to gain the resources they deserve.

Our robust data collection system also reinforced these concerns. I gained an appreciation and better understanding of how many barriers these families and the communities faced in trying to get those services.

We knew something had to be done to help streamline supports for these families and their children.

ISC FNIHB Jordan’s Principle Authority invited FNHC to become more involved with these communities. FNHC set up a special projects team lead to offer further supports in identifying how many families and children need support in education, health, mental health, and proper housing.

FNHC assisted these families in advocating for the services and supports they needed as well as navigating the process to get them.

Much more can be done, and we will continue to work with them.

It makes me so proud to be a part of a team that is willing to spend the time to provide these families and communities with the proper supports they deserve. After so many years of being told “no” we are now on the path to “reconciliation.”
Special Initiatives
The target timeframe for paying invoices improved, with 97.5% of invoices being paid within 15 business days. Most payments, 65%, are made within 1-5 business days. The following chart shows the SARF target range for invoice payments in 2020-2021.

Payment of Invoices: 97.5% paid within 15 business days, 65% within 1-5 business days.

The target timeframe for paying invoices improved, with 97.5% of invoices being paid within 15 business days. Most payments, 65%, are made within 1-5 business days. The following chart shows the SARF target range for invoice payments in 2020-2021.

SARF Funds Spent in 2020-2021: Over $7 million.

Even though COVID-19 was at its peak in 2020/21, monthly expenditures did not drop below $300K. The final amount spent for the 2020/2021 fiscal year was $7,043,957.

Impact of COVID.

Like other programs, COVID-19 had an impact on the project. It increased the volume of our work and affected how we did our work. Flexibility and adaptability were key staff assets. Along with an increase in the workload, was an increase in staffing so we could stay committed to our goal of timely payments.

Four staff have responsibilities in the pilot project:

- Kathy Brazel, Data Entry Admin Assistant
- Chi Thai, Data Entry Admin Assistant
- Leanne Bourque, SARF Administration
- Julia Knott, SARF and Data Manager
2020/21 was a busy year, and we are expecting to be even busier in the upcoming year. It has been an honour and privilege for the team to be working on this project.

Submitted by:

Julia Knott
SARF and Data Manager
Contributing To The National Knowledge Base on Jordan’s Principle

In the fall of 2020, Indigenous Services Canada approached the First Nations Health Consortium to conduct a project to gather data on the implementation of Jordan’s Principle across Canada. The request reinforced the reputation of FNHC, its experience and capacity to conduct a nation-wide project.

Project Intent.

The overall intent of the project was to gain a clearer picture of the data available on the number of First Nations children being served and the number of services and products being provided, related to funds received under Jordan’s Principle. The information was intended to better understand what’s currently being done, what’s working with the existing rules and processes, what’s not working as well as it could along with ideas and recommendations for dealing with the challenges.

The project was guided by four purposes:

- Document the current state of Jordan’s Principle in Canada: how service coordination is defined by service coordinators and service coordination organizations and the processes being used to provide services and products to First Nations children and their families.

- Identify the major data types being collected on the First Nations families and children receiving services, supports and products through Jordan’s Principle funding.

- Identify successes/achievements and gaps in Jordan’s Principle.

- Identify promising practices and those that need improvement to fully realize the benefits of Jordan’s Principle to First Nations children and their families.
Data Collection Approaches.

Several approaches were used to collect information across Canada:

1. focus groups with service coordinators working on the frontline in coordinating services and supports for First Nations families and their children;

2. extensive online survey;

3. interviews with senior management officials across Canada having responsibilities for the implementation of Jordan’s Principle as part of their portfolio.

The project was officially initiated in November 2020 with extensive data collection and analysis for the next several months. A detailed report was prepared on the information gathered and the recommendations heard from all those who participated. While an official response to the report was not available at the time of this publication, FNHC remains hopeful that the findings will reinforce the importance of Jordan’s Principle in meeting the needs of First Nations children and their families and that federal efforts will be undertaken to further strengthen Jordan’s Principle.

Project Management and Delivery.

