



CENTRE WALGWAN CENTER

ANNUAL REPORT 2022-2023

Dear Shareholders, Employees and Stakeholders,

It is with great pleasure that I present to you our annual report for the year 2022-2023. This report serves as a testament to our collective efforts and achievements, and it is a testament to the remarkable progress we have made as a team.

Over the past year, we have faced numerous challenges and uncertainties, but I am proud to say that we have not only navigated through them successfully but have also thrived in the face of adversity. Our unwavering commitment to excellence, innovation, and collaboration has propelled us forward, enabling us to accomplish significant milestones and exceed our goals.

I would like to express my heartfelt gratitude to each and every one of you for your unwavering dedication, hard work, and resilience. Your passion, expertise, and solid commitment have been instrumental in our collective success. Together, we have created an environment where ideas flourish, and dreams become a reality.

Throughout the year, we have witnessed remarkable achievements across all departments. Our engagement sessions, proved to be a valuable platform for fostering collaboration, generating innovative ideas, and identifying solutions to the challenges faced by our communities. The outcomes highlighted the collective commitment and dedication of the team towards addressing these challenges and seizing opportunities for growth. Our team has delivered extraordinary modernisations, staying at the forefront of the community needs and providing our stakeholders with front-line solutions. Our team has streamlined processes, improved efficiency and ensuring the highest quality standards. Our team has continued to provide exceptional outpatient and virtual services during the engagement series, earning us the trust and loyalty of our valued youth, families and stakeholders.

Moving forward, it is crucial to maintain the momentum generated during the engagement sessions and ensure that the proposed ideas are effectively implemented. Regular follow-ups and progress tracking will be essential to drive the initiatives forward.

Beyond the numbers and milestones, our success as a Centre is also rooted in our core values. We have fostered a culture of inclusivity, respect, and teamwork, where every individual is valued and empowered to contribute their unique perspectives. Our commitment to sustainability and social responsibility has led us to initiate impactful initiatives that positively impact our communities.

Looking ahead, we have a multitude of exciting opportunities on the horizon. The potential for growth and expansion is vast, and we are well-positioned to seize these opportunities and further cement our position as a leader. Together, we will continue to push boundaries, drive innovation, and achieve remarkable results.

I want to express my deepest gratitude to our incredible staff, shareholders, clients, families and partners for their unwavering support and trust in our organization. We value the relationships we have built and look forward to continued collaboration and mutual success.

In closing, I would like to extend my heartfelt appreciation to each and every one of you for your incredible contributions. Our annual report is a testament to your dedication and the remarkable journey we have embarked upon together. Let us celebrate our achievements and embrace the future with optimism and determination.

Thank you for your continued commitment to our shared vision. Together, there is no limit to what we can achieve.

Warm regards,

A handwritten signature in black ink that reads "Pamela Chabong". The signature is written in a cursive, flowing style.

Executive Director / Directrice générale
Centre Walgwan Center

President of the Board of Directors
Centre Walgwan Center

Year End Highlights

In the face of a rapidly changing landscape, our Centre has demonstrated resilience, adaptability, and innovation. We have embraced new technologies, optimized our operations, and seized opportunities to drive sustainable growth. This report will provide you with an in-depth understanding of our performance and the strategies that have fueled our growth.

- We secured a long-term lease with the provincial ministry in a parcel of land to support our land-based initiatives.
- Support from our stakeholders in suspending residential care to support our participatory engagement series with communities in providing a platform for open and honest communication around the current needs of substance abuse and wellness.
- Highlighting our social responsibility during our suspension of residential services in implementing virtual services and outpatient care to address community needs in providing brief intervention and emotional support.
- Improved understanding of organizational goals, challenges, and opportunities through sharing diverse perspectives and feedback from communities.
- Greater appreciation for cross-functional collaboration and the value of collective problem-solving in supporting a shared leadership culture.
- Brainstorming sessions and various working groups generated a multitude of innovative ideas and potential solutions to address challenges.
- Supported a participatory engagement with communities aimed to foster open dialogue, collaboration, identify needs around wellness and generate ideas to address specific challenges.
- Our board and staff demonstrated creativity and resourcefulness around commitment, ownership and in proposing actionable ideas around innovation.
- Modernized clinical approaches according to current First Nation best practices.
- Partners in the CRISM Research Project within the Quebec-Atlantic Node in projects that accelerate the transfer of scientific knowledge towards the development of new treatments, and psychological interventions within substance use.
- Sponsored a youth softball team within the local community

Centers Demographics

Total Number of Individual Clients: 59

Number of centres: 1

Centre Information:

Centre Information for period starting 2022-04-01 and ending 2023-03-31	
<input type="checkbox"/> Centre Walgwan Center	
Biographical and Contact Information	
Contact	Pamela Charlong
Phone	418-759-3006
Extension	222
Email	pamela@walgwan.com or edwalgwan@globetrotter.net
Additional Information	
CA Funding Type	Set funding
Intake Frequency	Continuous
Average Cycle Length (days)	100
In-patient beds funded by	YSAC
Number of in-patient beds (Youth/YSAC)	6
Number of in-patient beds (Other)	0
Program offered in English	Yes
Program offered in French	Yes
Program Offered in Indigenous Languages	No
Please specify Indigenous language(s)	
Accessible to Clients with Physical Disability	Yes
Accepts Pregnant Women	Yes
Court Referral	Yes
From Corrections	Yes
Accepts Clients on Methadone	Yes
Accepts Clients on Suboxone	Yes
Accepts Clients Taking Other Psychoactive Medications	Yes
Teaching Staff and/or School on Site for Children	Yes
Access to Child Care	Yes
Types of Programs Offered	
Gender Specific Cycle	No
Gender Based	No
Concurrent Disorder Capable	Yes
Residential Schools	Yes
On-The-Land	No
Family Treatment	Yes
Child Counselling	Yes
Couples Counselling	Yes
Prescription Drug Abuse-Specific	Yes
Other	
If yes, please specify	
Access to Specialized Staff Within the Centre	
Psychologist Direct Service	Yes
Psychiatrist Direct Service	No
Psychologist/Psychiatrist Clinical Supervision	Yes
Case Manager	Yes
Elder	Yes
Cultural Practitioner	Yes
Clergy	No
Other	
Please specify other	
Access to Specialized Staff Outside of the Centre	
Psychologist Direct Service	Yes
Psychiatrist Direct Service	Yes
Psychologist/Psychiatrist Clinical Supervision	Yes
Case Manager	No
Elder	Yes
Cultural Practitioner	Yes
Clergy	Yes
Other	
Please specify other	

Number of Applicants

Total Number of Applicants and Total Number of Admissions by Sex:

**The following data is collected from the YSAC Intake/Referral Form, Levels of Care and the Client demographic record*

**No Shows are included in this report*

Provide the number of individuals who either applied to, were referred or admitted to your centre for treatment.

