



KSCS STRATEGIC PLAN (2016-2019) 3rd UPDATE REPORT

(covering two reporting periods from July 2017 to December 2017)

ABOUT THIS REPORT

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

The chart on the right provides a snapshot of the KSCS strategic plan and what all of the service areas within the organization are working together towards achieving.

KSCS will provide quarterly updates to our Board of Directors, staff and community on the progress we are making in each area of service. This is a new process undertaken by the organization and a work in progress.

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

The overall intent is to provide 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 KanieŃ'kehá:ka ways of doing things, including more use of our language

- ❖ Strengthen our understanding of our KanieŃ'kehá:ka ways, language and culture.
- ❖ Incorporate KanieŃ'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;

- Onkwanên:ra
- Teen Group
- Drama

Secondary Prevention;

- Support Counsellors

Family & Wellness Center;

- Parenting Program
- Traditional Services
- Where the Creek Runs Clearer
- Satatenikonarak... 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

- 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

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 UPDATE

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 July 2018.	The KSCS Social Committee continues to play a major role implementing activities for the global organization as well as suggestions for teams and programs to consider. Further details included in Organizational Support Service (OSS) update. Originally flagged as red now considered green. Date was changed to take into consideration the information provided as a result of the organizational review allowing for approximately three months to incorporate into individual service area plans.
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 September 2018.	Training plan completion date has been revised. Work has been progressing in this area, Harassment Training is being looked into, 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 September 2018.	The date has been revised, changing this from red to a green status in particular with the specialized areas. The 2017 Workforce Assessment has been completed and some Board approved recommendations will soon be implemented pending the steering committee implementation plan other recommendations also pending results of Organizational Review to be completed March 31, 2018.
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 July 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. Date moved from April to July to take into consideration the need to fill position of Director of Family Services and Director of Family Preservation. Other restructuring/internal changes happened within P&S, HCCS and ALS.
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 April 2018.	Originally was to be completed by Jan. 2018 and changed/extended to April to take into consideration results from organizational review.
SO 3: Develop, organize and use valid, up-to-date data		
3.1	Develop valid Key Performance Indicators (KPI's) by April 2018.	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). Will need to include where the Board would like to go. Target date changed to April 2018.
3.2	Get valid and timely client data by September 2018.	Continuing to working with our partners to accomplish this objective. Continuing work on implementation of new case management recording software project nearing launch in February 2018.

ORGANIZATIONAL OBJECTIVES continued

SO 4: Enhance use of IT & Communications technologies to improve client services and follow-up		Highlight: The original objective to consult staff and create prioritized goals based on needs has been completed. New goals have been listed below.
4.1	IT: Implement VOIP system beginning with the Main office by July 2017 and completing by March 2018.	So far the Main KSCS office building, Family and Wellness Center (FWC) and White House are on line with VOIP. Remaining service buildings to get VOIP are Home Care, Independent Living Services (includes EHS).
4.2	IT: Centralized location to store all files within the organization. (include redundancy system (backup at another location) by Aug. 2017	KSCS participates and partners with the IT Network group. Work being done with this group will impact the completion date.
4.3	IT: Centralize all the organizations important documents in one location including a table of contents that have hyperlinks to the files and templates by October 2017	Same as above in 4.2
4.4	IT: Organizational access to scheduling software for meeting and training rooms by September 2018	No movement, VOIP is priority
4.5	Communications: Conduct a review on how KSCS communicates internally by June 2017	Completion date has been revised from June 2017 to July 2018 because related to work completion in goal 4.1
4.6	Communications: Communicate the results of the review to staff and encourage them to utilize these methods. Ensure communications are also sent using other creative tools like bulletin boards, TV in the kitchen, SharePoint intranet and other creative communications tools by October 2017	Completion date has been revised from Oct. 2017 to Oct. 2018 because again related to work completion in goal 4.1
4.7	Communications: Prevention Services having access to a KSCS Facebook page to promote events and activities by October 2017	Consult and research completed. Have the required 2 prevention staff identified as staff editors for the page. Page created and awaiting approval to go live possibly in March 2018.

