



KSCS STRATEGIC PLAN (2016-2020) 9th UPDATE REPORT

(Covering July 2019 to September 2019)

ABOUT THIS REPORT

The purpose of this report is to provide an update on our strategic plan which originally was to span a three year time frame ending March 31, 2019. A decision was made by the KSCS Board of Directors to add an additional year and extend the timeframe to March 2020.

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 is committed to providing regular updates to our Board of Directors, staff and community on the progress we are making in each area of service. These updates can be found in these reports and available on our website kscs.ca.



KAHNAWAKE SHAKOTIIA'TAKEHNHAS COMMUNITY SERVICES STRATEGIC PLAN 2016-2020

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:n for healthy and fulfilling Kanien'kehá:ka lives..."

The number one strategic focus of the plan is to help empower Kahnawa'kehró:n 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 require a strategic focus on children, youth and young parents based within our culture.

STRATEGIC OBJECTIVE I

Be fully client-centered & client-driven

Re-focus on Kahnawa'kehró:n and their families as the single most important stakeholder

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

STRATEGIC OBJECTIVE II

Enhance community engagement & community-based partnerships

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

STRATEGIC OBJECTIVE III

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

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



OUR SERVICES

KSCS provides services that support the individual and family needs at every life stage of Kahnawa'kehró:n. The client services are grouped into five (5) service delivery teams:

PREVENTION SERVICES

- Primary Prevention;
 - Onkwān: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 FOR ELDERS & SPECIAL PEOPLE

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

HOME AND COMMUNITY CARE SERVICES

- Adult & Elders' Support Services & Programs
- Home Care Services
- Home Care Nursing
- Turtle Bay Elders' Lodge (25 beds)
- A'nōwara'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.

Created Sept. 28, 2016. Rev. Oct. 16, 2019

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 report.

GREEN	Goal/objective proceeding as scheduled.	Goal/Objective is moving well & is on track to meet the projected dates. Item is within budget. The required resources are approved & in place. Everything is fine & 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 & put on track with corrective actions. Attention required but we believe we can still be successful.
RED	Goal/Objective has met a major challenge & will not meet its projected dates.	Goal/objective is not moving & 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 & we do not believe we can deliver 100% successfully. Review & revisions are necessary. Requires management action to get back on track.
BLUE	Goal/Objective Completed	Goal/objective has been accomplished & 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 & 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) & 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 & follow up. The issues process outlined in "Implementation of Plan" should be followed.

ORGANIZATIONAL OBJECTIVES

Organizational objectives are the planned improvements & 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 & 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 & 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 & brief explanation of progress.

KSCS ORGANIZATIONAL OBJECTIVES UPDATE

KSCS Executive Director~ *Derek Montour*
 Director of Family Services ~ *Kathy Jacobs Horn*
 Director of Internal Operations~ *Wendy Walker Phillips*



SO 1: Assure KSCS has healthy and qualified staff		
1.1	Commit to & provide for a healthy & 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 & quality of working life with support from the KSCS Social Committee & Organizational Support Service (OSS). Date has been revised to allow for incorporation of recommendations from organizational review into plans. Family Services has staff activities that comprise of BBQ's, pot lucks, congratulation lunches and staff recognition and stage recognition activities.
1.2	<i>In collaboration with HR</i> , assess the skills requirements to meet the plan priorities & implement timely & systematic training, with an updated Training Plan completed for each unit by Dec. 2019.	See OSS update under 1.4
1.3	Develop an effective recruitment & 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 Sept 2019.	See OSS update under 1.2. Recommendations from the organizational review will be taken into consideration & incorporated in work beginning in this area.
SO 2: Enhance the organizational structure and work processes to deal with change		
2.1	Re-organize our structure & processes to provide best possible services to Kahnawa'kehró:non, by Sept.2019.	A new manager for Information Services has been recruited to form a new department that will bring I.T., Communications and Data & Research together. Each of these teams play an important role in managing the "flow of information" between community/clients and KSCS and will ensure for a better coordination of data & information. Family Services Manager job descriptions were reviewed and evaluated, next step is to create the 5 th Management Job Description. Plan to post November 2019.
2.2	Develop & implement a planned approach to deal with the changing work focus & re-organization in a constructive & fair manner, by September 2019.	In line with recommendations from the KSCS Organizational Review, KSCS is adopting changes to the organizational structure. This includes changes at the Director, Managerial, and Supervisory & Front Line levels. KSCS will be putting out separate communications regarding the Organization Review in the coming weeks. The organization structural changes will continue to occur during the next strategic plan given recommendations from the Organization Review & in anticipation of adjusted strategic directives. Strategizing on getting Family Services to embrace change. New management in Prevention is in the onboarding stage.
SO 3: Develop, organize & use valid, up-to-date data		
3.1	Develop valid Key Performance Indicators (KPI's) by March 2019.	No movement. This is both an individual team /service activity and a global activity. This has been noted that this will be a key activity and focus in next strategic plan.
3.2	Get valid & timely client data by Dec. 2019.	No new updates at this time.

