



# KSCS STRATEGIC PLAN (2016-2019) 6<sup>th</sup> UPDATE REPORT

(covering September 2018 to November 2018)

## ABOUT THIS REPORT

The purpose of this report is to provide a progress update on the implementation of our strategic plan which spans a three year time frame ending 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 is 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 narrative of the strategic work happening in the organization as well as the highlights and challenges faced as we all work together towards accomplishing our mission and vision.

## KAHNAWAKE SHAKOTII'AKEHNHAS 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 Kahnawà: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 Kahnawà'kehró:non 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 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 Kahnawà'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 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;
  - Onkwanèn:ra
  - Teen Group
  - Drama
- Secondary Prevention;
  - Support Counsellors
- Family & Wellness Center;
  - Parenting Program
  - Traditional Services
  - Where the Creek Runs Clearer
  - Satatenikonrarak... and several related services for each area.

#### SUPPORT SERVICES

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

#### ASSISTED LIVING SERVICES

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

#### HOME AND COMMUNITY CARE SERVICES

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

#### ENVIRONMENTAL HEALTH SERVICES

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

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

## COLOR CODING

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

<b>GREEN</b>	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.
<b>YELLOW</b>	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.
<b>RED</b>	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.
<b>BLUE</b>	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 March 2019.	Each Manager is responsible for their own team's health and quality of working life with support from the KSCS Social Committee and Organizational Support Service (OSS). Date has been revised to allow for incorporation of recommendations from organizational review into 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 March 2019.	Training plan completion date has been revised further. Some larger scale training initiatives that occurred during this timeframe were Anxiety Intervention Training, Applied Suicide Intervention Training, and Performance Management Refresher training for managers and staff as well as Trauma Informed Attachment training.
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 March 2019.	Still waiting movement on the recommendations of the organizational review which will guide this objective. HR team completed research for the Board on our compensation system, and recently got unanimous approval from the Board to move forward with salary adjustments.

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:n, by March 2019.	The Organizational Review provided specific recommendations for the organizational structure at KSCS. The Organizational Review Implementation Team (4 Board members and 4 Managers/Directors) presented a completed plan to the board. Awaiting further meetings with the Board to determine re-organization.
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.	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 March 2019.	No movement. Date has been revised. Organizational Strategic Development (OSD) to resume check in meetings with each Manager and Director to assist KPI development.
3.2	Get valid and timely client data by March 2019.	The new case management software is now being used in all KSCS service areas. By April 2019 it will have been in use for one full year. Date has been revised to reflect this. Client data is being gathered with the software but is not yet being analyzed.

## ORGANIZATIONAL OBJECTIVES continued

SO 4: Enhance use of IT & Communications technologies to improve client services and follow-up		
4.1	IT: Implement VOIP system beginning with the Main office by July 2017 and completing by October 2018.	Environmental Health Services, Assisted Living Services and the residents at Independent Living Services are using the VOIP Telephone system. Home and Community Care Services will be connected early in January (delay due to a glitch in the wireless telephone component of 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.	All our satellite officer are now connected through the community fiber network. The next steps will be to purge unnecessary files from the external servers and migrate all the data to the centralized server located at the main office.
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.	The one year testing of a centralized KLT directory has come to an end and OSD will evaluate its effectiveness with KSCS management.
4.4	IT: Organizational access to scheduling software for meeting and training rooms by November 2018.	Complete. Removal of this objective is recommended since issue has been resolved.
4.5	Communications: Conduct a review on how KSCS communicates internally by October 2018.	Began drafting an internal communications survey for KSCS.
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.	Complete. Three staff from Prevention Services now have access to upload posts directly to Facebook. Removal of this objective is recommended or mark it completed in future updates.

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 February 2019.	<p>Date has been revised. Finance continues 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 March 2019.	Date revised. Work is being carried out. Management continually encouraged to flag access issues with the ED. ED informs management of Coalition of English Speaking First Nation Communities in Quebec (CESFNCQ) activities and access issues identified in other regions. Still reviewing Onkwata'karitáhtshera's role within this objective.