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 July 2018.	Changing the account structure project is now ready to begin again. Will require meeting with Board and then Managers and Team Leaders. With regards to funding, the funding distribution from Jordan's Principle as well as in Home Care has still not been determined both which may augment services in Support and Home Care areas.

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 is 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 and Forum is being held in Feb. 2018. Emergency Social services training is scheduled for Feb. 2018

ORGANIZATIONAL OBJECTIVES continued

SO 7: Strengthen our partnerships within our teams, our community and beyond.		
7.1	Develop an inventory and description of the priority partnerships that KSCS must foster and revitalize at the local, regional and national levels, by April 2018.	A preliminary list of local, regional and national partners has been created and will be expanded upon with further consultation by Organizational Development Services (OSD).
SO 8: Incorporate Kanien'kehá:ka ways, language and culture in everything we do.		
8.1	To gather information around KSCS staff prior knowledge and to begin discussion on how staff currently include tsi niionkwarihò:ten into their services/programs, by February 2018.	<p>Information sources for prior knowledge (KSCS training data, community consultation reports and previous strategic planning documents) have been reviewed.</p> <p>Completed staff survey on tsi niionkwarihò:ten (approx. 40% of staff completed a survey). Currently analyzing results.</p> <p>Also carrying out focus groups with internal teams (2 sessions completed with Skátne lonkwaio'ten team and KLT and one upcoming with OSS).</p> <p>Support of staff activities have already begun such as assisting the Family Traditional Singing activities at Mohawk Trail Longhouse.</p>
8.2	To enhance the awareness of K.S.C.S. staff on tsi niionkwarihò:ten topics (ongoing calendar of events)	<p>The Tsi Niionkwarihò:ten committee has monthly meetings to ensure activities and education continues at K.S.C.S. Ex. staff participation in MCK Language and Cultural sessions. The committee hosted events such as the strawberry barbeque and Medicine Walk (in conjunction with the K.S.C.S. Social Committee), traditional foods workshop and upcoming Midwinter Ceremony presentation.</p> <p>The Tsi Niionkwarihò:ten coordinator also participates in the community tsi niionkwarihò:ten network and community language planning sessions (Skátne Enionkwaió'ten).</p> <p>An outline for a KSCS tsi niionkwarihò:ten orientation package has been created. Will be updated based on results of survey.</p> <p>Incentives to motivate staff are also in the works, such as t-shirts with slogan "lakwawatsiranoron lorihowa:nen ne Kanien'keha Aietewata:ti" (Our families are precious. We should speak Kanien'keha).</p> <p>Planning with the Secondary Prevention/Support team on a workshop day for Cultural Awareness Month, in collaboration with the Cultural Center.</p>
8.3	To provide KSCS a Final Report on the Tsi Niionkwarihò:ten pilot project by April 2018.	Information is being compiled for the final report. Outline has been created and is on track for completion date.

KSCS SERVICE DELIVERY TEAM UPDATE

PREVENTION SERVICES

Terry Young, Manager



SO 1: Know our clients potential and their priority needs		Challenge: global client consultation is needed for KSCS, we are waiting to work in partnership with other areas on this.
1.1	Complete the analysis of internal evaluation by April 2017, and revise programming and services to address the major gaps by May 2018.	Awaiting final report and will share with staff for next steps on how to adjust programming. The timeframe for revising programming and services to address gaps will be extended to May 2018.
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 2018.	This will need to take into consideration and be in alignment with the global client evaluation tool that is to be developed for KSCS services.
1.3	Design and implement "client helpfulness indicator" (CHI) for April 2018.	No movement on tool design. Looking at rewording and relevancy of goal. Year has been revised to 2018.

