

**Kahnawake Community Health Plan
2012-2013**

RATIONALE	There is a perceived increase in children with developmental disabilities as identified in the 2010 evaluation of the community health plan.						
GOAL	To assess, identify and plan for the needs of families experiencing developmental disabilities.						
STRATEGY	To collaborate with community stake holders to assess the needs of special needs community members and to strategize service delivery and future needs.						
OBJECTIVES	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
To address developmental disabilities within Kahnawake through collaboration of community organizations (Logic Model to be developed)	Establish a working group to focus on the mental health priority.		Onkwa	Ongoing	# of meetings Terms of reference Objectives	Sub committee reports	Improved and efficient service delivery
	Inventory existing services which impact addictions.		Working Group	Ongoing			
	Identify gaps and overlaps and implement service delivery activities to address this priority		Working Group	Ongoing	# of protocols, agreements, MOU, policies		A measurable decrease in developmental disabilities in Kahnawake
To close the gaps in services regarding residential care for Kahnawa'kehró:non living with developmental delays, and their families. (ALS)	Determine the efficacy of opening a residential care facility for Kahnawa'kehró:non who can no longer be maintained with their family setting.	Stakeholders Individuals, Families	ALS management	April 2012 - October 2012	Cost Comparative: individuals maintained off-reserve vs. on-reserve # of individuals presently receiving services on/off reserve	ALS Stats CHU Stats KEC Stats	Improve services for individuals living with developmental delays.
Assess community needs and develop strategies. (ALS)	Look at current services for special needs clients & families.	The special needs population of Kahnawake and their families	Connecting Horizons	Monthly Meetings	Identification of client/service needs	Meeting minutes: identified gaps and service needs	Improved local resources/services for special needs population.

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	Identify best practice models existing within Canada / U.S. for residential care and support services best suited to Kahnawake.	Special needs individuals and their caregivers	ALS Manager in partnership with research team	Ongoing collaboration over fiscal year	Identification of models of care and the structure by which the service is provided	Identified operating costs Staffing requirements Financial responsibilities Community based support where relevant	An identified strategy and next steps required to deliver best practice services in Kahnawake for special needs individuals
	Identify staff training needs to support the development of services	Staff working with special needs clients	ALS Manager	First quarter of FY 2013-2014	Comprehensive list of skill levels of staff and existing gaps to develop and enhance services		Improved services to special needs clients and their families. Reduced referrals to outside resources.
To reduce the incidence of FASD within the community and offer support to community members affected by FASD. (FASD)	To educate and promote awareness of Fetal Alcohol Spectrum Disorder (FASD).	Community Members <i>Adolescents</i> <i>Young adults (male & female)</i> <i>All women of childbearing age</i> <i>Adult males and females</i> <i>Elderly</i>	Prevention worker Communications Kahnawake Youth Center KMHC (ARBD Coordinator/Prevention Worker, Breastfeeding Support Group Coordinator, Community Health Unit)	Ongoing throughout the fiscal year.	# of information sessions, activities and kiosks completed # of people who participated in the sessions/activities and kiosks Decrease in the number of women who drink alcohol during pregnancy (self-report) # of articles, radio & television commercials produced	Participation Sign in sheets Quiz sheets Evaluation Forms	Increased education & awareness of FASD Potential decrease in the number of children suspected/actually affected by FASD Increased level of community awareness on the dangers of alcohol consumption prior to conception and during pregnancy. Potential decrease in the number of children suspected/actually affected by FASD

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To develop a FASD diagnostic/assessment team (multi-disciplinary team) within the community that can also offer appropriate support services.	Community Members	Prevention Worker All other appropriate KSCS personnel and community wide Family Preservation worker	Ongoing throughout the fiscal year.	# of personnel trained in diagnostic assessment # of clients assessed for FASD # of clients diagnosed with FASD	Training evaluation forms FASD Client files	Appropriate diagnosis and interventions for FASD clients
To develop and implement services/programs for high risk women and families.	All women of childbearing age	Prevention Worker Family & Wellness Center Support Worker ARS Workers	Ongoing	# of mentors trained # of clients utilizing mentoring support services	Training Evaluation forms Mentoring support services client files Client evaluation forms	Decrease in the severity of children born who are affected by FASD. Decrease in the # of FASD affected babies (Not possible to measure without the diagnostic component)

Goal	To close the gaps in services for Kahnawa'kehró:non living with developmental delays, and their families.						
Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
Determine the efficacy of opening a residential care facility for Kahnawa'kehró:non who can no longer be maintained with their family setting.	<ul style="list-style-type: none"> ▪ Needs assessment for services for Developmental Dealys ▪ Parent Interviews ▪ Identify gaps in services for individuals with developmental delays 	<ul style="list-style-type: none"> ▪ Stakeholders ▪ Individuals, Families 	ALS management	April 2012 - October 2012	<ul style="list-style-type: none"> ▪ Cost Comparative: individuals maintained off-reserve vs. on-reserve ▪ # of individuals presently receiving services on/off reserve 	<ul style="list-style-type: none"> ▪ ALS Stats ▪ CHU Stats ▪ KEC Stats 	Improve services for individuals living with developmental delays.

