

## GAPS AND OVERLAPS / ASSET MAPPING

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Thursday, August 18, 2011

Ohkwari, 8:30-1:00 pm

### DEFINITIONS

What is a Gap (in regard to health priorities)?

- An element missing from the services or a target that is not covered
- Identified need to fulfill that is not being met

What is an Overlap?

- A duplication of services/aggregate (to the same people)

### DISCUSSION

- Definition of type of service: activity from logic models, etc. As an example, Psych services was suggested as not being part of the logic models but is to be included.
- Some activities are funded through different funding agreements. This might more truly reflect gaps and overlaps. Color Post-Its and lines on each chart suggested to identify funding sources.
- Target groups defined: youth programs, etc.
- Discussion ensued that different services overlap between target needs i.e. YAP between Mental Health Issues and Learning/Developmental Disabilities.
- Substance Abuse: activity noted. Substance abuse is KSCS's mandate. Some questions on funding source were in debate. All ARS is covered under Transfer.
- Mental Health Issues: one participant said she could have added more.
- Observations: A lot being done, but more can be done. Learning Disabilities is new but other needs have previously been identified. It can be seen that we can do more in relation to cancer. Helps with networking when aware others are working on this. Other groups are working on these such as KSDPP (diabetes and cardiovascular disease) and Step-by-Step (learning disabilities). It is important to get feedback from these organizations.
- KSDPP does a lot to make sure that there are no gaps and overlaps so one contributor did not concentrate on that.

## GAPS AND OVERLAPS / ASSET MAPPING

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- Immunization, communicable disease and potable water are other issues that will need to be considered.
- It would help Onkwata'karitáhtshera to map this out further for prevention, intervention, aftercare, etc. to shore up practices.

GAPS AND OVERLAPS EXERCISE

<b><i>SUBSTANCE ABUSE/ADDICTIONS</i></b>				
<b>HEALTH TRANSFER FUNDING</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Tertiary Prevention	Assessment, intervention and coordination of care	People with existing health problems
	KMHC	Short-Term Care	Early detection	Short-term care
	KMHC	End of Life Care	Comfort measures, symptom management, support	End of life care patients
	KMHC	Staff Health	Support services to deal with addictions	
	KMHC	Elementary School	Lower risk of addictions/awareness	N-Grade 6
	KMHC	Homecare Nursing/Tertiary Care	Long outstanding history of substance abuse, end of life care due to addictions	Middle age-elderly
	KMHC	Awareness Education	Regarding substance abuse	High school
	KMHC	Elementary School	Sexual abuse prevention, lower mental health issues	N-Grade 6
	KSCS	Support/ARS	Client intake	Teen/adult/elder
	KSCS	Support/ARS	Assessment	Teen/adult/elder
	KSCS	Support/ARS	Treatment planning	Teen/adult/elder
	KSCS	Support/ARS	Orientation	Teen/adult/elder
	KSCS	Support/ARS	Case management	Teen/adult/elder
	KSCS	Support/ARS	Support group for significant others	Teen/adult/elder
	KSCS	Support/ARS	Counselling	Teen/adult/elder
	KSCS	Support/ARS	Crisis intervention	Teen/adult/elder
	KSCS	Support/ARS	Client education	Teen/adult/elder
	KSCS	Support/ARS	Referral	Teen/adult/elder

GAPS AND OVERLAPS / ASSET MAPPING

	KSCS	Support/ARS	Group support for post treatment	Teen/adult/elder
	KSCS	Support/ARS	Support group for women	Teen/adult/elder
	KSCS	Support/ARS	Client screening	Teen/adult/elder
	KSCS	Support/ARS	Report and recordkeeping	Teen/adult/elder
	KSCS	Support/ARS	Consultation	Teen/adult/elder
	KSCS	Prevention/FASD	Information sessions	All community
	KSCS	Prevention/FASD	Cradleboard teachings	All mothers
	KSCS	Prevention/Healing Lodge Medicines	Purging	All ages
	KSCS	Prevention/Healing Lodge	One-on-one counselling	All ages (Kahnawakero:non)
	KSCS	Prevention/Parenting	Prenatal workshops	Pregnant mothers
	KSCS	Communications*	Website	General and specific targets
	KSCS	Communications*	Electronic message board	General targets
	KSCS	Communications*	Infomercials	General and specific targets
	KSCS	Communications*	Travelling booths	General and specific targets
	KSCS	Communications*	Newsletter	General and specific targets
	KSCS	Communications*	Health campaigns	General and specific targets
	KSCS	Communications*	<i>Shakotia'tahkehnhas Presents</i>	General and specific targets
	KSCS	Communications*	<i>KSCS Insider</i>	General population and specific targets of service
	KSCS	Communications*	Client education	Clients referred by Support
	KSCS	Communications*	Server Training	Primary servers, secondary patrons of establishments
	KSCS	Communications	Drug ID workshop	
		*supports all health priorities		
<b>OTHER FUNDING</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Long-Term and Short-Term Care		

