

KSCS

ANNUAL REPORT

2017–2018

Kahnawà:ke
Shakotia'takehnhas
Community Services

Health Canada
Contribution Number
QC 1300001







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KSCS provides a variety of health and social services to the Mohawks of Kahnawà:ke. We get direction from Onkwata'karitáhtshera (a Kanien'kehá:ka word translated as "for all the people to be concerned in the area of good health"), the one health and social service agency that is responsible for overseeing community control over Kahnawà:ke's health and determining the health priorities.



Executive Director's Report

It is an honour and a privilege to act as the Shakotii'akehnhas Community Services Executive Director; I hope that I am able to achieve the description that Mr. Houston describes as a leader by improving the lives of our employees and clients, as well as helping to make the "system" better. At KSCS, we take great pride — and respect our responsibility — in our role in our community as one of the key community partners for encouraging healthy lifestyles for all of our families. I acknowledge and honour community members working towards the betterment of our community. Thank you for all the hard work that you do.

We are moving forward on implementing our 2016–2019 Strategic Plan and will soon begin planning for the next evolution in service delivery. We began the process facing projected deficits due to operational funding limitations. However, with the results from the Canadian Human Rights complaint and subsequent increases in funding, KSCS remains in excellent shape to implement key project activities, as well as support community development opportunities wherever we can. We look forward to announcing new initiatives and projects this coming year.

Our first strategic objective: *"Be fully client centered and client driven"* remains our top priority; however, it is imperative that KSCS continue to partner with our clients in all our service areas to identify opportunities for improvement and to capitalize on our areas of strength.

To support this end, the KSCS Board of Directors conducted a comprehensive internal organizational review to provide a snapshot of our organization's health. Coupled with this past year's work on the Child and Family Services Reform consultations, the organizational review will provide valuable input on where KSCS should be investing resources to produce better results for our community. Our goal is to keep our clients at the forefront of our planning, as our success is directly reflective of the quality of services they receive.

Our second strategic goal: *"Enhance community engagement and community based partnerships"* is another key opportunity for the community. KSCS is proud to be part of the community's Collective Impact change process and we hope to support initiatives on this work in the future.

Kahnawà:ke is fortunate to have many strong partnerships within our community; including with Onkwata'karitáhtshera partners, the Executive Directors Committee organizations, our grassroots community partnerships, Connecting Horizons, Circle of Security, and many more. It is imperative that we continue to build and strengthen partnerships within and outside the community.



EXECUTIVE DIRECTOR

DEREK MONTOUR

A leader is someone who helps improve the lives of other people or improve the system they live under. – Sam Houston

CORNERSTONES OF INTEGRITY

Respect

Responsibility

Trust

Commitment



I am pleased to report we are making great progress on our third strategic objective: *“Foster and accelerate active Kanien’kehá:ka ways of doing things, including more use of our language.”* A dedicated team of volunteers is making changes within KSCS and we are supporting partnerships that enhance the use of traditional healing practices. We look forward to continuing this work so that we can promote healing from a place of culture and language and supplement this with other methods of healing. We are living in an exciting time of rejuvenation and strength for our identity.

We are pursuing our goal of asserting self-determination of our services, in particular: youth protection. This activity was reported to you last year and continues to be a milestone we work towards for community self-determination. Unfortunately, we were unable to achieve this in the past year, but I continue to hope our efforts will prove fruitful. Mid-year, the Director of Family Services was hired to provide direction, leadership, and guidance to our client service teams. Due to unforeseen circumstances early in her tenure, she was placed on a leave of absence. We are looking forward to her return early in the upcoming year to resume her duties.

The final update I wish to share is our excitement with the launch of the first volume of “Onkwana’ta/Our Community, Onkwatakarí:te/Our Health”; an Onkwata’karitáhtshera collaborative portrait of the state of health in our community. The health portrait is a culmination of several years’ work to consolidate health data from a variety of sources to create an accurate picture of the state of health in our community.

As I mention every year, it is not an easy task to address our community’s core social challenges, which have been entrenched over generations, but I am grateful that we continue to receive the cooperation, openness and trust of our community members. Please remember that we all have challenges in life, but all of our challenges can be overcome if we have the willingness to actually face them; we just sometimes need a helping hand. KSCS is here to be that helping hand.

Board of Directors

Kahnawà:ke Shakotiià'takehnhas Community Services (KSCS) once again has had a challenging year. We are committed to work with KSCS staff and Kahnawà'kehró:non to make Kahnawà:ke's collective future healthier, both physically and emotionally, which is a difficult task in the best of times. Given our ever changing environment, improving the ability for our organization to meet the needs of Kahnawà:ke is what we are all striving for.

The KSCS Board of Directors are continuing to develop governance policies to help build a solid foundation for our organization.

The Board, in partnership with our Executive Director and staff, are searching for ways to ensure the KSCS services and programs that we provide meet your expectations. In the fall of 2017, we committed to an organizational review that would look at the current state of KSCS through the eyes of an independent team with the help and insight of our employees.

This review is nearly complete. Once the final report is vetted and recommendations are approved for implementation, we will embark on two new initiatives: we will be looking for direct feedback from you, our community, and we will be holding our first annual general assembly (AGA).

The vehicle for your direct feedback is a challenge in itself. We are currently discussing options to best achieve meaningful feedback from the community. The AGA will give both our staff and our community the opportunity to discuss our programs and services, as well as the issues facing KSCS.

These are interesting and exciting times for KSCS, with many internal and external developments with more to come in the coming years. We are committed to our staff and we are confident in our ability to evolve with Kahnawà:ke to ensure we are meeting your needs. We believe we will achieve success as a team working together for our collective future.

KSCS BOARD OF DIRECTORS



KSCS Board of Directors:

Standing from left to right: Thomas Sky, Michael Delisle (chair), Vernon Goodleaf.

Sitting from left to right: Janice Beauvais, Jessica Lazare, Valerie Diabo.

Not pictured: Warren White, Mary Lee Armstrong, Rhonda Kirby, Dwayne Zachary.





Onkwata'karitáhtshera (For All the People to be Concerned in the Area of Good Health) is the one health and social service agency that is responsible for overseeing community control over Kahnawà:ke health. It is mandated through a Mohawk Council of Kahnawà:ke (MCK) Resolution (MCR #45/1999–2000).

Onkwata'karitáhtshera membership consists of KSCS, Kateri Memorial Hospital Centre (KMHC), Mohawk Council of Kahnawà:ke (MCK) and the Kahnawà:ke Fire Brigade (KFB). Presently, three support staff carry out all aspects of Onkwata'karitáhtshera Secretariat operations for the community within the local, regional, and national areas of health and social services.