Contribution Agreement (CA) requirement to collect and input this information on a quarterly basis.

Total Number of Applicants and Admissions for period starting 2022-04-01 and ending 2023-03-31			
	Males	Females	Combined
Applicants	N=7	N=14	N=21
Admissions	N=20	N=39	N=59
Pre-Treatment Services	N=0	N=0	N=0

Access by Age and Gender

Clients Accessing Treatment by Age and Sex:

**The following data is collected from the YSAC Intake/Referral Form and the Client demographic record*

**No Shows not included in this chart*

Clients Accessing Treatment by Age and Sex for period starting 2022-04-01 and ending 2023-03-31			
Age Group	Males	Females	Combined
under 12	N=0 (0%)	N=0 (0%)	N=0 (0%)
12	N=0 (0%)	N=5 (14%)	N=5 (9%)
13	N=4 (21%)	N=4 (11%)	N=8 (15%)
14	N=5 (26%)	N=10 (29%)	N=15 (28%)
15	N=5 (26%)	N=5 (14%)	N=10 (19%)
16	N=4 (21%)	N=7 (20%)	N=11 (20%)
17	N=1 (5%)	N=4 (11%)	N=5 (9%)
18	N=0 (0%)	N=0 (0%)	N=0 (0%)
over 18	N=0 (0%)	N=0 (0%)	N=0 (0%)
Total Number of Clients	N=19	N=35	N=54
Average Age	15	14	14

Access by Region

Clients Accessing Treatment by Region of Origin and Sex:

*The following data is collected from the Client demographic record

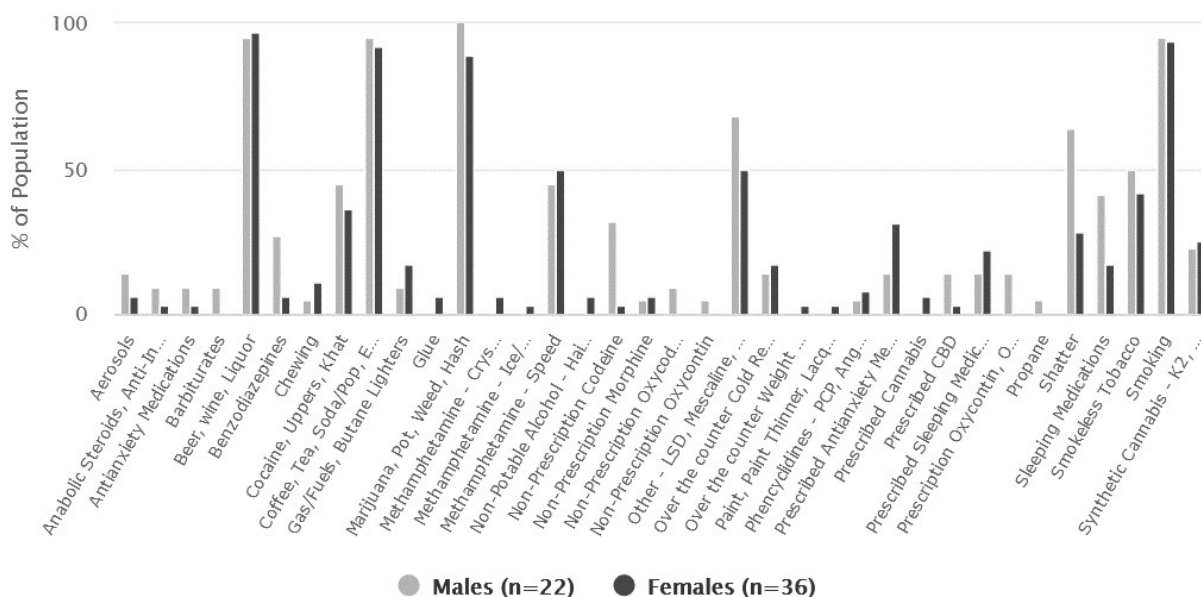
*No Shows not included in this chart

Clients Accessing Treatment by Region of Origin and Sex for period starting 2022-04-01 and ending 2023-03-31

Region	Males	Females	Combined
New Brunswick	N=1 (5%)	N=0 (0%)	N=1 (2%)
Newfoundland and Labrador	N=0 (0%)	N=2 (5%)	N=2 (4%)
Prince Edward Island	N=0 (0%)	N=1 (3%)	N=1 (2%)
Quebec	N=18 (95%)	N=34 (92%)	N=52 (93%)
Total Number of Clients	N=19	N=37	N=56

Substance use trends

Clients Accessing Treatment by Type of Substances Abused and Sex



Accessing Continuum of Care


Clients Accessing Continuum of Care:

**The following data is collected from Levels of Care*

**Clients could be counted in more than one level of care as they move through their continuum of care*

**No Shows not included in this chart*

Clients Accessing Continuum of Care for period starting 2022-04-01 and ending 2023-03-31

Level Of Care 	Number of Treatment Instances	Number of Unique Clients
Day Program	N=0	N=0
Inpatient - Residential	N=23	N=23
Outpatient	N=5	N=5
Outpatient - After Care	N=44	N=42
Outpatient - Virtual	N=17	N=16
Pre-Treatment Services	N=1	N=1

Inpatient-Residential

Clients Accessing Inpatient - Residential for period starting 2022-04-01 and ending 2023-03-31 - Summary

	Males	Females	Combined
Total unique clients accessing Inpatient - Residential	N=10	N=13	N=23
Average length in Inpatient - Residential	59	63	61
Percentage of clients in Inpatient - Residential not discharged	0% (N=0)	0% (N=0)	0% (N=0)

Outpatient-External

Clients Accessing Outpatient for period starting 2022-04-01 and ending 2023-03-31 - Summary

	Males	Females	Combined
Total unique clients accessing Outpatient	N=3	N=2	N=5
Average length in Outpatient	81	111	93
Percentage of clients in Outpatient not discharged	0% (N=0)	0% (N=0)	0% (N=0)

Outpatient-Aftercare (PostTreatment)

Clients Accessing Outpatient - After Care for period starting 2022-04-01 and ending 2023-03-31 - Summary

	Males	Females	Combined
Total unique clients accessing Outpatient - After Care	N=15	N=26	N=41
Average length in Outpatient - After Care	346	387	372
Percentage of clients in Outpatient - After Care not discharged	0% (N=0)	0% (N=0)	0% (N=0)

Outpatient-Virtual

Clients Accessing Outpatient - Virtual for period starting 2022-04-01 and ending 2023-03-31 - Summary

	Males	Females	Combined
Total unique clients accessing Outpatient - Virtual	N=3	N=13	N=16
Average length in Outpatient - Virtual	54	63	62
Percentage of clients in Outpatient - Virtual not discharged	0% (N=0)	15% (N=2)	13% (N=2)

Pre-Treatment Services

Clients Accessing Pre-Treatment Services for period starting 2022-04-01 and ending 2023-03-31 - Summary

	Males	Females	Combined
Total unique clients accessing Pre-Treatment Services	N=1	N=0	N=1
Average length in Pre-Treatment Services	41	0	41
Percentage of clients in Pre-Treatment Services not discharged	0% (N=0)	0% (N=0)	0% (N=0)

Non-Operation Days

Total Number of Operational and Non-Operational Days:

**The following data is collected from Residential Cycles and the Location demographic record*

An “**Operational Day**” is a day that treatment services are provided to clients.