GAPS AND OVERLAPS / ASSET MAPPING

<b>SOURCES</b>	KMHC	OPD	Screening/support for addiction	Community
	KSCS	Elders Caseworkers (contribution HCCS)		Elderly
	KSCS	Support/ARS	Addictions Education	Teen/adult/elder
	KSCS	Support/YP	Support to clients with addictions issues	Youth/teen/adult/elder
<b>GAP</b>	<ul style="list-style-type: none"> <li>We need our own treatment center.</li> <li>Need for a facility to assist peoples with addictions of any age. Detox center? Currently, clients need to be sent out of town.</li> <li>Detox services close by.</li> <li>There are many programs and services within the 2 organizations but we need to look at how much do we collaborate.</li> <li>Database: health &amp; social services</li> </ul>			
<b>OVERLAP</b>	<ul style="list-style-type: none"> <li>Lack of planning and evaluation of data across health priorities</li> </ul>			

**MENTAL HEALTH ISSUES**

<b>HEALTH TRANSFER FUNDING</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Volunteer Program	Providing services to clients/residents activities	LTC/STC resident/clients, Adult Day Center clients, rehab, etc.
	KMHC	Mental Health Nurse	Assessment, intervention, coordination of care	Person with severe and persistent mental health problems
	KMHC	Homecare Nurses/Tertiary	Support, intervention, follow-up, coordination of care, medication	All persons with mental health issues, short-term or severe and persistent
	KMHC	Culture and Language		KMHC residents and staff
	KMHC	WBC	Lower stress, screen for depression	Moms
	KMHC	Staff Health	EAP support to lower stress, depression, etc.	Staff

GAPS AND OVERLAPS / ASSET MAPPING

	KMHC	Newborn Visiting	Screening for post-partum depression	Mom
	KMHC	Social Service Worker	Referrals, counselling, family meetings	ADC/STC clients
	KMHC	Prenatal	Prevention of post-partum depression	Moms
	KMHC	Mental Health Homecare Nurse		Youth, middle age, elderly, severe and persistent, acute/chronic
	KSCS/ KMHC	Mental Health Team	Consultation	Youth/teen/adult/elder
	KSCS	Support/ARS	Co-morbid situations	Teens/adults/elders
	KSCS	Prevention/Shakotisnien:nens Support & Group		All Kahnawakero:non
	KSCS	Prevention/Shakotisnien:nens	Screening and assessments	All Kahnawakero:non
	KSCS	Prevention/Shakotisnien:nens	One-on-one counselling	All Kahnawakero:non
	KSCS	Prevention/FASD Media Campaigns	Radio, newsletter, TV	All community
	KSCS	Prevention/Nobody's Perfect Programming		Parents of children 0-5 years
	KSCS	Prevention/Healing Lodge/Grief & Loss Support Group		Adults (male & female)
	KSCS	Prevention/Healing Lodge	Screening and assessments	All Kahnawakero:non
	KSCS	Prevention/Healing Lodge/Brain Injury Support Group		Those with brain injury
	KSCS	Communications/ASIST Workshop		Primary: community members, partner organizations Secondary: those at suicide risk
		Communications/Mental Health First Aid Workshop		Primary: those working and youth Secondary: youth at risk

