



STRATEGIC PLAN 2023-2025

CHARLES J ANDREW



Completed by: YSAC

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Executive Summary

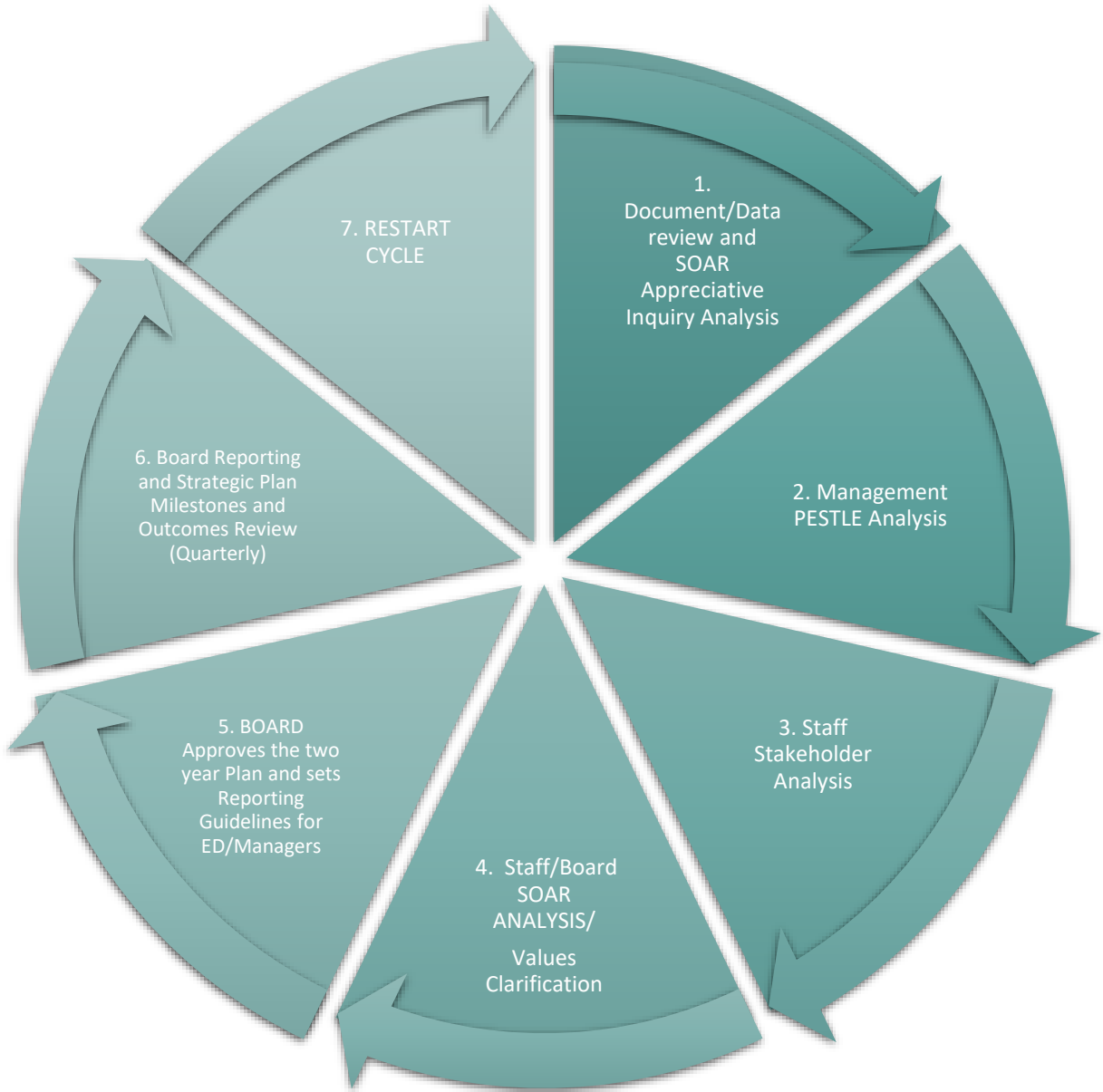
YSAC Centres require transformative quality improvement models that recognize that insight and optimistic growth ideas are needed. Inspired by YSAC leadership experiences with Appreciative Inquiry as both a research and planning methodology, this strategic plan grounds the strength based appreciative inquiry 5D cycle (define, discover, dream, design, deliver/destiny) as a mechanism for shared planning.

The cycle guides quality improvement planning strategically through a process that redefines holistic service provision and helps to discover new understandings of wellness and quality improvement across the past, present, and future of the organization.

In this spirit, this strategic plan is an organizational wide effort to develop the most comprehensive and attainable plan possible. Over the years Charles J Andrew collected important data to provide detailed and regular insight to inform this new two-year strategic plan including:

- ✓ Organizational review and update of Mission, Vision (Board & Staff)
- ✓ Organizational implementation of Core Values (Board & Staff)
- ✓ Stakeholder Analysis (Board & Staff)
- ✓ SOAR Analysis (Board & Staff)
- ✓ PESTLE Analysis (Board & Staff)
- ✓ YSAC Staff Satisfaction Surveys (20, 21, 22,23)
- ✓ Workforce Core Competency Assessment Surveys (22)
- ✓ Client Satisfaction Surveys (19-20; 21-22; 22-23)
- ✓ Board Self Evaluations (21,22)
- ✓ AMIS Client Services Data

Appreciative Inquiry events that provided analysis of Strengths and Opportunities were started at a staff level on October 28, 2022, and then again on April 24, 2023. The next step was to involve the Board on January 26, February 28, March 28 and April 12, 2023. Each group went through a process of strategic planning using a SOAR and PESTLE framework and an Appreciative Inquiry methodology. The two-year strategic planning model is visualized below.