ORGANIZATIONAL OBJECTIVES continued

SO 4: Enhance use of IT and Communications technologies to improve client services and follow-up

COMPLETED:

4.1 Information Technology (IT) Each KSCS unit will meet with IT Services to identify & prioritize their requirements for IT support, & finalize their action plans by December 2016.

Consultation completed for both goals. Needs have been identified & prioritized. New goals have been listed below as new 4.1 to 4.7.

COMPLETED:

4.2 Communications: Each KSCS unit will meet with Communications Services to identify & prioritize their requirements for effective communications technologies & finalize their action plans by December 2016.

4.1 COMPLETED:

IT: Implement VOIP system beginning with the Main office by July 2017& completing by Oct. 2018.

4.2

IT: Centralized location to store all files within the organization (include redundancy system backup at another location) by Dec. 2019.

Home & Community Care Service (HCCS) and Whitehouse are left to do. HCCS will be done in October. Waiting for folder and drives to be cleaned until then is delayed. Date needed to be adjusted from April to December, 2019.

4.3

IT: Centralize all the organizations important documents in one location including a table of contents that have hyperlinks to the files & templates by January 2019.

A folder was created with assigned access rights to Directors, Managers, and KLT members.

4.4 COMPLETED:

IT: Organizational access to scheduling software for meeting & training rooms by Nov. 2018.

4.5

Communications: Conduct a review on how KSCS communicates internally by Nov. 2019.

Community Perception and Satisfaction Survey completed and distributed back to community. Waiting for the new Manager of Information Services to be hired and to take the lead on developing a new communications strategy 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 COMPLETED:

Communications: Prevention Services having access to a KSCS Facebook page to promote events & activities by August 2018.

SO 5: Obtain the funding required to support the full implementation of the plan

5.1

Each KSCS service will develop a budget & capital plan by February 2019.

Finance continues to work with Managers on thinking about their budgets strategically & including projections for the completion of their strategic plan goals within the budget 2019/2020.

**Note: Strategic Objective to be revised as the funding required to support the strategic plan has been obtained but there is significant follow up.*

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 & clients are documented, reported on & addressed with the appropriate bodies by Dec.2019.

Meeting has been scheduled with representatives of the MSSS in order to dialogue about human rights concerns due to lack of access to English services.

