



KSCS STRATEGIC PLAN (2016-2019) 5th UPDATE REPORT

(covering reporting period of May 2018 to August 2018)

ABOUT THIS REPORT

The purpose of this report is to provide a progress update on the implementation of our strategic plan which runs to March 31, 2019.

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 regular 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 broad reaching organizational objectives and goals as well as the individual objectives and goals identified by each service area.

The overall intent is to provide a more detailed narrative of the strategic work happening in the organization as well as the highlights and challenges faced as we move towards accomplishing our mission and vision.

KAHNAWAKE SHAKOTIA' 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'KEHRON:NON FOR HEALTHY AND FULFILLING KANIE'KEHA:KA LIVES..."

The number one strategic focus of the plan is to help empower Kahnawa'kehron 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 (kahwà:tsire) as the strategic core of all programming and services. Strong, healthy kahwà: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'kehron and their families as the 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 kahwà: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'kehron 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 Kanie'kehà:ka ways of doing things, including more use of our language

- ❖ Strengthen understanding of our Kanie'kehà:ka ways, language and culture.
- ❖ Incorporate Kanie'kehà: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;
 - Onkwawèn: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 (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 December 2018.	Managers are responsible for their own team's health and quality of working life with support from the KSCS Social Committee and Organizational Support Service (OSS). Recommendations contained in the organizational review should be incorporated into future 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 December 2018.	Training plan completion date has been revised further. Some larger scale training initiatives that occurred during this timeframe were Statistics Canada Survey training and Cannabis in the workplace presentation.
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 2018.	Awaiting movement on the recommendations of the organizational review which will guide this objective.

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'kehrónon, by March 2019.	Date was adjusted. The organizational review has been completed and we have been provided with specific recommendations for the organizational structure at KSCS. An organizational review implementation team (consisting of 4 board members and 4 Managers/Directors) has been established. A plan should be completed by November 2019 for submission to the board.
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 March 2019.	Date was adjusted. Contingent on objective 2.1.

SO 3: Develop, organize and use valid, up-to-date data		
3.1	Develop valid Key Performance Indicators (KPI's) by December 2018.	No movement. Date needs adjustment. Organizational Strategic Development (OSD) to resume check in meetings with each Manager and Director to follow up on KPI development by the next reporting period.
3.2	Get valid and timely client data by September 2018.	The new case management recording software has been in use for 8 months now and is still in a fine tuning phase. All users have been trained since November of last year. Client data is being gathered with the software but not is not yet being analyzed because the system is still in development. This system will be one of the main data collection and reporting tools once it has been fully applied to all service areas.

ORGANIZATIONAL OBJECTIVES continued

SO 4: Enhance use of IT & Communications technologies to improve client services and follow-up		Highlight:
4.1	IT: Implement VOIP system beginning with the Main office by July 2017 and completing by October 2018.	We are currently testing the reliability of the shared community MIT fiber feed. Early in September we will be connecting both EHS and ALS to the VOIP system.
4.2	IT: Centralized location to store all files within the organization (include redundancy system backup at another location) by October 2018.	Both EHS and ALS are now connected to our centralized server. The White House and HCCS will be next to be moved over to our server.
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 January 2019.	We can now consult with Management in identifying which documents will be added to the common drive.
4.4	IT: Organizational access to scheduling software for meeting and training rooms by November 2018.	Objective no longer required (issue has been addressed with a new SOP to request meeting rooms). This objective to be removed for next reporting period.
4.5	Communications: Conduct a review on how KSCS communicates internally by October 2018.	Developing the goals, objectives and desired outcomes for the communications review.
4.6	Communications: Communicate the results of the review to staff & encourage them to utilize these methods. Ensure communications are also sent using other creative communications tools by January 2019.	Contingent on objective 4.5.
4.7	Communications: Prevention Services having access to a KSCS Facebook page to promote events and activities by August 2018.	The Facebook page is being used regularly to promote KSCS events. The Facebook policy was changed into a SOP and is currently being reviewed by Managers.