GAPS AND OVERLAPS / ASSET MAPPING

OTHER FUNDING SOURCES	ORG.	PROGRAM	SERVICE DELIVERY	TARGET GROUP
	KMHC	Physicians, Psychiatrist	Assessment, treatment, liaison	Persons with severe and persistent mental health problems
	KMHC	Long-Term and Short-Term Care		
	KMHC	Family Medicine		All ages
	KMHC	OPD	Screening/treatment/support for mental health issues	Community
	KMHC	Activity Program	Activities for clients, residents at KMHC	Long-term (residents) and short-term (clients)
	KMHC	Adult Day Care	Provide activities and nursing to elders in community	Elders with dementia and related disorders, physical limitations, isolation, mental health
	KSCS	Homecare (contribution HCCS)	Medication, domestic medical escorts	
	KSCS	Elders Caseworkers (contribution HCCS)		Elderly
	KSCS	Elders Day Program (contribution HCCS)	Social and leisure activities	Socially isolated clients
	KSCS	Support/Psych	Counselling: individual, couple, family	Youth/teen/adult/elder
	KSCS	Support/YP	Support to clients with mental health issues	Youth/teen/adult/elder
	KSCS	Support/ARS/Tehontatro:ris	Mental health education	Teen/adult/elder
	KSCS	Support/Psych	Assessment	Youth/teen/adult/elder
	KSCS	ILC/Caseworker (INAC)		
	KSCS	Prevention/Enhanced Prevention	Parenting support	All parents
	KSCS	Communications/CISD Training		Frontline community workers
<b>GAP</b>	<ul style="list-style-type: none"> <li>We need more facilities to house mental health clients (locked unit); not enough resources on outside.</li> <li>Foster Care for Elders: Twenty-four hour care, support for elders with dementia, incontinence but otherwise can do for themselves with supervision and guidance (between Elders Lodge and hospital)</li> </ul>			

GAPS AND OVERLAPS / ASSET MAPPING

	<ul style="list-style-type: none"> <li>• Foster Home (group home) for youth</li> <li>• Mental Health facility that can handle aggressive clients</li> <li>• We need central Mental Health Team involving service providers from both organizations.</li> <li>• There is no central organization or program that has been given the mandate to address mental health.</li> <li>• There is a need for foster level care for person with early Alzheimer’s dementia who requires 24-hour care.</li> <li>• Treatment services for co-morbid cases</li> <li>• Database: health &amp; social services</li> </ul>
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**LEARNING/DEVELOPMENTAL DISABILITIES**

HEALTH TRANSFER FUNDING	ORG.	PROGRAM	SERVICE DELIVERY	TARGET GROUP
	KMHC	Home Care Nurses	Assessment, intervention, coordination of care	Persons with developmental delays
	KMHC	Preconceptual Health	Prevention of developmental delays	
	KMHC	Elementary Health	YAP & TSC support developmental delay	Young adults
	KMHC	KSS	Support/advocacy for kids with LD/developmental delays	High school
	KMHC	Elementary School	Support for kids with LD/developmental delays	N-Grade 6
	KMHC	WBC	Screening for developmental delays	0-6 years
	KSCS	Prevention/Parenting	Parent-infant interactive groups	Parents with children 0-6 years
	KSCS	Prevention/Parenting/Parenting Teens Support Group		Parents of teens 13-18 years
	KSCS	Prevention/FASD	Diagnostic training	KSCS/KMHC/school staff
	KSCS	Prevention/Our Gang	Sessions	Children aged 6-12 years
	KSCS	Communications*	See * Addictions Post-Its	

GAPS AND OVERLAPS / ASSET MAPPING

OTHER FUNDING SOURCES	ORG.	PROGRAM	SERVICE DELIVERY	TARGET GROUP
	KMHC	Adult Day Centre	Provide activities and nursing to elders (learning/developmental) in community	Elders with dementia and related disorders, physical limitations, isolation, mental health
	KMHC	Long-Term and Short-Term Care		
	KMHC	OPD	Screening for LD	Community
	KSCS	Family Support Case Workers (contribution HCCS)		Disabled
	KSCS	Home Care (contribution HCCS)	Assistance with activities and daily living, medication	
	KSCS	Support/KJA	Support to clients	Teen
	KSCS	Support/Psych	Assessment and support	Youth and teen
	KSCS	ALS/Caseworkers (INAC)		
	KSCS	ALS/Inclusion Support Workers (INAC)		
	KSCS	ALS/Young Adults Program (INAC)		
	KSCS	ALS/Teen Social Club (INAC)		
	KSCS	ALS/FSRS Team Leader (INAC)		
<b>GAP</b>	<ul style="list-style-type: none"> <li>• No parent support</li> <li>• No advocate for students and parents of LD &amp; DD</li> <li>• Facility for adults with developmental delay i.e. adult with autism-cognitive delays with aging parents</li> <li>• Human resources fully trained in health priorities across the board</li> <li>• We need facility to house person with developmental delays (closed unit for aggressive persons).</li> <li>• Database: health &amp; social services</li> <li>• KSCS FASD Diagnostic Team in process of development</li> <li>• Early Intervention Assessment Tools Residential Services for individuals whose families can no longer provide care</li> </ul>			