SO 2: Ensure our children & youth receive a healthy, positive start		Challenge: Change management. It will be important to increase dialogue with staff on how we adjust our services.
2.1	Evaluate and address the program gap for 5 year olds, by April 2018.	Staff have brainstormed summer programming for summer 2017, was unable to put services in place. Now looking at primary prevention to have something in place for the 2018 summer. Changes in staffing has happened-Noreen Montour is now the new Team Leader at the Family and Wellness Center.
2.2	Enhance summer programs to ensure full access for all youth, regardless of family income by April 2017.	This was done by the date identified however seems will be an on-going goal. Reviewing and discussing primary prevention programming with a continued focus on full access for all.
2.3	In partnership with education and the schools, enhance our prevention (healthy lifestyle) team activities in the schools, by September 2017.	We are partnering more with Billings High School in Chateauguay. We have been also been working more closely with Survival School. Moving well. Would like to work more with KEC to review, revisit protocols. Completed by the date however is an on-going goal.

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 2018.	Filling of the Family Preservation Coordinator position was delayed, however Stephanie Horne was selected and began in July 2017. Original date was changed to reflect this delay and moved to the following year Sept.2018.
3.2	Enhance our "one-stop" service model to assure that any client in need will receive timely help from qualified personnel, by June2018.	Have not moved much on this. Ideas have been discussed. Small evaluations have been conducted. Possibly looking at streamlining the intake and status table although timeframe is not realistic (by Dec. 2017) and is adjusted to June 2018 which is necessary because there is a new Manager of Support Services –Cheryl Zacharie-Foote
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.	More responsibility given to prevention Team Leaders to ensure discussions are held to think/review our practices and where we can make changes. Staff are using the language and incorporating it more in their programming.

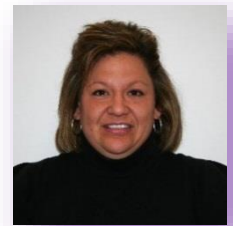
SO 4:Optimize partnerships to meet client needs		
4.1	Conduct an annual partner's consultation by February 2018, and incorporate major improvement for April 2018.	Timelines were adjusted to be more realistic. It will take more time to develop a system for partner consultation. Would like to build on the partnerships created at the Kahnawake Collective Impact.

SO 5: Incorporate 'tsi niionkwarihò:ten' (our ways).		Highlights: We have been continuing to incorporate more language and culture within our programming.
5.1	Incorporate Tsi Niionkwarihò:ten in all our programming & services and in our internal; practices, by September 2018.	Prevention team members sit at the traditional approaches subcommittee and weaving science and traditions committee. Mary McComber, the Tsi Niionkwarihotens coordinator has consulted internally with staff and groups and also with external partners. Is developing a work plan. Due to the delay in hiring and with the coordinator leaving a few weeks to do a required stage the date has been changed from April 2018 to September.

KSCS SERVICE DELIVERY TEAM UPDATE

SUPPORT SERVICES

Cheryl Zacharie, Manager



SO 1: Empower Kahnawa'kehró:non (individuals and families) to take control of their lives		Highlight: There has been a transition in Managers, the focus has been on building/strengthening relationships within the Support Services Team with a focus on working more effectively with each other. The eventual goal is to assist clients in meeting their own needs.
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.	Currently working on outcome measures taking into consideration the current consultations that have taken place in the last year.
SO 2: Improve healthy Kanien'keha:ka development options for youth		
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.). There are now a total of 4 new foster homes in the community that have been secured and a fifth to be confirmed in January 2018. Have coordinated and offered the following training to our Foster Homes: Intergenerational Trauma, Youth Protection, FASD and Neuro-behavioral conditions.
2.2	Significantly enhance effective support for youth 18 years who are transitioning out of foster care to capable independent living, by April 2018.	Research being conducted on other foster care resources, set up and funding for special supports for youth in transition out of care. FACES resources presentation was provided on children coming out of foster care.
2.3	Improve support for our youth in institutions outside the community (e.g. Batshaw), by April 2018.	Research being conducted on services and access i.e. if they can see a psychologist or if transportation is covered.
SO 3: Enhance the effectiveness of our youth protection, the Kanien'keha:ka way		Highlight: The CORE 504 Training has since been completed by Managers and Supervisors and has been well received. Staff have begun to implement the teachings into their work with staff of Prevention & Support. Challenge: Staffing has presented some challenges however this is being addressed on an on-going basis.
3.1	Get final approval of plan for the establishment of the Kahnawà:ke Youth Protection Directorate by the MCK no later than January 2018.	More work required however moving forward
3.2	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.	Moving along although needs more focus. Studies still 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.