The FNHC management team led by Barry Phillips, played a pivotal role in guiding the project in collaboration with ISC, led by the former Director, Jordan’s Principle, Julien Castonguay. The project management team under the leadership of Carol Blair and Associates worked closely with FNHC and ISC management and the FNHC regional service coordinators. The regional service coordinators supported the project by participating in the testing of various data collection and registration tools. They also contributed to the project findings by providing their input and sharing their experiences in supporting Alberta’s First Nations children and their families through Jordan’s Principle. My thanks and gratitude are extended to everyone for the various responsibilities they undertook in completing this project.

Submitted by:

Carol Blair
Project Manager
National Project on the Implementation of Jordan’s Principle across Canada
Communication And Connection Project

Strengthening the FNHC Role with Education and Elders.

Strengthening our role with Education and Elders will be a new initiative of the First Nations Health Consortium (FNHC), starting in April. I will have the privilege of carrying out that role as Service Coordinator, Education and Elders.

I have a degree in social work from the University of Calgary and I am a residential school survivor.

Education:

My work will involve contact with Superintendents and School Boards, on and off reserve, in the Treaty Seven area. I will promote the FNHC support services to our First Nations Children in the school settings and assist the schools with the referral and application process. These support services include psychological education assessments and Education Assistants. These services and supports are key to educating the school children and preparing them for a promising future.

Elders:

Raised as a Blackfoot woman, I speak the Blackfoot language which helps in my communication and sharing information with those Elders who also speak Blackfoot. The Blackfoot language is a calming language. My work will involve two groups of Elders:

1. Elders who take care of their grandchildren. We found that some of the Elders caring for their grandchildren, did not know where to go for support services. Some of the children may be high needs requiring an assessment. We will guide them to make contacts and give them resources. They require someone to advocate on their behalf to find supports for their grandchildren and to help them understand the application process for funding through Jordan’s Principle.

2. Traditional Elders who remain at home but are not taking care of their grandchildren. I will keep them informed about supports available through FNHC.
My work will include participation in community activities in the Treaty Seven area where I will let people know about FNHC and the services and supports available to meet children’s needs. I will also work jointly with the Regional Service Coordinators doing presentations.

“I see myself as an even keel across the board with our people, no matter if they’re young or old. I’m with them, right there. We have dual respect for each other. I value them, they value me. They respect me, I respect them. I’m advocating for them.”

Submitted by:
Beatrice Little Mustache
Service Coordinator, Education and Elders
Building On A Community’s Strengths

Providing support and building capacity is an important part of the work we do. Fox Lake is an isolated First Nations community in northern Alberta that needs to access goods and services by ferry in the late spring, summer and fall and by an ice-bridge in the winter.

Despite the strengths and assets in the community, the leadership and people were experiencing some significant challenges – they needed support and someone to work with them to address their concerns and find solutions that would work for the community.

As the FNHC Special Projects Lead I was given the opportunity to coordinate the work required to address some of the gaps in services and supports affecting their children, while working closely with the leadership and the people of Fox Lake.

Working together and with funding approved through Jordan’s Principle, the community completed several important projects that built upon their existing capacity to meet some important needs in the community. The families expressed their appreciation for these services which are expected to continue for the long term.

1. A camp was created to provide lodging and office space for out-of-town service providers. This lodging makes it possible for service providers to stay overnight and do evening work which fits the community’s lifestyle. This will also allow for the restart of the dental program that was unable to continue its service 18 months ago.

2. A team of allied health professionals in occupation therapy, physiotherapy, and speech language therapy was engaged and more children now receive needed services.

3. A paediatrician who used to work in the community is also being arranged for additional child health services.

4. The Head Start Program was given a boost with a building renovation to accommodate ramps to allow more children to attend. Training from the allied health services team was provided to staff to grow their knowledge and skill levels.
5. Three ‘ready to move’ houses were added to the community to replace homes that were overcrowded and unhealthy due to mold, and a new shop needed to store building supplies for other community projects was built for the community. With the aid of a local resident who speaks the language, a Project Management group was hired that included an architect, engineer, construction manager, and a team of local men who wanted to be part of their own community’s development while adding to their carpentry skills and experience. The construction team was able to build a shop, place the new homes, and provide necessary additional aids to assist the children with special needs.