## 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 March 2019.	<p>No movement. Date revised. The follow up still outstanding with KLT to review and existing document from CHP. Will need to also look at including internal partnerships (within KSCS) which are just as important.</p> <p>Of note for partnerships: HR Team Leader attended a Cannabis legislation conference, researched impact on our policy &amp; then worked with OSS Manager and Communications to create a pamphlet. Staff info sessions on Cannabis were organized and information was shared. KSCS shared its policy/info with two other community organizations that made requests.</p> <p>Internal partnerships are being strengthened as a result of those involved in the Family Services monthly meetings.</p>
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### 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.	<ul style="list-style-type: none"> <li>• The Secondary Prevention Team has been attending oral teachings meetings with community resource people as a forum for discussion on how to include more tsi niionkwarihò:ten in services.</li> <li>• The Prevention and Support Admin team included the Tsi Niionkwarihò:ten program coordinator in bi-weekly meetings. Input is shared on including our ways in areas such as intake, and assessments.</li> <li>• The KSCS Tsi Niionkwarihò:ten and Social Committees have teamed up to ensure that 4 joint activities are carried out per year for staff.</li> <li>• The program coordinator attends the Tsi Nón:we Ahsonhnhiióhake' and Skátne lonkwaio'te meetings regarding collaborations such as SOW Open House, Sweat Lodge Training, and brainstorming ideas for programming.</li> <li>• Meetings with KSCS HR have focused on tracking process for the MCK Language and Culture training program. Clarification/policy is needed for supervisors and staff on recognized training hours.</li> <li>• The Tsi Niionkwarihò:ten component of the KSCS On-Boarding Process was presented to the KLT and HR. A test run of the On-Boarding presentation was carried out with students. Revisions and follow up meetings with HR is needed prior to launch of the Pilot Project for the new fiscal year.</li> <li>• Regarding external partnerships, the Program Coordinator participates in the Tewahará:tat Tsi Niionkwarihò:ten Language and Culture Network (currently focusing on 2019 Year of Indigenous Languages) as well as the Tehotirihwaienawà:kon Traditional Approaches subcommittee of Onkwata'karitáhtshera (looks at ways to encourage and support tsi niionkwarihò:ten approaches to health and healing).</li> <li>• An additional Tsi Niionkwarihò:ten Program Coordinator has been approved and will begin in the new year assisting with reporting, program planning and development as well as follow up on collaborative efforts (particularly items 4 and 5 of yearend report which were too large for the scope of this period and 1 coordinator).</li> </ul>
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## ORGANIZATIONAL OBJECTIVES continued

<b>8.2</b>	<p>To enhance the awareness of K.S.C.S. staff on tsi niionkwarihò:ten topics (ongoing calendar of events)</p>	<ul style="list-style-type: none"> <li>• A draft calendar of planned staff events following the Cycle of Seasons has been created and distributed.</li> <li>• A staff lending library was set up in the kitchen of the main building. Documents also available to staff in an electronic folder. Staff starting to use the materials.</li> <li>• In Nov. 2018 Collaboration between Foster Care, Prevention and the Tsi Niionkwarihò:ten Program offered to community “Multigenerational Trauma and Resiliency” training by Suzy Goodleaf (33 participants). Additionally “Trauma Informed Attachment” 2 day training was provided to KSCS staff (25 staff attended).</li> <li>• Kanien'kéha sessions for staff started Oct. 17 and ran to Dec. 19, 2018. 20 staff expressed interest, and 14 completed the Unit 1 program. Planning for Unit 2 in January to March 2019.</li> <li>• Currently, 5 KSCS staff are participating in the MCK Language and Culture program. Support to staff is on-going.</li> <li>• The Program Coordinator assisted staff of Tsi Nón:we Ahsonhnhiióhake' in their Sweats Training to study the Kanien'keha speeches component.</li> <li>• Tsi Niionkwarihò:ten Committee offered Medicine Making workshop to staff in Oct. 2018. Committee reps demonstrated salves, tea and immune boosting syrup to staff.</li> </ul>
<b>8.3</b>	<p>To provide KSCS a Final Report on the Tsi Niionkwarihò:ten pilot project by April 2018.</p>	<p>Completed however yearend reports will be produced by the end of each fiscal year. The main areas for this year's report:</p> <ol style="list-style-type: none"> <li>1. On-Boarding Pilot Project</li> <li>2. Streamlining the MCK Language and Culture Training Request and Tracking process.</li> <li>3. Training and Education Plan (ex. Kanien'kéha' sessions).</li> <li>4. Cultural Competencies and the Performance Management Process.</li> <li>5. Discussions with KSCS Programs and Services.</li> </ol>

