

FAMILY ASSISTANCE PROGRAM GUIDELINES

QUALIFYING FOR THE PROGRAM

The Help Fill A Dream Foundation **FAMILY ASSISTANCE PROGRAM** assists families whose child has a life-threatening/critical condition, focusing on a child's mobility, health, and well-being. The intent of the program is to help reduce the financial stress that families experience from the costs and challenges associated with their child's condition. The child must be:

- Under the age of 19 (from birth until 19th birthday);
- A resident of Vancouver Island and the Gulf Islands;
- Diagnosed with a life-threatening/critical condition;
- Assessed and referred by a qualified health professional, including but not limited to: Social Workers, Physiotherapists, Occupational Therapists, RNs, and Physicians.

Support considered under this program may include medically required equipment such as a wheelchair, walker, or continuous glucose monitor; travel outside of the community, including out of province or country, for ongoing treatment; or monthly support for therapeutic resources such as uninsured medications. Expenses incurred prior to the approval of an application will not be reimbursed.

More than one item or expense type may be requested on an application.

All life-threatening/critical conditions will be considered but may require verification from a doctor.

A condition could be considered life-threatening/critical if under certain circumstances, when left untreated or improperly treated, it could lead to a shortened life span.

COMPLEMENTARY FUNDING

Please ensure you have applied to eligible government programs or extended medical benefits. You may also want to explore other sources of charitable funding in the event that you are not awarded the entire amount requested.

APPLYING TO THE PROGRAM

Please ensure the child meets the criteria for our program and that you are a health professional from the appropriate field to be making the request (e.g. a speech language pathologist should not be applying for a piece of mobility equipment, regardless of their knowledge of the child's condition).

- Apply to the program by obtaining an application from the Program Manager at <u>programs@helpfilladream.com</u>. If you keep an application stored locally, please ensure you are using the newest version.
- Ensure you have correct spelling and up to date contact information. Failure to provide a correct mailing address, email, or spelling of parent/guardian's name(s) may result in a delay in issuing payment for an approved application.
- Complete all mandatory fields in the application electronically. Handwritten applications will not be accepted. An application cannot be submitted without completion of all required fields.



- 4. Include all supporting documents such as a quote or travel dates at time of application. If parent/guardian is involved in providing supporting documents please collect those and submit as one complete application package sent directly from your organization. Do not provide the application to parent(s)/ quardian(s) for completion.
- 5. Review consent with the parent(s)/guardian(s). Ensure the parent/guardian understands that by consenting to this application, Help Fill A Dream will not publish their personal information. Any personal information provided is kept confidential, but information will be shared between the referring professional and Help Fill A Dream. Additionally, Help Fill A Dream may contact the parent/guardian at a later date to discuss their willingness to share their story.
- 6. Submit the completed application package by email to <u>programs@helpfilladream.com</u> or by fax to 236-653-8012.

APPLICATION REVIEW

Once the application has been received, the Program Manager will review for completeness. If any clarification is required, the Program Manager will consult with the referring health professional, and not the family.

A complete application will be reviewed for eligibility and approval by the Program team. In some cases, an application may need to be reviewed by the Help Fill A Dream Board, who meets monthly.

If the application is approved, the referring health professional will be contacted as soon as a decision has been made and it is their responsibility to communicate the decision to the family and the service provider/vendor.

Requests will be considered for a maximum of 6 months. If further support is requested beyond those timelines, a new application will be required. All invoices for equipment or other supplies must be received within six months of approval.

Travel and resource support will be paid to the family by cheque. Equipment or accommodation will be paid directly to the vendor whenever possible. In addition to paying vendors or the family, the Program Manager may order equipment online on a case-by-case basis. The Program Manager is not responsible for booking accommodations or for sourcing equipment.

If you have any questions about the guidelines or application please contact 250-382-3135 or programs@helpfilladream.com.