We reached out to the Dolly Parton Imaginary Library which provides a free book every month to children who are 0-5 years. With an initial donation of 200 books by FNHC, this Library has been set up for the children in Fox Lake and will be overseen by a community member who works at the school. Some Indigenous books are now being added to the library.

"We all know how important literacy is. I like the fact it's called the Imagination Library; that's exactly what it does. It enhances the imagination for the Kids"

Submitted by:
Dyan Harke
Special Projects Lead
Illustration by Sandra Wiltzen

“Making it Happen...Making it Matter”

Illustration by Sandra Wiltzen
Our Partners

Our success is dependent on the ongoing support of and collaboration with the leadership of the 11 member First Nations
Tansi Nitohatemtik,

‘No child should be denied access to public services when they need them’. This was a problem we faced in Maskwacis consistently, before 2017 when Maskwacis Health Services (MHS) partnered with Kee Tas Kee Now Tribal Council, Siksika Nation, and Bigstone Health Commission and launched the First Nations Health Consortium (FNHC). The First Nations Health Consortium was established to work towards implementing Jordan’s Principle and Maskwacis Health Services’ focus was to ensure that our children get the care and support they required without getting caught in red tape.

Today in Maskwacis, our population of children from 0 to 18 years of age is over 7,500, and over 500 case files have advanced from Jordan’s Principle in areas of health/medical, social, and educational needs. It is of utmost importance that we continue to advocate for our Children in Maskwacis both on and off reserve, and to ensure that equitable services are been provided to them and that their rights and best interests are met at all levels. Thank you.

In Respect,

Chase Rabbit
MHS Chairman

‘Let us put our minds together and see what kind of life we can make for our Children’
Chief Sitting Bull

HEALTH IS A TREATY RIGHT SANCTIFIED BY THE TRUE SPIRIT & INTENT OF TREATY NO. 6 MEDICINE CHEST CLAUSE
Tansi,

While the covid-19 pandemic has presented unique challenges over the last year I am proud that the First Nations Health Consortium has continued to honour and advocate for the needs of children and families. I want to acknowledge the deep level of commitment and flexibility our staff have shown during these unprecedented times. I also want to acknowledge the pandemic has caused additional stress and barriers to services for our children. The First Nations Health Consortium was able to provide enhanced supports throughout the pandemic to better serve all Alberta First Nation communities.

Looking forward to the upcoming year, I am excited to see the continued growth of the organization. As the landscape of Jordan’s Principle continues to change, the First Nations Health Consortium remains flexible and adaptable in the provision of first-rate enhanced service coordination.

On behalf of Kee Tas Kee Now Tribal Council I want to thank all the families, staff, and our partner organizations for their dedication and hard work over the last year. Here’s to a successful 2021!

Sincerely,

Grand Chief Ivan Sawan
Kee Tas Kee Now Tribal Council
Tansi,

On behalf of our Council and community, I am honoured to be in partnership with First Nations Health Consortium and the Jordan’s Principle-Child First Initiative. Our traditional beliefs are “children are a gift from the Creator”, and for all children, we have a moral and legal obligation and responsibility to care for our children.

“Jordan’s Principle funding has allowed us to meet some significant needs of our children by providing supports and services that were not previously available or accessible in all Bigstone communities. With Jordan’s Principle funding, we can close the gap in service inequality.”

Two projects are making a difference for children and their families in our communities:

1. **Complex Needs project.** Through Jordan’s Principle funding, we can access additional services and supports to ensure children with complex needs receive the best quality of care. These services include Speech & Language Services, Occupational Therapy and Physiotherapy.

2. **Mobile Immunization project.** The purpose of the mobile bus is to increase access to immunizations for all Bigstone children/teens (from newborns to 17 years of age), living in Bigstone Cree Nation communities and for families with transportation issues.

Our sincere thanks are extended to the First Nations Health Consortium and Indigenous Services Canada for the funding and opportunity to work with you on the Jordan’s Principle - Child First Initiative.

