



KSCS STRATEGIC PLAN (2016-2019) 2nd UPDATE REPORT

June 2017 (covering February 2017 to June 2017)

ABOUT THIS REPORT

The purpose of this report is to provide a progress update on the implementation of our strategic plan.

The chart on the right provides not only a snapshot of the overall plan but a reminder as well.

KSCS will provide quarterly updates to our Board of Directors, staff and community on the progress we are making in each area of service.

Status reporting will be made on each of the objectives and individual goals identified for each of the service areas.

This document provides a more detailed narrative of work happening in each area as well as the highlights and challenges being faced as we work towards accomplishing our mission and vision.

KAHNAWAKE SHAKOTIIA'TAKEHNHAS COMMUNITY SERVICES STRATEGIC PLAN 2016-2019

OUR VISION

KSCS strives for a strong collective future for Kahnawà:ke by promoting and supporting a healthy family unit.

OUR MISSION

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

CORNERSTONES OF INTEGRITY

These are the core principles that describe our organizational culture, help to determine our priorities and guide how we conduct ourselves in our daily work.

RESPECT

RESPONSIBILITY

TRUST

COMMITMENT

OUR THREE GUIDING STRATEGIC OBJECTIVES

"EMPOWERING KAHNAWA'KEHRÓ:NON FOR HEALTHY AND FULFILLING KANIEŃ'KEHÁ:KA LIVES..."

The number one strategic focus of the plan is to help empower Kahnawa'kehró:non individuals and families to take control of their lives. Client "helpfulness" will be one of the primary indicators of success. Also recognized is the importance of strengthened families (kahwá:tsire) as the strategic core of all programming and services. Strong, healthy kahwá:tsire requires a strategic focus on children, youth and young parents based within our culture.

STRATEGIC OBJECTIVE I

Be fully client-centered & client-driven
Re-focus on Kahnawa'kehró:non and their families as the single most important stakeholder

- ❖ Improve our knowledge and understanding of our clients: engage them directly in evaluations (Client Helpfulness Indicators) and setting priority needs.
- ❖ Strengthen and normalize strong kahwá:tsire, by empowering and engaging our people to undertake fulfilling lives and healthy lifestyles.
- ❖ Focus much more on the positive and personal fulfillment: help people see, appreciate and build on their capabilities and fulfill their potential. Help others see it also.
- ❖ Re-assess / adjust our programming on a timely basis to better meet changing needs.
- ❖ Enhance our service, especially the KSCS user-friendly one stop approach.
- ❖ Address stigma and fear: provide a safe, secure space (we partner with Kahnawa'kehró:non to help them empower themselves).

STRATEGIC OBJECTIVE II

Enhance community engagement & community-based partnerships

- ❖ Actively engage the community as a key agent for positive change.
- ❖ Continue to expand and strengthen KSCS's productive partnerships within our teams, our community and beyond.

STRATEGIC OBJECTIVE III

Foster & accelerate active Kanien'kehá:ka ways of doing things, including more use of our language

- ❖ Strengthen our understanding of our Kanien'kehá:ka ways, language and culture.
- ❖ Incorporate Kanien'kehá:ka ways in everything we do. This means increasing the use of our language and culture in everyday living and in the standard practices of our services.



OUR SERVICES

PREVENTION SERVICES

- Primary Prevention;*
- Onkwanèn:ra
 - Teen Group
 - Drama
- Secondary Prevention;*
- Support Counsellors
 - Family & Wellness Center;
 - Parenting Program
 - Traditional Services
 - Where the Creek Runs Clearer
 - Satatenikonrarak... and several related services for each area.

SUPPORT SERVICES

- Intake Services
- Addictions Response Services
- Youth Protection Services & Youth Criminal Justice Assistance Services
- Psychological Services
- Youth Protection Services
- Emergency Response Services, including "on-call"
- Foster Care & Case Aide Services

ASSISTED LIVING SERVICES FOR ELDERS & SPECIAL PEOPLE

- Family Support & Resources
- Life Skills Support
- Young Adults Program
- Independent Living Centre (12 beds)
- Clinical Services & Support ... and several related programs, e.g. Teen Social Club.

HOME AND COMMUNITY CARE SERVICES

- Adult & Elders' Support Services & Programs
- Home Care Services
- Home Care Nursing
- Turtle Bay Elders' Lodge (25 beds)
- A'nówara'hne (The Sixplex)
- HCCS Activity Program (Respite & Social Programming)
- Meals on Wheels

ENVIRONMENTAL HEALTH SERVICES

- Water Quality Monitoring
- Waste Disposal
- Food Safety Inspections
- Health Hazard Investigations
- Indoor Air Quality/Mold Investigations
- Communicable Disease Interventions
- Building Safety (Private & Public)
- Occupational Health & Safety
- Emergency Preparedness

KSCS internal services required to support the service delivery teams are; ORGANIZATIONAL SUPPORT SERVICES, FACILITIES MANAGEMENT and FINANCIAL SERVICES.