Alignment with Honouring Our Strengths

Honouring Our Strengths: A Renewed Framework to Address Substance Use Issues Among First Nations People in Canada document was released at the AFN National Health Forum in 2011 by the AFN, Thunderbird Partnership Foundation, and Health Canada. Charles J Andrew is committed to aligning strategic objectives to this plan in recognizing that culture is foundation to individual, family and community wellness. The framework's vision is one that supports a strengths-based, systems approach to dealing with substance use issues.

The focus embraced by this vision is on ensuring everyone has access to a range of useful, culturally relevant care options at any point in their healing journey.

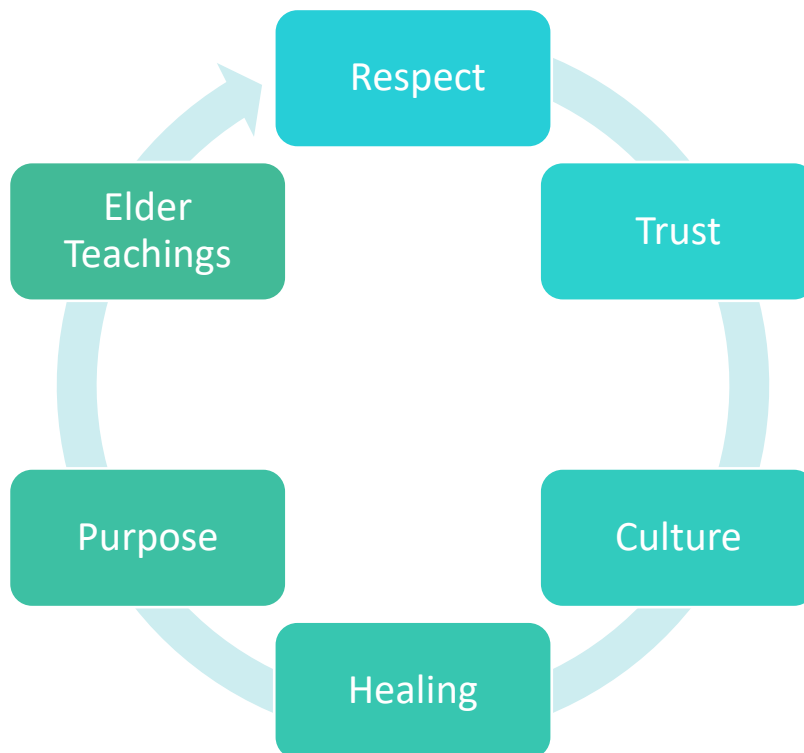


Figure 1: Honouring Our Strengths Framework

Organizational Mission, Vision, Values

Charles J Andrew Board of Directors and Staff have invested time in refining and building consensus about its Mission, Vision and Values. These statements and values serve as anchors for all planning, goal setting, policy development and decision-making.

MISSION	<ul style="list-style-type: none">• To strengthen Indigenous families by offering holistic healing through culture, language, land, and values
VISION	<ul style="list-style-type: none">• To nurture happy, healthy, and empowered communities
VALUES	<ul style="list-style-type: none">• CJAY has chosen to depict their values in a circular rather than linear fashion (see below), as each value is influenced and supported by other values



Value Statements

RESPECT

- We respect diversity: people, land, language, and culture

TRUST

- CJAY builds trust through connection and interaction with each other in a safe environment

CULTURE

- At CJAY we share diversity of Indigenous cultures and maintain knowledge. we encourage pride in different cultures

HEALING

- We practice holistic healing on the land and in program

PURPOSE

- CJAY nurtures clients through a sense of purpose

ELDER TEACHINGS

- CJAY values the language, respect, knowledge, and wisdom of Elder's teachings

Background Analysis

PESTLE Analysis

Political Issues	<ul style="list-style-type: none">○ ISC now extending Contribution Agreements up to 10 years○ Lack of access to ISC funding for expansion to bigger facility with family pods○ A change in Federal Government could affect long term funding○ Changes in leadership could affect the Board and CJAY's priorities○ CJAY has lack of knowledge of community plans
Economic Issues	<ul style="list-style-type: none">○ Rising cost of living due to inflation (for goods/services)○ Salaries must keep in sync with rising cost of living○ Decrease in applicant pool post Covid causing staffing challenges
Socio-Cultural Issues	<ul style="list-style-type: none">○ Increase in addictions due to government funding during Covid○ Lack of adequate housing for families○ Low life expectancies in Indigenous communities due to lifestyles and addictions○ Food insecurity due to inflation○ Systemic racism, stigma and stereotypes still exist○ Communities have different needs and cultures○ Types of substance used and use is more varied○ Education systems are westernized (colonized)○ Longer medical wait times○ Generational differences pose different work/life challenges
Technological Issues	<ul style="list-style-type: none">○ Lack of a back-up generator if power fails○ Require AMIS training as documentation is moving to electronic format○ Keeping abreast of new computer software required within CJAY
Legal Issues	<ul style="list-style-type: none">○ OH&S Committee must stay current in knowledge and proactive in solutions○ Access to external professionals is hampered due to isolated location○ Must keep abreast of new HR Laws○ Require bilingual staff for translation○ Teach staff how to share information while keeping confidentiality
Environmental Issues	<ul style="list-style-type: none">○ Weather is more unpredictable due to climate change (i.e. ice melt) deters mobility and hunting○ Caribou ban puts a limit on hunting○ Muskrat Falls project affects land and animal migration○ Other buildings being constructed in close proximity to the Centre creates lack of privacy at the Centre as trees were cut down○ No back-up generator in loss of power○ Everyone must keep current on emergency/evacuation plans
Collaborative Issues	<ul style="list-style-type: none">○ Lack of space/land for expansion limits number of families who can come to treatment○ Keeping abreast of best practices in addictions and mental health○ Competition in securing funding for additional projects

SOAR Analysis

In this section is the events (meetings and soar sessions by date and stakeholder) as well as 2-year SOAR document analysis by type.