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 2019.	<p>Completion date of goal adjusted to better align with budgeting process. Finance will continue to work with Managers on thinking about their budgets strategically and including projections for the completion of their strategic plan goals within the budget 2019/2020.</p> <p><i>*Note: Strategic Objective 5 needs to be revised as the funding required to support the strategic plan has been obtained but there is significant follow up.</i></p>

SO 6: Advocate for and obtain better access to critical services in the English language e.g. Institutional care, detox		
6.1	To strengthen internal processes that will ensure access issues to critical services in English that impact both KSCS staff and clients are documented, reported on and addressed with the appropriate bodies by Dec. 2018.	<p>Now green as 1) goal was articulated and 2) work is being carried out. Currently, Management encouraged to flag access issues with the ED. ED is member of Coalition of English Speaking First Nation Communities in Quebec (CESFNCQ) which focuses on access issues. ED informs management of CESFNCQ activities in communiques. CESFNCQ 2018 strategic plan is completed with 9 priorities of focus for this 2018 year. Report identifying barriers has been submitted to the Public Inquiry Commission On Relations Between Indigenous Peoples And certain Public Services In Quebec. Reviewing Onkwata'karitáhtshera's role within this objective.</p>

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.	No movement. Date needs adjustment. The follow up will be to review and update what exists (the preliminary list of partners and a tool developed for the community health plan) to create an inventory. Follow up will be planned with the KLT.
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>The Final Tsi Niionkwarihò:ten Report 2018 was situated in a common location for all staff to access.</p> <p>Follow up meetings have been held with Leadership team for direction, and other programs for collaborative efforts such as Skátne lonkwaio'ten, Prevention and Support Admin Team, Onkwata'karitáhtshera Tehotirihwaienawakon Sub Committee, and Family and Wellness Center (re: Sweats training and assisting them with language development sessions for sweats).</p> <p>A survey via Survey Monkey was completed Aug 31, 2018 to assist in planning for staff in-house Kanien'kéha lessons. A total of 51 staff participated in the survey.</p>
8.2	To enhance the awareness of K.S.C.S. staff on tsi niionkwarihò:ten topics (ongoing calendar of events)	<p>On-going collaborations with the Mohawk Council of Kahnawake Language and Cultural program re: staff training and networking.</p> <p>Discussions with Executive Director and the HR team for issues around the tracking of training. Other issues are also being discussed specific to KSCS seats in the MCK program.</p> <p>Inclusion of Tsi Niionkwarihò:ten in the On Boarding process (for new staff) is in the development phase.</p> <p>Regular planning with the KSCS Tsi Niionkwarihò:ten Committee is on-going and a draft activity outline for the year was developed. We had a Corn and Tobacco Planting session for staff on May 23rd.</p> <p>On-going meetings to be held with Social Committee to discuss collaborative events for staff.</p> <p>Preparation began for starting a tsi niionkwarihò:ten resource lending library in the main building kitchen.</p> <p>Community networking is also on-going with Tsi Niionkwarihò:ten Coordinator's involvement in Cannabis Law discussions, Tsi Niionkwarihò:ten Community Network (Tewahara:tat tsi niionkwarihò:ten), and Tewanatanonhnha Community Women's Group.</p>
8.3	To provide KSCS a Final Report on the Tsi Niionkwarihò:ten pilot project by April 2018.	<p>Completed as stated. Follow up to the report is on-going in terms of program priorities for the year.</p> <p>Ex. On Boarding Pilot Project is in the works. Meetings were held with Leadership Team for feedback and with Human Resources for planning. A test run will be done with Prevention and Support Services McGill stage students in September. Feedback will be provided for further development of the process.</p> <p>A new Tsi Niionkwarihò:ten program end of year report documenting all activities will be produced for April 2019.</p>