## KSCS SERVICE DELIVERY TEAM UPDATE

### PREVENTION SERVICES

*Terry Young, Manager*



SO 1: Know our clients potential and their priority needs		
1.1	Complete the analysis of internal evaluation by April 2017, and revise programming and services to address the major gaps by April 2019.	Manager considering contracting out for final review of the document and finalize it. Timeframe change required to move to April 2019 in order to complete this.
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 April 2019.	The update is the same as last quarter, there has been no movement on this as it needs to be developed in a larger KSCS service approach-date extended.  <i>*Note: Evaluation in general is being discussed with all service areas. Exploring the consolidation of global evaluation related objective/goals from each service area and placing under Organizational Objective 2. Changes will be reflected in next quarterly report.</i>
1.3	Design and implement "client helpfulness indicator" (CHI) for April 2018.	No movement on this tool design and may need to develop own for services area in Prevention. Some staff have received training on survey design. Considering use and fit of KSCS Feedback Form with our programs.
SO 2: Ensure our children & youth receive a healthy, positive start		
2.1	Evaluate and address the program gap for 5 year olds, by May 2019	Now that all 3 parenting workers are in their roles at the Family Wellness Center, meeting scheduled in January 2019. Manager will work with the Team Leader to develop and then implement an enhanced Parenting Program-date needed to be extended
2.2	Enhance summer programs to ensure full access for all youth, regardless of family income by April 2017.	Although completed, the goal has become regular practice as the evaluations need to be completed regularly. Summer program planning for 2019 begins in January.
2.3	In partnership with education and the schools, enhance our prevention (healthy lifestyle) team activities in the schools, by September 2017.	Although completed, the goal has become regular practice. The In School Prevention team continues to meet monthly to discuss programming needs and goals for each of the schools.
SO 3: Empower healthy Kanien'kehá:ka families		
3.1	Establish the Family Preservation Unit, with full programming, starting no later than April 2019.	Final report completed and submitted to Executive Director and Director of Family Services. Director will work with Executive Director on recommendations provided for the Family Preservation Model approach implementation. Timeframe adjusted (4 months added) to April 2019 to reflect implementation of this objective.
3.2	Enhance our "one-stop" service model to assure that any client in need will receive timely help from qualified personnel, by June 2019.	Implementation of "timely" services based on the needs of the clients is being explored and discussed at Family Service meetings. Looking to involve Director and the other managers more in discussions. The P&S Admin team have also been discussing a number of issues related to one stop service and are preparing to make recommendations on changes to current services. The date has been extended to June 2019.
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 has been ongoing. Team Leaders have incorporated this into their Performance management process as Key Result Areas. See Organization Objective 8 updates.

## PREVENTION SERVICES continued

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.	Slightly delayed however 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 has been ongoing. Mary McComber is incorporating the recommendations that came from the final report within the development of the new program. See Organization Objective 8 updates.