<b>CARDIOVASCULAR DISEASE (HYPERTENSION)</b>				
<b>HEALTH TRANSFER FUNDING</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Tertiary Prevention	Assessment, intervention, coordination of care, education	Patients with existing cardiac issues
	KMHC	Short-Term Care	Intervention, education, follow-up, coordination of care	Acute care patients with cardiac issue
	KMHC	Home Care Nursing/End of Life		
	KMHC	Staff Health	Education regarding CVD	Staff
	KMHC	KSS	Teen clinic for screening of hypertension	High school
	KMHC	Home Care Nursing	Monitoring/follow-up	Middle aged-elderly
	KMHC	Breastfeeding	Promotion of breastfeeding to lower risk of heart disease	Moms/babies
		KMHC	Adult Prevention	Screening for hypertension, health promotion
KMHC		Diabetes	Education to lower hypertension and CVD	Adults
KMHC		Newborn Home Visiting	Screening for hypertension	Moms
KMHC		Prenatal	Health promotion to reduce risk of hypertension	Moms
KMHC		Elementary School	Screening for hypertension	N-Grade 6
KMHC		Adult Prevention	Smoking cessation to lower CVD	Adult
KMHC		Elementary School	Health promotion to lower hypertension, CVD	School staff
KSCS		Communications*	See these with * on Addictions	

GAPS AND OVERLAPS / ASSET MAPPING

<b>OTHER FUNDING SOURCES</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	COHI	Good dental health to lower CVD risk	Community
	KHMC	Long-Term and Short-Term Care		
	KMHC	Family Medicine		All ages
	KMHC	OPD	Screening/treatment hypertension CVD	Community
	KMHC	Community Nutrition		All ages
	KMHC	Adult Care Centre	Provide activities to elders (hypertension) in community	Elders with physical limitation, dementia and related disorders, isolation
	KSCS	Meals on Wheels (contribution HCCS)	Nutritious meal available to meet dietary needs	
<b>GAP</b>	<ul style="list-style-type: none"> <li>Database: health &amp; social services</li> </ul>			

<b>CANCER**</b>				
<b>HEALTH TRANSFER FUNDING</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Cancer Care	Health promotion to lower risk of cancer	Community
	KMHC	Adult Prevention	Cancer prevention	Adults
	KMHC	Cancer Care	Providing support for people going to screening tests	Adults
	KMHC	Home Care Nursing	Physical/psychosocial support	Newly diagnosed clients
	KMHC	Cancer Support Worker		Newly diagnosed clients with cancer
	KMHC	Homecare Nurses/Tertiary Prevention	Assessment, intervention, coordination of care, support	Patient with cancer diagnosis
	KMHC	Home Care Nurses/Home Hospital	Assessment, intervention, support, teaching	Persons who need acute care for their cancer issues i.e. injections, dressing changes

GAPS AND OVERLAPS / ASSET MAPPING

	KMHC	Homecare Nurses/End of Life Care	Assessment, intervention, symptom management, support	End of life/palliative care patients
	KMHC	Adult Prevention	Smoking cessation, cancer prevention	Adult
	KMHC	Cancer Care	Support/care of people living with cancer	Adults with cancer
	KMHC	Staff Health	Education regarding cancer support for staff	Staff
	KMHC	Elementary School	Sun safety to lower cancer risk	N-Grade 6
	KSCS	Prevention/Our Gang	Cancer awareness sessions	Ages 6-12
	KSCS	Communications*	See those with * on Addictions	
<b>OTHER FUNDING SOURCES</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Adult Day Care	Activities and nursing for clients	Elders with variety of health needs, cancer
	KMHC	Long-Term and Short-Term Care		
	KMHC	OPD	Screening, treatment, support for cancer	Community
	KMHC	Family Medicine		All ages
	KSCS	Home Care (contribution HCCS)	Provide assistance with ALS; escort to medical appointments	
<b>GAP</b>	<ul style="list-style-type: none"> <li>Lack of data for informed planning</li> <li>Database: health &amp; social services</li> </ul>			