Operational Days have also been referenced as “Days Open” and/or “Client Days” in the past.

A “**non-operational**” or “**closed day**” is a day that treatment services are not provided to clients (i.e., cleaning of facility, staff training, and accreditation activities).

YSAC treatment centres are entitled to **35 closed days (non-operational days)** per year.

Please Note: If indicated in your contribution agreement, occupancy rates that exceed 100% can be credited to allow for additional Closure Days (or) non-operational days.

Available Bed Days for period starting 2022-04-01 and ending 2023-03-31						
Centre Name	Number of Operational Days	Number of Non-Operational Days	Number of Beds Available	Total Number of Available Bed Days	First Login	Last Login
Centre Walgwan Center	325	40	6	1950	2014-07-23	2023-06-09

Occupancy Rates

Quarter	#	%
1 st Quarter (April - June)	6	90%
2 nd Quarter (July - Sept)	6	66%
3 rd Quarter (Oct - Dec)	6	68%
4 th Quarter (Jan - March)	0	Closed for residential care. Outpatient-outreach and virtual services offered
Annual – Fiscal Year	23	57%

Occupancy Rates: Bed Utilization, Service Utilization and Rate for Clients Previously in Treatment

**The following data is collected from the Locations demographic record, Residential Cycles, Levels of Care and Client Discharge - Reason for Termination of Treatment*

Known as "residential occupancy rate" or "bed utilization rate" for your centre.

The standard occupancy rate for YSAC Treatment Centres is a minimum of 80%.

For YSAC treatment centres, **10 days** are allotted for client **no shows** or for **early discharge**.

Please Note: In **family treatment centres**, each family member who is present upon the family's intake to the program is to be counted as occupying a treatment centre bed. For example, 2 adult parents in a family of 4 request treatment for substance abuse. The mother, father and 2 children would be counted as occupying 4 beds.

Please Note: In youth treatment centres, parents who stay at a centre to participate in a component of a youth's treatment are added to the client admission count. For example, 5 adult parents/guardians staying over at the centre to participate in an aspect of their youth relation's treatment programming would be added as 5 additional individuals to the count of beds occupied during a cycle at that centre.

Please Note: If indicated in your funding arrangement, occupancy rates that exceed 100% can be credited to allow for additional Closure Days (or) non-operational days.

Bed Utilization Rate

Bed Utilization for period starting 2022-04-01 and ending 2023-03-31	
Centre Name	Occupancy Rate
Centre Walgwan Center	57%

Service Utilization Rates

Service Utilization Rate

**The following data is collected from Programs/Services - Outreach Sessions, Locations demographic record, Residential Cycles, Levels of Care and Client Discharge - Reason for Termination of Treatment*

The **Service Utilization Rate** identifies a centre's residential occupancy rate with day patient/outpatient/outreach included in the calculation.

The number of outreach contact hours is multiplied by the number of clients being reached and then divided by 24 to find the residential occupancy on an operational day equivalent. This is added to a centre's bed utilization as a number (not the percentage rate) so that the final percentage rate includes bed utilization *and* outreach.

Please Note: The considerations identified above in residential occupancy section for family treatment centres and youth treatment centres.

Service Utilization for period starting 2022-04-01 and ending 2023-03-31	
Centre Name	Service Utilization Rate
Centre Walgwan Center	1055%

Youth Previously attending treatment

Clients Previously Attending Treatment:

**The following data is collected from the YSAC Intake/Referral Form*

Attended Previous Treatment Rate for period starting 2022-04-01 and ending 2023-03-31

	Percentages
Attended Previous Treatment Rate	25%

Outreach Summary

In January 2022 the CWC suspended residential services to conduct participatory community engagement sessions aimed to foster communication around current needs and substance misuse trends, foster collaboration, and community involvement among various stakeholders.

The engagement sessions were designed to achieve the following objectives:

- Facilitate open and constructive dialogue with community stakeholders.
- Gather valuable insights, feedback, and suggestions around current needs.
- Enhance understanding and awareness of CWC's initiatives.
- Build strong relationships and foster community engagement.
- Identify potential areas of improvement and address concerns raised by participants.

In planning the engagement sessions, we established our target audience that consisted of youth between 12-17 years old, elders, front-line community programs, Chief and council and public community engagement sessions for the general public.

We conducted a series of community engagement sessions led by our team. Teams consisted of various staff members who facilitated and animated the engagement sessions through in person visits and virtual sessions. The engagement sessions incorporated visual aids, handouts, surveys and digital tools to encourage diverse perspectives and ensured inclusivity during discussions. Key points, suggestion and feedback raised by participants were captured and documented.

Within the post-session follow-up data is stored within a general server where it is being analyzed and the main findings summarized. A copy of the report will be shared with participants and stakeholders. Some communities expressed a desire to have an individual report based on their community feedback with the intention to mobilize and create a plan of action.

Up to this point 14 communities participated in our engagement sessions and various provincial services representing the urban populations. Based on the feedback received, we have identified actionable recommendations to address concerns and improve our service delivery initiatives around substance misuse and wellness. We are underway in prioritizing program enhancements according to feasibility and potential desired outcomes. An action plan will be presented in implementing the enhancements for community feedback.

Recommendations following the engagements sessions are the following;

- Enhance communication and visibility in strengthening communication channels to provide regular updates and progress reports to stakeholders.
- Utilize various mediums of communications such as newsletters, social media and community forums to keep stakeholders informed.
- Increase engagement opportunities through sessions to sustain momentum and keep stakeholders actively involved.
- Incorporate different formats, such as workshops, focus groups, online surveys to reach a wider audience.
- Develop strategies to address specific concerns and challenges raised during the session.
- Establish mechanisms for ongoing dialogue and follow-up with stakeholders to ensure their concerns are adequately addressed.

The engagement sessions conducted by CWC proved to be instrumental in fostering communication, gathering valuable insights, and building strong relationships with stakeholders. The feedback received will help shape CWC's initiatives and improve its overall service delivery model. Continued engagement and collaboration with stakeholders are essential to the success of future projects.