CJAY Board of Directors

STRENGTHS	OPPORTUNITIES
<ul style="list-style-type: none"> Expanded from Youth to Family Treatment model 1 week in Facility - 1 week at Nutshimit Nutshimit known as a best practice Waitlist of families to get into Treatment ED is knowledgeable and staff are resourceful Flexible Contribution Agreement Board has long time members AGM is hosted widely Good interagency partnerships Diversity of Elders and their teachings 	<ul style="list-style-type: none"> Everyone gets to share ideas in the strategic planning process Strengthen community-based aftercare programming and supports Development of an Outreach position Provide communities with substance use education and awareness Future combined board and staff retreat Increase partnerships for professional services, i.e. physiotherapist, psychiatrist, speech, behaviour management specialist
ASPIRATIONS	RESULTS
<ul style="list-style-type: none"> Have a designated Outreach Worker CJAY to assist community Crisis Teams That relapse times lengthen and families are healthier for longer periods Family reunification after treatment 	<ul style="list-style-type: none"> Growing waitlist for family treatment Occupancy rates increase Graduation rates increase Peer mentorship between families Abstinence rates increase after treatment

CJAY Staff

STRENGTHS	OPPORTUNITIES
<ul style="list-style-type: none"> Nutshimit program Family treatment + youth treatment Good staff, leadership and board Staff bring personal skills to work 	<ul style="list-style-type: none"> More opportunity for board/staff interaction; board involvement Facility expansion (treatment & Nutshimit) Purchase of 2 new 8 passenger SUV's Purchase cabins closer to the Centre
ASPIRATIONS	RESULTS
<ul style="list-style-type: none"> Larger facility with family pods More staff to expand programming Ability to provide TX to more families 	<ul style="list-style-type: none"> Graduating youth and families stay abstinent Longer times to relapse Reunification of families

Client Satisfaction Surveys

STRENGTHS	OPPORTUNITIES
<ul style="list-style-type: none"> • Caring, helpful, supportive staff 	<ul style="list-style-type: none"> • Counselling for older children • Expand Innu cultural teachings at Nutshimit • Separate men/women sharing circles • More programming
ASPIRATIONS	RESULTS
<ul style="list-style-type: none"> • Larger facility to house more private family pods 	<ul style="list-style-type: none"> • Significant increase in levels of satisfaction in 10/11 areas of programming • High levels of satisfaction in 8 areas re: Staff

Staff Satisfaction Surveys 2022/23

STRENGTHS	OPPORTUNITIES
<ul style="list-style-type: none"> • Support for Professional Development • Uses evidence-based processes • Motivating, inspiring workplace culture • Weekly huddles enhance communication 	<ul style="list-style-type: none"> • Longer programming • Increase staffing • Improve staff morale • More training in counselling • More casual staff • Improve employee wellness initiatives • Improving human resource systems and processes • Core competency results suggest need for training in specific counselling focused areas • Offering entry into higher education/credentials in addition to short course trainings
ASPIRATIONS	RESULTS
<ul style="list-style-type: none"> • A larger facility with family pods • Rebuild at Lobstick • Newer passenger vans • Outreach Worker 	<ul style="list-style-type: none"> • Seeing the families graduate • Families reunified with their children • Increased qualified workforce

Stakeholder Analysis and Accountability Measures

Board of Directors

- Approve Policies
- Help Set Strategic Direction
- Program Outcomes
- Support staff as a whole
- Transparency

Funders

- Indigenous Services Canada - Annual Reporting of program and financials
- Jordan's Principle
- International Grenfell Association

Elders

- Guidance Teaching
- Knowledge
- Respect
- Connection to Culture

Communities

- AGM
- Open House
- Annual Reporting of Program Outcomes
- Referral Workers

Clients & their Families

- Offer relevant holistic cultural programming
- Trust in CJAY

Staff

- Set Policies
- Support Staff
- Meet Quality Standards of Care

Canadian Accreditation Council

- Meet Standards of Quality Care

YSAC

- Reporting
- Benchmarking
- Best Practices

Partnerships

- Innu Round Table
- Mary May Healing Centre
- Child Senior & Social Development
- Public Health
- RCMP
- Diabetes Initiative

Chief and Council

- Appointment of Board members
- Community Outcomes

Strategic Directions

Strategic Plan at A Glance

<p style="text-align: center;">1</p> <p style="text-align: center;">Strategic Goal One: Expansion of Outreach and Aftercare Services</p>	<p style="text-align: center;">2</p> <p style="text-align: center;">Strategic Goal Two: Improve Building and Grounds</p>
<ul style="list-style-type: none"> <input type="checkbox"/> Enhance Outreach Services <input type="checkbox"/> Increase Community Awareness and Education <input type="checkbox"/> Develop a Comprehensive Aftercare Framework 	<ul style="list-style-type: none"> <input type="checkbox"/> Secure funding for Capital Projects and Needs <input type="checkbox"/> Develop a Capital proposal for facility restructuring. <input type="checkbox"/> Develop a process for new structure at Lobstick
<p style="text-align: center;">3</p> <p style="text-align: center;">Strategic Goal Three: Review and Expand Program Curriculum</p>	<p style="text-align: center;">4</p> <p style="text-align: center;">Strategic Goal Four: Build a Quality Workforce</p>
<ul style="list-style-type: none"> <input type="checkbox"/> Expand and Enhance Program Curriculum <input type="checkbox"/> Increase Cultural Teaching <input type="checkbox"/> Foster Diversity and Inclusion 	<ul style="list-style-type: none"> <input type="checkbox"/> Enhance Competency Based Recruitment Strategies <input type="checkbox"/> Develop Competency based Learning plans for all staff <input type="checkbox"/> Participate in Wage Parity Initiatives
<p style="text-align: center;">5</p> <p style="text-align: center;">Strategic Direction Five: Broaden and Better the Continuum of Care</p>	<p style="text-align: center;">6</p> <p style="text-align: center;">Strategic Direction Six: Strength Based Branding of the Centre</p>
<ul style="list-style-type: none"> <input type="checkbox"/> Increased availability of additional levels of care <input type="checkbox"/> Develop <input type="checkbox"/> Evaluate 	<ul style="list-style-type: none"> <input type="checkbox"/> Consultation Initiatives with Key Stakeholders <input type="checkbox"/> Engage legal and corporate services <input type="checkbox"/> Complete rebranding on promotional materials and office supplies