In the fall of 2017, Onkwata'karitáhtshera participated in the development of their five-year Strategic Plan which has integrated Kahnawà:ke's Community Health Plan (CHP) evaluation recommendations and themes. The CHP 2016 evaluation included some key themes and recommendations and reconfirmed the six original health priorities:

- Substance abuse/addictions
- Mental wellness
- Diabetes,
- Cardiovascular disease/hypertension/obesity
- Learning/developmental disabilities
- Cancer

These themes and recommendations will be addressed through the implementation of an operational plan within the 2018–19 year.

Several years ago, Onkwata'karitáhtshera identified a major gap: there was insufficient data to support planning and decision-making at the program level regarding the CHP health priorities.

In order to get an accurate picture of the true state of health of Kahnawakehró:non, Onkwata'karitáhtshera developed a partnership with Health Canada and Dr. Colleen Fuller, a public health specialist, to carry out a data mining project to collect specific health data.

Data was gathered from the 2015 Kahnawà:ke First Nations Regional Health Survey, the Quebec Integrated Chronic Disease Surveillance System, the Le Registre québécois du cancer (ROC Quebec Cancer Registry), birth and death statistics, and the Non-Insured Health Benefits (NIHB) program of First Nations and Inuit Health Branch Health Canada.

Volume one of the health portrait, Onkwana'ta/Our Community – Onkwata'karí:te/Our Health, was developed to build our community public health capacity and improve health promotion and disease prevention in Kahnawà:ke. The document was released to the community in the spring of 2018.

The Onkwata'karitáhtshera Secretariat is responsible for the administration and coordination of the selection process and reporting mechanisms for community-based programs funded by Health Canada. This includes funding that is disbursed to community projects through initiatives



TEAM LEADER
PATSY BORDEAU





Onkwata'karitáhtshera

such as Kahnawà:ke Head Start, which funds various educational organizations and daycare facilities for the 0–6 population.

Onkwata'karitáhtshera funded six projects in the community. Our Community Health Plan Initiative (CHPI) funds address the six health priorities through the 20 projects funded using the logic model training held in October 2017. The training was held to support the reporting and development for both the CHPI and Head Start projects.

Onkwata'karitáhtshera also coordinates the Health Canada Physical Activity Initiative (PAI) through Ahsatakariteke (To Be Well) subcommittee with funds going to five projects in 2017 that addressed global physical activity. The Health Canada Tobacco Control Strategy funding developed initiatives to address tobacco use in Kahnawà:ke via the KMHC. The activities included developing partnerships to encourage culture through the use of sacred tobacco, to work with youth based on the survey data, and to meet with leadership to enhance policy for more smoke-free spaces.

There is a need for continued navigational assistance for community members accessing Non-Insured Health Benefits (NIHB) in the areas of dental, vision, medical equipment and supplies, and prescription drugs.

Independent Auditors' Report

To the Members and Board of Directors of Kahnawà:ke Shakotia'Takehnhas Community Services:

We have audited the accompanying financial statements of Kahnawà:ke Shakotia'Takehnhas Community Services, which comprise the statement of financial position as at March 31, 2018, and the statements of operations and accumulated surplus, change in net financial assets, cash flows and the related schedules for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of Kahnawà:ke Shakotia'Takehnhas Community Services as at March 31, 2018 and the results of its operations, change in net financial assets and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Montréal, Québec

June 25, 2018

MNP SENCRL, srl¹

¹ CPA auditor, CA, public accountancy permit no. A124849

Kahnawà:ke Shakotiia'Takehnhas Community Services

Statement of Financial Position

As at March 31, 2018

	2018	2017
Financial assets		
Cash resources (Note 3)	7,031,651	5,813,365
Contributions and accounts receivable (Note 4)	684,659	937,007
Total financial assets	7,716,310	6,750,372
Liabilities		
Accounts payable and accruals (Note 5)	1,458,071	1,767,111
Deferred revenue (Note 6)	302,884	146,452
Amounts held in trust (Note 7)	72,848	86,742
Total liabilities	1,833,803	2,000,305
Net financial assets	5,882,507	4,750,067
Contingencies (Note 8)		
Commitments (Note 9)		
Non-financial assets		
Tangible capital assets (Note 10) (Schedule 1)	3,246,971	3,087,374
Prepaid expenses	64,678	108,999
Total non-financial assets	3,311,649	3,196,373
Accumulated surplus (Note 15)	9,194,156	7,946,440

Approved on behalf of the Board

“Original signed by Michael Ahrihrhon Delisle Jr.”, **Chairman**

“Original signed by Mary Lee Armstrong”, **Treasurer**

“Original signed by Joseph T. Norton”, **Grand Chief**

Kahnawà:ke Shakotiia'Takehnhas Community Services

Statement of Operations and Accumulated Surplus

For the year ended March 31, 2018

	<i>Schedules</i>	<i>2018 Budget</i>	<i>2018</i>	<i>2017</i>
Revenue				
Health Canada		8,499,665	9,447,114	9,156,721
Indigenous and Northern Affairs Canada		7,865,796	8,729,491	7,521,478
Other government funding		180,000	197,454	197,651
Rental income		316,080	312,820	316,565
Other revenue		208,647	407,123	271,107
Investment income		52,700	64,765	61,729
Distribution		-	-	198,400
Deferred revenue - prior year		-	146,452	124,613
Deferred revenue - current year		-	(302,885)	(146,452)
Repayment of government funding		-	(24,273)	(105,833)
Cancellation of government funding		-	-	(222,088)
		17,122,888	18,978,061	17,373,891
Expenses				
Block funded health priorities	4	8,741,889	8,441,643	8,321,050
Set funded health priorities	5	68,335	289,724	286,421
Enhanced prevention focused approach	6	6,443,835	6,127,047	5,724,821
Assisted living services	7	2,529,870	2,246,023	2,136,503
Other health and social services	8	279,585	387,046	428,860
Administration	9	395,371	59,951	(29,500)
Capital	10	-	188,911	159,003
Total expenses (Schedule 2)		18,458,885	17,740,345	17,027,158
Surplus before other items		(1,335,997)	1,237,716	346,733
Other income				
Gain on disposal of capital assets		-	10,000	-
Surplus		(1,335,997)	1,247,716	346,733
Accumulated surplus, beginning of year		7,946,440	7,946,440	7,599,707
Accumulated surplus, end of year		6,610,443	9,194,156	7,946,440

Kahnawà:ke Shakotiia'Takehnhas Community Services

Statement of Change in Net Financial Assets

For the year ended March 31, 2018

	<i>2018 Budget</i>	<i>2018</i>	<i>2017</i>
Annual surplus	(1,335,997)	1,247,716	346,733
Purchases of tangible capital assets	(550,922)	(348,508)	(239,977)
Amortization of tangible capital assets	-	188,911	159,003
(Gain) loss on sale of tangible capital assets	-	(10,000)	-
Proceeds of disposal of tangible capital assets	-	10,000	-
Acquisition of prepaid expenses	-	-	(74,365)
Use of prepaid expenses	-	44,321	-
Increase in net financial assets	(1,886,919)	1,132,440	191,394
Net financial assets, beginning of year	4,750,067	4,750,067	4,558,673
Net financial assets, end of year	2,863,148	5,882,507	4,750,067