In the spirit of caring,

**Chief Silas Yellowknee**

**Bigstone Cree Nation**
Oki,

On behalf of Siksika Health Services Siksika First Nation, we know that for too long the needs of First Nations children and their families have been neglected with too many children not receiving the health, education and social services and supports they need, and are entitled to. We thank-you for standing tall to support our First Nations children. Together we can make a difference.

The theme of this year’s annual report, Making things happen...Making things matter is not simply a string of words but a commitment to ensure that every First Nations child is given the opportunity for a fulfilling quality of life.

On behalf of the Siksika Health Services leadership, I extend my gratitude and heartfelt thanks for your work to ensure every child matters...no child is forgotten.

Sincerely,

Samuel Crowfoot

Samuel Crowfoot (Piitaisa’ksinam), B.A., J.D.
Siksika Nation Councillor
Chair – Siksika Health Services
Board of Directors
FNHC Board of Directors

Tyler White
Naa Taoyi Piita Wo Taan
(Holy Eagle Shield)
CEO Siksika Health Services
Chair, First Nations Health Consortium

Randy Littlechild
Executive Director
Maskwacis Health Services
Gloria Fraser
Health Director
Bigstone Health Commission

Sandra Lamouche
Health Director
Kee Tas Kee Now Tribal Council
We are a people who have been through pain, but we are still here, we are resilient. As we make every effort to lead our children to their glorious bright future they carry us along with them and together we share in its light. We honour our ancestors as we do so.
Five Years Forward...
Building A Strong Future
“We do not know where we are going if we do not know where we came from” (Author unknown)

Over this past covid-19 year, we gained a heightened appreciation for the importance of planning, especially strategic planning. The FNHC has always adhered to the idea that we must know and understand what we are striving to achieve, and how we will get there. The Leadership Forums are important in getting clear direction as to what is important to the elected Chiefs and Councillors representing our Consortium partners. Fortunately, we were able to hold a Leadership Forum in 2019, but, unfortunately with COVID, we had to cancel the 2020 Leadership Forum.

Adapting and adjusting to change critical to our continuing success.

Within a few short months, our normal became very ‘un-normal’. Masks, social distancing, Zoom, and elbow bumps changed the way we interacted with our friends, our customers, and our various stakeholders. But our dedication to our vision and our focus on the needs of the child were never lost, in part because we had a plan, not just any plan but a three-year strategic plan.
Of course, we needed to adhere to the mandated conditions of our Agreement, while changing the way we would achieve those objectives. Work from home, Zoom presentations and intakes replaced community presentations and telephones. Emails and messaging became our tools for personal communication with our clients and their families. Despite the new approaches we had to adopt, we still increased the number of children served and the coordination of goods and services to support the underserved children that either did not know how to gain access to service or who fell between the cracks in service delivery.

Changing policies, guidelines, and eligibility along with the lessons learned from our work and the data we collect also drove the need for change; not just in who we serve but how.

**Three-year strategic plan provided direction and stability.**

The Board of Directors and senior management used the direction they received from the Leadership and created a three-year strategic plan. Our plan enabled us to focus on current and emerging priorities that were important to carrying out our work. I am pleased that most of the priorities have been completed.

---

**Looking To The Future**

We still have more work to do. Now we need to examine:

- Why do gaps still exist?
- How do we become more proficient in what we do?
- What can be done differently to further enhance the service coordination between the child that needs the service and the service providers?

To accomplish these things, we need to set new goals and objectives that we believe will advance a child’s health status for the long term. FNHC has prepared thoughts for consideration by all who are impacted by our work and seeks your direction on priorities and implementation of those priorities.
## Highlights of Progress To Date

Highlights of our progress to date on our three-year strategic plan are given in the following table.