Strategic Goal One: Expansion of Outreach and Aftercare Services

EXPANSION OF OUTREACH AND AFTERCARE SERVICES

In the next two years Charles J Andrew will expand Outreach Services that will enhance referrals; provide marketing of the Centre; develop community-based substance use educational sessions; and create an aftercare framework that can provide support for prior graduates of CJAY's treatment program



Enhance Outreach Services



Community Awareness & Education



Aftercare Framework & Supports

Key Actions

- | | | |
|--|---|---|
| <ul style="list-style-type: none"> ➤ Develop and create an Outreach Framework ➤ Host Open Houses ➤ Continue to strengthen interagency relationships and partnerships ➤ Human Resource considerations to a newly developed job description, salary placement, performance evaluation & interview questions, recruitment ➤ Seek and secure ongoing funding ➤ Initiate a community needs assessment | <ul style="list-style-type: none"> ➤ Development of a suite of educational sessions on types of substance used; usage and effects, that can be shared with the communities based on need (i.e. solvents, marijuana, cocaine, methamphetamine, prescription drugs, illicit drugs, etc.) ➤ If one community has multiple graduates, work with community resources to establish a peer support network | <ul style="list-style-type: none"> ➤ Undertake or facilitate completion of post assessments in follow-up with graduates from CJAY that may/may not include community resources (i.e. NNADAP Worker, Wellness Worker, etc.) |
|--|---|---|

Strategic Goal Two: Improve Building and Grounds

IMPROVE BUILDING AND GROUNDS

In the next two years we will seek funding to restructure the main building to better accommodate a family program. We will also seek funding for a new structure at Lobstick for the land based program



Secure funding for Capital Projects/Needs



Develop Capital Proposal for Facility Restructuring



Develop Process for a new structure at Lobstick

Key Actions

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> ➤ Meet with ISC representatives concerning CJAY's needs ➤ Find solution to the ongoing plumbing issues at the Centre ➤ Source funding for a back up generator at the Centre ➤ Continue with the next steps of the solar panel project at Nutshimit, securing funding and contractor | <ul style="list-style-type: none"> ➤ Secure funding for capital proposal from ISC for expansion and/or renovations to accommodate family pods at the Centre | <ul style="list-style-type: none"> ➤ Seek alternate options for the Land based programming in the summer months ➤ Seek partnership to cost share building new structure at Lobstick ➤ Development of a project proposal and feasibility study to the funding agency |
|--|--|--|

Strategic Goal Three: Review and Expansion of Program Curriculum

REVIEW AND EXPANSION OF PROGRAM CURRICULUM

In the next two years CJAY will work towards expanding and enhancing its programming to include: all family members; gender-based programming; Indigenous cultural programming



Expand & Enhance Program Curriculum



Indigenous Cultural Teachings



Fostering Diversity

Key Actions

- | | | |
|--|--|---|
| <ul style="list-style-type: none"> ➤ Review current curriculum to determine gaps and to keep current of trends in addictions/mental health and quality care ➤ Develop treatment sessions that are appropriate for various ages, youth, teens and adults ➤ Measurements in place to monitor the effectiveness of the newly developed program | <ul style="list-style-type: none"> ➤ Increased Client satisfaction for culturally specific (Innu/Inuit) teachings ➤ Development of language camps to learn and revitalize native languages to Innu/Inuit clients and community members ➤ Increase traditional ceremonies in land-based programming ➤ Develop holistic care plans | <ul style="list-style-type: none"> ➤ Provide education sessions to both staff and families of LGBTQ2+ people ➤ Promotion and support for the diversity of staff, clients and community members ➤ Program teachings could also be added to the suite of education sessions provided by Outreach for community awareness and education |
|--|--|---|

Strategic Goal Four: Building a Quality Workforce

BUILDING A QUALITY WORKFORCE

In the next two years we will enhance recruitment strategies and professional development initiatives to build a strong and optimum workforce that can provide quality services to the families we provide services to.



Enhance Competency Based Recruitment Strategies and Initiatives



Develop Competency Based Learning Plans for all Staff



Participate in Wage Parity Initiatives

Key Actions

- Broaden job advertisement sources
- Host Community Job Fairs
- Offer job shadowing opportunities for staff from other YSAC Centres
- Build partnerships with post-secondary organizations to host work placements

- To engage an HR consultant or organization to assist in position task analysis
- Revise job descriptions as required post-task analysis
- Undertake task analysis for position descriptions
- Monitor learning plans on a regular basis for progress

- In partnership with TPF's strategic goal of securing wage parity for NNADAP and YSAP centres across Canada – seek wage parity for CJAY
- Seeking wage parity with similar organizations in Labrador and the region

Strategic Goal Five: Improve and Enhance the Continuum of Care

BROADEN AND BETTER THE CONTINUUM OF CARE

In the next two years we will pilot an increase in program length from 8 weeks to 12 weeks