**DIABETES**

<b>HEALTH TRANSFER FUNDING</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Elementary School Health	Education regarding diabetes	N-Grade 6
	KMHC	Diabetes	Education to lower diabetes and complication	Adult

GAPS AND OVERLAPS / ASSET MAPPING

	KMHC	Adult Prevention	Screening for diabetes, health promotion	Adults
	KMHC	KSS	Teen clinic screening for diabetes	High school
	KMHC	Diabetes	Research to look at how well screening for complications and treatment	Adult
	KMHC	Breastfeeding	Promotion of BF to lower risk of diabetes	Moms/babies
	KMHC	Prenatal	Health promotion to lower risk of diabetes (gestational type 2)	Moms
	KMHC	Newborn Home Visiting	Screening diabetes	Moms
	KMHC	Diabetes Education/Tertiary Prevention		All ages, type 1 or 2 diabetes
	KMHC	Homecare Nursing/Tertiary Prevention	Assessment, intervention, coordination of care	Persons with diabetes
	KMHC	Homecare Nursing/Short-Term Care	Assessment, intervention, coordination of care	Person with acute care needs r/t diabetes i.e. dressing for ulcer
	KMHC	Homecare Nursing/End of Life Care		
	KMHC	Staff Health	Education regarding diabetes	Staff
	KMHC	Diabetes	Screening for complication	Adult
	KMHC	Homecare Nursing	Monitoring at home	Middle aged-elderly
	KSCS	Prevention/Shakotisnien:nens	Info sessions on diabetes (ADI)	All Kahnawakero:non
	KSCS	Prevention/Our Gang	Diabetes awareness	Ages 6-12
	KSCS	Prevention/MAD		Ages 12-17 (youth)
	KSCS	Communications*	See those * on Addictions	
<b>OTHER FUNDING SOURCES</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	COHI	Education to lower dental/gum complication in diabetes	Adult
	KMHC	OPD	Screening for diabetes, treatment, support	Adults

GAPS AND OVERLAPS / ASSET MAPPING

	KMHC	Family Medicine		All ages
	KMHC	Adult Day Centre	Activities and nursing for clients	Elders with variety of health needs (diabetes)
	KMHC	Long-Term and Short-Term Care		
	KMHC	Community Nutrition		All ages
	KSCS	Meals on Wheels (contribution HCCS)	Nutritious meal delivered to homes of individuals with nutritional needs	
	KSCS	Home Care (contribution HCCS)	Medication, activities of daily living	
<b>GAP</b>	<ul style="list-style-type: none"> <li>Database: health &amp; social services</li> </ul>			

<b>OBESITY**</b>				
<b>HEALTH TRANSFER FUNDING</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Nutritionist		Malnourished and obese
	KMHC	Staff Health	Physical Activity Initiatives/Obesity	Staff
	KMHC	Elementary School	Education regarding increased physical activity, increased fruits and vegetable, decreased screen time and decreased obesity	N-Grade 6
	KMHC	Breastfeeding	Promotion of BF to lower risk of childhood obesity	Moms/babies
	KMHC	Diabetes	Education to lower obesity	Adults
	KMHC	WBC	Screening for childhood obesity and intervention referral	0-6 years
	KMHC	Prenatal	Health promotion to prevent obesity (limit weight gain)	Moms
	KMHC	Adult Prevention	Physical activity to lower obesity, etc.	Adult