COLOR CODING

KSCS will use color coding to provide at-a-glance information about how we are moving forward. Here is a description of what the following colors mean in this status report.

GREEN	Goal/objective proceeding as scheduled.	Goal/Objective is moving well and is on track to meet the projected dates. Item is within budget. The required resources are approved and in place. Everything is fine and in control.
YELLOW	Goal/objective slightly delayed however proceeding.	Goal/Objective is moving but somewhat off track and/or some control has been lost. The item could be at risk so is being managed cautiously. There are potential issues with schedule, budget or resource approvals/ access, but likely can be saved and put on track with corrective actions. Attention required but we believe we can still be successful.
RED	Goal/Objective has met a major challenge and will not meet its projected dates.	Goal/objective is not moving and cannot be accomplished in the present state. More than likely we will miss the desired dates. Issues/challenges have surfaced with schedule, budget, or scope of work and we do not believe we can deliver 100% successfully. Review and revisions are necessary. Requires management action to get back on track.
BLUE	Goal/Objective Completed	Goal/objective has been accomplished and is considered complete.

Note for update reporting:

- Goals flagged as **green** do not necessarily stay green forever. The colors can change as the environment changes and impacts the work we planned to do. Green items are not elaborated on at KSCS Leadership Team (KLT) updates, unless to celebrate major accomplishments.
- For goals flagged as **yellow**, the cause of the problem(s) and what's being done to correct it should be stated in the update. For most updates don't be surprised if yellow is the predominant color.
- For goals flagged as **red**, these will need management intervention and follow up. The issues process outlined in "Implementation of Plan" should be followed.

ORGANIZATIONAL OBJECTIVES

Organizational objectives are the planned improvements and major changes KSCS will undertake *in the ways we do things as an organization*, which we *must* do if we are to achieve our strategic objectives, with the primary focus on the empowerment and success of our clients. Each of the objectives are overseen by the Executive Director. Some specific objectives have been assigned to individual managers to oversee with the agreement that ultimately each service area is responsible to incorporate these into their plans. More details such as the rationale and purpose can be found in the larger Strategic Plan Document on page 28.

KSCS SERVICE DELIVERY TEAM UPDATES & SUPPORTIVE SERVICE TEAM UPDATES

Following the organizational Objectives section updates, the Manager of each service area has provided key highlights or challenges for their team's strategic objectives. Each of the goals under the objectives are given an "at-a glance" color code and brief explanation of progress.



KSCS ORGANIZATIONAL OBJECTIVES UPDATES

KSCS Executive Director~ Derek Montour

SO 1: Assure KSCS has healthy and qualified staff		
1.1	Commit to and provide for a healthy and balanced quality of working life for all KSCS Staff. Each service area to submit its specific plan by no later than April 2017.	The KSCS Social Committee plays a major role within this goal and recently has a new and improved mandate. Created its own plan. Further details included in OSS update.
1.2	<i>In collaboration with HR</i> , assess the skills requirements to meet the plan priorities and implement timely and systematic training, with an updated Training Plan completed for each unit by April 2017.	Training plan completion date needs to be revised. Work has been progressing in this area, see OSS update.
1.3	Develop an effective recruitment and retention strategy to obtain employees with the skills to meet the specialized requirements of some parts of the plan, e.g. Director of Youth Protection, Psychologists, by December 2016.	Work has been progressing, see OSS update which identifies work being done in this area. The date specified in this goal needs revision in particular with the specialized areas.
SO 2: Enhance the organizational structure and work processes to deal with change		
2.1	Re-organize our structure and processes to provide best possible services to Kahnawa'kehró:non, by April 2018.	An internal reorganization has taken place to better streamline services both internally and externally, this is a work in progress and based on evaluation may require further organizing.
2.2	Develop and implement a planned approach to deal with the changing work focus and re-organization in a constructive and fair manner, by January 2018.	An improved salary compensation plan for KSCS was approved by the board and implemented.

ORGANIZATIONAL OBJECTIVES continued

SO 3: Develop, organize and use valid, up-to-date data		
3.1	Get valid and timely client data.	Working with our partners to accomplish this objective. Completed deleting old files in preparation for implementation of new case manager software "Penelope". This project overseen by Blair Armstrong, is progressing very well, Penelope likely to be implemented by September. Community Health Plan is being updated using current logic models. Health Canada evaluated our annual report, KSCS awaiting a template for future reports. Annual report process being reviewed.
3.2	Develop valid Key Performance Indicators (KPI's) by April 2017.	Organization Strategic Development Services (OSD) to work individually with managers to support their development of KPI's for the strategic plan (what does success look like). Work to begin in fall but dependent on availability of valid and up to date data. Target date needs revision.

SO 4: Enhance use of IT and COMMUNICATIONS technologies to improve client services and follow-up		
4.1	Information Technology (IT) Each KSCS unit will meet with IT Services to identify and prioritize their requirements for IT support, and finalize their action plans by December 2016.	Consultation completed for both goals. Needs have been identified and prioritized. Future work required for 4.1 & 4.2 tasks have been incorporated into the larger OSS Plan and will be an on-going process.
4.2	Communications: Each KSCS unit will meet with Communications Services to identify and prioritize their requirements for effective communications technologies and finalize their action plans by December 2016.	