Increase availability of others of levels of care



Develop extended programming



Evaluation of Impact on Extended Program Length

Key Actions

- | | | |
|---|--|---|
| <ul style="list-style-type: none"> ➤ Seek Board approval ➤ Seek ISC approval for pilot year | <ul style="list-style-type: none"> ➤ Expand program from 8 weeks to 12 weeks as a pilot program ➤ Centre to develop another four weeks of programming prior to changing intake length ➤ Overview of enhanced program curriculum to CJAY Staff, Board and YSAC committee | <ul style="list-style-type: none"> ➤ Client Evaluations will provide feedback on the length of the program and content ➤ Regular reporting will monitor the number of graduates completing the program and occupancy rates ➤ Aftercare support will monitor relapse and sobriety length ➤ Monitor family reunification rates ➤ Staff Evaluations will provide acceptance and support of the new program length |
|---|--|---|

Strategic Goal Six: Strength Based Branding of The Centre

STRENGTH BASED BRANDING OF THE CENTRE

In the next two years we will undertake a Corporate Name Change from the current Charles J Andrew Treatment Centre to embody a more holistic wellness and strength based model



Consultation



Finalization of Corporate Name



Rebranding

Key Actions

- | | | |
|--|--|---|
| <ul style="list-style-type: none"> ➤ Consultation with Board and Staff for name change from Charles J Andrew Treatment to “Wellness or Health” Centre ➤ Notify key stakeholders ie. ISC, various government departments (municipal, provincial and federal) ➤ Reach out to the Andrew family out of respect and consultation of the name change | <ul style="list-style-type: none"> ➤ Update internal documentation ➤ Seek legal consultation to ensure proper procedures are taken | <ul style="list-style-type: none"> ➤ Rebrand the website ➤ New promotional materials ➤ Change the name on all internal/external documentation ➤ New signage |
|--|--|---|

Quality Assurance and Improvement Plan

What is Quality in Residential Treatment?

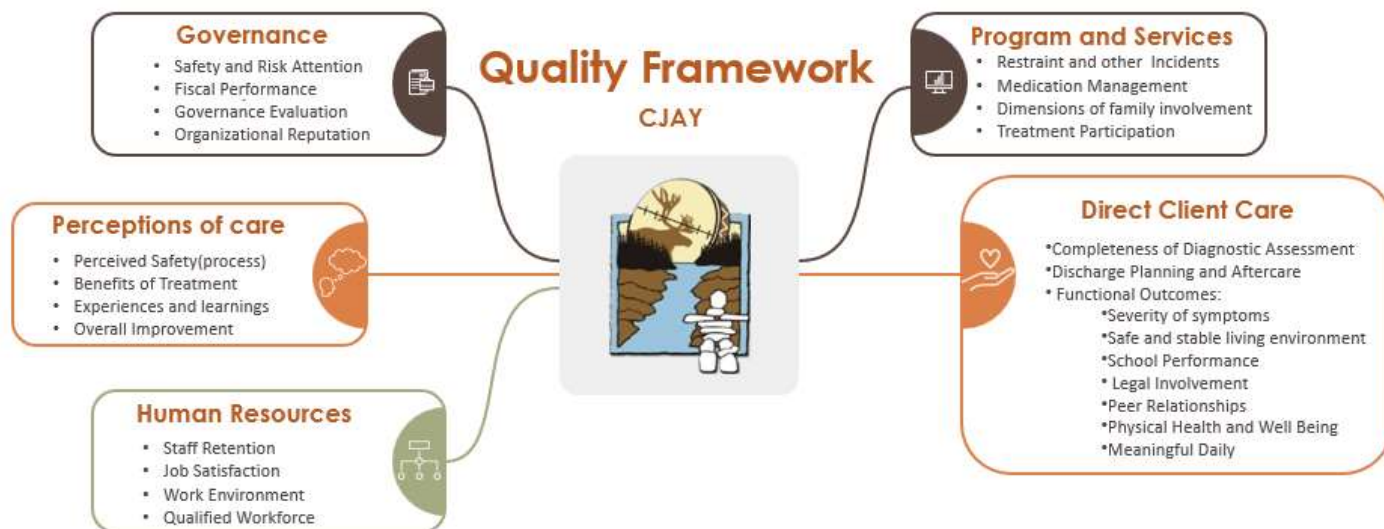
Quality is a term that specifies elements of the best service possible. AT YSAC centres, this means targeted attention to a complex set of processes that are going on simultaneously during a client's healing journey. The YSAC Quality assurance and improvement planning template helps individual YSAC centres to define, review and adopt a variety of quality processes and mechanisms. In an effort to ensure organizational awareness of the quality framework and different measures of recording and monitoring quality, all YSAC employees are required to take a course in Quality and Outcome Collection. The course content includes information about quality definitions, lenses for quality assurance and considerations of individual positions in each centre.

How is Quality Assurance Distributed?

Each Centre reviews the quality framework during its strategic plan process and adapts it to its own local context and service delivery components. The Framework outlines key areas of quality assurance consideration, including:

1. Policies and practices designed to promote the specific quality dimension.
2. Training and Orientation that help set the foundation for employees' understanding of that dimension and its improvement and monitoring.
3. Indicators or monitored and measurable outcomes.

Quality Dimensions



Sources of Quality Dimensions and Indicators

The framework is developed with attention to many evidence-based and published quality frameworks. Each is chosen for its relevance to the work of YSAC centres.

Accreditation Canada

Eight dimensions are used to define quality and guide the focus of the standards: population focus, accessibility, safety, work-life, client-centred services, continuity of services, effectiveness and efficiency.(Mitchell & MacDonald, 2014)

Recovery Research Institute

Personalized Approach to Cultural Competence, Integrated Tx Approach (Continuing Care), Measurement of Tx Outcomes, Tx matching, Qualified, ongoing training and well-supervised staff, and Dignified Respectful Environment. Family Involvement, Retention Efforts, Evidence-Based Practices. Externally Accredited(Recovery Research Institute, 2017)

Canadian Accreditation Council

Satisfaction person served Use of assessment tools, Safety and risk attention, a written quality plan.