SO 7: Strengthen our partnerships within our teams, our community and beyond		
7.1	Develop an inventory & description of the priority partnerships that KSCS must foster & revitalize at the local, regional & national levels, by Dec. 2019.	The Executive Director created a list of partnerships that KSCS is involved in; this has to now be passed to managers and supervisors for validation with the Family Services and the Internal Operations. Family Services Inventory completed identifying all partnership committees, working groups and regional tables.
SO 8: Incorporate Kanien'kehá:ka ways, language and culture in everything we do		
8.1	To gather information around KSCS staff prior knowledge & to begin discussion on how staff currently include tsi niionkwarihò:ten into their services/programs, by February 2018.	<p>The Tsi Niionkwarihò:ten Coordinators (Mary McComber & Christine Loft) continue to work with teams (ex. consult on tools for referral/assessment) such as Prevention and Support Admin and the Psychology department re: Culturally Appropriate Assessment/Test tools and incorporating to our work with involvement on an advisory committee at Douglas Research.</p> <p>Ongoing collection of pre/post assessments from On Boarding (OB) sessions with staff. A 4th OB session was done with the KLT. Follow up with other supervisors and remaining KLT members will continue in October. Tools need to be reviewed with others (from previous sessions) for follow up (post-tests).</p> <p>The MCK Language & Culture Program SOP has been completed and promoted. Coordinators will track. May need to review evaluation for the effectiveness of this new process.</p> <p>Ongoing feedback continues for each education session. The challenge at the end of the year is to compile all the evaluations to assess an increase in knowledge. We have done well to date, using the self- assessment questions on each Activity Feedback/ Evaluation.</p> <p>Community feedback also gathered during the Addictions and Mental Health Fair (58 people participated).</p> <p>Nov and on follow up meetings with satellite offices to be scheduled.</p>
8.2	To enhance the awareness of K.S.C.S. staff on tsi niionkwarihò:ten topics (ongoing calendar of events)	<p>Staff approved the time to attend the Great Law Recital in August and 22 staff attended. A follow up debrief session was facilitated by the Tsi Niionkwarihò:ten Coordinators. Staff expressed that they learned a lot about the law and our responsibilities as Onkwehón:we.</p> <p>The Tsi Niionkwarihò:ten Coordinators continued to collaborate internally and externally for planning ex. International Year of Indigenous Language booth at Onake (July), Kanien'keha Bingo at KSCS staff picnic, Addictions and Mental Wellness Fair Booth, Staff Monthly Traditional Singing, involvement at Iakwawennahá:wi weekly-sessions with elders for language development and consult for KSCS translations.</p> <p>We also offered staff an awareness session on Indian Day School- presenters were Tom Dearhouse and Wahéhshon Whitebean (copy of her thesis and video on file). 12 staff involved and there was an increase in awareness.</p>
8.3	<p>COMPLETED:</p> <p>To provide KSCS a Final Report on the Tsi Niionkwarihò:ten pilot project by April 2018.</p> <p>Data collection continues in preparation for end of year reporting to Managers, 2019-2020</p>	

KSCS SERVICE DELIVERY TEAM UPDATE

PREVENTION SERVICES ~Stephanie Horne, Manager



SO 1: Know our clients potential & their priority needs		
1.1	Complete the analysis of internal evaluation by Apr. 2017 & revise programming & services to address the major gaps by Apr. 2019.	Manager considering contracting out for final review of the document & finalize it. Timeframe change required to move to April 2019 in order to complete this.
1.2	Design & implement a consultation with clients to identify & prioritize the clients' aspirations/expectations for achieving fulfillment, clients' priority needs & clients' evaluation of our programs & services by April 2019.	Evaluation in general is being discussed with all service areas. Exploring the consolidation of global evaluation related objective/goals from each service area & placing under Organizational Objective 2.
1.3	Design & implement "client helpfulness indicator" (CHI) for April 2018.	No movement & may need to develop own for services area in Prevention. Some staff have received training on survey design. Considering use & fit of KSCS Feedback Form with our programs.

SO 2: Ensure our children and youth receive a healthy, positive start		
2.1	Evaluate & address the program gap for 5 year olds, by May 2019	All parenting workers are in their roles at the FWC. Manager will work with the Team Leader to develop & then implement an enhanced Parenting Program-date needed to be extended
2.2	COMPLETED: Enhance summer programs to ensure full access for all youth, regardless of family income by April 2017. Goal has become regular practice	
2.3	COMPLETED: In partnership with education & the schools, enhance our prevention (healthy lifestyle) team activities in the schools, by Sept. 2017. Goal has become regular practice.	

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 & submitted to Executive Director & 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 & discussed at Family Service meetings. Looking to involve Director & the other managers more in discussions. The P & S Admin team have also been discussing a number of issues related to one stop service & are preparing to make recommendations on changes to current services. The date extended to June 2019.
3.3	Improve our understanding, appreciation & use of the cultural values & ways of empowered & 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.

SO 4: Optimize partnerships to meet client needs		
4.1	Conduct an annual partner's consultation by Feb 2018, & 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 & in our internal practices, by September 2018.	Development of a new program. See Organization Objective 8 updates.