Kahnawà:ke Shakotia'Takehnhas Community Services

Statement of Cash Flows

For the year ended March 31, 2018

	2018	2017
Cash provided by (used for) the following activities		
Operating activities		
Cash receipts from contributors	19,329,198	18,322,720
Cash paid to suppliers	(7,515,917)	(7,724,151)
Cash paid to employees	(10,300,237)	(9,826,596)
Interest income	57,643	50,000
	1,570,687	821,973
Financing activities		
Change in amounts held in trust	(13,893)	(138,646)
Capital activities		
Purchases of tangible capital assets	(348,508)	(239,977)
Proceeds of disposal of tangible capital assets	10,000	-
	(338,508)	(239,977)
Increase in cash resources	1,218,286	443,350
Cash resources, beginning of year	5,813,365	5,370,015
Cash resources, end of year	7,031,651	5,813,365

Kahnawà:ke Shakotii'a'Takehnhas Community Services

Schedule 2 - Schedule of Expenses by Object

For the year ended March 31, 2018

	<i>2018 Budget</i>	<i>2018</i>	<i>2017</i>
Expenses by object			
Amortization	-	188,911	159,003
Bank charges and interest	24,500	28,372	27,475
Clinical care	1,376,460	1,417,754	1,388,782
Contracted services	350	38,554	20,282
Food and beverage	117,800	128,681	97,161
Foster care	-	1,195,742	1,125,516
Furniture and equipment	17,500	12,674	41,560
Group home costs	-	107,846	34,474
Headstart	288,813	235,992	280,485
Health management	43,000	21,194	93,154
Honoraria(um)	25,200	17,199	20,564
Institutional care	-	1,068,490	1,311,994
Insurance	15,265	12,206	13,627
KMHC accreditation	30,000	56,278	55,280
Miscellaneous	13,500	7,123	10,521
Office and administration cost share	(18,000)	(52,186)	(16,614)
Office equipment lease	22,390	14,617	19,099
Office supplies and expenses	39,300	41,360	54,055
Placement costs	85,500	147,662	61,991
Postage	6,300	7,693	4,857
Prenatal nutrition	42,586	43,864	43,392
Professional fees	80,242	116,298	118,118
Renovation materials	18,000	15,177	18,000
Rent	145,500	145,530	145,530
Repairs and maintenance	129,300	116,482	122,978
Salaries and benefits	11,509,189	10,300,237	9,826,596
Service delivery costs	3,784,858	1,813,356	1,494,433
Social development project	50,000	50,000	50,000
Telephone	142,200	65,465	53,236
Training	111,400	76,382	56,997
Translation	-	-	32
Transportation	47,547	46,464	41,957
Travel	224,552	167,727	160,576
Utilities	85,633	87,201	92,047
	18,458,885	17,740,345	17,027,158

Kahnawà:ke Shakotiia'Takehnhas Community Services

Schedule 1 - Schedule of Tangible Capital Assets

For the year ended March 31, 2018

	Buildings and building improvements	Equipment	Furniture and fixtures	Computer hardware	Vehicles	Subtotal	Telephone System	2018	2017
Cost									
Balance, beginning of year	4,993,432	82,486	81,236	161,450	133,578	5,452,182	74,010	5,526,192	5,286,215
Acquisition of tangible capital assets	269,678	12,300	17,142	-	49,388	348,508	-	348,508	239,977
Disposal of tangible capital assets	-	-	-	-	(49,166)	(49,166)	-	(49,166)	-
Balance, end of year	5,263,110	94,786	98,378	161,450	133,800	5,751,524	74,010	5,825,534	5,526,192
Accumulated amortization									
Balance, beginning of year	2,072,108	57,300	71,644	129,537	108,229	2,438,818	-	2,438,818	2,279,815
Annual amortization	122,568	7,497	5,347	10,627	18,227	164,266	24,645	188,911	159,003
Accumulated amortization on disposals	-	-	-	-	(49,166)	(49,166)	-	(49,166)	-
Balance, end of year	2,194,676	64,797	76,991	140,164	77,290	2,553,918	24,645	2,578,563	2,438,818
Net book value of tangible capital assets	3,068,434	29,989	21,387	21,286	56,510	3,197,606	49,365	3,246,971	3,087,374
2017 Net book value of tangible capital assets	2,921,324	25,186	9,592	31,913	25,349	3,013,364	74,010	3,087,374	

Kahnawà:ke Shakotiia'Takehnhas Community Services

Schedule 3 - Schedule of Revenue and Expenses

For the year ended March 31, 2018

	Schedule #	Budget	INAC Revenue	Other Revenue	Deferred Revenue	Total Revenue	Total Expenses	Adjustments/ Transfers From (To)	Current Surplus (Deficit)	Prior Year Surplus (Deficit)
Segment schedules										
Block Funded Health Priorities	4	1,331,924	-	9,074,281	(7,732)	9,066,549	8,441,643	-	624,906	392,782
Set Funded Health Priorities	5	(20,776)	-	348,560	(58,836)	289,724	289,724	-	-	-
Enhanced Prevention Focused Approach	6	951,665	6,305,959	197,454	-	6,503,413	6,127,047	5,165	381,531	(455,220)
Assisted Living Services	7	(45,423)	2,348,532	281,095	-	2,629,627	2,246,023	(239,500)	144,104	216,087
Other Health and Social Service Activities	8	29,569	75,000	401,002	(89,865)	386,137	387,046	10,111	9,202	(34,720)
Administration	9	93,198	-	112,611	-	112,611	59,951	90,776	143,436	(183,895)
Capital	10	3,087,374	-	-	-	-	188,911	348,508	159,597	80,974
Internally Restricted Fund	11	1,141,389	-	-	-	-	-	(215,060)	(215,060)	330,725
Moveable Assets Reserve	12	20,181	-	-	-	-	-	-	-	-
Surplus		6,589,101	8,729,491	10,415,003	(156,433)	18,988,061	17,740,345	-	1,247,716	346,733



For the fiscal year 2017-2018, the financial team's primary focus has been on aligning the budget with the Strategic Plan and improving the relationship with the management team for a more seamless work-through of the yearly budget process. Our goal was to improve the process and make the budget easier to read and understand. We believe we have achieved success in this matter.

The budget process has been greatly improved and, because it is user friendly, our managers are taking a more active role in all decisions regarding their individual budgets.

The finance team is constantly working on improving our processes and we're always willing to accept feedback on changes to our methods to provide quality services to our clients.