SO 5: Obtain the funding required to support the full implementation of the plan		
5.1	Each KSCS service will develop a budget and capital plan by January 2017.	Finance worked with every department to develop a basic annual budget for their main components for this fiscal year (ending March 2018), this was presented to Board and approved. Facility Management Services created a capital plan that was presented to Board and approved. The next task is to develop and implement a rolling three (3) year budget process with management.

SO 6: Advocate for and obtain better access to critical services in the English language e.g. Institutional care, detox		
6.1	<i>In development</i>	The organization is maintaining its current partnerships with English speaking services and communities. ED has been a member of the Coalition of English Speaking First Nation Communities in Quebec which focuses on matters relating to access issues. The group completed a three year work plan.

ORGANIZATIONAL OBJECTIVES continued

SO 7: Strengthen our partnerships within our teams, our community and beyond.	
7.1 <i>In development</i>	<p>No specific goals have been created yet however work has been proceeding at all levels within the organization.</p> <p>ED re-established management meetings in June. ED involved with supporting the Kahnawake Collective Impact process, KSCS staff were encouraged to attend major meeting held in May. External to Kahnawake-ED participates at the Regional Round Table meetings, Continuity of Care, first line services, chairs the FNQLHSSC Board of Directors, and is a member of National Advisory Committee (attends as an alternate for QC) that focuses on Child and Family Services.</p>
SO 8: Incorporate Kanien'kehá:ka ways, language and culture in everything we do.	
8.1 <i>In development</i>	<p>This objective has been assigned to Tsi Niionkwarihò:ten Coordinator (Mary McComber hired in June 2017) to ensure movement and track progress made within the organization.</p> <p>Work identified for this area can be found within the full Strategic Plan- progress will be reported on in the next quarterly report.</p>



KSCS SERVICE DELIVERY TEAM UPDATES

PREVENTION SERVICES

Terry Young, Manager

SO 1: Know our clients potential and their priority needs		<p>Highlight: Staff are having discussions about what assessment of priorities looks like. Changes were made to summer programs registration and selection criteria. The process will be reviewed for next year's applications.</p> <p>Challenge: Making the shift from old ways of evaluating a session (how did you like the activity) to assessing client potential and determining impact of our work. A global client consultation is needed for KSCS, we are waiting to work in partnership with other areas on this.</p>
1.1	Complete the analysis of internal evaluation by April 2017, and revise programming and services to address the major gaps by May 2017.	Same as first quarter: Internal evaluation completed, need to finalize report and share with staff for next steps on how to adjust programming. The timeframe for revising programming and services to address gaps will likely need to be extended.
1.2	Design and implement a consultation with clients to identify and prioritize the clients' aspirations/expectations for achieving fulfillment, clients' priority needs and clients' evaluation of our programs and services by September 2017.	Same as first quarter: Discussion has been happening about what this can look like and the preferred style of focus groups to invite feedback. Now must get the teams involved. Nothing has been put into action yet. Tied to the plans for a global client evaluation tool for KSCS services.
1.3	Design and implement "client helpfulness indicator" (CHI) for April 2017.	Same as first quarter: This cannot be completed within the timeframe outlined due to other priorities. No movement on tool design. Needs to be restructured with a new timeline.

SO 2: Ensure our children & youth receive a healthy, positive start		<p>Challenge: Change management. It will be important to increase dialogue with staff on how we adjust our services.</p>
2.1	Evaluate and address the program gap for 5 year olds, by April 1, 2017.	Staff have been brainstorming and partnering to provide well thought out summer programming especially focusing on the 5 year olds. Hoped to have programming for summer 2017, unfortunately unable to put services in place.
2.2	Enhance summer programs to ensure full access for all youth, regardless of family income, by April 2017.	Same as first quarter: Meetings being held to explore options and make sure we are learning from past experiences (processes that did not go as intended and missed the mark). Looking into what our summer programs are really doing and what we need them to do. Ex. exploring a referral based Onkwanenra.
2.3	In partnership with education and the schools, enhance our prevention (healthy lifestyle) team activities in the schools, by September 2017.	Same as first quarter: In school planning team now includes Youth Protection staff. Have increased presence in Kahnawake schools. We are now providing prevention programming in new school, at Billings in Chateaugay. Working on a Memorandum Of Understanding with the Kahnawake Youth Center to partner and share resources. KSCS prevention has ability to financially support certain partner's activities that encourage healthy lifestyles. Exploring building partnerships beyond Kahnawake (i.e. YMCA, Native Friendship Center).