KSCS SERVICE DELIVERY TEAM UPDATE

SUPPORT SERVICES ~ Cheryl Zacharie, Manager



SO 1: Empower Kahnawa'kehró:non (individuals and families) to take control of their lives		Highlight: We continue to work toward empowering our clients to take control of their lives. Our approach to providing services has been more client focused.
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.	Placing under Organizational Objective 3.2. No longer will be actively updated here
SO 2: Improve healthy Kanien'keha:ka development options for youth		Highlight: We have successfully filled our Youth Support Worker position; they will work with youth aging out of care by offering support & assistance. The incumbent will begin their duties in December 2019. We look forward to the growth of the program and the positive influences this role will offer to our youth. Challenge: Recruitment of new Foster families is a constant need & challenge that we continue to address on an ongoing basis.
2.1	Recruit & train minimum 10 skilled/qualified foster homes in the community-on-going.	We've 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 yrs) who are transitioning out of foster care to capable independent living, by Dec. 2019	Officially have filled the position, successful candidate will begin in this position December 2019 and the date was changed to December to reflect this.
2.3	Improve support for our youth in institutions outside the community (e.g. Batshaw), by March 2020.	This continues to be an ongoing objective the need for further research into the inequities experienced in reference to access to services outside of the community is needed. A series of meetings are being held with ACCESS and looking at options for placement in English Services.
SO 3: Enhance the effectiveness of our youth protection, the Kanien'keha:ka way		Highlight: We continue to experience lower numbers in Youth Protection signalements and are actively working to ensure a more proactive and preventative approach to addressing concerns that are brought forward Challenge: Law 21 continues to present us with issues & as a result, we have run into barriers when attempting to hire caseworkers who meet the criteria of the Order
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.	Still no movement toward getting final approval for the establishment of the Kahnawà:ke Youth Protection Directorate. The KSCS team will continue to work toward updating and implementing changes in the Youth Protection Act, and on reviewing the Annex in anticipation of future movement.
3.2	Enhance the timeliness & quality of response & 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 March 2020.	Preliminary evaluations has shown that signalments have decreased however reviewing as to why this is happening through current data kept. Research has been ongoing and a working group is being formed. Receiving assistance in analysis from McGill as well as the formulation of future questions. Looking possibly at hiring an individual to assist in data analysis and reporting.

SUPPORT SERVICES continued

SO 4: Break the recurring and normalizing pattern of addictions		Highlight: In the area of Addictions Response we have been successful in offering a variety of services to the community & continue to build and maintain partnerships with various external stakeholders in relation to the areas of gambling, mental health & drug use.
4.1	Take the lead in implementing & 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 & ready to implement by April 2019.	Staff continues to work alongside Prevention Services to promote information & education but also to address more clinical issues that may arise. After months of planning and preparation, we hosted a Mental Health and Addictions Fair, an initiative that brought service providers in the area of mental health & addictions together to share their services, information & resources with the community
4.2	Research & recommend implementation of new tools to address drug use (e.g. DUSI-R) Drug Use Screening Inventory by April 2019.	We are currently working toward the implementation of the DUSI-R (Drug Use Screening Inventory) that will be useful to both clients and staff to assist clients in addressing their realities; this is helpful to ensure a client-focused approach to offering services tailored to each individual.
4.3	Secure a youth case worker for ARS to address the specific needs of youth with addictions by Dec. 2019	A new recruitment strategy is in place to fill the last vacant position.
4.4	COMPLETED: <i>With the legalization of Cannabis, staff continue to work alongside Prevention Services to promote information & education but also to address more clinical issues that may arise</i>	
4.5	Create a plan of action based on a comprehensive review of video lottery terminals that includes promotion/education, prevention & intervention approaches by September 2019.	Staff continues to work alongside Prevention Services to promote information & education but also to address more clinical issues that may arise.
SO 5: Assess and upgrade our psychological services		Highlight: With a full & capable team our staff are working toward the growth of the Psychological Services program.
5.1	Design a systematic process to consult with clients to identify their priority needs, by April 2019.	Client consultation is a common objective & 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 Organizational Objective 3.2.
5.2	COMPLETED: <i>Complete a comprehensive review of psychological services & present recommendations.</i> We anticipate building on the findings of the review & work towards implementing the recommendations.	
5.3	COMPLETED: <i>Put in place a fully capable, professional psychological service by October 2019.</i> Have 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 and family		
COMPLETED		
1.1	Find & implement an effective clinical assessment tool to enable caseworkers & families to assess needs & develop effective service plans, by April 2019.	
1.2	Address the current gap in proper services for children by developing an information package for special needs caregivers, by September 2019.	Work has continued with the consultants hired for this project. The Draft of the Resource Guide presently being finalized: feedback received from families and community groups e.g. Connecting Horizons. Final draft expected to be approved and sent for printing by the end of October
SO 2: Enhance the quality of life and recognition/appreciation of each client		
COMPLETED		
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		
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.	Work continues <ul style="list-style-type: none">• Building Inspection for ALS was completed• Inspection report received and follow-up recommendations being coordinated with Facilities Manager• In July Accreditation Canada (AC) completed a certification visit.• Recommendations from AC report received in September are also being addressed.
3.2	Develop & implement a viable respite capability to accommodate special needs individuals by September 2019.	Completed <ul style="list-style-type: none">• All current families have been provided assistance to register/receive respite dollars through the CLSC.• Case workers have also successfully gained access to respite beds through local and nearby resources.
SO 4: Maintain a minimum waiting list (capacity to deal with the growing number and complexity of clients)		
COMPLETED.		
4.1	Develop & implement an ALS Personnel Plan to support this plan by Sept. 2018.	
4.2	Increase the physical capacity of the Centre to support special needs clients during the plan period & beyond, with an improved plan & funding completed by April 2019.	Renovations to increase physical space has been approved. Collaborative effort and responsibility to complete is with Facilities Manager and ALS Manager.
4.3	Develop an alternative funding strategy, involving all three levels of government & other partners, to support the required physical expansion & the additional staff requirements, by Mar. 2019.	Movement in this area has begun Date is uncertain due to outside partners involvement.