SUPPORT SERVICES continued

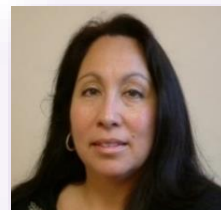
SO 4: Break the recurring and normalizing pattern of addictions		Highlight: With the transition in Managers, the focus has been on building/strengthening relationships within the Support Services Team with a focus on working more effectively with each other.
4.1	Take the lead in implementing and coordinating 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.	Still working on building this plan and including traditional medicines in this comprehensive approach.
4.2	Research and recommend implementation of new tools to address drug use (e.g. DUSI-R) Drug Use Screening Inventory by April 2017.	Completed for DUSI-R.. Addictions Team Leader Jamie Samayoa updating research for new Manager with new expenses, tool and process for implementation. Awaiting approval.
4.3	Secure a youth case worker for ARS to address the specific needs of youth with addictions by April 2017.	The youth case worker for ARS left the organization and the position has been reposted –still being evaluated.
4.4	Create a plan of action based on research in anticipation of the impact of the legalization of Cannabis in the community that includes promotion/education, prevention and intervention approaches by September 2018.	With the legalization of Cannabis, Support Services has added a Goal in anticipation of impact on our service response from an addictions perspective.
4.5	Create a plan of action based on a comprehensive review of video lottery terminals that includes promotion/ education, prevention and intervention approaches by September 2018.	Support Services has added a Goal in anticipation of the impact of Video Lottery Terminals (VLT's) and our service response from an addictions perspective.

SO 5: Assess & upgrade our psychological services		
5.1	Design and implement a systematic process to consult with clients to identify their priority needs, by April 2017.	Client consultation on the screening and assessment process at intake has been completed. Was to be reviewed by the psychologist however limited staff requires us to re-strategize and review next steps.
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 service by October 2019	The goal of putting in place a full Psych Team had been achieved however not functioning due to staff leaves of absence. This needs to be revisited. Possibly reviewing job descriptions to divide the responsibilities and more focus on building the program.

KSCS SERVICE DELIVERY TEAM UPDATE

ASSISTED LIVING SERVICES (ALS)

Vickie Coury-Jocks, Manager



SO 1: Know and address the needs of each client & family		
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 2018.	ALS has identified a more appropriate assessment tool to assist in the assessments and service planning of our clientele and in January have obtained confirmation from the Commission that as of April 2018 ALS will no longer be obliged to use the previous assessment tool.
1.2	Address the current gap in proper services for children by developing an information package for special needs caregivers, by April 2018.	INAC's Disabilities Initiative Project is going well. McGill consultants researching information and are to develop a resource guide containing both local and outside resources available for families with special needs individuals. Started off slowly but after the summer has begun moving, we are expecting the completion of this resource guide in April 2018. New date is April 2018

SO 2: Enhance the quality of life & recognition/appreciation of each client		
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 continue to offer creative and musical development for our clients: using the fine arts medium to foster and advance communication skills and self-development. We are also networking with the Special Olympics office in Chateaugay to support the athletic aspirations of some of our clients. Finally, we remain committed to the health determinants in the Community Health Plan fostering increased physical activity through regular activities that include therapeutic horseback riding, swimming, bowling and yoga. Participants also receive cardio and weight training classes, accessing local resources.
2.2	Maximize the integration of the clients into community activities, including employment (on-going).	Caseworkers continue to actively network with Tewatohnni'saktha.