With an eye to the future, the finance team and management are planning a preliminary *chart of accounts* with a goal to improving reporting to our funding sources and to the community. We are optimistic that we can implement the chart of accounts in the 2018 – 2019 fiscal year.



**FINANCIAL
CONTROLLER**
DANA STACEY

The budget process has been greatly improved and, because it is user friendly, our managers are taking a more active role in all decisions regarding their individual budgets.





Environmental Health Services (EHS)

The mandatory components of environmental health and safety in Kahnawà:ke are carried out under Environmental Health Services (EHS) of KSCS. EHS has the benefit of its own environmental health officer (EHO) with a certificate in public health inspection (Canada), who is responsible for upholding the standards we follow in accordance with all inspecting, testing and sampling.



TEAM LEADER
DONALD GILBERT

Services/Programs

- Potable water quality monitoring (public water system and private wells)
- Recreational water quality monitoring (swimming, etc.)
- Public building inspections (recreational and institutional)
- Indoor air quality investigations
- Private building inspections (quality of living conditions)
- Food service facilities
- Food premises inspections
- Wastewater (sewage) disposal and solid waste disposal
- Cancer reduction activities and health awareness
- Communicable disease control/awareness
- Special projects

For more information, please contact Environmental Health Services at 450-635-9945. We are located at a satellite office adjacent to the Assisted Living Services on the Old Malone highway.

The statistics on the following page show the mandatory activities that were completed during 2017– 2018 fiscal year.



EHS ACTIVITIES		
	2016–2017	2017–2018
Water Quality Monitoring - Centralized System - Bacteriological	348	333
Water Quality Monitoring - Centralized System - Complete Chemical Analysis	25	185
Water Quality Monitoring - Centralized System - Trihalomethanes	21	27
Water Quality Monitoring - Private Water Systems - Complete Chemical Analysis	58	114
Water Quality Monitoring - Private Water Systems - Bacteriological	68	470
Recreational Water Sampling	208	492
Public Building Inspections	40	45
Food Safety	78	90
Food Safety Re-inspections	11	7
Indoor Air Quality	22	22
Well Disinfections	4	17
Radon	2	3
Private Building (Health and Safety)	8	6
Cancer Reduction Activities	1	4
Public Safety Recall Announcements	7	3
Training Activities / Professional Development	22	7
Special Projects	50	7
Consultations	16	20

Turtle Bay Elders' Lodge (TBEL) was successful in applying for almost \$240,000 in funding through Indigenous and Northern Affairs Canada. The funds were used to make scheduled repairs and maintenance to the facility and upgrade building components in order to comply with quality and safety requirements.

An in-house building committee was created to oversee the awarding of the components of the project to contractors in accordance with the KSCS procurement policy. The repairs and upgrades were based on the 2016 building conditions report from Waban-AKI. Some of the major upgrades and replacements were:

- replacing the main pipes in the dry fire suppressant system
- installing a walkway around the entire perimeter of the facility to aid in fire evacuation
- upgrading the entire security camera system
- upgrading the lighting throughout the building to light-emitting diode (LED)
- changing all the lock tumblers to a one-key system
- changing the fencing around equipment
- painting the exterior and interior of the building

TBEL continues to assist area hospitals to help alleviate the shortage of beds by offering type –one and type–two level of care. Our 25 beds are occupied 95 per cent of the time.

We are assisting the Kateri Memorial Hospital Centre while they have been undergoing expansion construction and have lost the use of their kitchen during the upgrade. Their kitchen services team has been relocated to TBEL where both teams can realize an objective from the Community Health Plan to meet the overall nutritional needs of community members. Having direct access to KMHC nutritionist services has ensured high quality nutritional care and food services for our community members using our kitchen services.

A'nowaráhne (The Place of Turtles) is a complex comprised of six two-bedroom apartments, adjacent to TBEL, for community members who are 55 years and older and in need of housing. The residence has proven successful by offering alternative housing to those in need.



MANAGER
DWAYNE KIRBY





Making cut-out bears, part of Bear Witness Day at the ALS.



Halloween at the ALS.



The annual variety show.



The ALS Christmas craft sale at the Services Complex.



The YAP annual Fun Fair (both photos).



Assisted Living Services (ALS)

The team at Assisted Living Services (ALS) provides support and assistance to individuals living with mental health issues and developmental delays. Two areas identified within Kahnawake's Community Health Plan.

We maintain a 12- bed residential facility for individuals living with a mental health diagnosis. The mental health team includes case workers, support workers, and a full time security team. In addition, clients have access to support from physicians, mental health nurses, and psychiatry and addictions services. We use a client centered, multi-disciplinary case management approach that focuses on maintaining a client's stability and wellness. With the support of a case worker clients set personal goals and build on creating positive social connections with family and the community.

Services to our special needs population include the Young Adults Program (YAP), a day program that operates Monday through Friday and is available to individuals 21 and over. The Teen Social Club (TSC) is an after school program that operates from September to June, Monday through Friday for individuals between ages 12–20. During the summer months the TSC operates as a day program Monday through Friday. For clients with specific individual needs and requiring a specialized approach we offer the services of Life Skills Support Workers. All clients are supported through a team of case workers who meet with both clients and caregivers to assess and develop individual service plans based on needs and individual goals. In general, the service strives to build and increase opportunities for life skills development, social integration, cultural knowledge and connections to the community.

Many program activities are specifically designed to target specific health priorities as identified in Kahnawà:ke's Community Health Plan. And while obesity, cardiovascular disease and cancer are some of our most significant health concerns this is particularly true among our special needs and mental health population where numbers tend to run higher than the population at large. Due to some degree because of their typically sedentary lifestyles a lot of effort has been placed in getting our clients active and mobile.

Each year ALS tries to build on the success of the previous year and takes into account feedback from the clients themselves. With this in mind this year clients were regularly involved in a variety of physical activities that included:

- Swimming
- Bowling
- Therapeutic Horse Back Riding
- Exercise classes, mini-weights, cardio workouts and a walking club

With regard to healthy eating and nutrition the programs enlisted the help of a nutritionist and chef who specializes in vegetarian cuisine. This weekly activity focused on increasing each participant's interests and ability to cook and enjoy eating healthy foods. At the end of the year the team produced a cook book made up of all the recipes made throughout the year with the hope that participants and their families will incorporate some of these healthy recipes into their regular cooking routine. In addition, outings and cooking events were organized and scheduled



MANAGER
**VICKIE COURY-
JOCKS**



around our traditional festivals. Participants made meals using our traditional three sisters (corn, beans and squash) and went berry, apple and pumpkin picking. After each trip participants returned to ALS and prepared healthy, delicious recipes using what they had just freshly picked.

Furthering our commitment to provide cultural content to our program, volunteers from the community came and taught participants the peach pit game, traditional songs, drumming and how to make corn husk dolls. At this year's annual Variety Show participants will be adding traditional singing to their performance.