PREVENTION SERVICES continued

SO 3: Empower healthy Kanien'kehá:ka families		Challenge: we do not currently have the resource people with skills and time to dedicate to moving certain goals forward.
3.1	Establish the Family Preservation Unit, with full programming, starting no later than September 2017.	The Family Preservation Coordinator position was re-posted, causing some delay, however a successful candidate was selected. Stephanie Horne began her new role on July 24, 2017.
3.2	Enhance our "one-stop" service model to assure that any client in need will receive timely help from qualified personnel, by December 2017.	Same as first quarter: Have not moved much on this. Ideas have been discussed. Small evaluations have been conducted. Possibly looking at streamlining the intake and status table. The timeframe is not realistic and needs to be adjusted.
3.3	Improve our understanding, appreciation and use of the cultural values and ways of empowered and healthy Kanien'kehá:ka families, including in our work practices, by June 2018.	Same as first quarter: More responsibility given to prevention Team Leaders to ensure discussions are held to think about how our services are fostering healthy families and what more/alternatives we can do. They work in partnership with the KMHC traditional medicine component to build on what they know and can do.

SO 4: Optimize partnerships to meet client needs		Highlight: A lot of partnering is happening. We see this throughout the other objectives above.
4.1	Conduct our annual partner's consultation by February 2017, and incorporate major improvement for April 2017.	Same as first quarter: Plan to do this however the timelines need to be adjusted. It will take more time to develop a system for partner consultation.

SO 5: Incorporate 'tsi niionkwarihò:ten' (our ways).		Highlights: We have been incorporating more language and culture within our programming. We now have a Tsi Niionkwarihò:ten coordinator.
5.1	Incorporate Tsi Niionkwarihò:ten in all our programming & services and in our internal; practices, by April 2018.	Same as first quarter: Teams encouraged to use more Kanienkeha in day to day. Actively looking at ways of doing this. Prevention team members sit at the traditional approaches subcommittee and weaving science and traditions committee. Mary McComber began her new role as Tsi Niionkwarihotens coordinator in May 15, 2017.



KSCS SERVICE DELIVERY TEAM UPDATES

SUPPORT SERVICES

Kathy Jacobs, Manager

SO 1: Empower Kahnawa'kehró:non (individuals and families) to take control of their lives		Highlight: The goal/objective's progression is not as we had hoped, however in the past 1.5 years, 3 following consultative processes were implemented and the information we received will be very useful in designing questions for community/client surveys or questionnaires: 1. All Staff Follow Up Consultation Report (use of new funding) 2. The McGill Research Project: "KSCS A First Nations Model of Child Welfare Practice" 3. The FNCFS Reform consultation (Kahnawake Report)
1.1	Design and implement a systematic process to consult with clients on a regular basis to identify their priority needs and obtain their timely assessment of the quality of our services, by April 2019.	All three (3) reports cited above will assist KSCS in one form or another in moving forward with SO1. The target date to reach this goal has been adjusted to a realistic time frame.
SO 2: Improve healthy Kanien'keha:ka development options for youth		Highlight: Discussions at the professional table to seek ways of getting client approvals to allow caseworkers to seek relatives/families first to assist when a child is in need, instead of placement in foster care/no relation. Challenge: Is still a challenge to find homes that can provide care to those clients who have special needs/requirements.
2.1	Recruit & train minimum 10 skilled/qualified foster homes in the community by September 2018.	Recruitment: family members have stepped forward to assist their relatives in need (aunts, etc.). 1 new foster home in the community has been secured in the last 3 months.
2.2	Significantly enhance effective support for youth 18 years who are transitioning out of foster care to capable independent living, by April 2018.	Same as first quarter: Research being conducted on other foster care resources, set up and funding for special supports for youth in transition out of care. This was removed from budget for next fiscal year but is still important. Hope resources can be directed to this area for the following year.
2.3	Improve support for our youth in institutions outside the community (e.g. Batshaw), by April 2018.	Same as first quarter: Research being conducted on services and access i.e. if they can see a psychologist or if transportation is covered. Concern that First Nations children are treated differently and expected to use non-insured benefits to meet their needs (assumption that there is more money for a FN youth), reality, Kahnawake has more constraints, for ex. we do not have set funding for Case Aids.