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.	In collaboration with KSCS's Facilities Manager we will submit a proposal to obtain capital dollars, submission of this proposal is on track for April 2018. We continue to have capitol meetings and have draft plans. Discussing and preparing for tenders.
3.2	Develop and implement a viable respite capability to accommodate special needs individuals by April 2019.	Work to identify respite resources for families continues. Case workers continue to assist families in accessing respite dollars through the CLSC.

ASSISTED LIVING SERVICES continued

SO 4: Maintain a minimum waiting list (capacity to deal with the growing number and complexity of clients)		Challenge: ambitious especially goal 4.3 which is dependent on other organizations to be accomplished.
4.1	Develop & implement an ALS Personnel Plan to support this plan by September 2018.	The personnel plan is complete and approximately 75% implemented. An additional case worker was hired in August and this position has alleviated our waitlist. Still remains the need for a Psych-educator and as new salary dollars acquired we will close this gap.
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.	An on-going process working with Facilities Manager, we are looking at all options to increase operational space.
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 March 2019	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. We continue to keep communications open with levels of government and will need to explore/discuss further with our Board. Date was changed from Sept. 2017 to March 2019.

KSCS SERVICE DELIVERY TEAM UPDATE

HOME & COMMUNITY CARE SERVICES (HCCS)

Mike Horn, Manager



SO 1: Enhance client-centered service delivery		
1.1	Evaluate current services from a client perspective and make timely adjustments to programs, by June 2018.	Have not done any formal evaluation as of yet. Exploring current processes that could be used for Client feedback such as the development and revisions of Client Service Plans. Through the accreditation process we can pull data from that as well to help make changes. The date for this to be accomplished has been revised as this does not depend only on H&CCS rather we are taking into account what the whole organization may be looking at.
1.2	Review client activities/services that now can be enhanced due to block funding and report on by April 2018	Have completed a Service Delivery and Risk Management Plan which helped in getting the program under block funding- will have been under this for a full year and can review impact and make adjustments accordingly as there is flexibility in how the funding is used.
1.3	Modify (reorganize) and enhance (when possible) HCCS personnel that will ensure better client service delivery by June 2018.	Participated in the workplace assessment project which identified that a clinical supervisor for HCCS is recommended-this is being further explored. Dwayne Kirby, Facilities Manager, relocated his office to HCCS and took on the supervision of maintenance and security staff at the Lodge.
1.4	Increase the physical capacity (beds/rooms) at the Elders Lodge to meet the needs of the community and staff by April 2019.	<p>Worked with Facilities Manager to work on an agreement and Capital Plan. Submitted a proposal to access funding renovations/upgrades which was approved for \$230,000.</p> <p>Working on ensuring the Elders Lodge building becomes provincially licenced which is not too much of an issue because we already meet similar standards in our accreditation process-this will be an added assurance of the safety in our building.</p>
SO 2: Assure the dignity, autonomy and quality of life for elders		
2.1	Fully implement and evaluate the "falls response protocol" by February 2018.	Falls Response Protocol will require evaluation at a year mark. Everyone received the same training. Exploring it use and relevancy in other KSCS service areas as standard. The committee working on this is to be reconvened to continue the work and next steps.
2.2	Identify& address situations of Older Adult Mistreatment through Promotion and Education awareness campaigns on an ongoing basis.	<p>Moving along very well. The elders' abuse committee meets monthly and is continuing to address older adult mistreatment.</p> <p>A survey was done with community and results of the survey were used by the committee in the development of the Financial abuse campaign that was held at Turtle Bay Elders Lodge on Nov. 16, 2017. The campaign focused on Financial Abuse, have a package of resources from our partners FNQLHSSC to use and disseminate. An awareness video was also created and played on community TV and in waiting area of KMHC during campaign. Looking at developing and creating quarterly awareness campaigns.</p>
2.3	Enhance palliative care capability and service.	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. There may be funding available in April 2018 regarding assisted dying and will likely be proposal driven, we are preparing by exploring needs.