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Served	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
No Community Specified	1	Substance Education	20	04/05/2022	2
No Community Specified	1	Wellness Conference	8	04/08/2022	2.5
La Nation Innu Matimekush-Lac John	1	Mobile Outreach	5	04/08/2022	1.5
Betsiamites	1	Mobile Outreach	6	04/11/2022	1
Mistissini, Chisasibi	1	Drug & Alcohol Awareness	1	04/12/2022	1
Winneway	1	Mobile Outreach	2	04/12/2022	1
No Community Specified	1	Intake/Aftercare	1	04/15/2022	0.5
Lac Simon	1	Intake/Aftercare	1	04/15/2022	1
Uashat-Maliotenam	1	Intake/Aftercare	2	04/15/2022	0.5
Uashat-Maliotenam	1	Intake/Aftercare	1	04/18/2022	0.5
No Community Specified	1	School Based Prevention	12	04/22/2022	2
Natuashish	1	Drug & Alcohol Awareness	2	04/25/2022	1
No Community Specified	2	Drug & Alcohol Awareness	2	04/28/2022	2
Natuashish	1	Drug & Alcohol Awareness	1	04/28/2022	1
No Community Specified	1	Drug & Alcohol Awareness	1	05/02/2022	0.5
Listuguj Mi'gmaq Government	1	Substance Education	2	05/02/2022	2
Natuashish	1	Drug & Alcohol Awareness	1	05/02/2022	1
No Community Specified	1	School Based Intervention	7	05/03/2022	1
Uashat-Maliotenam	2	Drug & Alcohol Awareness	4	05/05/2022	2.5
Listuguj Mi'gmaq Government	2	School Based Prevention	18	05/09/2022	2
Listuguj Mi'gmaq Government	2	Substance Education	16	05/09/2022	2
No Community Specified	1	Mobile Outreach	5	05/10/2022	2
No Community Specified	1	School Based Intervention	7	05/10/2022	1
Natuashish	1	Drug & Alcohol Awareness	2	05/10/2022	1
Lac Simon	1	Intake/Aftercare	1	05/11/2022	0.5
Kitzisakik	1	Mobile Outreach	6	05/12/2022	1

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Serviced	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
Uashat-Maliotenam	1	Drug & Alcohol Awareness	2	05/12/2022	1
No Community Specified	1	Mobile Outreach	7	05/13/2022	2
No Community Specified	1	Relapse Prevention/Continuing Care	6	05/16/2022	1.5
Betsiamites	1	Mobile Outreach	4	05/16/2022	1
No Community Specified	1	School Based Intervention	7	05/17/2022	1
La Romaine	1	Drug & Alcohol Awareness	3	05/18/2022	1
No Community Specified	2	Mobile Outreach	15	05/20/2022	3.5
No Community Specified	1	School Based Intervention	7	05/24/2022	1
Uashat-Maliotenam	1	Mobile Outreach	3	05/24/2022	1.5
Pakuashipi	1	Drug & Alcohol Awareness	2	05/25/2022	2
No Community Specified	1	Mobile Outreach	4	05/26/2022	2
No Community Specified	1	Drug & Alcohol Awareness	2	05/27/2022	0.5
Lac Simon	1	Intake/Aftercare	7	05/27/2022	1
Listuguj Mi'gmaq Government	1	Substance Education	8	05/30/2022	1
No Community Specified	1	Intake/Aftercare	3	05/31/2022	1
No Community Specified	2	School Based Intervention	14	05/31/2022	2
No Community Specified	1	Wellness Conference	3	05/31/2022	2.5
Betsiamites	1	Intake/Aftercare	7	06/02/2022	1.5
Uashat-Maliotenam	1	Drug & Alcohol Awareness	1	06/02/2022	1
Lac Simon	1	Intake/Aftercare	1	06/06/2022	0.5
No Community Specified	1	School Based Intervention	7	06/07/2022	1
Betsiamites	1	Intake/Aftercare	1	06/07/2022	1
No Community Specified	1	Drug & Alcohol Awareness	6	06/08/2022	2
Uashat-Maliotenam	1	Drug & Alcohol Awareness	2	06/08/2022	1
No Community Specified	1	Drug & Alcohol Awareness	6	06/09/2022	2

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Served	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
No Community Specified	3	School Based Intervention	21	06/14/2022	3
Lac Simon	1	Intake/Aftercare	1	06/14/2022	1
Pakuashipi	1	Virtual Intervention Recovery (Zoom/Other)	1	06/15/2022	1
Pakuashipi	1	Virtual Intervention Recovery (Zoom/Other)	1	06/23/2022	1
Uashat-Maliotenam	1	Virtual Intervention Recovery (Zoom/Other)	5	06/29/2022	1.5
Pakuashipi	1	Virtual Intervention Recovery (Zoom/Other)	1	06/30/2022	0.5
Les Atikamekw de Manawan	1	Virtual Intervention Recovery (Zoom/Other)	4	07/05/2022	2
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	4	07/05/2022	2
Pakuashipi	1	Virtual Intervention Recovery (Zoom/Other)	1	07/06/2022	0.5
Matimekush	1	Intake/Aftercare	1	07/07/2022	1
Pakuashipi	1	Intake/Aftercare	1	07/07/2022	1
Uashat-Maliotenam	1	Intake/Aftercare	1	07/07/2022	1
Kitzisakik	1	Virtual Intervention Recovery (Zoom/Other)	4	07/12/2022	2
Uashat-Maliotenam	2	Virtual Intervention Recovery (Zoom/Other)	11	07/19/2022	3.5
Betsiamites	1	Intake/Aftercare	1	07/20/2022	1
Lac Simon	1	Intake/Aftercare	1	07/20/2022	1
Matimekush	1	Intake/Aftercare	1	07/20/2022	1
Winneway	1	Intake/Aftercare	1	07/20/2022	1
Kitzisakik	1	Intake/Aftercare	1	08/18/2022	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	08/26/2022	1
Pakuashipi	1	Mobile Outreach	4	08/30/2022	2
Tobique	1	Mobile Outreach	5	08/30/2022	1.5
Kitzisakik	1	Intake/Aftercare	5	08/31/2022	1.5
Mistissini	1	Virtual Intervention Recovery (Zoom/Other)	2	08/31/2022	1
Wemataci	1	Mobile Outreach	4	09/01/2022	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	09/02/2022	1