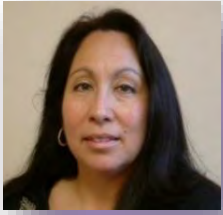
SUPPORT SERVICES continued

<p>SO 3: Enhance the effectiveness of our youth protection, the Kanien'keha:ka way</p>		<p>Highlight: The 3rd Core RUJI (Reseau Universitaire Integre Jeunesse) Manager and Supervisors in a Child Welfare Setting. The Supervisory Capacity Building has been well received by all and is being put into practice. This training has also served as a "Team Building" strategy in Support & Prevention Services to assist in truly working together as a team while building on their administrative/management skills</p> <p>Challenge: Change within the supervisory team has caused challenges, however progress is noted on a daily basis.</p>
<p>3.1</p>	<p>Establish our Kahnawà:ke Youth Protection Directorate by no later than September 2017, with final approval of the plan by the MCK no later than January 2018.</p>	<p>Same as first quarter: Moving forward but very slowly, much is in the hands of the government. Need to document the chronology of events in relation to the YP Directorate. Many action steps must be further elaborated on in preparation for a future YP Directorate.</p> <p>KSCS currently reviewing and upgrading a number of manners of practice in the administration.</p> <ul style="list-style-type: none"> - The new case manager system "Penelope" is moving forward very well with a few members from Support Services on the Working Group. This will help support how we manage our case files while respecting the current legislation we work under, also getting ourselves ready for file audits when called upon, and being able to provide accurate data. - We are reviewing the process to revise and create a system that helps track the SOP's of Support Services.
<p>3.2</p>	<p>Enhance the timeliness and quality of response and support for families in need, including successful reintegration of the child back with the family, by fully implementing the Enhanced Prevention Focused Approach no later than April 2018.</p>	<p>Studies that will help to inform on this objective have been underway. Phase I: Current study with McGill looking at the community approach model. This is a follow up activity to McGill research on Kahnawake's YP numbers vs. outside norms. Phase II: Research plan underway for "KSCS A First Nations Model of Child Welfare Practice", dissertation by Jennifer Nutton, McGill University School of Social Work in partnership with KSCS. Target date to reach this goal has been adjusted.</p>
<p>SO 4: Break the recurring and normalizing pattern of addictions</p>		<p>Challenge: working with YP mandated addictions counselling.</p>
<p>4.1</p>	<p>Take the lead in implementing and coordinating a comprehensive & integrated partnership approach to address the growing problem of the abuse of prescribed & non-prescribed medications, especially pain killers, with an integrated plan approved and ready to implement by April 2019.</p>	<p>Same as first quarter: mobilization has been happening but the timelines for the action plan steps need revision. A multidisciplinary task force has been moving on addressing the opiate crisis for our community. Meetings with physicians, pharmacists and leadership are happening. Everyone is on board. With leadership involved, we anticipate moving faster. The target date to reach this goal has been adjusted.</p>
<p>4.2</p>	<p>Research and recommend implementation of new tools to address drug use (e.g. DUSI-R) Drug Use Screening Inventory by April 2017.</p>	<p>The DUSI-R be revisited by September 2017 and implemented by the target date. We hope to review our assessment tools every 3-5 years.</p>
<p>4.3</p>	<p>Secure a youth case worker for ARS to address the specific needs of youth with addictions by April 2017.</p>	<p>The additional worker in ARS who works with the youth has worked out very well; however there are challenges noted for those youth who are under YP with mandated addictions counselling recommendations. Mandates between services are to be reviewed to assist in achieving a better understanding.</p>

SO 5: Assess & upgrade our psychological services

Highlight: The Funding for NIHB criteria has changed in the 2017/2018 period to allow for all psychological request and not only those who are considered “in crisis” which in the past created limitations in our services. (awaiting the new criteria from Health Canada)

5.1	Design and implement a systematic process to consult with clients to identify their priority needs, by April 2017	Same as first quarter: No movement in these areas as the other parts required to make the necessary changes to psychological services were priority. Client consultation is a common objective and we do not want to work in isolation but rather include this as a part of the global client consultation plans for KSCS.
5.2	Complete a comprehensive review of psychological services and present recommendations.	Building partnerships and understanding are now required to assist in ensuring that the client receives the appropriate services and that a protocol between Psychological Services, Support Counsellors and the Shakotisniennens Traditional Support Counsellors and other services is respected.
5.3	Put in place a fully capable, professional psychological services by October 2019	The goal of putting in place a full Psych Team has been achieved. Capacity building and departmental development is still underway.



KSCS SERVICE DELIVERY TEAM UPDATES

ASSISTED LIVING SERVICES

Vickie Coury-Jocks, Manager

SO 1: Know and address the needs of each client & family		Challenge: ALS recently finalized a client satisfaction questionnaire to use with families and clients to provide ALS with feedback and suggestions. We were hoping to implement by this summer with the assistance of summer students however this task had to be deferred until the fall due to unexpected staff members on leave. Resources were stretched to the limit over the summer months so this task was deferred.
1.1	Find and implement an effective clinical assessment tool to enable caseworkers and families to assess needs and develop effective service plans, by April 2017.	Service plans are all on track to be reviewed and updated however ALS is still looking through new assessment tools and has not adopted a final tool at this time.
1.2	Address the current gap in proper services for children by developing an information package for special needs caregivers, by September 2017.	INAC accepted our proposal under the Disabilities Initiative and we have now contracted consultants from McGill to carry out the work of researching information and developing a high quality resource guide containing both local and outside resources available for families with special needs individuals. Through this project the consultants will also be identifying any gaps between available services on reserve vs. off reserve. In addition to our work under the Disabilities Initiative we are working with Jordan's Principle to address individual family needs through application's for equipment, resources and services. Presently two specific applications have been submitted and we are awaiting a reply. ALS will track all applications as we move forward.