GAPS AND OVERLAPS / ASSET MAPPING

	KMHC	Homecare Nursing/Tertiary Prevention	Assessment, intervention, coordination of care	Person with existing health problem
	KSCS	Prevention/ Our Gang	Healthy eating	6-12 years
	KSCS	Prevention/ Mad Group	Healthy eating	12-17 years
	KSCS*	Communications		See those with * on Addictions
<b>OTHER FUNDING SOURCES</b>	<b>ORG.</b>	<b>PROGRAM</b>	<b>SERVICE DELIVERY</b>	<b>TARGET GROUP</b>
	KMHC	Community Nutrition		All ages
	KMHC	Long-term and Short-term Care		
	KMHC	OPD	Screening treatment for obesity	Common
	KMHC	KSS	Increased education on physical activity, increased Fruits & Vegetables, decreased screen time	High school
	KMHC	Home Care Nursing/Home Hospital Short-Term	Obese person with acute care issue Early detection, assessment, intervention of care and coordination	
	KMHC	Adult Care Centre	Activities and nursing for clients (obesity)	Elders and variety of healthy needs
	KSCS	Elders Day Program (contribution HCCS)	Exercise program, walking activities, nutritious meal available at TBEL	
	KSCS	Psych Support	KCSC Counselling	Teen, adult, elder
<b>GAP</b>	<ul style="list-style-type: none"> <li>Database: health &amp; social services</li> </ul>			

ASSET MAPPING (FLIP CHARTS LISTS)

<b>PEOPLE ASSETS</b>	<b>COMMUNITY ASSETS</b>	<b>PHYSICAL ASSETS</b>
<ul style="list-style-type: none"> <li>• Elders</li> <li>• Volunteers</li> <li>• Board members</li> <li>• Role models (healthy lifestyle)</li> <li>• Families who take care of children, grandchildren, elders and disabled</li> <li>• Community members who provide community support (depression)</li> <li>• Healers</li> <li>• Church committees</li> <li>• Coaches</li> <li>• Stage students</li> <li>• Artists</li> <li>• Actors</li> <li>• Healers</li> <li>• People of Longhouse</li> <li>• Athletes</li> <li>• School committees</li> <li>• Pow Wow Committee</li> <li>• Community organizers</li> <li>• People in recovery</li> <li>• Bilingual and trilingual people</li> <li>• Trainers</li> <li>• Turtle Island Theatre Company Committee</li> </ul>	<ul style="list-style-type: none"> <li>• Cancer support group</li> <li>• Golden Age Club members</li> <li>• Social club members</li> <li>• Food bank, Christmas train</li> <li>• Language program</li> <li>• Alternate Dispute Resolution</li> <li>• Musical Entertainers</li> <li>• Turtle Island Theatre Company</li> <li>• Traditional social singers</li> <li>• Drumming groups</li> <li>• Beadwork groups</li> <li>• Meeting groups</li> <li>• Mohawk Choir</li> <li>• Funding groups</li> <li>• Communal laws</li> <li>• Community decision making process</li> <li>• Research council</li> <li>• Community Advisory Board</li> <li>• Minor sports associations</li> <li>• ABC</li> <li>• Language program</li> <li>• ADR (Alternative Dispute Resolution)</li> <li>• KYC youth programming</li> <li>• KMHC Users' Committee</li> <li>• Scrapbooking groups</li> <li>• KFA (Kahnawake Funding Association)</li> <li>• Daycares</li> <li>• Justice</li> <li>• Emergency planning</li> <li>• Strategic Community Health Careers</li> <li>• Recycling Depot</li> <li>• HR Network</li> </ul>	<ul style="list-style-type: none"> <li>• Longhouse/people of the Longhouse</li> <li>• Churches</li> <li>• KYC (youth programming)</li> <li>• Step-By-Step</li> <li>• KYC gym, exercise rooms and classes</li> <li>• Fire Hall</li> <li>• Community facilities (KYC, parks, Kateri Hall, arena, hockey, lacrosse, ballpark)</li> <li>• Golf club land (cross-country skiing)</li> <li>• Tekakwitha Island</li> <li>• Bike path</li> <li>• Fire and ambulance</li> <li>• Schools and grounds</li> <li>• Ball fields, soccer fields</li> <li>• KSCS, KMHC, Caisse Populaire</li> <li>• Hospital</li> <li>• School buses</li> <li>• Taxi services</li> <li>• Tioweroton</li> <li>• Marina (water, social club, marina itself, park, pool)</li> <li>• Water and sewage treatment</li> </ul>