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Served	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	09/06/2022	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	09/07/2022	1
Mistissini	1	Virtual Intervention Recovery (Zoom/Other)	1	09/07/2022	1
Uashat-Maliotenam	1	Mobile Outreach	5	09/07/2022	1
Wemataci	1	Mobile Outreach	4	09/07/2022	2
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	09/08/2022	1
Abegweit	1	Intake/Aftercare	1	09/09/2022	1
Lac Simon	1	Intake/Aftercare	1	09/09/2022	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	09/12/2022	1
Uashat-Maliotenam	3	Intake/Aftercare	3	09/12/2022	3
Lac Simon	3	Virtual Intervention Recovery (Zoom/Other)	3	09/13/2022	3
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	09/13/2022	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	09/14/2022	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	09/14/2022	1
Micmacs of Gesgapegiag	1	Mobile Outreach	1	09/14/2022	2
Mistissini	1	Virtual Intervention Recovery (Zoom/Other)	1	09/14/2022	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	09/15/2022	1
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	4	09/30/2022	1.5
Micmacs of Gesgapegiag	1	Drug & Alcohol Awareness	9	10/05/2022	2
Mistissini	1	Virtual Intervention Recovery (Zoom/Other)	1	10/05/2022	1
Micmacs of Gesgapegiag	3	Brief Treatment Intervention	3	10/06/2022	3
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	10/17/2022	1
Micmacs of Gesgapegiag	3	Brief Treatment Intervention	3	10/20/2022	3
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	10/20/2022	1

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Serviced	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
Micmacs of Gesgapegiag	2	School Based Prevention	33	10/21/2022	2
Matimekush	1	Virtual Intervention Recovery (Zoom/Other)	7	10/24/2022	1.5
Schefferville	1	Virtual Intervention Recovery (Zoom/Other)	6	10/24/2022	1.5
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	10/24/2022	1
Micmacs of Gesgapegiag	2	Brief Treatment Intervention	2	10/26/2022	2
Mistissini	1	Virtual Intervention Recovery (Zoom/Other)	1	10/26/2022	1
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	10/27/2022	1
La Romaine	1	Virtual Intervention Recovery (Zoom/Other)	5	10/31/2022	1.5
La Romaine	1	Virtual Intervention Recovery (Zoom/Other)	6	11/01/2022	1.5
Micmacs of Gesgapegiag	4	Brief Treatment Intervention	4	11/02/2022	4
Mistissini	1	Virtual Intervention Recovery (Zoom/Other)	1	11/02/2022	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	4	11/03/2022	1.5
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	11/03/2022	1
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	11/07/2022	1
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	11/10/2022	1
No Community Specified	2	Mobile Outreach	6	11/11/2022	2
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	11/11/2022	1
Wemataci	1	Virtual Intervention Recovery (Zoom/Other)	1	11/14/2022	1
Listuguj Mi'gmaq Government	2	School Based Prevention	20	11/15/2022	2
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	3	11/15/2022	1.5
Matimekush	1	Virtual Intervention Recovery (Zoom/Other)	5	11/18/2022	2.5
Micmacs of Gesgapegiag	2	Brief Treatment Intervention	5	11/21/2022	2.5
Micmacs of Gesgapegiag	1	Mobile Outreach	4	11/22/2022	2
Micmacs of Gesgapegiag	1	Wellness Conference	4	11/23/2022	2

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Served	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
Listuguj Mi'gmaq Government	2	School Based Prevention	14	11/29/2022	2
Micmacs of Gesgapegiag	1	School Based Prevention	9	11/30/2022	1
Naskapi Nation of Kawawachikamach	1	Virtual Intervention Recovery (Zoom/Other)	5	12/01/2022	2
Listuguj Mi'gmaq Government	1	Virtual Intervention Recovery (Zoom/Other)	4	12/05/2022	2
Micmacs of Gesgapegiag	1	Virtual Intervention Recovery (Zoom/Other)	4	12/05/2022	2
Pakuashipi	1	Virtual Intervention Recovery (Zoom/Other)	6	12/05/2022	1
Micmacs of Gesgapegiag	1	Virtual Intervention Recovery (Zoom/Other)	1	01/05/2023	0.5
Inuvik	1	Virtual Intervention Recovery (Zoom/Other)	1	01/10/2023	2
Kitzisakik	1	Virtual Intervention Recovery (Zoom/Other)	1	01/10/2023	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	01/12/2023	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	01/12/2023	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	01/16/2023	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	01/16/2023	1
Kahkewistahaw	1	Virtual Intervention Recovery (Zoom/Other)	1	01/18/2023	1
Kitzisakik	1	Virtual Intervention Recovery (Zoom/Other)	1	01/19/2023	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	01/20/2023	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	01/23/2023	1
Kitigan Zibi Anishinabeg	1	Virtual Intervention Recovery (Zoom/Other)	1	01/25/2023	1.5
Kitzisakik	1	Virtual Intervention Recovery (Zoom/Other)	1	01/25/2023	0.5
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	01/27/2023	1
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	01/30/2023	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	01/31/2023	1
Kitigan Zibi Anishinabeg	1	Virtual Intervention Recovery (Zoom/Other)	1	02/01/2023	1
Kitzisakik	1	Virtual Intervention Recovery (Zoom/Other)	1	02/01/2023	0.5
Puvirnituk	1	Virtual Intervention Recovery (Zoom/Other)	1	02/02/2023	0.5
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	02/02/2023	1
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	02/06/2023	1

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Served	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
Micmacs of Gesgapegiag	1	Brief Treatment Intervention	1	02/06/2023	1
Puvirnituk	1	Virtual Intervention Recovery (Zoom/Other)	1	02/09/2023	0.5
Puvirnituk	2	Virtual Intervention Recovery (Zoom/Other)	2	02/13/2023	1
Waskaganish First Nation	1	Mobile Outreach	44	02/13/2023	3
Waskaganish First Nation	3	Mobile Outreach	22	02/14/2023	4.5
Winneway	1	Mobile Outreach	68	02/14/2023	3.5
Eastmain	3	Mobile Outreach	67	02/15/2023	6
Kitzisakik	1	Mobile Outreach	1	02/15/2023	1.5
Kitigan Zibi Anishinabeg	4	Mobile Outreach	48	02/16/2023	8
No Community Specified	1	Mobile Outreach	5	02/17/2023	1.5
Mohawks of Kanesatake	2	Mobile Outreach	26	02/20/2023	4.5
Puvirnituk	1	Mobile Outreach	2	02/21/2023	2
Lac Simon	1	Virtual Intervention Recovery (Zoom/Other)	1	02/21/2023	1
Mohawks of Akwesasne	1	Mobile Outreach	3	02/21/2023	1.5
Naskapi Nation of Kawawachikamach	1	Mobile Outreach	60	02/21/2023	5
Mohawks of Kahnawá:ke	1	Mobile Outreach	16	02/22/2023	2
Puvirnituk	1	Mobile Outreach	1	02/23/2023	2.5
Mohawks of Kahnawá:ke	1	Mobile Outreach	1	02/23/2023	1.5
Naskapi Nation of Kawawachikamach	1	Mobile Outreach	1	02/23/2023	1.5
Timiskaming First Nation	1	Mobile Outreach	1	02/24/2023	1.5
Lac Simon	4	Mobile Outreach	95	03/06/2023	6
Pikogan	4	Mobile Outreach	66	03/07/2023	7.5
No Community Specified	3	Mobile Outreach	38	03/08/2023	7
Puvirnituk	1	Virtual Intervention Recovery (Zoom/Other)	1	03/08/2023	0.5