SO 2: Enhance the quality of life & recognition/appreciation of each client		Highlight: We are pleased to be able to offer a wide range of activities that enhance the person's quality of life.
2.1	Foster, develop and implement more opportunities for the athletic, artistic and other kinds of personal development and excellence of our clients, with the full recognition and active support of the community (on-going).	We've secured external funding to hire someone to work with the creative and musical development for our clients. This person is trained in special needs. The fine arts programming involves music, arts and drama. We are also networking with the Special Olympics office in Chateauguay to support the athletic aspiration of our clients. Finally, we remain committed to fostering physical activity in support of our CHP through regular activities that include therapeutic horseback riding, swimming, bowling and yoga. Participants also receive cardio and weight training classes through purchased gym memberships.
2.2	Maximize the integration of the clients into community activities, including employment (on-going).	Caseworkers are actively networking with Tewatohnni'saktha. We have 4 clients who are job ready and now looking for an employer match. At this time 2 individuals participated in a short term work placement.

ASSISTED LIVING SERVICES continued

SO 3: Assure continuity of quality care for each dependant		Highlight: We've submitted a new proposal that if approved will help us to better plan for continuity of care for any potential clients.
3.1	Establish a full-time residential unit (for a minimum of 12 persons) as a planned alternative caregiver option for aging caregivers by April 2019.	Plans are in development for capital construction and expansion of ALS to accommodate the steady increase in new referrals as well as the need for the development of a residential resource for special needs individuals. In collaboration with KSCS's Facilities Manager we have identified a grant opportunity to obtain capital dollars, submission of this proposal is on track to be submitted April 2018. In addition, through the Disabilities Initiative we will work to create a true community portrait of special needs in Kahnawake with hard data to support and justify the need for additional operational dollars.
3.2	Develop and implement a viable respite capability to accommodate special needs individuals by April 2019.	Presently ALS has assisted our interested families in applying for respite dollars through the CLSC. So far all families that have expressed interest have been assessed and receive respite money from the CLSC, ALS then assists families in locating appropriate respite services. Work is on-going to identify options for on reserve respite.
SO 4: Maintain a minimum waiting list (capacity to deal with the growing number and complexity of clients)		Highlight: We have been successful in reducing our wait list from 4 to zero.
4.1	Develop & implement an ALS Personnel Plan to support this plan by January 2016.	The personnel plan is complete. It was used to negotiate another case worker and a psychoeducator (both of which will be joining our team in the new fiscal year). As we are approved based on funding, we will continue to fill identified human resource gaps.
4.2	Increase the physical capacity of the Centre to support special needs clients during the plan period & beyond, with an improved plan and funding completed before April 2018.	ALS was not eligible to apply for the grant within this fiscal year and can only submit in April 2018.
4.3	Develop an alternative funding strategy, involving all three levels of government and other partners, to support the required physical expansion & the additional staff requirements, by September 2017.	ALS is moving forward with grant proposals and the collection of hard data to create a clear community portrait on special needs in Kahnawake and through these efforts we intend to push for resources to meet the present and growing needs of this special population. However it remains to be seen how far these efforts will go and may at some point require political intervention and support. Presently, the federal government is unwilling to open negotiations just for ALS, insisting that all 10 agreements be up for renegotiation, a move which MCK has not agreed to move forward on at this time.



KSCS SERVICE DELIVERY TEAM UPDATES

HOME & COMMUNITY CARE

Mike Horn, Manager

<p>SO 1: Enhance client-centered service delivery</p>		<p>Challenge: A global client consultation/evaluation is needed for KSCS, so clients are not oversaturated with requests.</p> <p>Highlight: A new goal to be added that reflects HCCS movement under block funding.</p>
<p>1.1</p>	<p>Evaluate current services from a client perspective and making timely adjustments to programs, by June 2017.</p>	<p>Same as first quarter: Have not done any evaluation. Some data available from the recent re-accreditation process. The intent changed, originally it was to evaluate the meals on wheels service and kitchen. Now there is a global move toward gathering feedback from clients.</p> <p>The date for this to be accomplished needs revision as this does not depend only on H&CCS.</p>

<p>SO 2: Assure the dignity, autonomy and quality of life for elders</p>		<p>Highlight: there are working committees for each goal. Planning is happening for everything. The chair is responsible for keeping things moving.</p> <p>Challenge: the time for the teams to be able to focus on moving the strategic objectives. There is a lot happening on the everyday work and operational side.</p>
<p>2.1</p>	<p>Develop and fully implement a “falls response protocol” by February 2017.</p>	<p>Same as first quarter: Falls Response Protocol is fully developed and implemented in most but not all service components. Will require evaluation at a year mark. Everyone received the same training. There is feedback that the protocol is being followed.</p>
<p>2.2</p>	<p>Identify& address situations of elder abuse on an urgent basis, starting no later than September 2016.</p>	<p>Moving along very well. The elders’ abuse committee is moving on external partnerships to address older adult mistreatment. A Kahnawake campaign on the prevention of elder abuse was kicked off on June 15th- National Day of Older Adult Mistreatment Awareness. A community survey was also completed.</p>
<p>2.3</p>	<p>Enhance palliative care capability and service by May 2017.</p>	<p>Same as first quarter: Palliative care services are complimentary- there is no special funding for it. Enhancing development of a specialized team to provide care in home. The palliative care committee is moving on planning the steps.</p>