KSCS SERVICE DELIVERY TEAM UPDATE

ENVIROMENTAL HEALTH SERVICES (EHS)

Donald Gilbert, Team Leader



SO 1. Enhance client-centered service delivery		Highlight: Bryan Ip, a new Environmental Health Officer (EHO) has joined the team. Challenge: Homes with active well use are not responding to requests for testing.
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. We have been promoting water testing in the community on the Electronic billboards. Recognizing there is a need for education and awareness on water filtration systems maintenance as well disinfecting wells.
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.

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.	There will be a shortfall in the funding in this area awaiting confirmation of additional funding because there are additional tests being done resulting in increased sample tests, supplies and travel.

KSCS SUPPORTIVE SERVICE TEAM UPDATES

ORGANIZATION SUPPORT SERVICES (OSS)

Wendy Walker, Manager



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.	The Social Committee has implemented the "KSCS House Leagues" with the intent to encourage staff to participate in KSCS social activities and foster relationships. Nearing completion of pilot and will be looking at evaluating this by March 2018.
1.2	Review and revise the current recruitment process at KSCS by March 31, 2018.	This has proven to be more complex and complicated than anticipated. Nearing completion of analysis identifying gaps and overlaps. Next steps are to conduct a validation activity with managers and then make the changes identified.
1.3	Enhance staff wellness by becoming more strategic and proactive in supporting employee management of a healthy and balanced life	There are slight delays however work is proceeding.
1.4	Create a KSCS Training and Development process & plan by April 2019	There are slight delays however work is proceeding. CPR and First Aid training is underway and should be completed by March 2018. Excel Training course for managers and supervisors is in progress, details of its coordination are in the process of being finalized.
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.

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. Provided training on the PMP and Calibration process to managers in December.
2.2	Develop and provide HR database access and training.	Completed, all Team Leaders trained in May and now exploring access for staff.
2.3	Create an electronic user friendly OSS Resource library (include policies, directives, benefits etc.)	On hold, awaiting results and suggestions from work with the external IT Network to see where and what is going to happen with the organizations partaking within this network. Internal research has been on-going.
2.4	Provide support and guidance to KSCS management in implementing strategies	OSD continues to provide support and guidance to managers and team leaders in their implementation of plans. Team is working with Facilities to develop their plans.

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.	There are slight delays however work is proceeding
3.2	Adjust services to better meet the needs of KSCS by March 2019	<p>Remaining offices to get VOIP is Assisted Living Services offices and Home & Community Care.</p> <p>IT and Communications has consulted managers to gather priority IT and Communication needs. New goals have been created and prioritized and listed in the organizational objectives.</p> <p>Hired consultant to conduct Workforce Assessment which was completed in August. All managers and Board have been provided report along with recommendations. Some recommendations have been approved to be moved on others are pending the results from the Organizational Review. The Steering Committee for this project is to meet to work on next steps.</p>
3.3	Update and maintain an OSS policy framework that provides guidance to KSCS	All Managers were provided an orientation/training session on the new Personnel Policy, to prepare them to sit with their staff and orient them before it went into effect. Personnel Policy became effective October 2, 2017. Now exploring an internal process for managing policy reviews and revisions to be more timely and tracked.
3.4	Ensuring KSCS staff are continually informed of all OSS services available.	Inventory completed and still drafting directory.

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	Work has not progressed as anticipated. Research has been on going.
4.2	Provide training on evaluation and surveys	Training needs must be defined in this area. Looking to secure a trainer(s) and date.
4.3	Establish and engage in effective and safe dialogue between KSCS, Kahnawa'kehró:non and our partners.	OSD providing support to Prevention & Support in creating client surveys/assessment tools and assisting Tsi Nionkwarihö:ten coordinator with pilot project evaluation.

KSCS SUPPORTIVE SERVICE TEAM UPDATES

FACILITIES MANAGEMENT

Dwayne Kirby, Manager



Facilities Management (which encompasses maintenance at the main building, maintenance and security and also the kitchen at the Turtle Bay Elders Lodge) has been slowly progressing with developing its strategic plan. The primary challenge has been setting time amidst numerous time sensitive projects.