## KSCS SERVICE DELIVERY TEAM UPDATE

### SUPPORT SERVICES

Cheryl Zacharie, Manager



<b>SO 1: Empower Kahnawa'kehró:nnon (individuals and families) to take control of their lives</b>		<p><b>Highlight:</b> We continue to work toward empowering our clients to take control of their lives. Our approach to providing services has been more client focused. As an organization we have released the Service Feedback Form which will offer feedback in relation to our services.</p> <p><b>Challenge:</b> While we are moving forward, we have not been able to implement recommendations of the community consultations/workforce assessment.</p>
1.1	Design & implement a systematic process to consult with clients on a regular basis to identify their priority needs & obtain their timely assessment of the quality of our services, by Apr. 2019.	<p>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.</p> <p><i>*Note: Evaluation in general is being discussed with all service areas. Exploring the consolidation of global evaluation related objective/goals from each service area and placing under Organizational Objective 2. Changes will be reflected in next quarterly report.</i></p>
<b>SO 2: Improve healthy Kanien'keha:ka development options for youth</b>		<p><b>Highlight:</b> We have been working toward improving available options for youth and recently completed the draft job description for a Youth Transition Worker who will work with our youth who are aging out of care by offering support and assistance.</p> <p><b>Challenge:</b> While we have been successful in meeting the ongoing needs of children requiring care, recruitment of new Foster families is a constant need</p>
2.1	Recruit & train minimum 10 skilled/qualified foster homes in the community-on-going.	We have been able to meet the ongoing needs of children requiring care, recruitment of Foster families continues to be a challenge. We are working with the communications team to increase public relations to gain 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 April 2019.	We did not meet this initial deadline of Dec. 2018, we have since completed the draft job description. Awaiting approval, our updated goal is to have a Transition Worker in place by start of the new fiscal year in April 2019
2.3	Improve support for our youth in institutions outside the community (e.g. Batshaw), by April 2019.	This objective will need to look at issues encountered amongst all services of the Family Services Unit (HCCS, ALS, and Prevention & Support).
<b>SO 3: Enhance the effectiveness of our youth protection, the Kanien'keha:ka way</b>		<p><b>Highlight:</b> KSCS along with Tewatohnhisaktha and KEC, discussing viability of a Kahnawake BSW program and will pursue options in the new year.</p> <p><b>Challenge:</b> Law 21 continues to present us with issues and as a result, we have run into barriers when attempting to hire caseworkers who meet the criteria of the Order.</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 election there has been no movement toward getting final approval for the establishment of the Kahnawà:ke Youth Protection Directorate.
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 2019.	Recommendations from the Family Preservation Project has recently been released and we can anticipate many positive changes to service delivery. Moving forward we will have to evaluate and analyze our current structure and services in order to determine the best practices for assisting our clientele. Timeframe needs to be extended to April 2019 due to delays.

## SUPPORT SERVICES continued

<b>SO 4: Break the recurring and normalizing pattern of addictions</b>		<b>Highlight:</b> The ARS team continues work on an initiative with Kahnawake CrossFit, focusing on physical fitness as a means of encouraging a holistic approach to sobriety. Presentation on addiction to Electronic Gambling Machines sparked opportunity for further discussions and partnerships.
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.	ARS staff and other service areas recently received a 30 hr training on advanced clinical issues in Mental Health and Addictions. Staff continue to receive ongoing training in the area of Opioid use. With the recent legalization of Cannabis, staff continue to work alongside Prevention Services to promote information and education but also to address more clinical issues that may arise.
4.2	Research and recommend implementation of new tools to address drug use (e.g. DUSI-R) Drug Use Screening Inventory by April 2019.	Working towards implementing the DUSI R. Recent discussions with IT services to ensure that the program can and will meet our needs moving forward. Timeline reconsidered and have set a new goal of implementation for the new fiscal year.
4.3	Secure a youth case worker for ARS to address the specific needs of youth with addictions by Sept. 2019	Was completed however position currently open again and need to develop a new recruitment strategy by Sept. 2019.
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 Dec. 2018.	With the legalization of Cannabis, staff continue to work alongside Prevention Services to promote information and education but also to address more clinical issues that may 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 2019.	In the November 2018 Tehontatoris session, Concordia University presented on Electronic Gambling Machines. It was well attended, videotaped and sprouted the opportunity for building partnerships within the community.
<b>SO 5: Assess and upgrade our psychological services</b>		<b>Highlight:</b> The Psychological Services Team has been able to maintain fully functioning services despite ongoing staffing issues. We have replaced our Psychological Services Coordinator and filled the Psychologist/ Clinical Supervisor position.
5.1	Design a systematic process to consult with clients to identify their priority needs, by April 2019.	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.	Although completed, with the recent hiring of a new Psychologist, our hopes are that we can build on the findings of the review and work towards implementing the recommendations.
5.3	Put in place a fully capable, professional psychological service by October 2019.	We have recently filled our Psychologist/ Clinical Supervisor position and have also been able to replace our Psychological Services Coordinator. With a full team in place we are able to maintain a fully functioning service but also work towards further growth.