KSCS SERVICE DELIVERY TEAM UPDATE

PREVENTION SERVICES

Terry Young, Manager



SO 1: Know our clients potential and their priority needs		Highlight: The Prevention Team has been able to have all positions full at this time, which has not been the case for the past few years.
1.1	Complete the analysis of internal evaluation by April 2017, and revise programming and services to address the major gaps by January 2019.	This report has not been finalized yet and the timeline has been extended to the new year in order for follow up with the OSD team.
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 tool has not been developed yet and there will have to be alignment with the other areas of the organization. This area could be connected to the need for a tool for all service areas and not just limited to Prevention Services.
1.3	Design and implement "client helpfulness indicator" (CHI) for April 2018.	No movement on this tool design. Need to revisit the relevancy of this goal.
SO 2: Ensure our children & youth receive a healthy, positive start		
2.1	Evaluate and address the program gap for 5 year olds, by December 2018.	The Team Leader of the FWC has been tasked with this goal. In the coming month or so, the Manager will be meeting with the Parenting team to address this area and to implement a workplan and update of Parenting programming services.
2.2	Enhance summer programs to ensure full access for all youth, regardless of family income by April 2017.	The Team Leader of Primary prevention services will be meeting with the team responsible for summer programming at the end of September and will complete an evaluation of the activities and make recommendations for next year. This goal is ongoing as there is still follow up.
2.3	In partnership with education and the schools, enhance our prevention (healthy lifestyle) team activities in the schools, by September 2017.	The Primary Prevention team has implemented a strong in school presence. The Manager will follow up to assess working relationships with Karihwanoron and Indian Way School. This goal is ongoing until the development of new objectives and goals.
SO 3: Empower healthy Kanien'kehá:ka families		
3.1	Establish the Family Preservation Unit, with full programming, starting no later than December 2018.	The final reporting is being drafted by Stephanie Horne, Project Coordinator and will be completed by the end of Sept 2018. The final recommendations will be discussed with the two Managers responsible and the Director of Family Services. Three family preservation models have been reviewed and the recommendation for KSCS using one model will be outlined in the final report.
3.2	Enhance our "one-stop" service model to assure that any client in need will receive timely help from qualified personnel, by June 2018.	Ideas have been discussed between Prevention and Support Managers but there have been no decisions made on how to implement services in this manner. There are a number of areas that need to be further reviewed before any alignments of services can happen. The Managers will be meeting with the Director in the coming weeks to begin this discussion and work out a plan with Family Services.

PREVENTION SERVICES continued

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.	This is an ongoing objective as the Team Leaders have incorporated this objectives into their own Key Result areas and for those of the staff they supervise directly.
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 2019.	Has not been completed at this time and will look to have completed by April 2019.
SO 5: Incorporate 'tsi niionkwarihò:ten' (our ways)		
5.1	Incorporate Tsi Niionkwarihò:ten in all our programming & services and in our internal practices, by September 2018.	This goal is ongoing as Mary McComber is now incorporating the recommendations that came from the Final report within the development of the new tsi niionkwarihò:ten program.