KSCS SERVICE DELIVERY TEAM UPDATE

HOME & COMMUNITY CARE SERVICES (HCCS) ~ Mike Horne, Manager



SO 1: Enhance client-centered service delivery		
1.1	Evaluate current services from a client perspective & make timely adjustments to programs (on-going).	<p>Evaluation continues to be based on individual client assessments, & Client Service Plans.</p> <p>The Meals on Wheels service is addressing gaps.</p> <p>Office reconfiguration of Home Care personnel is near completion. Once complete it will provide a work environment aimed at enhancing Home Care.</p>
1.2	<p>COMPLETED.</p> <p><i>Review client activities/services that now can be enhanced due to block funding & report on by April 2018.</i></p> <p>Completed but continue to meet funding & reporting requirements.</p>	
1.3	Modify (reorganize) & enhance (when possible) HCCS personnel that will ensure better client service delivery by June 2018.	In the process of hiring 3 sporadic Home Care Health Aides. A clinical supervisor has been hired.
1.4	Increase the physical capacity (beds/rooms) at the Elders Lodge to meet the needs of the community & staff (on-going).	<p>A feasibility study regarding the TBEL expansion to be conducted in near future.</p> <p>Certification of Turtle Bay Elders' Lodge facility has begun. On August 1 an Accreditation Canada surveyor met with the team to obtain required information. Received a report in September and have begun implementing the recommendations as outlined in the report.</p>
SO 2: Assure the dignity, autonomy and quality of life for elders		
2.1	Fully implement & evaluate the "falls response protocol" by March 2019.	Completed: A team is in place and now need to determine how we will evaluate. After evaluation extend to other areas of service.
2.2	Identify & address situations of Older Adult Mistreatment through Promotion & Education awareness campaigns on an ongoing basis.	On August 18-22 nd the HCCS Older Adult Mistreatment Committee attended the National Adult Protective Services conference. This allowed the committee to establish a network, and obtain current information, legislation, and strategies to address Older Adult Mistreatment.
2.3	Enhance palliative care capability & service (on-going).	<p>Palliative care continues to be offered to end life clients in the community.</p> <p>Palliative medical equipment is being evaluated & replacement alternatives are being sought where required.</p>

KSCS SERVICE DELIVERY TEAM UPDATE

ENVIROMENTAL HEALTH SERVICES (EHS)

Donald Gilbert, Team Leader



SO 1: Enhance client-centered service delivery		
1.1	Revisit current water quality monitoring schedule & increase frequency of bacteriological & basic chemical analysis if necessary.	249 bacteriological samples collected. Wells with E.coli during this quarter; 36. We are still following up with samples taken in the previous quarter and contacting MCK Capital Works.
1.2	Determine if annual inspections of high risk facilities is satisfactory or should be increased.	Completed: Identified facilities are cooperating & actively participating. No reporting required.