## 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 & implement an effective clinical assessment tool to enable caseworkers & families to assess needs & develop effective service plans, by April 2019.	Assessment tool selection has been finalized, training on tool scheduled for end of Jan-early Feb. The psycho-educator position has successfully been filled which will have a direct impact on the assessments and enhanced service plan development for our clients.
1.2	Address the current gap in proper services for children by developing an information package for special needs caregivers, by September 2019.	Steering Committee feels that more work required on package before printing and distribution. Possible candidates are being looked at to complete the gaps of information remaining within the document.
SO 2: Enhance the quality of life & recognition/appreciation of each client		
2.1	Foster, develop & implement more opportunities for the athletic, artistic & other kinds of personal development & excellence of our clients, with the full recognition & active support of the community.	Completed. Now ongoing practice within service. In support, began tracking and keeping stats on all programs and participation levels.
2.2	Maximize the integration of the clients into community activities, including employment (on-going).	Work in this area on-going.
SO 3: Assure continuity of quality care for each dependant		
3.1	Establish a full-time residential unit (for a min. of 12 persons) as a planned alternative caregiver option for aging caregivers by December 2019.	The capital costs for building the residential component for special needs being worked on, report expected to be complete by December 2018. Next step- identify all the operational costs. Task to be completed in the next quarter.
3.2	Develop and implement a viable respite capability to accommodate special needs individuals by September 2019.	Support continues; case workers are assisting families in accessing respite dollars through the CLSC.
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 Sept. 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.	A site assessment has been completed by First Nations consultants and a report with recommendations is expected by end of December 2018.
4.3	Develop an alternative funding strategy, involving all three levels of government and other partners, to support the required physical expansion & the additional staff requirements, by Mar. 2019.	In the beginning stage of talks. MCK has indicated support and willingness for the expansion of the physical operating space including construction of a residential component for special needs individuals.

