

# COVID-19: First Nations Community Guide on Accessing Additional Supports

## 1. ROLE OF INDIGENOUS SERVICES CANADA

Indigenous Services Canada (ISC) is working closely with First Nation partners, the Public Health Agency of Canada, other departments such as Health Canada, Public Safety as well as provincial and territorial counterparts to protect the health and safety of First Nations and support First Nations communities in responding to the public health crisis resulting from the novel COVID-19.

ISC's regional health emergency management coordinators, communicable disease coordinators, regional medical officers and regional emergency management leads are working with First Nations communities in support of public health emergency preparedness and response activities.

If you want to know more about what ISC is doing to support planning, preparedness, and responses to COVID-19, you can access the following video or visit the website at the following links:

### Website:

English: <https://www.sac-isc.gc.ca/eng/1581964230816/1581964277298>

French: <https://www.sac-isc.gc.ca/fra/1581964230816/1581964277298>

### Video:

English: <https://www.youtube.com/watch?v=71fFRFQn2VA&feature=youtu.be>

French: <https://www.youtube.com/watch?v=CokQeYaUWH8&feature=youtu.be>



## **2. COVID-19 SPECIFIC FUNDING ANNOUNCED BY GOVERNMENT OF CANADA TO SUPPORT FIRST NATIONS PUBLIC HEALTH RESPONSE**

The Government of Canada's response to COVID-19 complements and is integrated into the broader pandemic public health and safety measures of the provinces and territories.

In order to support First Nations in preparing for and responding to COVID-19, which has been classified as a pandemic by the World Health Organization, the Government recently announced two funding tracks through which First Nations communities can access resources:

1. \$100 million for areas of federal responsibility, including for First Nations, Inuit and Métis community public health needs. These funds will:
  - Respond to identified needs to update and/or activate pandemic plans;
  - Support an effective allocation of the limited public health and primary health care capacity to respond to the COVID-19 outbreak;
  - Align response efforts with scientific evidence as determined by a medical officer of health; and,
  - Address immediate needs in the short term.
  
2. \$305 million for a new Indigenous Community Support Fund
  - This fund will be allocated on a distinctions-basis and will provide leadership with the ability to make choices that work for their communities.
  - It is anticipated that funding will be used to both proactively address immediate needs in First Nations, Inuit and Métis Nation communities. Communities will be able to proactively respond to emerging needs as they arise.
  - Funding will begin to flow in short order through existing mechanisms.
  - More information will be available soon.

Please note that the information outlined below is in regards to accessing support either through the \$100M announced last week or other existing programs for which expenditures related to COVID-19 may be eligible. Additional information on the \$305M Indigenous Community Support Fund will be available soon. That amount is over and above what is discussed below.

## **3. ADDITIONAL PUBLIC HEALTH-RELATED EMERGENCY SUPPORTS AVAILABLE FOR FIRST NATIONS COMMUNITIES**

While it is difficult to know exactly how, when or where COVID-19 might affect communities, it is important for all First Nations communities to be prepared by updating and testing their all-hazard/pandemic plans.

### **A. Supports through the First Nation and Inuit Health Branch**

The First Nations and Inuit Health Branch (FNIHB) provides funding and expertise to First Nations communities for developing and maintaining their all hazard or pandemic plans in all provinces except British Columbia (BC).

In BC, FNIHB will be supporting the First Nations Health Authority (FNHA) who is coordinating community requests for communities, which are transferred under their health authority in this province. As well, in the Yukon and Northwest Territories, FNIHB will collaborate with First Nations and the Territorial Governments to identify the need for additional supports.

On-reserve communities who require assistance in updating their plans should contact their ISC Regional Office (See Annex B).

The table below provides some examples of public health-related emergency eligible expenditures that can be submitted. Recognizing the increased demand globally and across Canada for surge health capacity and supplies, we encourage communities to take a **collaborative and coordinated approach to organizing surge capacity and procuring supplies** wherever possible with neighboring communities, local public health authorities or through Tribal Councils or First Nations Regional Health Authorities.

<b>Examples of Eligible COVID-19 expenses</b>
<ul style="list-style-type: none"> <li>• Community or service provider level infection <b>prevention and control supplies</b> (soap, sanitizers, disinfectants, personal clinical supplies, community training, etc.);</li> <li>• <b>Medical Transportation under the Non-Insured Health Benefits Program:</b> Travel (air, ground and water) / Meals and accommodations (note high-risk individuals eligible for private ground transportation, such as taxi, and private accommodations, such as hotel);</li> <li>• <b>Emergency Transportation &amp; additional escorts under the Non-Insured Health Benefits Program:</b> Travel (air, ground and water) meals and accommodations (note high-risk individuals eligible for private ground transportation, such as taxi, and private accommodations, such as hotel);</li> <li>• <b>Health human resources surge capacity:</b> primary care nurses and public health nurses, or other health providers such as paramedics and community workers;</li> <li>• <b>Mental health services</b> to support communities, particularly when they are facing affected individuals;</li> <li>• <b>Adaptation of community space</b> for surge capacity access to medical care or for self-isolation or other related purposes and additional operation and maintenance cost incurred by surge capacity requirements;</li> <li>• <b>Storage</b> costs of supplies;</li> <li>• <b>On-the-land initiatives</b> to support social isolation or food security; and,</li> <li>• Other types of expenses considered on a <b>case-by-case basis</b>.</li> </ul> <p><b><i>To access Personal Protective Equipment (PPE), please see section 5</i></b></p>