SO 2: Seek necessary funding to operate within the Strategic Objectives		
2.1	COMPLETED. No further reporting required	

KSCS SUPPORT SERVICE DELIVERY TEAM UPDATE

FINANCIAL SERVICES ~ Dana Stacey, Finance Comptroller



SO 1: Enhance short and long term global financial planning efforts based on sound financial practices & operations		
1.1	Integrate the implementation of the strategic plan with the budget by Jan. 2018.	Updated date with new plan following meetings in October to discuss 3 yr. rolling budget. Ongoing process to always keep budget aligned with plan.
1.2	Review & amend KSCS Chart of Accounts to ensure the generation of timely & accurate financial reports that will assist in management decision making & reporting by May 2020	Revisiting, reviewing and revising original plans. Working in collaboration with the Executive Director, Director of Operations & Director of Family Services. October anticipated to present plan to management. Consultant & Finance will test then launch April 1 2020. Change management strategies are also to be developed.

SO 2: Improve financial services based on the knowledge and understanding of client needs		
2.1	COMPLETED: Design & implement a consultation with clients that will assess financial services offered & needs by Feb.2019.	
2.2	Implement a client engagement process that will identify areas for improvement & client needs by March 2020.	Not started the consultation planning with our external partners/clients due to workload of staff. Date will be changed from 2019 to March 2020 and can do by date and report on what indeed improved.

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 & update those financial procedures & policies that ensure the timeliness of services by October 2019 & communicate them to staff.	Drafts being reviewed by Director of Internal Operations.

KSCS SUPPORT SERVICE DELIVERY TEAM UPDATE

ORGANIZATION SUPPORT SERVICES (OSS) ~ *Susie Diabo, 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.	This objective will be reported on under KSCS Organizational Objective 1.1
1.2	Review & revise the current recruitment process at KSCS by Oct. 2019.	Consulting activities are completed (research, interviews, surveys & focus groups, etc.). OSD analyzing the data and will have a draft report for Steering Committee to review by end of October.
1.3	Enhance staff wellness by becoming more strategic & proactive in supporting employee management of a healthy & balanced life.	Tsi Niionkwarihó:ten Coordinators & HR working together and identified aspects that need to be further explored. (i.e. recruitment of healers, measuring effectiveness, etc.). Further research on Code of Ethics and waivers is on-going.
1.4	Create a KSCS Training & Development process & plan by February 2020.	A Request for Proposals (RFP) for a consultant to work closed in September, a Steering Committee is in place and a consultant has been selected. Date for completion will need to change due to timeframes within proposal submitted. Anticipated new month for completion is February 2020.
1.5	Ensure OSS staff are healthy & qualified in order for us to be able to support & provide the best service to KSCS.	OSS staff continue to expand their knowledge through various trainings offered internally and externally in order to better support staff, such as the Basics of Collaborative Problem Solving, Fostering a Respectful Workplace, A New Attitude: The Truth About Mental Illness, and Language and Culture Training.
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.	HR updated the Performance Management Process (PMP) presentation to Management and staff. Dates for training are set for October 2019.
2.2	COMPLETED: <i>Develop & provide HR database access & training.</i> Training to supervisors was completed in May. HR is currently looking into a new HR Information System (HRIS) to better suit the needs of the organization.	
2.3	Create an electronic user friendly OSS Resource library (include policies, directives, benefits etc.).	Work on this is ongoing but slow however will likely pick up and become a task for the new IT Manager to oversee and complete.
2.4	Provide support & guidance to KSCS management in implementing strategies.	A new Manager of Information Services has been hired who will assist in the further development of IT/Communications/Data Research which add to OSS's provision of support and guidance to all staff.