GAPS AND OVERLAPS / ASSET MAPPING

<b>PEOPLE ASSETS</b>	<b>COMMUNITY ASSETS</b>	<b>PHYSICAL ASSETS</b>
	<ul style="list-style-type: none"> <li>• EDC</li> <li>• Governance training</li> </ul>	

<b>PROFESSIONAL ASSETS</b>	<b>ECONOMIC ASSET</b>	
<ul style="list-style-type: none"> <li>• Political leaders</li> <li>• Clergy</li> <li>• Doctors, nurses (Dr. Saylor)</li> <li>• Teachers</li> <li>• Psychologists, addictions workers</li> <li>• Clinical supervisors</li> <li>• Prevention workers</li> <li>• Computer technicians</li> <li>• Pharmacists</li> <li>• Addictions counsellors</li> <li>• Social workers</li> <li>• Case workers</li> <li>• Computer technicians</li> <li>• Mediators</li> <li>• EMTs</li> <li>• Executive directors</li> <li>• Prevention workers</li> <li>• Librarians</li> <li>• Nutritionists, physiotherapists (OT,PT, RT, ST)</li> <li>• Lawyers</li> <li>• Judges, justice of the peace</li> <li>• Guidance counsellors</li> <li>• Firefighters</li> <li>• Peacekeepers</li> <li>• Policy analysts</li> <li>• Sanitation engineers</li> <li>• Administrators</li> <li>• MBA's</li> <li>• Recreation animators</li> <li>• Private services/complimentary</li> </ul>	<ul style="list-style-type: none"> <li>• Government funding</li> <li>• Tobacco revenue i.e. KTA</li> <li>• Gambling facilities (Super Bingo)</li> <li>• Community businesses</li> <li>• Tewatohnhi'saktha-CBS, ITC</li> <li>• Social Assistance</li> <li>• Caisse Populaire Community Fund/donations</li> <li>• ODS</li> <li>• Unaccessed government funding</li> <li>• KMHC Foundation</li> <li>• Private fundraisers</li> <li>• Restaurants</li> <li>• Private daycares</li> <li>• Pow Wow</li> <li>• Private Businesses</li> </ul>	

<b>PROFESSIONAL ASSETS</b>	<b>ECONOMIC ASSET</b>	
<p>health practitioners (acupuncture, massage therapy, chiropractor, dentist, opticians, optometrists, homeopaths)</p> <ul style="list-style-type: none"> <li>• Consultants (ODS, OSD and Awimel)</li> <li>• Tewatohnhi'saktha</li> <li>• Radio and TV announcers</li> <li>• Doctor of Public Health (i.e.Trina Delormier, Ph.D)</li> <li>• Artisans</li> <li>• Actors</li> <li>• Sound technicians, recording artists, producers</li> <li>• Healers</li> <li>• Journalists</li> </ul>		

**DISCUSSION**

- Sequel exercise can be organized to further detail assets.
- We are supposed to be listing things that we are not using.
- So many government programs are untapped.
- This mapping is to help group think outside the box. A good example is Home Care and Home Care Nursing come together. This is being reflected as partnerships i.e. Health Careers.
- *Any surprises?* We are fortunate, it is overwhelming how much there is and where it can be tapped into.
- Realize there are a lot of resources. It will be a job to use these resources to address needs.

## OPPORTUNITIES, SUPPORTS & SUSTAINABILITY

<b><i>OPPORTUNITIES, SUPPORTS &amp; SUSTAINABILITY</i></b>
<ul style="list-style-type: none"><li>• Identifies alternate venues-go to the people in their familiar environment</li><li>• Opportunities for improved collaboration, expands partnerships</li><li>• Brings expertise together</li><li>• Keeps momentum going</li><li>• Developing and aligning frameworks for health priorities</li><li>• Active sharing</li><li>• Joint training, wisdom base; joint research projects; involve all stakeholders</li><li>• MOUs-how to enhance and evaluate those partnerships</li><li>• Onkwata'karitáhtshera</li><li>• Grassroots and frontline collaboration</li><li>• Community vision</li><li>• Community wellness plan</li><li>• Ownership</li></ul>