Goal	Resolve the need for a residential care for special needs Kahnawa'kehro:non						
Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
Look at current services for special needs clients & families.	Participation in a group made up of special needs individuals, families and services to obtain input on gaps, overlaps and opportunities for the development of partnerships and services.	The special needsa population of Kahnawake and their families.	Connecting Horizons	Monthly meetings	Identification of client/service needs	Meeting minutes: identified gaps and service needs.	Improved local resources 7 services for special needs population: the development of a residential care facility for special needs individuals in need of long term care.

Goal	To close the gaps in services for Kahnawa'kehró:non living with developmental delays, and their families.						
Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
Identify best practice models existing within Canada / U.S. for residential care and support services best suited to Kahnawake.							

Kahnawake Community Health Plan

Program: FASD
KSCS: FASD

Kahnawake Community Health Plan 2012-2013

Goal							
Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
To promote education & awareness of Fetal Alcohol Spectrum Disorder (FASD).	1. Conduct FASD information sessions, activities, and kiosks throughout the community.	- Adolescents, Young adults (male & female), all women of childbearing age, adult males and females. - Elderly	- Prevention worker and KSCS communications department	- Ongoing throughout the fiscal year.	- Number of information sessions, activities and kiosks completed. - Number of people who participated in the sessions/activities and kiosks.	- Participation sign in sheets.	- Increased education & awareness of FASD. - Potential decrease in the number of children suspected/actually affected by FASD.
	2. Host activities that are youth orientated which integrate all programs providing information and awareness to ensure the target groups participation. Ex: Winter Carnival, Graffiti Projects, Spirit of Wellness.		Kahnawake Youth Center		- Decrease in the number of women who drink alcohol during pregnancy (self-report).	- Quiz sheets	
			- KMHC (ARBD Coordinator/				

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KSCS: FASD			Kahnawake Community Health Plan 2012-2013 Prevention worker, Breastfeeding support group coordinator, community health unit).				
	3. Conduct a media campaign focusing on providing prevention/education/awareness messages on FASD.	- All community members	Prevention worker and KSCS communications department (promotion/education worker).	- Ongoing throughout the fiscal year.	- Number of articles, radio & television commercials produced	- Community evaluation forms	- Increased level of community awareness on the dangers of alcohol consumption prior to conception and during pregnancy. - Potential decrease in the number of children suspected/actually affected by FASD.
To develop a FASD diagnostic/assessment team (multi-disciplinary team) within the community that can also offer appropriate support services.	1. To provide FASD diagnostic training to the appropriate multi-disciplinary team members.	- All community members	- Prevention worker	- Ongoing throughout the fiscal year	- Number of personnel trained in diagnostic assessment.	- Training evaluation forms.	Appropriate diagnosis and interventions for FASD clients.

Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
KSCS: FASD			Kahnawake Community Health Plan 2012-2013 - All other appropriate KSCS		- Number of clients assessed for FASD.	- FASD Client files.	
	2. To identify clients that may be affected by FASD		personnel and community wide		- Number of clients diagnosed with FASD.		
	3. To assess clients suspected of FASD.		- Dr. Kent Saylor (KMHC/MCH)				
	4. To provide clinical diagnosis of FASD to clients						
	5. To teach and provide appropriate intervention tools/strategies for front line workers, FASD clients and their families. (Certificate in FASD Education, Lethbridge College)		Family Preservation worker				
	6. To link families affected by FASD with the appropriate services.						
	7. To advocate on behalf of FASD clients for the appropriate/needed services.						

Objectives KSCS: FASD	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
To develop and implement services/programs for high risk women and families.	1. To provide FASD diagnostic training to the appropriate personnel & mentors.	- All women of childbearing age	- Prevention Worker	- Ongoing	- Number of mentors trained. - Number of clients utilizing mentoring support services.	- Training evaluation forms. - Mentoring support services client files.	- Decrease in the severity of children born who are affected by FASD. - Decrease in the number of FASD affected babies- (Not possible to measure without the diagnostic component).
	2. Mentoring support services		- Family & Wellness Center support Worker - Addictions Workers			- Client evaluation forms	
	3. To provide training and support (prevention & intervention) programs to mothers at risk.						
	4. Follow process for referrals and statistics collection regarding approaching, diagnosis and treating individuals with FASD.						
	5. Integrate Mohawk traditional teachings. (Ex: Cradle Board teachings, traditional medicines) that support and encourage healthy pregnancies.						

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KSCS: FASD			Kahnawake Community Health	Plan 2012-2013			