**Table of Contents**

Introduction..................................................................................................................................... 3

What are Aboriginal Midwifery Services? ..................................................................................... 3

What is an Aboriginal Midwifery Program? .................................................................................. 4

Who is Eligible to Apply for this Initial Application Process for Aboriginal Midwifery Programs? ......................................................................................................................... 4

What will be funded? ...................................................................................................................... 5

Key Foundational Blocks to Support an Enhanced State of Readiness to Implement an Aboriginal Midwifery Program ......................................................................................................................... 6
Introduction

“Ontario will…continue to support midwifery practice groups and Aboriginal midwives who offer support to expectant mothers and their babies.”

The Government of Ontario is committed to supporting Aboriginal midwives and expanding midwifery services. This initiative aims to provide funding to support communities in establishing and maintaining Aboriginal Midwifery Programs that will provide culturally appropriate Aboriginal midwifery services in Aboriginal communities.

As a first step, this initial call for applications builds on existing capacity within Aboriginal communities including:

- Midwives who have been identified in their community as able to provide Aboriginal midwifery services;
- Primary health/team based care programs and organizations currently serving the community to support midwives;
- Mechanisms to provide oversight and ensure safety of midwifery services; and
- Physical space for an Aboriginal Midwifery Program.

It is anticipated that subsequent opportunities to apply for Aboriginal Midwifery Programs will be available as part of the Ministry’s annual midwifery funding cycle, subject to available funding. For communities unable to apply for this initial call, a Development Grant application is available to assist in activities that will allow a community to determine the feasibility and support for Aboriginal midwifery services.

What are Aboriginal Midwifery Services?

Aboriginal midwifery plays an important role in the healing, health and wellbeing of Aboriginal peoples in Ontario. Aboriginal midwifery services have proven to have a positive impact on Aboriginal reserve/urban/rural communities by helping to maintain traditional values, language, and kinship and support women and youth to make informed choices around reproductive health and parenting.

The National Aboriginal Council of Midwives describes the role of an Aboriginal midwife as “a committed primary health care provider who has the skills to care for pregnant women, babies, and their families throughout pregnancy and for the first weeks in the postpartum. She is also a person who is knowledgeable in all aspects of women’s medicine and she provides education that helps keep the family and the community healthy. Midwives promote breastfeeding, nutrition, and parenting skills. A midwife is the keeper of ceremonies for young people like puberty rites. She is a leader and mentor, someone who passes on important values about health to the next generation.”

The Ministry of Health and Long-Term Care recognizes that Aboriginal midwifery services can be delivered by any woman or man, registered through the College of Midwives of Ontario or practicing under the Exception Clause for Aboriginal Midwives, Midwifery Act, 1991, who has been recognized by her/his community as having the skills and knowledge to provide Aboriginal midwifery care.

Throughout these documents, the term “midwife” is defined (unless otherwise noted) to include both “Registered Midwives” and “Aboriginal Midwives” practicing under the exception.

---

1 2015 Ontario Budget: Effective Health Care System for All
More information on Aboriginal Midwifery services can be found here: www.aboriginalmidwives.ca/toolkit/work-aboriginal-midwife

What is an Aboriginal Midwifery Program?

Aboriginal Midwifery Programs will be locally determined to reflect specific community needs and will be expected to demonstrate the following components:

1. Provide culturally appropriate and culturally safe midwifery services, education and counselling to women and newborns, families, and the community in collaboration with other caregivers, both traditional and contemporary;

2. Provide holistic services, not limited to the pre-natal, labour and delivery and post-partum period. For example: health promotion and illness prevention, well woman care, youth sexual health, menopausal care;

3. Provide a program that is integrated with other health care providers within any primary health care organizations and other health and community care providers at the community level;

4. Provide system navigation and care coordination – linking women and newborns, her family, and the community to other parts of the health care system and community programs and services; and,

5. Provide patient-centred care where the client is a key member of the team and uses information and support to make informed decisions on how to manage her self-care needs, including informed choice of birthplace (home, birth centre or hospital).

Who is Eligible to Apply for this Initial Application Process for Aboriginal Midwifery Programs?

In order to better ensure success, the ministry’s intention for this initial application process is to support Aboriginal Midwifery Programs identified as having existing capacity and supported by existing interprofessional primary health care teams/organizations. The ministry is inviting applications to establish an Aboriginal Midwifery Program from:

- Registered and Aboriginal Midwives (individuals or existing Midwifery Practice Groups) wishing to establish services in Aboriginal communities,
- Interprofessional primary health care organizations currently serving Aboriginal communities (e.g. AHACs, and Aboriginal governed CHCs, FHTs and NPLCs, Band Council Health Committees),
- Band Councils, and,
- from partnerships of any of the above.