With the majority of our budget going directly to salaries, the ALS staff work rigorously applying for grants and fundraising to cover the costs of activities and programs. In addition, community volunteers have been incredibly supportive, offering their talent and skills to our clients. ALS continues to increase the knowledge and skills of staff through additional training in the area of mental health and special needs. ALS is a highly regarded and sought after resource for those studying social work and nurse's aide training as we are requested for stage placements often. We continually network with community organizations for feedback and to support the development of services wherever possible. New this year, was the federal government's roll out of Jordan's Principle. Through this initiative ALS has been able to assist families to narrow the gap of previously un-met services and needs, which we will continue to support in the year ahead.

In this past year it has been rewarding to work with staff to address feedback from families and clients as we continue to follow through on the commitments made within our strategic plan. And although we struggle with limited space and budget we remain committed to pursuing the expansion of services to meet the existing and growing needs of our clients.

CLIENT USAGE STATISTICS AT ASSISTED LIVING SERVICES

	2016-2017	2016-2017	2016-2017	2017-2018	2017-2018	2017-2018
	Male	Female	Total	Male	Female	Total
Caseworkers	40	29	69	40	26	66
Family Support and Resource Services	10	7	17	17	10	27
Teen Social Club	9	8	17	11	8	19
Young Adults Program	10	8	18	10	9	19
Total	69	52	121	78	53	131

Home and Community Care Services (HCCS)

Home and Community Care Services (HCCS) offers culturally relevant services to provide a continuum of care to Kahnawà:kehró:non in alignment with Kahnawà:ke Shakotiaa'takehnhas Community Services mission and vision statements and strategic plan.

The accredited program (Accreditation Canada) has moved into flex block funding that will allow the program to better meet the immediate and future needs of the community. We have worked to form an enhanced working relationship with First Nation and Inuit Health Branch (Home and Community Care Program – Quebec region) of Indigenous Services, Government of Canada.

A shortage of hospital beds in surrounding area hospitals (including Kateri Memorial Hospital) has led to a significant increase in new clients for home care services. It's through the integration of various services and resources that we are able to offer programs and services that meet the diverse needs of our senior population. Programming includes:

- Home care
- Nursing
- Social work
- Meals on wheels
- Estate planning and management
- Income security assistance
- Activity programming

Iethi'nikò:n:rare ne Thotí:iens (Looking out for our Elders) launched a campaign on June 15, 2017 to coincide with the World Elder Abuse Awareness Day. The focus of this campaign was to increase awareness of this issue throughout the community. The long term goal of Iethi'nikò:n:rare ne



MANAGER
MIKE HORNE

ADULT AND ELDERS SERVICES COUNSELLOR

Service	2016-2017	2017-2018
Old Age Security	56	42
Social Security	3	3
Quebec Pension Plan	1	3
Estate Planning	48	69
Legal	33	12
Pension Plans	2	3
Commissioner of Oaths	5	9
Miscellaneous	97	74
Civil Status Application		2
Networking	35	9
Total Requests	280	226



HCCS TOTAL HOURS OF SERVICE PROVIDED

Service Areas	2016-2017	2017-2018
Home Visits	49,376	46,156
Services Provided	41,430	51,144
Medication Assistance	8,043	5,943
Nursing	5,148	5,431
Personal Care	3,886	4,859
Case Management	5,301	5,315
Therapy	1,388	1,229
In-Home Respite	62	57
Domestic Services	2,650	2,978
Meal Services* (Including Meals on Wheels)	5,041	5,944
Activity Program	7,797	16,698
<i>Note: numbers have been rounded to the nearest number.</i>		

HOME AND COMMUNITY CARE SERVICES

Clients Served	2016-2017		2016-2017 Total	2017-2018		2017-2018 Total
	Male	Female		Male	Female	
Activity Program	3	28	31	10	43	53
Elders Caseworkers	7	20	27	8	13	21
Homecare	43	103	146	41	88	129
Homecare Nursing	91	151	242	89	147	236
Meals on Wheels	20	36	56	21	47	68
Turtle Bay Elders Lodge	7	24	31	12	21	33
Total	171	362	533	181	359	540

HOME AND COMMUNITY CARE SERVICES

Intakes	Activity Program	Elders Caseworker	Homecare	Homecare Nursing	Meals on Wheels	Extended Care	Equipment Loan	Total
								240
2017-2018	22	11	50	84	22		1	190
2016-2017	10	16	64	110	21			221

Thotí:iens is to strategically address the various forms of older adult mistreatment in Kahnawà:ke.

Through the development of a palliative care team consisting of key members of HCCS, we are identifying and prioritizing areas for improvement. The goal is to work in partnership with families to provide Kahnawakehró:non with the option to die at home with dignity.

The HCCS Activity Program enhanced its programming to offer specialized activities based on the diverse needs of our participants. The program’s aim is to offer individuals residing at home the opportunity to participate in social and recreational activities while offering caregivers a chance for respite.

Our programming is constantly challenged due to a shortage of human resources within certain service areas but it’s through the assistance and perseverance of our devoted staff that we are able to overcome these shortcomings and deliver quality care to our clientele and to our community. The program’s success is the result of a team of professionals which consist of highly dedicated staff focused on offering quality care to our community. In partnership with caregivers we are able to maintain community members in their home for longer periods of time while assisting in enhancing their quality of life.



Raising awareness about older adult mistreatment to mark World Elder Abuse Awareness Day.

The King and Queen of the annual elders’ lodge Valentine’s Day luncheon, part of the winter carnival.





Turtle Bay Elders Lodge Christmas party.

A social that took place at the elders' lodge on World Elder Abuse Awareness Day.



Cameron Lahache presented a donation from First Nations Wireless to the Turtle Bay Elders' Lodge.

Prevention has taken a direct approach with regards to sending messages of healthy living out the community. As in previous years, the focus of Prevention Services is to provide the most up-to-date and relevant primary prevention information to the community. Prevention messages have been sent to all ages and organizations within the community via an increase in our attendance and participation at major community events.

Once again Prevention services were able to support many other fantastic initiatives that were developed by their partners such as the Kahnawà:ke Youth Center with the funding of the March break youth camp, Kateri Memorial Hospital, the Kanien'kehá:ka Onkwawén:na Raotitióhkwa Language and Cultural Center, Kahnawà:ke Schools Diabetes Prevention Project, Kahnawà:ke Education Center, and the Mohawk Trail Longhouse. Prevention Services was able to successfully support "Kahnawà:ke Talks" which gave a platform to community members to discuss their journey of healing, an event that had a fantastic turn out with positive feedback.

Great emphasis was put on capacity building of Prevention and Support staff skills and training, but KSCS was able to help train other staff in community partner organizations as well. This narrative will outline the effective completion of the many activities within this year, and will provide a concise account of the activities that were developed, implemented and evaluated within our various programs.