KSCS SERVICE DELIVERY TEAM UPDATES

ENVIRONMENTAL HEALTH SERVICES

Donald Gilbert, Team Leader

SO 1. Enhance client-centered service delivery		Challenge: We've lost our Environmental Health Officer (EHO), Karen Padda, who has moved to Toronto. The position for a new EHO has been posted.
1.1	Revisit current water quality monitoring schedule and increase frequency of bacteriological and basic chemical analysis if necessary.	Generating active participation from our target audience. While the weather permits, we have been using a 'door-to-door' approach that seems to be more successful.
1.2	Determine if annual inspections of high risk facilities is satisfactory or should be increased.	Inspections are being conducted with full cooperation of identified facilities.
1.3	In partnership with Kahnawake Environment Protection Office, Health Canada and INAC participate in a groundwater monitoring project on properties in proximity to former dumpsites in Kahnawake.	This project will be conducted solely by the Kahnawake Environmental Protection Office. No further reporting will be necessary.
SO 2: Seek necessary funding to operate within the Strategic Objectives		Highlight: Increase in funding for our services.
2.1	Negotiate with Health Canada to increase funding to perform additional water quality monitoring activities and associated materials.	On July 6 th , 2017 we have been informed that an amendment to our contribution agreement will include an additional \$15,000 for water quality monitoring.

KSCS SUPPORTIVE SERVICE TEAM UPDATES



ORGANIZATION SUPPORT SERVICES

Wendy Walker, Manager

The OSS team includes Human Resources, Payroll, Administration, Communications, IT, and Organizational Strategic Development. Each area with the exception of Admin had created and developed their own strategic plans. The large OSS team consolidated all of the objectives and goals based on commonalities within each plan and redefined them into the OSS plan. The OSS Plan is completed and has been shared with managers.

SO 1. Assist in the assurance that KSCS has healthy and qualified staff using a holistic approach.		
1.1	Ensure the KSCS Social Committee plans activities that support staff wellness, using a holistic approach.	Annual planning & calendar of social events completed, using staff input. Holistic approach to activities focus on Mind, Body, Spirit & Heart. First activities will be evaluated. Meetings with Tsi Niionkwarihò:ten taking place to develop joint collaboration.
1.2	Review and revise the current recruitment process at KSCS by March 31, 2018.	Existing recruitment processes identified; team leaders to review and eliminate gaps & overlaps to ensure an efficient & streamlined process.
1.3	Enhance staff wellness by becoming more strategic and proactive in supporting employee management of a healthy and balanced life	Staff satisfaction survey conducted regarding group health insurance. HR is identifying data sources to gather data from in order to plan wellness /prevention activities.
1.4	Create a KSCS Training and Development process & plan by April 2019	Staff training & development needs were gathered from performance assessments. OSS will plan in-house group trainings based on staff requirements. This will evolve into a full training plan.
1.5	Ensure OSS staff are healthy and qualified in order for us to be able to support and provide the best service to KSCS	OSS team validation and team activities is an ongoing agenda item at staff meetings. Working to develop a code of ethics and conduct for OSS staff.

SO 2. Ensure OSS provides skills, resources, opportunities and accountability processes that will empower KSCS staff, and will contribute to their competence and satisfaction.		
2.1	Support employee coaching for performance, using existing PMP practices to support employees in achieving their goals.	Ongoing one-on-one advice; formalizing a work plan to provide ongoing training and support to ensure consistent performance management.
2.2	Develop and provide HR database access and training.	Training for all team leaders was completed May 31 st and all team leaders now have access to their employees' file on the database.
2.3	Create an electronic user friendly OSS Resource library (include policies, directives, benefits etc.)	IT developing infrastructure and by end of November 2017 will have a centralized server in place. OSS working on collecting resources to upload to the resource library, and developing archival framework.
2.4	Provide support and guidance to KSCS management in implementing strategies	OSD has been facilitating the KLT's reporting of strategic plan. Providing ongoing support.

ORGANIZATION SUPPORT SERVICES continued

SO 3. Evaluate OSS services and adjust based on client needs by March 2019.		
3.1	Consult staff and management for feedback on OSS service areas by March 2018.	Survey for service feedback to be developed by February 2018.
3.2	Adjust services to better meet the needs of KSCS by March 2019	KSCS telephone system upgrade to VOIP completed at main building July 2017.
3.3	Update and maintain an OSS policy framework that provides guidance to KSCS	Revised Personnel Policy drafted and awaiting approval.
3.4	Informing and keeping staff informed of all OSS services available.	A directory of existing OSS services drafted.