Outreach Program Summary for period starting 2022-04-01 and ending 2023-03-31

Name of Community Serviced	Number of Services Provided	Type of Activity	Number of Participants	Date of Service	
Kitigan Zibi Anishinabeg	1	Virtual Intervention Recovery (Zoom/Other)	1	03/08/2023	0.5
Puvirnituk	1	Virtual Intervention Recovery (Zoom/Other)	1	03/10/2023	0.5
Les Atikamekw de Manawan	1	Mobile Outreach	16	03/14/2023	2
Wendake	3	Mobile Outreach	20	03/16/2023	4.5
Puvirnituk	1	Virtual Intervention Recovery (Zoom/Other)	1	03/20/2023	0.5
Matimekush	2	Mobile Outreach	10	03/20/2023	3
Kuujuaq	1	Mobile Outreach	1	03/21/2023	2
Naskapi Nation of Kawawachikamach	2	Mobile Outreach	16	03/21/2023	2.5
Naskapi Nation of Kawawachikamach	2	Mobile Outreach	5	03/22/2023	3
Wolf Lake	1	Mobile Outreach	2	03/22/2023	1.5
Naskapi Nation of Kawawachikamach	1	Mobile Outreach	3	03/23/2023	1.5
Puvirnituk	1	Virtual Intervention Recovery (Zoom/Other)	1	03/28/2023	0.5
No Community Specified	1	Mobile Outreach	15	03/29/2023	2

Outpatient Summary

Within the last year we have developed significant relationships with the Gesgapegiag Wellness Centre, Gignu group home, local high school (NRHS) and the CISSS (health authority).

Some benefits of offering outpatient services are designed to be easily accessible, offered locally within the community or neighbouring offices. This convenience allows youth to receive the support they need without the requirement for overnight stays or extensive disruptions to their daily routines. It reduces barriers to seeking help and promotes regular attendance, ensuring consistent care.

This consistency allows for a comprehensive understanding of the youth's unique needs, history, and progress. The relationships built between the youth counselor and cultural mentors fosters hope, meaning, purpose and belonging, leading to more effective treatment outcomes.

Outpatient services are well-suited for early intervention and preventive measures. By identifying and addressing mental health, behavioral, or substance abuse concerns at an early stage, outpatient services can help prevent issues from escalating and becoming more severe. This proactive approach can contribute to improved long-term outcomes and reduce the need for more intensive interventions.

By offering accessibility, continuity of care, early intervention, individualized wellness care plans, and a supportive environment, outpatient services play a vital role in promoting the mental health and well-being of youth. They contribute to better outcomes, improved functioning, and enhanced quality of life for young people facing mental health or behavioral challenges.

Clients Accessing Outpatient for period starting 2022-04-01 and ending 2023-03-31 - Summary			
	Males	Females	Combined
Total unique clients accessing Outpatient	N=3	N=2	N=5
Average length in Outpatient	81	111	93
Percentage of clients in Outpatient not discharged	0% (N=0)	0% (N=0)	0% (N=0)

Community development, Universal Prevention and Health Promotion

Community development, universal prevention, and health promotions are integral approaches aimed at improving the overall well-being and quality of life within a community. This report provides an overview of these concepts, their significance, and the strategies employed to promote health and prevent negative outcomes at the community level.

Community Development:

- Participation: Through our engagements with community and urban centres, members were involved in sharing their perspectives around current trends and priorities. These opportunities were part of a collaborative approach in addressing current needs around our service delivery within youth wellness initiatives.
- Capacity Building: Enhancing the skills, knowledge, and resources of individuals and organizations within the community through various partnerships with post secondary schools.
- Collaboration: Encouraging cooperation and partnership among various stakeholders such as the health center, ISC, the treatment centers network, CSSSSPNQL local leadership, and service providers.

Education and Awareness:

- Providing the Buffalo Riders program within certain provincial settings (group homes) and schools as a community-based prevention initiative that supported culturally appropriate health education material, workshops, and sessions to increase awareness of health issues and promote healthy behaviors through cultural practices.
- Collaboration with health centers, and external organizations to integrate health promotion messages into educational curricula and extracurricular activities.
- Broadened our communication channels, including public quarterly newsletter, social media platforms, radio, and community gatherings, to share information.

Accessible Healthcare Services:

- Advocated for increased accessibility of services within the First Nation communities and urban centres to address gaps through virtual care, outpatient services and hybrid treatment models in supporting mental health and substance misuse treatment.
- Collaboration with NADDAP and community-based organizations to deliver culturally sensitive and holistic services based on the National frameworks and best practices (Culture as foundation, land-based healing, honouring our strengths, etc.).
- Supported initiatives that address mental health and improve health outcomes for community members, through virtual psychological services, hybrid treatment programs and emotional support through a toll-free hotline.
- Support groups specifically designed for family members as a resource. The groups brought together parents or significant others who are going through similar experiences, allowing them to share their stories, offer support, and learn from one another.

Strengthening Social Support:

- Fostering partnerships and social connections within community driven health initiatives (Wellness Forums, Life Promotion, NAAW, etc.)
- Partnering with community centers and organizing community events around wellness promoting culture as foundation (youth sweat lodges monthly), animating cultural

activities at the youth center, and supporting community celebrations to promote social cohesion and a sense of belonging.

- Facilitated a visiting elders initiative to support intergenerational activities to enhance social support and resilience.

Partnerships and Collaborations:

- Forged partnerships with local organizations, community leaders, government agencies, and healthcare providers to leverage resources, expertise, and funding opportunities. (Provincial gouvernement, CISSS de la Gaspésie, CIUSSS, FNHMA, Accreditation Canada, etc.). We benefitted from some culture inclusion funds for a music program and some provincial program resources around clinical assessments and family programming.
- Called upon regional (CSSSPNQL, ISC, Provincial) or national Indigenous health organizations (YSAC, TPF, FNHMA, ICBOC) and networks to access specialized knowledge and best practices within our modernization of program curriculum.
- Collaboration with Mc Gill university and the CRISM Atlantic-Québec node to conduct community-based research on health issues and interventions.
- Discussions around piloting a family program and obtaining a grant through a research project with Mc Gill university.

Evaluation and Continuous Improvement:

- Regular evaluations done to measure the effectiveness and impact of our programs and initiatives (youth, family and referral satisfaction surveys, two-year post-follow up assessments, engagement dialogue with communities). We would like to include clinical measurements to assess family relationships in the near future as part of our post-treatment follow-ups.
- Focus groups are conducted with youth and families in evaluating different components of the program, participating in policy review and cultural practices.

Early Identification, Brief Intervention and Aftercare

Early identification and brief intervention focus on prevention and risk reduction rather than waiting for a full-blown substance use disorder to develop. This proactive approach aims to address substance use concerns at an early stage, preventing the progression of harmful patterns and reducing the likelihood of long-term negative outcomes.