Keeping in focus with KSCS' Strategic Objective 1 "Be fully client centered and client driven" and 3 "Foster and accelerate active Kanien'kehá:ka ways of doing things", two new positions were implemented in the past year; the Tsi Nionkwarihò:tens Coordinator, who has been working very closely with the various cultural and language resources in the community to develop and implement more Kanien'kehá:ka practices into all of the service areas of our organization and look at how we can partner with other organizations as well. Second, the position of Special Project Coordinator has been working with KSCS staff to begin the development of the Family Preservation Model Approach which KSCS plans to integrate into our services in the coming year.

In alignment with incorporating "Tsi Nionkwarihò:ten", the team participated in a number of Onkwata'karitáhtshera sub-committees that focus on the mental health wellness, the physical wellness and the spiritual wellness of Kahnawà'kehró:nnon. The Prevention worker for addictions has been working closely with our Addictions Response Team to deliver important awareness education on opioids, marijuana and alcohol through travel boards, billboards and on radio broadcasts — all to empower healthy Kanien'kehá:ka families, a Prevention Services objective.

Prevention Services has been working closely with the Tehoterihwaienawà:kon Traditional Approaches Subcommittee, which was implemented to focus on Kanien'kehá:ka cultural and healing practices in Kahnawake.

Primary and secondary prevention services were offered to the community throughout the year by the use of one-on-one counseling services, group programming, cultural programming activities, and support groups.

Prevention Services functions within a multi-disciplinary team model, along with other teams within KSCS and in partnership with other community organizations to best serve all Kahnawakekehró:nnon throughout the continuum of life.

As per our strategic objective "In partnership with education and the schools, enhance our prevention team activities", primary Prevention Services has been using their in-school Prevention



MANAGER
TERRY YOUNG



Prevention Services

cont/

programming, and have been able to provide countless hours of support to both students and teachers in community schools with regards to healthy living skills and techniques. The team covered issues such as homophobia, depression, stress management, HIV, healthy sexuality and family violence prevention education along with many other themes throughout the year.

Within the realm of youth mental wellness, the Afterschool Drama Program was a great success. 24 of Kahnawà:ke's youth took part in numerous culturally based and drama centered activities at Karonhianónhna and Kateri Schools.

KSCS Prevention Services will continue to offer programming to meet the needs of the community and will maintain working partnerships with other community organizations and initiatives whose goals are to encourage overall healthy lifestyle choices. The services will uphold its commitment to working with all Kahnawa'kehró:non seeking assistance, and welcomes any and all feedback in regards to the programming offered by contacting us directly by phone or via the KSCS website at www.kscs.ca.

PREVENTION SERVICES USAGE

	2016-17	2016-17	2016-17	2016-17	2017-18	2017-18	2017-18	2017-18
	Male	Female	Other	Total	Male	Female	Other	Total
After-school Drama Program (correct term?)	19	53		72	28	47		75
Teen Group/Á:se Tahonatehiaróntie	11	7		18	15	10		25
Onkwanen:ra Group	45	19		64	53	37		90
Parenting Services (Individual)	6	36		42	2	7		9
Parenting Services (Groups)	165	453	75	693				
S5 Voluntary Services	82	173		255	29	131		160
Traditonal Services	50	78		128	79	79		158
Traditional Services (Groups)		8		8		0		0
Where the Creek Runs Clearer Group	14	16		30	3	12		15
Total	392	843	75	1,310	209	323		532

ENHANCED PREVENTION EVENTS AND PARTICIPATION

Total Participants										
	2016-17	2016-17	2016-17	2016-17	2016-17	2017-18	2017-18	2017-18	2017-18	2017-18
Category	Events	Male	Female	Other	Total	Events	Male	Female	Other	Total
Community Activities	71	723	1,030		1,753	45	149	297	4	450
Kiosks	53	1,010	1,252	4	2,266	28	303	271	15	589
In-School Prevention Activities	78	998	948		1,946	21	356	266	9	631
Workshops/ Trainings	14	280	149		429	25	139	185	12	336
Total	216	3,011	3,379	4	6,394	119	947	1,019	40	2,006



Veterans breakfast, part of Spirit of Wellness.



Á:se Tahonatehiaróntie at the free community dinner.



Spirit of Wellness family painting night.



Presentation on marijuana by Prevention Services.



Family social singing night at the Mohawk Trail Longhouse.



FASD sponsored table at the opening of the splash pad.



Family game night, part of Violence Prevention promotion.



At the Onake Paddling Club for family paddling night.



Wapikoni Cinema on Wheels tour at the Whitehouse.



Sexapalooza at the Kahnawà:ke Survival School.



Spirit of Wellness opening.



Parents Day at the Family and Wellness Center.

Support Services provides a multi-disciplinary team approach to assist community members in acquiring quality intervention services in the following areas: Intake, Psychological Services, Addictions Response Services, Youth Protection and Youth Criminal Justice Services. In addition, our Tsi Ionteksa'tanonhnha Extended Family Foster Care Program and Case Aide Program secures appropriate foster homes to assist families in need, and provides support to the foster parents and clients.

With the assistance and collaboration of the Kahnawà:ke Peacekeeper's, and other critical partners, we provide after-hours emergency response services for social emergency situations that occur within the community on a 24-hour, 365-day-per-year basis. The ultimate focus of our work is to empower clients to take control of their lives and strive for healthier lifestyles.

Beginning in 2015–2016 and continuing into 2018–2019, the goals and objectives of the KSCS Strategic Plan have been the guiding principle towards improving our services and building a more collaborative relationship with our stakeholders.

This year was not without its challenges. The new manager, Cheryl Zacharie, transitioned into the position while managing staff shortages and ensuring there were plans to address the legalization of cannabis and the introduction of video lottery terminals in the community.

In the area of Psychological Services, the focus has been on designing and implementing a comprehensive assessment of priority needs in mental wellness, engaging the effectiveness and efficacy of processes, and emphasizing a client-centred approach with practices embedded in positive psychology. A trend analysis for referrals to psychological services was carried out to better understand client needs. Results continue to reflect that there are three times as many female versus male clients seeking services. Top reasons for referral this year have been:

FEMALES	MALES
Depression / Anxiety	Behavioral Problems (children / teens)
Sexual abuse	Depression / Anxiety
Self Esteem	Marital Difficulties
Post-Traumatic Stress Disorder (PTSD)	Anger Management

The Addictions Response Services (ARS) team continues to help individuals to break free from addictions and learn new ways of coping. This year, the team focused on a more comprehensive and integrated partnership approach to address the abuse of prescribed and non-prescribed medications. ARS successfully organized a gathering of doctors, nurses, pharmacists, psychosocial support workers, and other key invitees, to look at partnering on strategies to raise awareness at the community level regarding this issue. The team accomplished the following:

- Secured training for front line workers to understanding overdoses and safely administering Naloxone, an antidote used to reverse the effects of opioid overdose
- Maintained an active and integral role (Chair) on the Opioid and Prescription Drug Abuse Task force to monitor the impact of the drug use trend in the community.