KSCS SERVICE DELIVERY TEAM UPDATE

SUPPORT SERVICES

Cheryl Zacharie, Manager



SO 1: Empower Kahnawa'kehró:nnon (individuals and families) to take control of their lives		<p>Highlight: We continue to work toward empowering our clients to take control of their lives. What we have come to realize is that while this goal is extremely important to strive for within Support Services, it is relevant to services across the entire organization.</p> <p>Challenge: We have not had an opportunity to consider the results/ recommendations of the Workforce Assessment nor have we had the opportunity to complete a consultation process with our stakeholders. This information will be invaluable to further addressing the best way of empowering our clientele.</p>
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.	Following discussion in reference to this goal, we have established that this objective is the responsibility of the organization as a whole. We will need to consider the Workforce Assessment and the Organizational Review to gain some clarity/ insight into the needs of the organization. In addition, we will focus on client consultation to ensure that our services are able to meet the needs of the clients we serve.
SO 2: Improve healthy Kanien'keha:ka development options for youth		<p>Highlight: Currently, there are less youth in care as compared to previous periods. We have taken on a stage student from McGill University School of Social Work, in the Foster Care program. Her role is to assist our Foster Resource Worker in her duties but also to build her capacities in the delivery of service in Kahnawake.</p> <p>Challenge: While we have been successful in meeting the ongoing needs of children requiring care, we are consistently faced with the need to recruit new Foster families.</p>
2.1	Recruit & train minimum 10 skilled/qualified foster homes in the community by September 2018.	While we have been able to meet the ongoing needs of children requiring care, recruitment of Foster families continues to be a challenge. We will be working towards more external communication and increased public relations, with the hope of gaining new interested families.
2.2	Significantly enhance effective support for youth 18 years who are transitioning out of foster care to capable independent living, by December 2018.	With the summer months behind us we are in the process of building a job description with the hopes of posting the position by December 2018.
2.3	Improve support for our youth in institutions outside the community (e.g. Batshaw), by April 2019.	This continues to be an ongoing objective and we recognize the need for further research into the inequities experienced in reference to access to services outside of the community. We have also acknowledged that this objective will need to look at issues encountered amongst all services of the Family Services Unit (HCCS, ALS, Prevention, Support).

SUPPORT SERVICES continued

SO 3: Enhance the effectiveness of our youth protection, the Kanien'keha:ka way		<p>Highlight: Over the last year we have experience much difficulty filling positions that require a degree in Social Work and subsequently a membership to a specific professional Order. While we have had several interested applicants we have not been able to attract people from the community, either because they do not have the required degree and/or do not have membership to the Order. As a means of addressing this, I am proud to share that we have begun to look at the viability of offering a Bachelor of Social Work to our community in partnership with Tewatohnhisaktha and the KEC.</p> <p>Challenge: Law 21 continues to present us with issues and as a result, we have run into barriers when attempting to hire caseworkers. Moving forward one of our plans is to build a working relationship with the Order and negotiate the possibility of “vetting” our own workers to work with our people in our community.</p>
3.1	Get final approval of plan for the establishment of the Kahnawà:ke Youth Protection Directorate by the MCK no later than January 2019.	With the recent summer break/ hiatus for Cabinet, there has been no movement toward getting final approval for the establishment of the Kahnawake Youth Protection Directorate before January 2019.
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.	We have been patiently waiting for the report and recommendations from the Family Preservation Project and can anticipate that many positive changes to service delivery will be suggested. As a follow up to this we will have to evaluate and analyze our current structure and services in order to determine the best practices for assisting our clientele.
SO 4: Break the recurring and normalizing pattern of addictions		<p>Highlight: We have recently been able to recruit 2 new Addiction Response Workers and are happy to share that we now have a complete team. The ARS program has been working on new initiatives. They have been focusing on building relationships with NIHB and discussing service availability. We have taken on a stage student from McGill University who will be assisting our ARS workers in their duties while building her own capacity.</p> <p>Challenge: Access to English Services continues to be a challenge.</p>
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.	There has been a recent partnership between Kahnawake CrossFit and KSCS to offer a program aimed at addressing physical wellbeing in sobriety.
4.2	Research and recommend implementation of new tools to address drug use (e.g. DUSI-R) Drug Use Screening Inventory by April 2017.	With the summer months behind us, we will be working to implement the DUSI R into our services by the end of December 2018.

SUPPORT SERVICES continued

4.3	Secure a youth case worker for ARS to address the specific needs of youth with addictions by April 2017.	Completed. We have recently been able to recruit 2 new Addiction Response Workers and are happy to share that we now have a full team.
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 December 2018.	With the legalization of Cannabis right around the corner we will be working with Prevention Services in order to educate the community on effects of the use of Cannabis, and work together to address the issues as they arise.
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.	The ARS team has recently completed training on the topic of gambling addiction and a plan for dealing with the use of VLT's has been developed. In the coming months the plan will include working with prevention services to educate the community on the effects that the use of VLTs may have.