Canadian Centre on Substance Abuse

Client-centred, Low cost, Qualified Staff(CCSA, 2017)

IOM Standards of Care (Health Quality Care)

Patient Centeredness, Effectiveness, Efficiency, Equity, Timeliness, Safety(Committee on Quality of Health Care in America, n.d.)

American Association of Children Residential Centres

Process and Practice Indicators

- Areas of risk (e.g., seclusion and restraint, medication management, elopements, incidents, and injuries)
Dimensions of family and client involvement (e.g., family inclusion in the milieu, client participation in treatment, parent contact)
- Continuum of care (e.g., access to services and supports, participation of community partners, continuity of care, timeliness and comprehensiveness of diagnostic assessments, and discharge planning)

Work life Indicators

Including Staff Retention, Job Satisfaction, Work Environment

Fiscal Performance, Safety Programs

Outcomes that are Person Focused

(Severity of symptoms, safe and stable living environment, school performance, legal involvement, peer relationships physical health and well being, meaningful daily activities)

Person focused (satisfaction with)

Benefits of Treatment Experiences and learnings. Overall Improvement

YSAC Total Quality Assurance and Improvement Process Framework and CJAY activities

Leadership and Governance				
Indicator Area	Quality Indicator Source	CJAY Practice/Policy	CJAY Education/Orientation	CJAY Data Mechanism
Safety and Risk Attention	(American Association of Children’s Residential Centers, 2009; Committee on Quality Health Care in America, 2001)	<input type="checkbox"/> CJAY Risk Management Plan <input type="checkbox"/> CJAY Strategic Plan Process <input type="checkbox"/> Occupational Health & Safety Committee <input type="checkbox"/> AED on site <input type="checkbox"/> Risk Management policy and Risk Review Meeting <input type="checkbox"/> Regular Building and Equipment Inspections <input type="checkbox"/> Universal Precautions Practice <input type="checkbox"/> Security Cameras on premises <input type="checkbox"/> Recruitment Screening	<input type="checkbox"/> Risk Management for Boards <input type="checkbox"/> Quality and Outcome Collection Course <input type="checkbox"/> Safe Food Handling <input type="checkbox"/> CPR/First Aid <input type="checkbox"/> Infection Control Training <input type="checkbox"/> # of YSAC trainings related to mental health and addictions and quality of care	<input type="checkbox"/> Incident Reporting in AMIS <input type="checkbox"/> Centre Based incident collation with debriefing after the incident/end of program/annually <input type="checkbox"/> # Certified staff in relevant safety areas <input type="checkbox"/> # Front line workers trained in CPI <input type="checkbox"/> # Front line workers trained in First Aid
Fiscal Performance	(American Association of Children’s Residential Centers, 2009)	<input type="checkbox"/> CJAY template board reporting <input type="checkbox"/> Annual Reporting to Stakeholders <input type="checkbox"/> Financial policies <input type="checkbox"/> Human Resource policies <input type="checkbox"/> Program Policies <input type="checkbox"/> By Laws	<input type="checkbox"/> Regular communication with Funding Agency (Variance reporting)	<input type="checkbox"/> Centre Annual Audit <input type="checkbox"/> Annual reporting deliverables
Governance Evaluation	None	<input type="checkbox"/> Standard Board reporting template <input type="checkbox"/> Quarterly Board of Director Meetings <input type="checkbox"/> Annual AGM <input type="checkbox"/> Representation from MIFN, SIFN, NG, APC	<input type="checkbox"/> Governance Training every 2 years <input type="checkbox"/> Orientation for new Board Members	<input type="checkbox"/> YSAC Board Governance Evaluation Annually
Organizational Reputation	None	<input type="checkbox"/> Open House <input type="checkbox"/> Social Media Presence <input type="checkbox"/> Stakeholder Needs Assessment	<input type="checkbox"/> Ethics Training	<input type="checkbox"/> Attendance records <input type="checkbox"/> Engagement records
Programs and Services (Design and Admin)				

Indicator Area	Quality Indicator Source	CJAY Practice/Policy	CJAY Education/Orientation	CJAY Data Mechanism
Restraint	(AACRC, 2009)	<input type="checkbox"/> Policy with incident report and debrief	<input type="checkbox"/> Mandatory CPI training <input type="checkbox"/> De-escalation training	<input type="checkbox"/> Incident report trends over time
Medication Management	(AACRC, 2009)	<input type="checkbox"/> Policy with incident report and debrief <input type="checkbox"/> Medication audit (personnel and process) <input type="checkbox"/> Medication storage	<input type="checkbox"/> YSAC Med Management certified training	<input type="checkbox"/> Incident report trends over time <input type="checkbox"/> Audit records
Incidents	(AACRC, 2009)	<input type="checkbox"/> Incident policies <input type="checkbox"/> Incident report template in AMIS	<input type="checkbox"/> Biweekly incident review and debrief <input type="checkbox"/> Debrief for critical incidents <input type="checkbox"/> Incident training modules attached to other trainings	<input type="checkbox"/> Incident report trends over time (quarterly)
Dimensions of family Involvement	(AACRC, 2009)	<input type="checkbox"/> Policies on family contact <input type="checkbox"/> Visits/phone calls <input type="checkbox"/> Safe family space <input type="checkbox"/> Families involved in graduation <input type="checkbox"/> Family circle and elder involvement	<input type="checkbox"/> NWA (Native Wellness Assessment) and belonging indicator	<input type="checkbox"/> CJAY Client satisfaction survey <input type="checkbox"/> Reunification rates of families
Treatment Participation	(AACRC, 2009)	<input type="checkbox"/> Clinical and Land Based structure and treatment components	<input type="checkbox"/> AMIS (Pre-post) <input type="checkbox"/> YSAC Treatment Planning Training	<input type="checkbox"/> AMIS- Measures across Continuum <input type="checkbox"/> In program session attendance and daily progress notes <input type="checkbox"/> AMIS Graduation/reasons for leaving rates in % <input type="checkbox"/> Levels of care (AMIS)
Human Resources (Work life)				
Indicator Area	Quality Indicator Source	CJAY Practice	CJAY Education/Orientation	CJAY Data Mechanism
Staff Retention	(American Association of Children's Residential Centers, 2009)	<input type="checkbox"/> CJAY turnover indicators <input type="checkbox"/> Incentive programs (celebratory, benefits and financial) <input type="checkbox"/> Clear HR polices <input type="checkbox"/> Clear Job Descriptions <input type="checkbox"/> EAP program	<input type="checkbox"/> YSAC HR Management Module <input type="checkbox"/> YSAC Diversity Course	<input type="checkbox"/> Staff Satisfaction Q# <input type="checkbox"/> Core Competency Q#