MANAGER
CHERYL ZACHARIE



- Created a support group for clients with opioid addiction that integrates conventional and traditional approaches to recovery.
- Active involvement with the Regional Working Group on Cannabis in an effort to help create strategies that aim at harm reduction as a possible result of the legalization of cannabis.
- Working collaboratively with the addictions prevention worker to promote health awareness in the community.

Additionally, ARS has taken proactive steps to address the possible impacts of video lottery terminals (VLTs) coming to the community by establishing a direct partnership with the chair of gambling research from Concordia University. The partnership includes support to KSCS (education, consultation and referral for gambling treatment training) to help reduce the level of harm to the community. The team is also in the process of acquiring a comprehensive drug and alcohol assessment instrument that would enhance our ability to service those in need.

On a continuous basis, the KSCS Youth Protection program deals with reports concerning situations that may place the child(ren) at risk or in danger (compromising his or her security and/or development). Causes of concern are issues with the individual or home environment that could include addictions, psychological and emotional problems, conjugal and domestic violence, neglect, sexual abuse, physical abuse, and serious behavioral problems.

Given that each situation is unique, a tailored response is put into place to address the needs of the child. The primary goal is preservation of the family by maintaining the child in his or her family of origin, however this is not always possible. When a placement outside of the child's home is needed, extended family member homes are the first choice. We are happy to report that in most situations, family members have come forward to care for the child. Other placement situations may be within a foster care home or within a group home setting. The eventual goal is reunification and strengthening of the family.

The KSCS Tsi Ionteksa'tanonhnha Foster Care Extended Family Program and the Youth Protection Program work closely together to facilitate the smoothest transition when a child must be placed outside of the home. This past year, Tsi Ionteksa'tanonhnha Foster Care has focused on recruiting and increasing the number of foster homes available in Kahnawà:ke. Six new families came forward to apply to be a foster home this year. Of these six, one family respectfully requested their application be put on hold, two fostered for a short duration but are unable to continue at this time, one home was closed, and two homes are currently caring for children.

Each foster home is reviewed to assess their strengths and is offered specific trainings to build on those strengths and enhance the knowledge and capacity of the home. Over the last year, trainings offered have included topics such as intergenerational trauma, attachment, understanding youth protection, drug and alcohol addictions, FAE/FASD and other neuro-behavioral conditions. Trainings have been well attended and received by our foster parents. Foster home recruitment (via media, poster, articles and presentations) will be a continuous effort throughout the year to ensure we have homes available.

With regards to Youth Protection and Youth Criminal Justice Act (YCJA) services, KSCS has been working towards taking charge of the responsibilities normally assigned to the Director of Youth Protection (DYP) under the Quebec Youth Protection Act, as well as those responsibilities normally assigned to the Provincial Director (DP) under the YCJA, both external bodies to the community. The work towards building a Kahnawà:ke Youth Protection Program with our own directorate will allow us to shift our procedures and adapt the application of social service interventions to the realities of the community in a more culturally appropriate way. Ultimately, this will allow Kahnawà:ke to exercise its full authority and independence.

SUPPORT SERVICES — CASE AIDES

Total Participants		
	2016-17	2017-18
Supervised Visits	163	371
Transports	1,282	1,221

SUPPORT SERVICES

Total Participants								
	2016-17	2016-17	2016-17	2016-17	2017-18	2017-18	2017-18	2017-18
	Male	Female	Other	Total	Male	Female	Other	Total
Addictions Response Services	111	96		207	65	74		139
Brief Services	37	48		85	34	49		83
Case Aides	27	23		50	33	34		67
Foster Care	26	19	1	46	23	19		42
Ineligible	5	11		16	8	12		20
Psychological Services	27	59		86	58	128		186
Youth Criminal Justice Act	10	7		17	8	5		13
Youth Protection Services	128	128		256	107	97		204
Total	371	391	1	763	336	418		754



Raising awareness about the Tsi Ionteksa'ainonhnha Foster Care Extended Family Program in the lobby of the Services building.

Support worker raising awareness and opening dialogue about and for trans youth at the Sexapalooza event at the Kahnawà:ke Survival School.



Organizational Support Services (OSS)

The OSS team works within the main KSCS building. The team has grown over the years and includes Human Resources, Payroll, Communications, Information Technologies, Organizational Strategic Development, KSCS Administration (main office building) and Research and Data Systems.

This past year, the OSS team began working on and drafting our own plan while building our team and aligning our services with the strategic plan. For OSS, our clients are KSCS service areas. The draft OSS plan amalgamated common goals and objectives from the plans of each service area. This process uses a collaborative multidisciplinary approach that better supports KSCS and our staff.

The draft was shared with Managers and work began on several key objectives. Even though the team was challenged with managing staff shortages and supporting co-workers during leaves, the teams have been able to accomplish several key objectives and projects within KSCS this year.



MANAGER

**WENDY WALKER-
PHILLIPS**

ON LEAVE: OCTOBER FOR THE
BALANCE OF THE FISCAL YEAR

INTERIM MANAGER:
SUSIE DIABO

HUMAN RESOURCES (HR)

Human Resources continued to work towards achieving our objectives while maintaining a high level of quality services in all areas of HR management.

HR is pleased to report that the revised Personnel Policy was approved by the Board of Directors and implemented on October 2017. The team worked tirelessly to ensure all of the preparations, training and launch of the revised Personnel Policy went as smoothly as possible. Research has begun on considering what other formal policy review processes exist that could be adapted/used for documenting and tracking revisions and amendments.

Recruitment efforts once again kept the HR department busy this year. We welcomed several new employees to the kscs family and also said goodbye to longstanding employees as they entered their retirement. Recruitment is a strategic priority that HR has identified as needing to be reviewed and assessed. HR, in collaboration with the OSS team leaders, has begun work to review and streamline the process — from recruitment, hiring, and orientation to disengagement — to be as efficient and effective as possible.

HR STATISTICS

Recruitment Processes	2016-2017	2017-2018
Positions Posted	41	36
Applications Processed/Interviews	128	76
New Hires/Orientations Conducted	33	26
Departures	28 (14 regular, 14 end of contract)	18
Summer Students	5	5
Stage Students	7	8
Total Number of Employees	189	192
Benefit Management	2,016	2017-2018
Total Leaves of Absence*	40	45



HR STATISTICS

Employee Assistance Usage

19

14

*Includes short-term and long-term medical leaves, leaves of absence, maternity/paternity, and on the job injuries.

Employee Turnover

HR is pleased to report that the number of departures decreased from last year; five of which can be attributed to retirement.