SO 5: Assess & upgrade our psychological services		Highlight: The Psychological Services Team has been able to maintain fully functioning services. Challenge: Major challenge has been to address the needs of the Psych Team without a fulltime Psychologist assisting in the development of the service area.
5.1	Design and implement a systematic process to consult with clients to identify their priority needs, by April 2017.	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. This goal may become integrated under 1.1 above.
5.2	Complete a comprehensive review of psychological services and present recommendations.	Completed.
5.3	Put in place a fully capable, professional psychological service by October 2019.	All job descriptions for psychological services have been updated. The Psychological Services Team have been working to ensure a client focused approach to service delivery and despite the challenge of inconsistencies within the team, have been able to maintain fully functioning services.

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 December 2018.	We have identified selected assessment tools and are reviewing before a final decision is made. Implementation is on track for December 2018.
1.2	Address the current gap in proper services for children by developing an information package for special needs caregivers, by September 2018.	The project is nearly complete, we still need to work on adding resources and services available within Kahnawake. Once the resource booklets are complete they will be printed and copies made available through our partners such as local schools, KMHC, Step By Step, MCK-SDU, etc.
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).	Completed as stated. This has become part of our regular assessment and programming. We now need to develop Key Performance indicators for this.
2.2	Maximize the integration of the clients into community activities, including employment (on-going).	This is going really well. We work closely with Tewatohnhi'saktha and other partners for this. Seven clients are now involved in work placements. This still needs to be formally integrated into our clinical process (assessment and development of service plans) for all client who are willing to try new activities and employment opportunities.
SO 3: Assure continuity of quality care for each dependant		
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.	Work is ongoing. Next step is to post for a contract position to cost out a residential unit. Need to look into feasibility study and business plan.
3.2	Develop and implement a viable respite capability to accommodate special needs individuals by April 2019.	Work is ongoing. We are working with parents and caregivers on what they see as respite needs and options. We are trying to partner more with families about what this looks like.

ASSISTED LIVING SERVICES continued

SO 4: Maintain a minimum waiting list (capacity to deal with the growing number and complexity of clients)		
4.1	Develop & implement an ALS Personnel Plan to support this plan by September 2018.	Completed.
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 by April 2019.	We are looking into some possibilities to increase space immediately. A briefing note has been completed. The addition plans are still pending.
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.	No movement for this goal.

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 (on-going).	Evaluation is being based on individual client assessments, and Client Service Plans. Still have to conduct a comprehensive client evaluation for all services.
1.2	Review client activities/services that now can be enhanced due to block funding and report on by April 2018	Completed. HCCS continues to network with First Nations and Inuit Health Branch Department of Indigenous Services Canada/Government of Canada.
1.3	Modify (reorganize) and enhance (when possible) HCCS personnel that will ensure better client service delivery by June 2018.	Human resources and services are being modified or enhanced, based on individual client assessments, and Client Service Plans. An example is the structuring of the palliative care team (see goal 2.3).
1.4	Increase the physical capacity (beds/rooms) at the Elders Lodge to meet the needs of the community and staff (on-going).	Renovations and upgrades to Turtle Bay Elders' Lodge as part of the provincial certification process where completed in August 2018.
SO 2: Assure the dignity, autonomy and quality of life for elders		
2.1	Fully implement and evaluate the "falls response protocol" by March 2019.	Falls protocol being utilized by HCCS and Turtle Bay Elders' Lodge staff within the confines of TBEL facility, but not completely implemented in other HCCS service areas. The team will be reconvening committee meeting to strategically plan for evaluation and enhancement to HCCS program.
2.2	Identify& address situations of Older Adult Mistreatment through Promotion and Education awareness campaigns on an ongoing basis.	The committee held a campaign June 14th at Turtle Bay Elders' Lodge, focusing on financial abuse. The target audience were residents and HCCS activity participants. The next campaign will target the Golden Age Club clients.
2.3	Enhance palliative care capability and service (on-going).	The team had the opportunity to provide 24 hour palliative care for a 7 day period. The palliative care committee will be reconvening meetings to plan for evaluation and enhancement to program.