## **B. Supports through the Emergency Management Assistance Program (EMAP)**

In addition to public health related emergency supports, First Nation communities on reserve may need emergency assistance services that can be provided through the Emergency Management Assistance Program (EMAP). The types of expenses covered under EMAP when communities are under imminent threat include:

- incremental wage costs, including temporary hires and overtime;
- rental of special equipment;
- set-up costs for one-time preventative measures;
- insurance and fuel costs of response vehicles;
- care, feeding and accommodation of human resources separate from health care professionals, if required (contractors and temporary hires);
- communications (satellite phones, cell phone usage above and beyond normal use); and,
- water and household supplies (i.e., providing food and water if there is a concern that a shortage may occur)

At this time, Emergency Management Assistance Program assistance is dedicated to ensure the immediate health and safety response of First Nations related to COVID-19. Funding will not be used to support capacity building activities, nor to supplement other programs such as Band Support Funding. Eligible expenses will still be funded in cases of fire, flood or other natural disasters that pose an imminent threat to communities that would typically be supported by the Emergency Management Assistance Program.

## **C. CHILD & FAMILY SERVICES & JORDAN'S PRINCIPLE**

Existing processes are still in place to support Child and Family Services, and Jordan's Principle. Expenses can continue to be submitted through these existing processes, even if related to specific supports to respond to COVID-19 response efforts by First Nations child and family services agencies or by families/service providers related to the needs of specific children.

## **4. HOW TO SUBMIT A REQUEST**

Please, consult your ISC Regional Office (Annex B) when submitting your request.

See Annex A for an example of a template to submit requests for funding for costs planned or incurred by your community due to COVID-19.

To submit a request for funding or reimbursement for costs incurred to update and/or activate your pandemic or all-hazard plan beyond your current funding levels, submit a list of planned expenses or keep a list of incurred expenses that includes information related to:

- Cost (if reimbursement, with receipt or invoice);
- Item required or purchased;

- Brief description of item and the essential function it provides your community to be able to operationalize your plan; to support your community in reducing the spread of COVID-19; and/or to respond to cases in your community.

See Annex A for an example of a template to submit requests for funding for costs planned or incurred by your community due to COVID-19. Only one application is required to access any of the above requests, with the exception of Jordan's Principle or Child and Family Services agency claims who should continue to work directly with their regular contacts (e.g. 24/7 Jordan's Principle call centre or regional Focal Point).

## **5. HOW FIRST NATIONS COMMUNITIES ACCESS PERSONAL PROTECTIVE EQUIPMENT (PPE)**

Communities who are not able to have orders for Personal Protective Equipment (PPE) filled through regular procurement channels, such as PPE suppliers, or provincial/territorial PPE stockpiles, should contact the Regional Medical Officer in their Region at Indigenous Services Canada to let them know (see list in Annex B).

Requests from communities who provide essential primary health care services will be assessed. ISC is currently providing PPE to health facilities and health service providers who provide essential primary health care services, to support ongoing access to this care following guidelines from provincial public health departments. Facilities that offer primary care are being prioritized to receive quantities that correspond to their population size.

In order to practice good stewardship of the ISC PPE stockpile, facilities and health providers that do not offer primary care services may be approved to receive gloves and masks for routine use. We are continuing to work with the Public Health Agency of Canada to coordinate supply levels so we can replenish the stockpile as needed.

Once PPE arrives in community, please email [sac.pperequests-demandedeeipi.isc@canada.ca](mailto:sac.pperequests-demandedeeipi.isc@canada.ca) (cc to Regional office) to confirm that the shipment has been received.