## KSCS SERVICE DELIVERY TEAM UPDATE

### HOME & COMMUNITY CARE SERVICES (HCCS)

Mike Horn, Manager



SO 1: Enhance client-centered service delivery		<b>Highlight:</b> Additional funding opportunities. <b>Challenge:</b> High rate of human resource changes in Home Care Nursing and HCCS Case Worker positions. No success yet in recruitment of Clinical Supervisor.
1.1	Evaluate current services from a client perspective and make timely adjustments to programs (on-going).	<p>Evaluation continues to be based on individual client assessments, and Client Service Plans.</p> <p>October 16<sup>th</sup>, 2018 purchased 25 medication boxes and secure locks, to enhance medication dispensing to clientele with identified needs.</p> <p><i>*Note: Evaluation in general is being discussed with all service areas. Exploring the consolidation of global evaluation related objective/goals from each service area and placing under Organizational Objective 2. Changes will be reflected in next quarterly report.</i></p>
1.2	Review client activities/services that now can be enhanced due to block funding and report on by April 2018.	Completed. However continue to meet funding and reporting requirements.
1.3	Modify (reorganize) and enhance (when possible) HCCS personnel that will ensure better client service delivery by June 2018.	<p>Dec 2018 finalized 4 year funding agreement with Kateri Memorial Hospital Centre to enhance Home Care Nursing, Home Care Mental Health Nursing, and HCSS Activity Program.</p> <p>TBEL and kitchen team services now under the supervision of HCCS manager effective October 8th, 2018.</p>
1.4	Increase the physical capacity (beds/rooms) at the Elders Lodge to meet the needs of the community and staff (on-going).	In Dec 2018 attended meeting with MCK Housing Department and Chiefs to discuss an additional 10 apartment expansion to Turtle Bay Elders' Lodge.
SO 2: Assure the dignity, autonomy and quality of life for elders		<b>Highlight:</b> funding available via proposals. <b>Challenge:</b> short time-frames to utilize the funding acquired.
2.1	Fully implement and evaluate the "falls response protocol" by March 2019.	<p>Protocol still being utilized by HCCS and TBEL staff.</p> <p>The team will be reconvening committee meetings to strategically plan for evaluation and enhancement to other components of HCCS service areas.</p>
2.2	Identify & address situations of Older Adult Mistreatment through Promotion and Education awareness campaigns on an ongoing basis.	Oct. 2018 submitted a proposal to One-Time Projects Aboriginal Affairs, to host a 2 day workshop in February 2019, inviting traditional speakers to share their knowledge through story telling which would highlight historical and cultural relevance regarding respect and cultural responsibilities toward elders.
2.3	Enhance palliative care capability and service (on-going).	<p>Oct. 2018 4 members of HCCS Palliative Committee attended the International Palliative Care Conference and shared information and material obtained with those involved in providing palliative care.</p> <p>Nov. 2018 11 HCCS staff attended a Loss and Grief training workshop to assist in coping with the loss of palliative clients they are assisting.</p>

## KSCS SERVICE DELIVERY TEAM UPDATE

### ENVIROMENTAL HEALTH SERVICES (EHS)

*Donald Gilbert, Team Leader*



SO 1: Enhance client-centered service delivery			<b>Highlight:</b> With the increased field work, we have been able to provide face-to-face information related to EHS & KSCS services. We are also looking at providing information for homeowners regarding general health and safety issues we notice while visiting the properties.
1.1	Revisit current water quality monitoring schedule and increase frequency of bacteriological and basic chemical analysis if necessary.		This quarter we were able to resample 309 wells for bacteria. Of those 309 wells, 5 wells needed to be disinfected. Getting difficult to resample some homes due to weather and some have shut their outdoor taps anticipating freezing temperatures.
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			
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



<b>SO 1: Assist in the assurance that KSCS has healthy and qualified staff using a holistic approach.</b>		
1.1	Ensure the KSCS Social Committee plans activities that support staff wellness, using a holistic approach.	The committee is in the third quarter of our annual plan of activities. Offered in-house wellness massage day offered to staff; mindfulness seminar; staff & family Halloween activities. A joint social and cultural activity held with Tsi Niionkwarihò:ten committee – ribbon skirt making for staff held in the evening.
1.2	Review and revise the current recruitment process at KSCS by Sept. 2019.	HR has developed a new onboarding program that will be piloted in January and evaluated after 6 months. Tsi Niionkwarihò:ten will be incorporated into the process. Goal is to provide new workers with the tools, resources & knowledge they need to be successful & productive workers. The date was extended to reflect evaluation.
1.3	Enhance staff wellness by becoming more strategic and proactive in supporting employee management of a healthy and balanced life.	Ongoing planning to gauge current levels of employee satisfaction. Working with the HR network to seek a new EAP (employee assistance program) provider in order to meet the continued needs of employees.
1.4	Create a KSCS Training and Development process & plan by April 2019.	Continued planning for Supervisory training; knowledge, skills & abilities required for the jobs, and assessment of current skill levels to develop training plan. Global training plan will be assigned to a specific coordinator to develop in the new fiscal year.
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 staff worked on team values to develop a Code of Conduct. Proud to see that 5 of OSS staff are attending the in-house Kanien'keha classes – In support of language & culture (KSCS Organizational Objective). We also have one OSS team member in 3 <sup>rd</sup> year of the 5 year MCK language & culture training program.
<b>SO 2: Ensure OSS provides skills, resources, opportunities and accountability processes that will empower KSCS staff, and will contribute to their competence and satisfaction.</b>		
2.1	Support employee coaching for performance, using existing PMP practices to support employees in achieving their goals.	All staff and supervisors received refresher training on the PMP process to increase knowledge of the system & tools; will also ensure the program is being applied consistently.
2.2	Develop and provide HR database access and training.	Changes in the database software prevented us from giving access to team leaders and training them on use. Managers & Director have access to HR database files of all their employees. In the next quarter we will work on a solution with the database company.
2.3	Create an electronic user friendly OSS Resource library (include policies, directives, benefits etc.).	The shared KLT resource listing is coming up to the 1 year mark; is being evaluated with managers. SOPs will be developed to ensure effective file management before it becomes available to all staff.
2.4	Provide support and guidance to KSCS management in implementing strategies.	Advice, technical support and guidance continues to be offered as needed. A tracking system for new requests to be developed. Organizational Strategic Development provided guidance and assistance with the editing, packaging and finalization of the Family Preservation Special Project Final Report.