The team has met to work towards developing a set of their own strategic objectives and goals to report on. The final sessions will be held shortly within the New Year and we will have these documented in the larger plan by the next strategic plan update. Maintenance, renovations (and all that this entails i.e. tendering, contracts commissioned etc.), capital planning and budget planning have all been on-going with the goal to ensure we are providing services to our clients both internal and external to meet their needs.

The following are some **highlights** of accomplishments from July 2017 to present.

- A steering committee had guided the Garden project and developed a work-plan. Was implement in the fall and is ready for the next planting cycle (spring 2018).
- The Ohkwari room at the main KSCS building was temporarily converted to work stations. A transition strategy is in development for converting Okwari back to a large meeting room (once alternate workspace has been constructed).
- The Voice Over Internet Protocol (VOIP) phone system has been up and running in the main building and the White House. Family & Wellness Center is next in line for VOIP.
- Facilities Manager will continue discussions on comprehensive community management with MCK Director of Asset Management (potential to consolidate certain functions and tasks to be more efficient and stretch resources).
- Partnerships are forming. MCK Capital is willing to be involved when necessary, with future planning for Turtle Bay Elders Lodge and ALS facilities.
- TBEL has been working on upgrades to get certified by the province. A building committee has been formed to oversee the contract award process in harmony with the procurement policy.
- Services Complex parking lot lighting upgraded to LED fixtures.
- Storage space has been evaluated and storage containers to be installed at Services Complex and TBEL. Office space is still being evaluated to meet the current and future needs.
- Reception area is getting renovated in December. Expected to be complete by late January 2018.
- Main building waiting room relocated with entrance at reception.
- Counselling room space at main building will be upgraded. Family room will be divided to make two counselling rooms and Computer room will become a counselling room.
- The KMHC hospital kitchen staff will be departing TBEL kitchen tentatively by April 1, 2018 and there is a plan to backfill the Team Leader of kitchen responsibilities.
- Considering a future larger strategic planning session with internal/external partners and stakeholders.

KSCS SUPPORT SERVICE DELIVERY TEAM UPDATE

FINANCIAL SERVICES

Dana Stacey, Finance Controller



SO 1. Enhance short and long term global financial planning efforts based on sound financial practices and operations		
1.1	Integrate the implementation of the strategic plan with the budget by February 2018.	Work has been progressing however a bit slower than anticipated due to other internal, external demands on the organization
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.	Have gone from a yellow to now a red category. Very big task and more complicated than anticipated with possible system upgrades. Have consultant in place however project is on hold until Organizational Review is completed so as to take into consideration the results and recommendations with regards to this goal.
SO 2. Improve financial services based on the knowledge and understanding of client needs.		
Challenge: Strategizing and preparing for the retirement of senior staff and the return of staff currently on leave.		
2.1	Design and implement a consultation with clients that will assess financial services offered and needs by June 2018.	No movement, the priority has been the chart of accounts and supporting the development of budgets attached to the strategic plan. Plan to use the results from workforce assessment and organizational review to design our client consultation.
2.2	Implement a client engagement process that will identify areas for improvement and client needs by July 2018.	No movement as this is dependent on 2.1.
SO 3. Enhance KSCS management and staff financial skills and practices that will assist them in fulfilling their current and planned needs.		
Highlights: Management are becoming increasingly more involved with the budgeting process and as we continue to provide one on one training to build their capacity.		
3.1	Review and update those financial procedures and policies that ensure the timeliness of services by June 2018 and communicate them to staff.	<p>A Finance Manual is being revised and updated to reflect changes within the department and within the organization. Managers are provided tools to help in their budgeting and one on one training with managers has been on-going.</p> <p>We are looking critically at how we can further enhance building the managers financial capabilities and tools to use to evaluate our training. This is tied to our second strategic objective where we are working to improve our services so that managers can accomplish their goals.</p>