We are also helping share information on the appropriate, evidence-informed use of PPE so health care providers know what to use in what situations and to make sure they are safe. The safety and preparedness of our front line workers is key to making sure we have a strong, coordinated response to COVID-19. A good guideline provided by the World Health Organization can be found at:

[https://apps.who.int/iris/bitstream/handle/10665/331215/WHO-2019-nCov-IPCPPE\\_use-2020.1-eng.pdf?sequence=1&isAllowed=y](https://apps.who.int/iris/bitstream/handle/10665/331215/WHO-2019-nCov-IPCPPE_use-2020.1-eng.pdf?sequence=1&isAllowed=y)

# ANNEX A: TEMPLATE TO REQUEST FUNDING UNDER COVID-19

## COVID-19 Funding Relief Request Template

Name of Community: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

Estimates/Invoices/Receipts for Actual Costs Incurred for items and/or services purchased (please list below and attach photocopies of invoices with your funding request) or submit a table of funding estimates

- *Invoice/receipt 1...*
- *Invoice/receipt 2...*
- *Invoice/receipt 3...*

### Template

Item/service Purchased	Date of purchase	Cost of purchase	Reason for Request
<i>Additional bed linens</i>	<i>March 16, 2020</i>	<i>\$100.00</i>	<i>Additional bed linens to support infection prevention control measures in communities where self-isolation of members occurring in separate facility from house</i>
<i>Soap – cleaning</i>	<i>March 15, 2020</i>	<i>\$75.00</i>	<i>Soap required for increased infection prevention control measures in community</i>

## **ANNEX B: INDIGENOUS SERVICES CANADA – REGIONAL MEDICAL OFFICER**

### Regional Medical Officers

#### **British Columbia**

Dr. Evan Adams, First Nations Health Authority

[Evan.Adams@fnha.ca](mailto:Evan.Adams@fnha.ca)

604-831-4898

#### **Alberta**

Dr. Wadieh Yacoub, Indigenous Services Canada

[sac.cdemergenciesab-urgencesmtab.isc@canada.ca](mailto:sac.cdemergenciesab-urgencesmtab.isc@canada.ca)

#### **Saskatchewan**

Dr. Ibrahim Khan, Indigenous Services Canada

[ibrahim.khan@canada.ca](mailto:ibrahim.khan@canada.ca)

306-564-9175

#### **Northern Inter Tribal Health Authority**

Dr. Dubuka, Northern Inter Tribal Health Authority

[nndubuka@nitha.com](mailto:nndubuka@nitha.com)

306-953-5021

#### **Manitoba**

Dr. Michael Routledge, Indigenous Services Canada

[Michael.routledge@canada.ca](mailto:Michael.routledge@canada.ca)

204-984-8924

#### **Ontario**

Dr. Maurica Maher, Indigenous Services Canada

[Maurica.maher@canada.ca](mailto:Maurica.maher@canada.ca)

1-833-978-2335

#### **Quebec**

Richard Budgell, Indigenous Services Canada

[Richard.budgell@canada.ca](mailto:Richard.budgell@canada.ca)

514-283-4774

#### **Atlantic**

Dr. Eilish Cleary, Indigenous Services Canada

[Eilish.cleary@canada.ca](mailto:Eilish.cleary@canada.ca)

506-249-5713

If you live in the territories, please contact your regional health authorities in the territory where you are located.

## ANNEX C: PROCESS TO REQUEST PERSONAL PROTECTIVE EQUIPMENT (PPE)

Please contact your regional contact (Annex B) and they will assist you in obtaining the information below so that your request can be submitted to the ISC national stockpile.

<b>Community Requesting PPE</b>	<i>Name</i>	<b>Level of health services provided by the organization making the request</b>	<input type="radio"/> Primary Care <input type="radio"/> Public Health <input type="radio"/> Other (describe)
<b>Community population</b>	<i>Number</i>	<b>Describe who will use this PPE and what PPE they will use as per the rational use of PPE guidelines (attached).</b>	
<b>Name, email, and phone number of person making request</b>		<b># of staff requiring PPE who are fit tested to N95 models</b>	<input type="radio"/> 1860 <input type="radio"/> 1860S <input type="radio"/> 1870+
<b>Transferred/ Non-Transferred</b>		<b>Person requesting agrees that PPE will be stored according to the PPE storage guide that was shared with all communities. This includes ensuring storage is controlled to maintain the integrity of the stockpile</b>	YES  NO
<b>Able to access PPE through regular supplier</b>	YES  NO	<b>Reason for Request</b>	<input type="radio"/> Supply in-stock due to expire <input type="radio"/> Routine Use <input type="radio"/> Pre-Positioning <input type="radio"/> Response to COVID-19 in or near community <input type="radio"/> Other extenuating circumstances (describe)



<b>Able to access PPE through provincial stockpile</b>	YES NO	<b>Delivery Address</b>	
<b>Item</b>	<b># of units/ pairs requested</b>	<b>Item</b>	<b># of units/ pairs requested</b>
Gowns – Small/ Medium		Face Shields	
Gowns – Large (Universal)		Procedure Masks	
Gowns – X-Large		N95 Respirator Model 1860	
Gowns – XX-Large		N95 Respirator Model 1860S	
Pairs of Gloves – Small		N95 Respirator Model 1870+ Aura	
Pairs of Gloves – Medium		Alcohol Based Hand Rub	
Pairs of Gloves – Large			
Pairs of Gloves – X-Large			