## 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 2019.	Heavy workload has this delayed to new fiscal year. Date has been revised.
3.2	Adjust services to better meet the needs of KSCS by March 2019	Dependant on completion of 3.1.
3.3	Update and maintain an OSS policy framework that provides guidance to KSCS	A Documentation Control Process was developed to track policy revisions & amendments. Will be piloted with Board for Personnel Policy review.
3.4	Ensuring KSCS staff are continually informed of all OSS services available.	Info on OSS services gathered and updated; slight delays as we are developing an interactive online pamphlet and are waiting for the shared resource infrastructure (2.3) to become operational. In the interim, a traditional paper pamphlet is being created.
SO 4: Develop and implement processes to involve clients directly in the timely evaluation and improvement of KSCS programs		
4.1	Create an internal evaluation team and determine roles and responsibilities.	Evaluation team will pick up after the holidays to focus on terms of reference and development of work plan for internal evaluation. On the interim, OSD has been in discussions with various teams re: their needs for evaluation. <i>*Note: Evaluation in general is being discussed with all service areas. Exploring the consolidation of global evaluation related objective/goals from each service area and placing under Organizational Objective 2. Changes will be reflected in next quarterly report.</i>
4.2	Provide training on evaluation and surveys.	The Statistics Canada survey training will be brought back in the new year. Research has been ongoing to find a provider for evaluation training. OSD continues to provide support to managers and teams on issues related to evaluations and surveys.
4.3	Establish and engage in effective and safe dialogue between KSCS, Kahnawa'kehró:non and our partners.	Finance services had attended the survey training, and successfully developed & launched an internal client satisfaction survey with staff. OSD provided support with reviewing questions, implementing the survey on Survey Monkey & also assisted with compiling the data. OSD is assisting Communications with developing a client feedback survey to gather important information on community perception. This will be launched in the new year. Feedback will be used to help develop a communications strategy.

## KSCS SUPPORTIVE SERVICE TEAM UPDATES

### FACILITIES MANAGEMENT

*Dwayne Kirby, Manager*



SO 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.		
1.1	Put a storage management process for KSCS managers into effect that clearly outlines access, usage maintenance and evaluation of storage space (containers) acquired for each satellite office by March 2019.	Inventory of square footage per facility undertaken. Asset inventory of KSCS for insurance purposes as well as storage planning in progress.
1.2	Improve after hour security measures (such as lighting, video surveillance, locks etc.,) and protocols at all KSCS buildings by March 2019.	Services Complex camera system upgraded. All facilities security monitoring systems upgraded. Fire panel upgrades to be in capital plan for fiscal year 2019-2020.
1.3	Incorporate Tsi Nionkwarihò:ten (our ways) where possible into maintenance practices and operations (such as reducing environmental footprints) by December 2018.	Use of Kanienkeha encouraged each day in service delivery. Eco-friendly cleaning supplies beginning to be phased in.
1.4	Enhance existing partnerships through creation of formal agreements with other partner organizations that outline details of collaborative efforts in delivery of services by December 2019.	Dialogue with MCK Director of Asset Management on collaboration for specific facilities related projects: Maintenance Management software acquisition.
SO 2: Create and maintain a culture that will foster teamwork, happiness, motivation and success.		
2.1	Implement a professional development and training plan for all Facilities Management team members (both full time and on call) that will ensure everyone has reached standard level of competency by December 2019.	No movement yet.
2.2	Implement a team building validation process with quarterly events that will help foster happy and healthy employees by March 2019.	Sporadic after hour team activities currently in practice.