Job Satisfaction		<input type="checkbox"/> Routine supervision (formative and summative)	<input type="checkbox"/> Orientation checklists and processes	<input type="checkbox"/> CJAY & YSAC Staff Satisfaction National Collection Annual in December
Work Environment	(American Association of Children’s Residential Centers, 2009; Mitchell & MacDonald, 2014)	<input type="checkbox"/> Ethics policies <input type="checkbox"/> Promotion of healthy work environment – Wellness Committee <input type="checkbox"/> Open communication practice <input type="checkbox"/> Performance Assessments <input type="checkbox"/> Clinical Supervision	YSAC Module Motivating Employees YSAC workplace CARE <input type="checkbox"/> Clear grievance process and policy	<input type="checkbox"/> CJAY Staff Satisfaction <input type="checkbox"/> Work Engagement Profile <input type="checkbox"/> Six Seconds Org Vital Signs <input type="checkbox"/> Complaint and grievance records
Qualified Workforce	(American Association of Children’s Residential Centers, 2009; CCSA, 2017)	<input type="checkbox"/> Competency based hiring strategy with qualification scoring <input type="checkbox"/> Orientation process <input type="checkbox"/> Mandatory and annual training <input type="checkbox"/> Learning plans and development records	<input type="checkbox"/> Suite of Courses available to meet key risk areas and key counseling function areas	<input type="checkbox"/> CJAY Staff Sat Q # <input type="checkbox"/> AMIS Annual Report certification Rates <input type="checkbox"/> YSAC Core Competency National Survey

Client Care

Indicator Area	Quality Indicator Source	CJAY Practice	CJAY Education/Orientation	CJAY Data Mechanism
Completeness of Diagnostic Assessment	(American Association of Children’s Residential Centers, 2009; Mitchell & MacDonald, 2014)	<input type="checkbox"/> Client readiness and motivational interviews <input type="checkbox"/> External admission assessments <input type="checkbox"/> Medical clearance <input type="checkbox"/> Education assessments	<input type="checkbox"/> YSAC Tx Planning and DUSI/NWA assessments <input type="checkbox"/> YSAC Outcome Collection Course	<input type="checkbox"/> DUSI/NWA
Discharge Planning and Aftercare		<input type="checkbox"/> Formalized discharge summary and aftercare plan <input type="checkbox"/> AMIS aftercare level of care	<input type="checkbox"/> YSAC Tx Planning	<input type="checkbox"/> AMIS Data #aftercare admissions <input type="checkbox"/> Outreach report numbers <input type="checkbox"/> Client call back logs
Severity of symptoms (Functional Outcome)	(American Association of Children’s Residential Centers, 2009; Mitchell & MacDonald, 2014)	<input type="checkbox"/> Pre-post assessment policies <input type="checkbox"/> Medical and other partnerships for symptom management or specialized care	<input type="checkbox"/> YSAC Treatment Planning Course <input type="checkbox"/> YSAC Outcome Collection Course	<input type="checkbox"/> DUSI- Overall problem density score
Safe and	(American	<input type="checkbox"/> Outreach follow up	<input type="checkbox"/> YSAC Treatment	<input type="checkbox"/> NWA Scores

stable living environment (Functional Outcome)	Association of Children's Residential Centers, 2009; Mitchell & MacDonald, 2014)	<input type="checkbox"/> Transition supports <input type="checkbox"/> Referral Advocacy	Planning Course <input type="checkbox"/> YSAC Outcome Collection Course <input type="checkbox"/> Trauma Informed Care	POST(Belonging) <input type="checkbox"/> DUSI POST- Scale #
School Performance (Functional Outcome)	(American Association of Children's Residential Centers, 2009; Mitchell & MacDonald, 2014)	<input type="checkbox"/> Modified education programs in centre <input type="checkbox"/> Support for mainstream reconnection/enrollment <input type="checkbox"/> Connect with teachers in home communities for student placements in the NL curriculum		<input type="checkbox"/> NWA Scores (Belonging) <input type="checkbox"/> Education report cards pre and post treatment
Legal Involvement (Functional Outcome)	American Association of Children's Residential Centers, 2009)	<input type="checkbox"/> Intake package <input type="checkbox"/> Probation Partnerships		<input type="checkbox"/> DUSI- Scale #
Peer Relationships (Functional Outcome)	American Association of Children's Residential Centers, 2009)	<input type="checkbox"/> Positive peer programming <input type="checkbox"/> Peer mentorship/leadership practices		<input type="checkbox"/> DUSI- Scale # <input type="checkbox"/> YSAC aftercare survey
Physical Health and Well Being (Functional Outcome)	American Association of Children's Residential Centers, 2009)	<input type="checkbox"/> Scheduling incorporates physical activities <input type="checkbox"/> Environmentally good rec space <input type="checkbox"/> Holistic Case Plans <input type="checkbox"/> Cultural Ceremonies <input type="checkbox"/> Harm reduction initiatives	<input type="checkbox"/> YSAC Mental Health Course	<input type="checkbox"/> NWA global score (measure of holistic health) <input type="checkbox"/> DUSI
Meaningful Daily Activities (Functional Outcome)	American Association of Children's Residential Centers, 2009)	<input type="checkbox"/> Holistic Care Plans <input type="checkbox"/> Cultural Ceremonies, Sweat ceremonies, cultural programming	<input type="checkbox"/> Clients have inclusion in their Cultural Supports	<input type="checkbox"/> NWA (Purpose/Meaning) <input type="checkbox"/> DUSI
Perceptions of Care				
Indicator Area	Quality Indicator Source	CJAY Practice	CJAY Education/Orientation	CJAY Data Mechanism