KSCS SERVICE DELIVERY TEAM UPDATE

ENVIROMENTAL HEALTH SERVICES (EHS)

Donald Gilbert, Team Leader



SO 1. Enhance client-centered service delivery		<p>Highlight: We are slowly becoming a common sight in the outlying areas and interactions with community members has increased to a limited degree</p> <p>Challenge: Accomplishing the goal of sampling every well twice a year.</p>
1.1	Revisit current water quality monitoring schedule and increase frequency of bacteriological and basic chemical analysis if necessary.	Last year at this time we had accomplished 330 residential bacteriological samples. This year we've achieved 469 and increase of 139 samples. We've also increased our Basic Chemical Analysis numbers. Last year at this time we has sampled 45 wells. So far this year we've sampled 57 wells.
1.2	Determine if annual inspections of high risk facilities is satisfactory or should be increased.	No issues to report. Identified facilities are cooperating and actively participating
SO 2: Seek necessary funding to operate within the Strategic Objectives		<p><i>Note: SO2 has been completed and will be removed for next report. To be determined if a new objective can be developed.</i></p>
2.1	Negotiate with Health Canada to increase funding to perform additional water quality monitoring activities and associated materials.	Completed.

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.	Joint planning meeting held between Social Committee & Tsi Niionkwarihò:ten to plan quarterly joint activities to incorporate more culture & Kanienkeha language into activities. An integrated calendar of events is being worked on. More activities will be planned for after-hours & weekends to accommodate essential service employees who can't always benefit from activities due to scheduling.
1.2	Review and revise the current recruitment process at KSCS by March 2019.	There has been slight delays in this area but will become a priority area to complete by April 2019. Tsi Niionkwarihò:ten coordinator has developed an Onboarding process to welcome new staff to our language & culture program at KSCS.
1.3	Enhance staff wellness by becoming more strategic and proactive in supporting employee management of a healthy and balanced life.	Researching being conducted on methods to gauge employee satisfaction. Presentation provided to management on organizational culture and employee satisfaction, follow-up work to continue. Meetings held with group health insurer to ensure benefit management is provided fairly and consistently.
1.4	Create a KSCS Training and Development process & plan by April 2019.	Monthly Supervisory training is being planned with a survey being developed for management input; 5 employees attended a 3-day training focusing on supervisory skills for new managers/supervisors. Ideally, we could develop a pilot project for global training coordination.
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.	Within this timeframe, meetings were held with the OSS team leaders and validation/team building activities for all OSS staff helped everyone to feel better connected.
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 coaching & support with new supervisors to understand PMP process; refresher on performance management training being planned for all staff prior to end of performance cycle.
2.2	Develop and provide HR database access and training.	Training with management conducted on new database; supervisor access being developed, then training planned.
2.3	Create an electronic user friendly OSS Resource library (include policies, directives, benefits etc.).	Awaiting infrastructure to be finalized; currently testing a resource listing for KLT managers.
2.4	Provide support and guidance to KSCS management in implementing strategies.	Advice, technical support and guidance has been offered on an on needs basis. A formal tracking system may need to be explored.

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.	This has had some delays, but is going to be an important activity for the next year, as this has been identified as a high priority in Workforce Assessment and Organizational Review. Follow up to involve putting a formal workplan together.
3.2	Adjust services to better meet the needs of KSCS by March 2019	These activities will follow 3.1.
3.3	Update and maintain an OSS policy framework that provides guidance to KSCS	Work continues and other processes for managing policy reviews and revisions are under review.
3.4	Ensuring KSCS staff are continually informed of all OSS services available.	Work has begun on creating an inventory of all services that will be incorporated in a pamphlet for staff