<b>SO 3: Assure the continuity of high quality and timely maintenance services to staff, clients and community.</b>		
<b>3.1</b>	Acquire a facilities management software program that will support facility management activities and ensure requests and work completed are tracked and within budget by June 2019.	In progress. Maximo software consultation underway in collaboration with MCK & Tewatohnhi'saktha.
<b>3.2</b>	Ensure service delivery and workflow are aligned with the needs of the team's diverse clients and multiple sites by September 2019.	Day to day service delivery is fluid, however improvements via updated standard operating procedures, work order prioritizing and processing to be undertaken with software management (implementation of 3.1).
<b>3.3</b>	Complete all current facility upgrades and renovations identified in the 2017/18 capital plan year within budget by March 2020.	Ongoing and adjustments being made as organization evolves and will be reflected in capital plan 2019-2020.
<b>3.4</b>	Determine key messages and continuously convey effective communications that informs clients of our service delivery standards and processes along with realistic expectations for projects by March 2020.	No movement yet. To begin in new fiscal year. Pertinent information is conveyed when required pertaining to facilities related functions and projects.
<b>3.5</b>	Implement a system that will inventory and manage facilities equipment and supply needs, access and usage in order to meet the needs of the team and organization by September 2019.	Groundwork for this objective is in the early stages, more details should follow by next report.

<b>SO 4: Enhance the management of KSCS facilities through continual process improvements.</b>		
<b>4.1</b>	Research best practices to ensure Facility Management Services are efficient, effective and safety focused by September 2019.	No movement yet.
<b>4.2</b>	Review current Facility procedures/practices to ensure they are alignment with organizational policies, by December 2019.	No movement yet.
<b>4.3</b>	Improve current procedures/practices based on findings and ensure they are implemented consistently among all staff by December 2019.	No movement yet.
<b>4.4</b>	Implement a clear, step by step process to aid the development of a long range (3 year) capital plan that identifies priorities within each budget cycle by March 2020.	No movement yet.
<b>4.5</b>	Implement annual client satisfaction surveys and focus group(s) to gather client feedback that will identify satisfaction with the quality and timeliness of services by March 2020.	No movement yet.

## KSCS SUPPORT SERVICE DELIVERY TEAM UPDATE

### FINANCIAL SERVICES

*Dana Stacey, Finance Controller*



<b>SO 1: Enhance short and long term global financial planning efforts based on sound financial practices and operations</b>		
<b>1.1</b>	Integrate the implementation of the strategic plan with the budget by January 2018.	Continuing progress on Manager's understanding of budgets.
<b>1.2</b>	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.	This project is on hold until the organization's organigram has been finalized. No further update.
<b>SO 2: Improve financial services based on the knowledge and understanding of client needs</b>		
<b>2.1</b>	Design and implement a consultation with clients that will assess financial services offered and needs by February 2019.	Internal consultation complete, currently working on review and implementing recommendations.
<b>2.2</b>	Implement a client engagement process that will identify areas for improvement and client needs by March 2019.	Internal client consultation complete. Areas for improvement were identified and will be addressed. Next step would be to consult external clients.
<b>SO 3: Enhance KSCS management and staff financial skills and practices that will assist them in fulfilling their current and planned needs</b>		
<b>3.1</b>	Review and update those financial procedures and policies that ensure the timeliness of services by March 2019 and communicate them to staff.	Updated the Finance Manual and created a Finance policies and Procedures Manual. Currently reviewing to see if only one document is necessary.