### ***DETAILS***

- Identifies alternate venues and direct access i.e. at Golden Age Club for golden agers. Efforts are better if organizations go to the people, familiar environments. It doesn't work the other way. A lot of organization goes into these events and it doesn't work.
- Still need to improve in collaboration i.e. do we involve everyone instead of doing things separately. This is building on partnerships. In relation to frameworks for collaborative approach to a problem, sustaining it after the launch event is important. Why is Home and Community Care continuing to work so well? What is keeping the momentum going? Move this to other areas.
- Some have heard discussion to cluster community needs; this would require less framework. Some KSCS departments are feeling they are working in isolation. If we put it on paper everyone who is involved, it will help.
- Sustainability: same issue applies in different areas. Would like to see active sharing where programs get done, that has already been created, can see trends, communication. Joint training helps in getting same base of wisdom, same terminology. Joint projects perform the same function. The benefit is different perspectives from all stakeholders. It works toward the vision of all working together.
- There is Onkwata'karitáhtshera. All health organizations sit there and that process should be fine tuned. There is an MOU table. These provide opportunities but these must be shored up, enhanced, refined. Since it has been set up it has not been evaluated. Perhaps there is even an overlap there.
- Grassroots people are not at these tables. There has to be something.

- This is where strategic framework comes in to play. Goals should ripple down through marching orders. Some are natural organizers, some have to be told.
- Grassroots are at Onkwata'karitáhtshera table but subcommittees have to look at it. For example, go to Step-by-Step. They do their evaluations. KMHC must figure out how to work with SBS so evaluations are the same.
- Grassroots are considered frontline workers, deliverers of the service. These people have to get together. The beginning of many organizations is grassroots; it was community members who worked on a need i.e. Indian Way, Karihwanoron, Kateri Hospital.
- Grassroots and frontline collaboration.
- Need to see a common line that connects them. I need to have that to give to workers and say this is what we are working on.
- An opportunity to develop common vision. We have a community vision. We need to align our strategic frameworks to the community vision.
- We do not have a community wellness plan. We should not concentrate on disease, but wellness.
- There should be ownership. It is important as a worker to understand, to use as a guide or as a tool.

### BARRIERS & CHALLENGES

<b>BARRIERS</b>	<b>CHALLENGES</b>
<ul style="list-style-type: none"> <li>• Working in isolation</li> <li>• Not getting all information regarding CHP and how it is rolled out</li> <li>• Data/analysis</li> <li>• Confidentiality</li> <li>• Overcoming barriers—look at what works</li> <li>• Specify outcomes to work in best interest of client with accountability</li> <li>• Talented resources</li> <li>• Finding new ways to reach population</li> <li>• Language barriers with provincial systems</li> </ul>	<ul style="list-style-type: none"> <li>• How to plan to keep momentum</li> <li>• Technology (high cost)</li> <li>• Limited financial resources</li> <li>• Working with federal and provincial systems</li> <li>• Staying current/informed of best practices in addressing health issues</li> <li>• Aligning community visions</li> </ul>

## **DETAILS**

- Working in isolation
- All the staff need to see the community health plan or summary. Information on community plan not properly rolled out.
- Do not have data for planning
- Confidentiality: if dealing with same case, don't see holding on to it. Perhaps, MOU table will help. Be open with data, just not personal data. Look at history on how others share information and learn from it i.e. Home and Community Care.
- Analysis: The need to look at numbers, to get the facts, not community word of mouth
- Specify outcomes. If confidentiality is an issue, what is the specified outcome to this (with accountability)? If people are not achieving outcomes, we should hold them accountable.
- Another challenge is human resources. Not enough are trained for the jobs. They must be trained on the job, no matter what level.
- How is everyone going to get together on how to get things into place and keep momentum?
- Technology: There is a lot that could be used to share information but it is costly. KMHC is looking at an electronic health record. Sharing lab results has begun. Gap with thinking: must change conventional thinking, add Facebook as a means of communication.
- Limited financial resources
- We have to work with both federal and provincial systems and there is a language barrier to do this (provincial).
- There is a need to consistently stay current/informed on best practices on addressing health and social issues.
- Challenge: keeping the bigger picture in play. Each organization has a vision. Frameworks for KMHC and KSCS are aligned to community vision.