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.	Team in development, will be working on terms of reference & work plan development; delayed because awaiting results from organizational review. Research into best practices has been on-going.
4.2	Provide training on evaluation and surveys.	Statistics Canada was brought in to provide general training on survey development for staff who have been designated or interested in creating and surveying clients especially for summer programming. Recommended to provide a second round for those on waiting list. Ongoing, informal one-on-one training and support has been provided by OSD with various service areas.
4.3	Establish and engage in effective and safe dialogue between KSCS, Kahnawa'kehró:non and our partners.	OSD continues to provide support, advice and assistance to various service areas in creating and analyzing surveys/feedback. In June the Board worked with Communications to launch a Services Feedback form. A News Release was done to inform community and promote use of the form. The new form can be found on our website and at every satellite office.

KSCS SUPPORTIVE SERVICE TEAM UPDATES

FACILITIES MANAGEMENT

Dwayne Kirby, Manager



A draft Strategic Plan for Facilities Management (which encompasses maintenance and security at all offices as well as the kitchen at Turtle Bay Elders Lodge-TBEL) was completed with strategic objectives and goals for each. The draft plan is being presented internally and being finalized to be included in the next report with updates.

The following is a summary of the strategic objectives to be attained by Facilities Management Team:

- **Strategic Objective #1:** Support and continuously improve KSCS services through sustainable, environmentally friendly and cost effective maintenance practices that add to the value and integrity of its assets.
- **Strategic Objective #2:** Create and maintain a culture that will foster teamwork, happiness, motivation and success.
- **Strategic Objective #3:** Assure the continuity of high quality and timely maintenance services to staff, clients and community.
- **Strategic Objective #4:** Enhance the management of KSCS facilities through continual process improvements.

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** reflecting major activities within this reporting period.

- Transfer of fire and security monitoring systems at all KSCS facilities to new company
- Coordinated and completed roof top Air Conditioning unit replacement at Services Complex
- Repainted Services Complex front porch, steps and canopy.
- New office commissioned to meet needs for Team Leader of Administrative Services at KSCS main building. Further main office renovations in the planning.
- Staff support and coordination provided for large global activities held over the summer i.e. ALS fun fair equipment and tents transport, set up and takedowns
- A'nowarahne (sixplex next to TBEL) inspection completed along with a 1 year plan for the scheduling of repairs created.
- TBEL renovations wrapped up and final report submitted to INAC.
- TBEL Certification recommendation led to contract implementation for Linen and Uniform Services for Maintenance, Security, and Kitchen staff.
- Ashlan Phillips, Kitchen Services Team Leader hired in August.
- Transition plans between TBEL Kitchen Services and KMHC Kitchen Services developed and scheduled for October 2018. KMHC will transfer the operations of the kitchen services back to KSCS Kitchen Services.
- Final phase of TBEL Garden project implemented.
- Facilitation and completion of the Grounds Keeping Project in collaboration with the Church of the Latter Day Saints Volunteer Services was done at both TBEL and ALS sites.

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 January 2018.	The managers now have a better understanding and will be able to align their budget with the strategic plan for the upcoming year.
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.	Organizational Review is now complete and changes will be happening once Organizational Review Team has started process of implementing recommendations. Once the team is comfortable with the organization's organigram, we can continue with the chart of accounts changes.
SO 2. Improve financial services based on the knowledge and understanding of client needs		
		Challenge: Same challenges of time and staff to complete these tasks.
2.1	Design and implement a consultation with clients that will assess financial services offered and needs by February 2019.	Initial discussion has begun on what an internal client consultation could look like.
2.2	Implement a client engagement process that will identify areas for improvement and client needs by March 2019.	Will need to discuss the bigger picture of client engagement with Executive Director considering the recent implementation of the Service Feedback Forms.
SO 3. Enhance KSCS management and staff financial skills and practices that will assist them in fulfilling their current and planned needs		
3.1	Review and update those financial procedures and policies that ensure the timeliness of services by March 2019 and communicate them to staff.	Work is progressing on the procedures and policies. Advancing slowly.