SO 4. Develop and implement processes to involve clients directly in the timely evaluation and improvement of KSCS programs		
4.1	Create an internal evaluation team and determine roles and responsibilities	Evaluation team has been determined; will be meeting this month to set roles & responsibilities. The evaluation team will look at effective evaluations for KSCS programs.
4.2	Provide training on evaluation and surveys	To be further explored and details of training to be determined. Looking to have provided before end of fall 2017.
4.3	Establish and engage in effective and safe dialogue between KSCS, Kahnawa'kehró:non and our partners.	Assisting Prevention & Support with conducting client surveys on current assessment tools used. Assisting Tsi Nionkwarihò:ten coordinator with evaluation.

KSCS SUPPORTIVE SERVICE TEAM UPDATES



FACILITIES MANAGEMENT

Dwayne Kirby, Manager

The Manager of Facilities began work in April 2016 at the end of KSCS' Strategic Planning Process. The primary objective was to create a capital plan for each facility. The goal thus far has been to enhance facilities to better meet client needs. The priority for the next 5 years is to maintain, upkeep and expand what exists. There was some restructuring of supervisory responsibilities under the new manager.

Facilities management now encompasses maintenance at the main building, maintenance and security and also the kitchen at the Turtle Bay Elders Lodge.

As the newest team, Facilities Management does not yet have its own strategic objectives and goals to report on. Work will begin in July 2017 to create a new set of strategic objectives and goals for their services. Once completed, these will be available for the next Strategic Plan update.

The following are some **highlights** of accomplishments from January 2016 to present.

JANUARY

- Budget preparation 2017/2018 fiscal year.
- Capital Plan submission and adjustments.
- Ohkwari Room conversion- 12 workstations installed.
 - Electrical supply furnished in Ohkwari
- White House water heater replaced.

Training

- Emergency Social Services – Emergency Management Training Program provided by the Canadian Red Cross – Quebec

FEBRUARY

- Capital Plan budget & work schedule approved.
- Lilly Diabo retirement dinner (from Kitchen Services).
- First Nations of Quebec and Labrador Health and Social Services Commission - Adult Care Facilities Regional Meeting. Mandated to become provincially certified via proposal for funding to upgrade Elders Lodge facility.
 - Budget preparation for INAC funding proposal.

MARCH

- INAC proposal submitted upon receiving KSCS Board Resolution and MCED supporting the new mandate to certify the services provincially.

APRIL

- Turtle Bay Elders Lodge Therapeutic garden working group project launched.

MAY

- MCK fuel depot launched and implemented.
- Facilities Manger office relocated to Elders Lodge.
- Kitchen ventilation hood degreased and disinfected at Elders Lodge kitchen.
- Electrical step down transformer install at Service Complex to accommodate new H/VAC at Caisse Populaire.

JUNE

- Employee Chris Zemel promoted to indeterminate status within KSCS Maintenance & Security team.

JULY

- Organization wide cleanup / collaboration with Tewa for industrial shredding services.
- Setup/takedown for Pow-Wow weekend Family Wellness display tent.
- Setup/takedown for staff picnic at Marina Grounds.
- Brand new vans acquired for 1) Foster Care services and 2) Assisted Living Services.
- Asphalt repairs to Elders Lodge parking lot
- INAC funding proposal approved for major facility upgrades to Elders Lodge



KSCS SUPPORTIVE SERVICE TEAM UPDATES

FINANCIAL SERVICES

Dana Stacey, Finance Controller

SO 1. Enhance short and long term global financial planning efforts based on sound financial practices and operations		Challenge: Year end closing and audit taking priority. Highlight: New staff are trained and department audit is complete and we are able to concentrate on our Strategic Plan.
1.1	Integrate the implementation of the strategic plan with the budget by February 2018.	Still in progress once chart of accounts is set in place more in-depth work can be done on this objective.
1.2	Review and amend KSCS Chart of Accounts to ensure the generation of timely and accurate financial reports that will assist in management decision making and reporting.	Financial consultant recommended putting the account restructure on hold temporarily. Currently meeting on this to finalize account structures and then will implement within the next few months if all goes well.
SO 2. Improve financial services based on the knowledge and understanding of client needs.		Highlight: Although this is not a priority, as manager I have been meeting with each area to present on the finances in their respective areas and how the account structure is set up currently.
2.1	Design and implement a consultation with clients that will assess financial services offered and needs by June 2018.	No movement yet, the priority has been the chart of accounts and supporting the development of budgets attached to the strategic plan. Confident it can be accomplished within the timeframe.
2.2	Implement a client engagement process that will identify areas for improvement and client needs by July 2018.	No movement yet, the priority has been the chart of accounts and supporting the development of budgets attached to the strategic plan. Confident it can be accomplished within the timeframe.
SO 3. Enhance KSCS management and staff financial skills and practices that will assist them in fulfilling their current and planned needs.		Highlight: Management feels more involved with the implementation of new reports they have received from Finance.
3.1	Review and update those financial procedures and policies that ensure the timeliness of services by June 2018 and communicate them to staff.	This objective will take time to finalize. On a day to day basis procedures and policies are reviewed but putting it together formally will take some time.