Successful applicants are expected to demonstrate how their application aligns with Ontario’s Patients First: Action Plan for Health Care:

Access:
- Improve access – providing faster access to the right care.
- Provide midwifery services to areas of need.
Connect:
• Connect services – delivering better coordinated and integrated care in the community, closer to home.

Inform:
• Support people and patients – providing the education, information and transparency they need to make informed decisions about their health.

Protect:
• Protect our universal public health care system – builds on/leverages the assets already existing in the primary health care organization.

Demonstrate support from the community:
• Demonstrated support from within the Aboriginal community.
• Process for recognizing/acknowledging Aboriginal midwives.

Demonstrate Readiness:
• Demonstrated readiness to operate including a sustainable governance model; identification of a midwife; interprofessional health provider commitment; facility availability or advanced space planning; established partnerships within their communities.

The deadline for submission of all applications is 5:00 p.m., June 24, 2016.

It is expected that successful applicants will be contacted in summer 2016.

Note: It is anticipated that subsequent opportunities to apply for Aboriginal Midwifery Programs will be available as part of the Ministry’s annual midwifery funding cycle, subject to available funding.

What will be funded?

<table>
<thead>
<tr>
<th>Human Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaried Employees:</td>
</tr>
<tr>
<td>• Midwife – Registered and/or midwife practicing under the Exemption for Aboriginal Midwives, <em>Midwifery Act, 1991</em></td>
</tr>
<tr>
<td>• Administrator and clerical</td>
</tr>
<tr>
<td>Contracted Services:</td>
</tr>
<tr>
<td>• Midwife – Registered and/or midwife practicing under the Exemption for Aboriginal Midwives, <em>Midwifery Act, 1991</em></td>
</tr>
<tr>
<td>Benefits</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Liability Insurance</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Overhead/Operational</td>
</tr>
<tr>
<td>Basket of General Overhead</td>
</tr>
<tr>
<td>Midwifery Equipment, restocking</td>
</tr>
<tr>
<td>Second Attendant funding</td>
</tr>
<tr>
<td>Professional Development</td>
</tr>
<tr>
<td>Travel – for delivering client services</td>
</tr>
<tr>
<td>One Time Start Up Costs</td>
</tr>
<tr>
<td>Furnishing and Equipment</td>
</tr>
<tr>
<td>Information Technology</td>
</tr>
<tr>
<td>Minor Leasehold Improvements</td>
</tr>
</tbody>
</table>
Key Foundational Blocks to Support an Enhanced State of Readiness to Implement an Aboriginal Midwifery Program

When establishing an Aboriginal Midwifery Program, there are four key factors that serve as the foundational building blocks to support an enhanced state of readiness.

The more advance planning you are able to do towards addressing these key factors, the greater your state of readiness will be to establish and begin operating an Aboriginal Midwifery Program.

You will need to consider the following factors and address them in the Application section. These factors will also inform the evaluation of applications:

1. **Governance:** Governance refers to the manner in which affairs of an organization or program are managed and supervised. The governance structure of the Aboriginal Midwifery Program being applied for must be linked with an existing transfer payment agency or Band Council and be supported by the community.

   Examples of applicable governance models include, but are not limited to:

   i. Primary Health Care Organization-Led – this incorporated group is governed by a Board of Directors (which may include the local Band Council) and may currently be funded by Ministry of Health and Long-Term Care (AHAC and Aboriginal governed CHC, FHT, or NPLC), provides the governance, oversight, is the fund recipient/transfer payment agency, and the employer.

   ii. Band Council– Band Council provides the governance and oversight, is the fund recipient/transfer payment agency, and is the employer.

   iii. Partnership - a combination of organizations that share the responsibilities of governance and oversight, fund recipient/transfer payment agency, and employer and/or contractor of midwifery services.

2. **Human Resources:** Aboriginal Midwifery Programs are intended to work in partnership with established interdisciplinary teams of primary care health professionals working collaboratively within their full scope of practice. The application should outline how the existing health human resources and assets of the primary health care organization will be leveraged to support the Aboriginal Midwifery Program.

3. **Knowledge and Integration of Traditional and Contemporary Midwifery Practices in the Community:** Demonstrate knowledge of the community/catchment area of your proposed program, existing community resources, capacity and service gaps, and culturally specific practices/ceremonies that will be incorporated into the Aboriginal Midwifery Program.

4. **Accommodation:** Identified space that can accommodate the program which requires little or no remodelling/renovations will be considered an asset.