Requests for brief intervention have increased following the post-pandemic. The impacts of the pandemic have indicated an increase in substance use among youth. Youth and families do not necessarily want to send their children to residential services for various reasons. The brief intervention option is a convenient way in supporting wellness outcomes for youth experiencing various challenges.

Due to an increase in requests for brief treatment, Walgwan has secured a virtual counsellor in order for us to maintain a residential and brief treatment options be in in-person through outpatient services or through virtual care options.

These services consist of eight-week modules composed of two meetings a week. Psychological services are available as additional supports as needed. Families are involved in the brief intervention services as they play a key role in the wellness outcomes. We accomplish this by connecting with the families through family circles where cultural practices are used to surround the youth with support and share in a safe space around solutions to increase the protective factors.

Implementing early identification and brief intervention for youth and substance use is a proactive approach that promotes timely support, prevention, and positive outcomes. By identifying and intervening early, professionals can provide targeted support, educate youth about substance use risks, and mitigate the potential long-term consequences associated with substance abuse.

Secondary Risk Reduction

Harm reduction strategies aim to reduce the negative consequences of substance use by providing practical strategies and resources to minimize harm. This is done through accurate and evidence-based information (brain science) about the potential risks, harms, and consequences of cannabis use to youth who can then make an informed decision.

Schools play a crucial role in secondary risk reduction efforts. Implementing evidence-based prevention programs such as the Young Buffalo Riders program utilizing culture as foundation within school settings can help educate youth about the risks and consequences of substance use, build protective factors, and provide support for those already engaged in substance abuse.

Providing a range of treatment options, including virtual wellness programs, outpatient counseling, group therapy, and specialized youth programs, can support youth in their respective journey towards their wellness goals. Access to treatment should be barrier-free.

Substance abuse often co-occurs with mental health disorders. Offering integrated mental health services alongside substance abuse services can address underlying mental health issues that contribute to substance use. Providing psychological supports and access to mental health supports within our health authority can help youth manage their mental health and reduce the risk of substance use.

Active Treatment

We are currently restructuring our program following the feedback from the community engagement opportunities.

Our program supports the national frameworks of honouring our strengths, culture as foundation and native wellness continuum framework. We integrated these teachings into various aspects of our program, including curriculum development, program activities, youth interactions, and staff training. We aim to ensure that Indigenous voices and perspectives are authentically incorporated, and aspire for a continued consultation with Indigenous elders or community members for guidance and cultural protocols.

We have integrated these concepts and correlated them within the Seven Sacred Teachings as a meaningful approach that incorporates Indigenous wisdom and values. Each teaching represents a core value that guides youth in leading a balanced and purposeful life fostering hope, meaning, purpose and belonging.

Our program will be moving from a 14-week residential program to a 10-week residential program with a hybrid component focusing on reintegration in post-treatment/aftercare and family support services through a virtual platform for an additional 4 weeks.

In light of various services offered within the levels of care we will moving away from a continuous intake and reverting to a calendar of block programming to ensure capacity in maintaining the various levels of care and engaging with communities in providing brief intervention and prevention activities.

Care Facilitation

We want to ensure the coordination and facilitation of comprehensive care and support services for youth using our services. This involves the coordination of various community resources, cultural mentors and/or elders, NADAAP or other professionals, and interventions to ensure that youth receive the necessary care, services, and ongoing support to address risk factors and increase protection factors through a strength-based approach.

Initial assessments (DUSI-R and NWA) are done at periodic times such as 1, 3, 6, 9, 12, 18, 24-month marks to evaluate the needs, strengths, and unique challenges of youth. Based on the assessment, a collaboration is done with the youth, their families, and other supportive services to develop solution focused strategies to reduce risk and promote wellness. We foster collaboration through individual meetings with the youth and then involve the family and other significant members or service providers in the conversation through a family circle where cultural components according to the youth's belief system are incorporated in the circle.

Our outreach/aftercare counselor's play a central role in coordinating the delivery of services. This involves collaborating with various professionals, including counselors, therapists, medical providers, and social workers, to ensure that the youth receive a comprehensive and integrated

experience throughout their wellness journey. They provide ongoing support, advocacy, and guidance to the youth and their families throughout the aftercare period.

Post Treatment Referrals for period starting 2022-04-01 and ending 2023-03-31	
Post Referral Type ↕	Total Clients
Case Management services	N=13
Community Mental Health Supports	N=2
Community-based peer support programs	N=12
Cultural activities and supports	N=17
Doctor/Physician	N=12
Education and/or Job training	N=10
Elders	N=15
Employment supports	N=2
Family supports and programs (i.e. AHSOR, FASD, MCH)	N=11
Housing services	N=0
NNADAP community-based workers	N=6
No post-treatment referral	N=8
Provincial services and programs	N=10
Psychiatrist/Psychologist	N=19
Total Number of Clients	N=23

Workforce Development Activities

Our focus with staff training has been around life promotion, implementation of the national frameworks within our program curriculum, cultural sensitivity, strength-based approaches such as positive discipline, cultural practices, best practices to mitigate risk and early screening and assessments.

Due to capacity challenges our focus is to be versatile as a team and reduce the risks of gaps in services due to unplanned departures or absences within our team. Our vision is for all staff to have experience in all levels of care to avoid future gaps in services.

Thunderbird Partnership Foundation and YSAC have offered extensive virtual and open learning platforms to enhance our skill set and knowledge around best practices and promising First Nation approaches to wellness.

- Clinical Supervision
- Workplace violence and harassment
- Bloodborne pathogens
- Screening and assessment tools
- First Nation Mental Wellness Continuum Framework

- Culture as Foundation
- Land-based Healing
- PDEC (10 sessions-positive discipline)
- Infection Prevention and control
- Diversity and Inclusion
- Ethics
- Pharmacology
- Substance use trends (vaping, cannabis, wax)
- Pro FAN 2.0
- Life promotion (life is sacred)
- MOOC University of Alberta (indigenous Canada)
- CPI/CPR
- Virtu-A (technology addiction)
- Post-secondary studies (Mc Mater university)

We currently have eight workers certified with ICBOC.

Governance and Coordination of Systems

Our governance board consists of seven (7) members and one honorary member transitioning out. The board are principally a policy board and meet quarterly to oversee the operations of the Center.

Strategic Planning: Our Governance Board plays a pivotal role in guiding our organization's strategic direction. Through thoughtful deliberation and collaborative discussions, we are finalizing our comprehensive strategic plan that aligns with our mission and vision.

Fiscal Responsibility and Resource Management: Our Governance Board demonstrated exemplary fiscal responsibility, ensuring the prudent management of resources and financial sustainability of our organization. By implementing robust financial oversight measures, including regular budget reviews, financial audits, and risk assessments, the board safeguarded the organization's financial health. Financial reports are presented every quarter and the board has also been involved in long-term budget projection forecasts to support our vision and strategic orientations.