ORGANIZATION SUPPORT SERVICES continued

SO 3: Evaluate OSS services and adjust based on client needs by March 2019		
3.1	Consult staff & management for feedback on OSS service areas by Dec. 2019.	<p>Tsi Niionkwarihò:ten consult with staff and management regarding on boarding and optimal Kanien'kéha sessions.</p> <p>HR conducted an internal survey regarding Group Insurance and Microsoft Excel training interest and date</p> <p>Admin/Reception have an internal process to get feedback from staff regarding respectful practices within the workplace</p> <p>A Recruitment Process Review will be completed by end of October or early November</p>
3.2	Adjust services to better meet the needs of KSCS by Jan. 2020	Adjustments have been made according to findings from consults identified in 3.1. In conjunction with these results from the external Community Perception & Satisfaction Survey Final Report was shared internally and with community. OSD to work with programs and provide deeper analysis for program service improvements.
3.3	Update & maintain an OSS policy framework that provides guidance to KSCS by October 2019	Work is moving along on all policies. The Personnel Policy has been submitted for approval at the October Board meeting.
3.4	Ensuring KSCS staff are continually informed of all OSS services available.	Continually engage employees by providing information via KSCS Info Line and bulletin to inform about staff on services.
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 & determine roles & responsibilities.	<p>Consolidating global evaluation related objective/goals from each service area & placing under Organizational Objective 3.2.</p> <p>Reviewing tasks and objective-to take this into consideration.</p>
4.2	Provide training on evaluation & surveys.	Have brought in Stats Canada several times. Will now look into possibly offering a session on a bi-annual basis. This will be dependent on the Training and development that is created.
4.3	Establish & engage in effective & safe dialogue between KSCS, Kahnawa'kehró:non & our partners.	The Community Perception and Satisfaction survey along with the KSCS feedback form are two processes in place that have allowed for some engagement with community. Enhancements and improvements have been identified and some implemented to ensure effectiveness.

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 & evaluation of storage space (containers) acquired for each satellite office by March 2020	Next report should have a better update on activities. Is contingent upon to 3.1
1.2	Improve after hour security measures (such as lighting, video surveillance, locks etc.) & protocols at all KSCS buildings by Dec. 2019.	Capital projects launched in June, to be completed by end of Q3. Date will need to be adjusted from March 2019 to reflect launch to December 2019.
1.3	Incorporate tsi niionkwarihò:ten (our ways) where possible into maintenance practices & operations (such as reducing environmental footprints) by December 2018.	Use of Kanien'kéha encouraged each day in service delivery. Eco-friendly cleaning supplies beginning to be phased in. Kanien'kéha Language classes participated 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.	Collaboration with MCK Director of Asset Management on specific facilities related projects: Monthly discussions on mutual areas of concern / collaboration of facilities maintenance related matters.
SO 2: Create and maintain a culture that will foster teamwork, happiness, motivation and success.		
2.1	Implement a professional development & training plan for all Facilities Management team members (both full time & on call) that will ensure everyone has reached standard level of competency by Dec.2019.	Working with MCK on Asset management as well SOP's.
2.2	Implement a team building validation process with quarterly events that will help foster happy & healthy employees by March 2019.	Have in place once a quarter to do an activity, been doing and acknowledge staff
SO 3: Assure the continuity of high quality and timely maintenance services to staff, clients and community.		
3.1	Acquire a facilities management software program that will support facility management activities & ensure requests & work completed are tracked & within budget by June 2019.	Making decisions and should have one made by next quarter. Funding, plans and partners are all in place.
3.2	Ensure service delivery & workflow are aligned with the needs of the team's diverse clients & multiple sites by November 2019.	Have hired an Administration Level 3 person who will only begin in November which will enhance the overall service delivery flow, the date will need to be adjusted to reflect this and when this can be completed.

FACILITIES MANAGEMENT continued

SO 3: Assure the continuity of high quality and timely maintenance services to staff, clients and community.		
3.3	Complete all current facility upgrades & renovations identified in the 2017/18 capital plan year within budget by March 2020.	On-going
3.4	Determine key messages & continuously convey effective communications that informs clients of our service delivery standards & processes along with realistic expectations for projects by March 2020.	On-going
3.5	Implement a system that will inventory & manage facilities equipment & supply needs, access & usage in order to meet the needs of the team & organization by Dec. 2019	With Inventory & Accounts Control person hired task will move to better meet the needs of the team and organization.

SO 4: Enhance the management of KSCS facilities through continual process improvements.		
4.1	Research best practices to ensure Facility Management Services are efficient, effective & safety focused by March 2020.	Harmonizing with MCK and their department and working with Wabanaki.
4.2	Review current Facility procedures/practices to ensure they are alignment with organizational policies, by March 2020.	Harmonizing with MCK and their department and working with Wabanaki.
4.3	Improve current procedures/practices based on findings & ensure they are implemented consistently among all staff by December 2019.	Harmonizing with MCK and their department and working with Wabanaki.
4.4	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.
4.5	Implement annual client satisfaction surveys & focus group(s) to gather client feedback that will identify satisfaction with the quality & timeliness of services by March 2020.	No movement yet.