PAYROLL

The Payroll team continued to work diligently administering the activities relating to payroll and benefits for approximately 190 staff on a weekly basis. Their work included control procedures to ensure the accuracy of wages, benefits, and deductions, as well as developing, implementing and monitoring of the internal audit and government reporting.

The HR team continues to be an active member of the Kahnawà:ke Human Resource Network with our community partners by sharing resources and advice with all of the participating organizations within Kahnawà:ke's Executive Director's Committee (EDC).

ORGANIZATIONAL STRATEGIC DEVELOPMENT (OSD)

This year OSD focused on providing in-house consultation services as well as support to the services/programs of KSCS. The OSD team continued to volunteer on various boards and committees both internal and external to the organization. This helps us to ensure that we remain connected and up-to-date on trends, issues and needs. Below is a listing of OSD projects and activities for the 2017-2018 fiscal year.

Strategic Planning Global Needs

- Assisted internal supportive service teams to develop and review objectives and goals
- Consulted managers on their strategic planning support needs and provided resources
- Provided presentation on strategic plan update at KSCS "All Staff" meeting
- Produced quarterly strategic plan updates for board, staff and community
- Researched, created and adapted planning/project management tools for internal use
- Created resource directory for management (KLT)
- Secured translation of key pieces of the strategic plan to Kanien'keha and advocated/supported for language use at various levels.

Internal Projects

Evaluation was a common request this past year. OSD provided support to various service areas by coaching on processes, providing technical assistance, creating/editing tools and implementing surveys with staff capacity building in mind.

- Assisted in Child and Family Services (CFS) Reform process community consultation and provided final report.
- Evaluated internal meeting processes within Prevention and Support

cont.

- Advised and assisted in the Case Aide evaluation, Spirit of Wellness month evaluation and development of the Tsi Niionkwarihò:ten survey (all used Survey Monkey)
- Evaluation of internal activities such as Pictures with Santa, Social Committee activities, etc.
- Worked with internal Steering Committee to create Terms of Reference for Workplace Assessment and follow-up activities.

Human Resource Training and Development

- Co-facilitated and delivered Applied Suicide Intervention Skills Training (ASIST) workshop to community organization.
- Delivered two-day intervention training to ALS frontline staff
- Coordinated CPR, First Aid and AED training for KSCS staff requiring certification

OSD assisted with research projects including a review of commonly-used processes for amending policies, a report on a Cultural Orientation Process for KSCS, and began a major research project on KSCS move towards accreditation.

COMMUNICATIONS AND INFORMATION SYSTEMS

One of the main objectives of the Strategic Plan is to enhance the use of IT and communications technologies. The team worked to improve the organization's communications technologies and provide access of these technologies to the staff. Simultaneously work involved providing communications and IT assistance and support both internally and externally to the community and our partners.

Two of the major developments this past year have been the implementation and transition to the VOIP (Voice over Internet Protocol) telephone system and launch of the KSCS Facebook page. The access to social media is our newest channel for disseminating information to the community especially for Prevention programming.

Community networking continues to be a high priority for the team as we navigate through the ever changing environment of communications and IT. Both areas of the team have actively participated with our partners to improve our use and access to new technologies that we have become involved with.

COMMUNICATION STATISTICS

Activity	2016-2017	2017-2018
TV Commercials	3	
Facebook Posts (as of March 2018)		9
Workshops Recorded for Lending Library	13	14
Newspaper Ads	96	100
Newspaper Community Notes	12	19
Radio Talk Shows	17	16
Radio Commercials	17	6
Radio PSA's	34	41
Website Updates	231	310
Weekly Bulletins	50	50

COMMUNICATION STATISTICS

Activity	2016-2017	2017-2018
Requests for Assistance	250	288
Aionkwatakari:teke Issues*	6*	6**
KSCS Insider	15	15

* 6 publications with 76 articles covering the following health issues: Addictions 7, Violence 8, Mental Health 29, Parenting 11, Teen issues 9, Physical Health and Diabetes 10, and Environment 2

**6 publications with 118 articles covering the following health issues: Addictions 12, Violence 10, Mental Health 32, Parenting 11, Teen Issues 27, Physical Health and Diabetes 16, Environment 10

ADMINISTRATION SERVICES

Administration services continues to support all departments within KSCS. This year Karen Zachary transitioned from Prevention and Support Services to OSS Administrative Services.

This move was part of the restructuring for administration services to help align the work load to best meet the needs of our clients. Our administration team currently has five (5) full time staff and six (6) sporadic employees that help to support staff and clients.

The Team Leader's role was also enhanced over the last year, through the merging of administration and reception services, and allowing focus on developing processes to improve and gauge employee and client satisfaction as identified in the Strategic Plan.

RECEPTION SERVICES

Our main reception is in the process of being renovated to better meet the needs of our clients/community and staff. A new waiting room is being constructed to help create a more comfortable atmosphere for the clients/community and visitors. Between our daytime and evening services (weekends when required) KSCS has welcomed almost four thousand clients and 120 different groups in the last year.

Reception also bid farewell to a longstanding employee, Marlene Zachary, who retired from her position after thirty (30) years of service with KSCS. Skasennati Bik and Donja Phillips are the new faces of daytime reception at the main office.

DATA/INFORMATION MANAGEMENT

This year saw the migration to a new case management software program for KSCS. Penelope, the new program, is a web-based program that allows for more KSCS user access. This project is a huge endeavor that will continue into this year with building on the program and adding in new services.

The transition from the old-to-new case management program also entailed a major purge of Prevention and Support client files. Over 400 old client files were purged and destroyed as per KSCS' Retention Policy.



An abstract graphic of a hand, rendered with a vibrant rainbow gradient from green at the fingers to red and orange at the palm, transitioning into purple and blue at the wrist. The hand is positioned diagonally across the page, with the fingers pointing towards the top left and the wrist towards the bottom right. The background is white.

OUR VISION

Kahnawà:ke Shakotiià'takehnhas Community Services strives for a strong collective future for Kahnawà:ke by promoting and supporting a healthy family unit.

MISSION STATEMENT

KSCS's mission is to encourage and support a healthy lifestyle by engaging with community through activities that strengthen our core values of peace, respect and responsibility with the collaboration of all organizations of Kahnawà:ke.

Kahnawà:ke Shakotiià'takehnhas Community Services

P.O. Box 1440
Kahnawà:ke Mohawk Territory
via Quebec, J0L 1B0
Tel: 450-632-6880
Fax: 450-632-5116
Web: www.kscs.ca

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Credits 2017–2018 Annual Report Production Team:

Doug Lahache, Tyson Phillips, and Marie David

Proofreaders: Winnie Taylor and Andrea Brisbois?

Author: Derek Montour

Team Leader of Communications: Doug Lahache

Editing, Layout and Graphics: Marie David