Program Evaluation and Quality Improvement: The Governance Board placed significant support on program evaluation and quality improvement initiatives. With a commitment to excellence, the board members championed evidence-based practices, supporting monitored program outcomes, and sought continuous feedback from stakeholders. By incorporating data-driven decision-making into our processes, the board successfully identified areas for improvement,

implemented necessary changes, and ensured the delivery of high-quality services to our beneficiaries. (Restructuring of the program)

Board development and succession planning are areas to strengthen within our governance board.

Addressing Mental Health Needs

We are fortunate as a Center to have a psychologist on a contractual basis and a formal agreement to access a mental health team within our local health authority. When co-concurrent disorders are present, we can access these resources in providing a comprehensive, wrap around service to the youth and their family.

Within various assessments we gather data on the prevalence of mental health issues, identifying the specific challenges faced by youth and families. By obtaining a clear understanding of the current situation, we can develop targeted interventions that address the unique needs of each youth.


We are utilizing the AMIS software and are identifying diagnosed cases of mental health within this system that can provide us some data in creating a portrait of youth's challenges and adapting program accordingly to meet their individual needs.

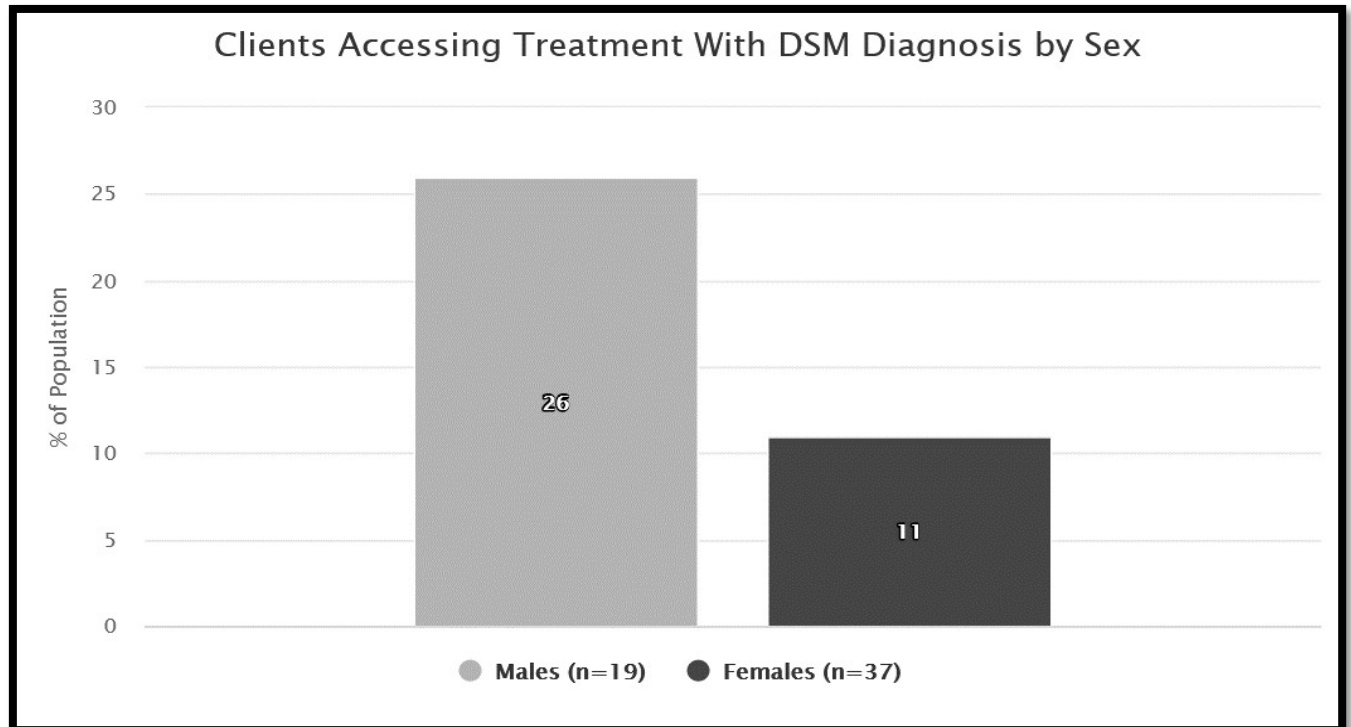
Clients Accessing Treatment With DSM Diagnosis by Sex:

**The following data is collected from DSM-V and the Client demographic record*

**This only includes clients entering treatment with an existing DSM diagnosis on medical record*

**No Shows not included in this chart*

Clients Accessing Treatment With DSM Diagnosis by Sex for period starting 2022-04-01 and ending 2023-03-31		
Males 	Females	Combined
N=5 (26%)	N=4 (11%)	N=9 (16%)
N=19	N=37	N=56



Adopting a culturally sensitive approach is essential to ensure that mental health services are aligned with the cultural values, traditions, and beliefs of families. This is achieved by involving community elders, healers, and cultural experts in the development and implementation of wellness supports. Incorporating traditional healing practices, ceremonies, and teachings into our wellness services can promote a sense of cultural identity, belonging, and overall well-being among youth and families.

Performance Measurements

Regular assessments are practiced to obtain our stakeholders feedback to ensure a culture of quality improvement. Assessments are performed around client satisfaction, staff satisfaction, workplace culture, core competency, family satisfaction and referral satisfaction questionnaires.

These results are reviewed and brought to the team for discussion and review. A quality improvement plan is created to address areas of concern or priority based on the feedback from our stakeholders.

A quality improvement committee reviews the plan and actions every month and adjusts accordingly.

Youth Satisfaction Indicators:

- 66.6% of those surveyed remember being informed of their rights at entry.
- 42% of those surveyed felt safe or extremely safe.
- 85% of those surveyed rated cultural components as helpful.
- 77.8% of those surveyed felt very satisfied or somewhat satisfied with wellness approaches to address substance abuse challenges.

Family Circle Satisfaction Indicators:

- 100% of those surveyed responded that the facilitator was prepared for the session.
- 90% of those surveyed responded that they felt their voices were heard.
- 90% of those surveyed felt their needs were met.
- 88% of those surveyed felt that their family was able to discuss and identify solution to their specific challenges.
- 90% of those surveyed found the family circles to be a positive experience.

Staff Satisfaction Indicators:

- 44% of staff surveyed are committed to practice self-care.
- 56% of staff surveyed feel they can contribute positively to the organizational culture by participating in constructive feedback.
- 87% of staff surveyed strongly agree or moderately agree that there is a reasonable degree of trust and conflict is dealt with openly.
- 68% of staff surveyed feel respected & empowered
- 75% of staff surveyed feel that situations involving disagreement or conflict are handled proactively.