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Progress to March 31, 2021</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop a communication plan by gathering and using client stories and targeting relevant information and messages to a range of stakeholders</td>
<td><strong>FNHC believes that improvement in the process could and would be made if the Focal Points and Regional Service Coordinators (RSC) were co-located.</strong></td>
<td></td>
</tr>
<tr>
<td>Continue to make the case for full Focal Point co-location in FNHC offices</td>
<td>Although this has still not happened some improvement in the needed communications between the two bodies was implemented. A Regional Focal Point was assigned to FNHC files and dealt directly with the RSC to assure compliance. We believe that was the first step and would prove that the focused relationship between Client, RSC, and Focal Point would improve understanding and turnaround time between application and decisions. This was discontinued by ISC FNIHB due to issues they stated within their organization. We still believe that this should happen.</td>
<td></td>
</tr>
<tr>
<td>Continue to make the case for managing SARF including Community applications</td>
<td>The FNHC took over the responsibility for payment of approved invoices on June 1st 2019. This change aided in the relationship building with service providers. But with no knowledge of what services a community could provide, other communities’ effectiveness of community applications is diminished.</td>
<td></td>
</tr>
<tr>
<td>Strengthen the efficiency of the information management (IM) system, addressing the needs of the Regional Service Coordinators and Jordan’s Principle Access Workers</td>
<td>Meet the data change requirements to implement payment of invoices to service providers within time limitations imposed by the Tribunal Orders</td>
<td>Offer to pilot the Information Management System</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Changes had to be made due to changing guidelines, but others had to be made to make the IM system easier to use. Both objectives have been met and our robust system provides our workforce with quality tracking capability and tabulates results.</td>
<td>The changes were made, and we are proud of the fact that the payment process now ensures that service providers are paid well within the conditions. For example, 80% of service providers receive payment within 5 business days and 100% of providers who have invoiced and provide EFT authorizations are paid in accordance with the guidelines (15 days).</td>
<td>The FNHC offered to host the National Information system tracking data related to Jordan’s Principle and/or to work with the National design team to ensure that either interoperability or interconnectivity was possible. Our proposal was not approved so no national database is available for First Nations Leadership to access and assess results.</td>
</tr>
</tbody>
</table>
Appendix: Key 2020-21 Enhanced Service Coordination Statistics

FNHC maintains a robust data system. The following statistics provide key information about the children served and the number and types of services requested throughout 2020-21. Comparisons to 2019-2020 are also provided.

Percentage of Children Served On Reserve And Off Reserve, 2019/20 to 2020/21

- **2019/20**
  - On Reserve: 57%
  - Off Reserve: 43%

- **2020/21**
  - On Reserve: 53%
  - Off Reserve: 47%
In 2020/21, the top three highest requests for services were: 1) Education; 2) Health; 3) Dental.

The following table shows the requests for children living on reserve and those living off reserve. Apart from health and dental needs, the level of most requests was similar between on reserve and off reserve children.

**Needs Requested By Category 2020/2021**
More educational requests were made due to school closures and children doing their classes online at home. Educational requests involved three main types of requests: 1) Educational Assistants; 2) tutoring; 3) assistive learning technology. All other service categories were within the 20-point range of change, with Health and Dental being the next highest level of requests for both fiscal years. The following chart shows the needs requested for each fiscal year.
Pulp Studios Inc. creates animation, motion graphics, and illustrations that communicate ideas clearly and in an engaging way. We specialize in making challenging content easy to understand, accessible and exciting. Pulp Studios Inc. is humbled by the work FNHC does and is thankful to have collaborated on this annual report. We hope that we presented this report and the stories of the many families, staff, employees, and service providers in a good way.

Thank you.

Kyle Charles is a writer/illustrator living in Edmonton, Alberta. He has drawn for several series including Roche Limit: Clandestiny and Her Infernal Descent. He has also written and illustrated short stories for publishers like Heavy Metal and OnSpec Magazine. Kyle also illustrated the story “Tilted Ground” for the award-winning This Place: 150 Years Retold. He has provided artwork for both Marvel comics and DC comics, and has signed a first-look deal with animation legend Nelvana. When not busy at the drawing table, Kyle spends much of his time teaching comics to local students. He is a member of Whitefish Lake First Nation.
Jordan's Principle Enhanced Service Coordination:
Annual Report 2020-2021