Benefits of Treatment	American Association of Children's Residential Centers, 2009)	<input type="checkbox"/> Admission package and website promotion of intended benefits <input type="checkbox"/> Community Outreach		<input type="checkbox"/> CJAY Client Satisfaction <input type="checkbox"/> CJAY Referral Survey
Experiences and learnings	American Association of Children's Residential Centers, 2009	<input type="checkbox"/> Graduation Celebration and Certificate <input type="checkbox"/> Ongoing Treatment Plan and Case Plan Reviews		<input type="checkbox"/> CJAY Client Satisfaction <input type="checkbox"/> Treatment/Discharge Summary
Overall Improvement	American Association of Children's Residential Centers, 2009)	<input type="checkbox"/> All above data collection mechanisms		<input type="checkbox"/> CJAY Client Satisfaction <input type="checkbox"/> CJAY Referral Survey <input type="checkbox"/> Board Survey <input type="checkbox"/> NWA <input type="checkbox"/> DUSI-R <input type="checkbox"/> Follow Up/Aftercare Discussions

Risk Management Plan 2023-25

The CAC Standard on Risk Management

1.2.3 RISK MANAGEMENT PLAN

The organization will create an annually reviewed risk management plan, minimally including:

1. The development of written policies and procedures to outline:
 - a. How risks are identified
 - b. How risks are reported
 - c. How risks are managed
 - d. How risks are acted on
 - e. Protocols define response time
 - f. Protocols define type of response provided
2. The identification of potential and actual risks, which are recorded on a risk register*
3. The following elements:
 - a. Risks identified on the risk register that are likely to happen or would have severe impact
 - b. Proactive and reactive measures used to mitigate the identified risks
 - c. Persons or positions responsible for managing identified risks
 - d. Communication methods
 - e. Monitoring and evaluation of the effectiveness of the risk management plan
 - f. Informing all personnel of their role in managing risks

The organization will ensure that the Risk Management Plan is reviewed, updated and authorized minimally annually. Authorization may be demonstrated by the signature of a person with authority to approve policies and plans or the recorded decision of a governing body

By Using this process, CJAY can answer;

- How risk are identified (both within your centre and through a YSAC quarterly community of practice collective process)
- Proactive measures to reduce risk
- Monitoring and evaluation of the effectiveness of the risk management plan
- Quality Indicators used include; Governance, Work Life, Client Safety, Reputation, Evidence Based & Holistic Continuum

Quality Area	Risk Area	Risk Factor	Threat (high, medium, low)	Severity (negligible, marginal, severe)	Risk Prevention Strategies	Harm Minimization
Governance	Program	Meeting of program objectives and review of Director	M	Marginal to Severe	<ul style="list-style-type: none"> <input type="checkbox"/> The Board has implemented a policy (by-law) and mandate for BOD <input type="checkbox"/> Quarterly meetings are held <input type="checkbox"/> Annual Board evaluations <input type="checkbox"/> AGM <input type="checkbox"/> Board Orientation package <input type="checkbox"/> Regular governance review and training <input type="checkbox"/> Board abides by Code of ethics and meet board appointment criteria 	Board Liability – Errors & Omissions Insurance Annual Board survey
Financial Controls	Funding	Continuation of funding	L	Marginal	<ul style="list-style-type: none"> <input type="checkbox"/> Completion of an annual external audit <input type="checkbox"/> Meet reporting requirements <input type="checkbox"/> Annual and regional reports to funding agency & Board 	No Harm
Work life, Client Safety	Treatment	Client aggression	H	Marginal to Severe	<ul style="list-style-type: none"> <input type="checkbox"/> All staff trained in nonviolent crisis intervention <input type="checkbox"/> Counselling and relational prevention <input type="checkbox"/> Staff ratios promote connection and relational care <input type="checkbox"/> Staff trained in de-escalation 	Clinical debrief of all incidents Policy review and enforcement

Client Safety	Treatment	Infection Control	H	Marginal to Severe	<input type="checkbox"/> Infection control manual with annual review <input type="checkbox"/> Trauma informed staff training (Stigma/privacy/prevention/protection) <input type="checkbox"/> Partnership with local public health <input type="checkbox"/> Staff & clients vaccinated <input type="checkbox"/> TB testing prior to treatment <input type="checkbox"/> Medical of clients prior to admission <input type="checkbox"/> Universal precautions	Quarantine if required Staff trained Notification to public health of outbreaks Medical attention if indicated Privacy informed disclosure
Client Safety	Treatment	Client trauma at intake	H	Severe	<input type="checkbox"/> All staff trained in trauma informed practice through YSAC MH course or YSAC Tx Planning Course or other <input type="checkbox"/> Staff recognize behavioral triggers	Staff debrief Staff communication protocols
Client Safety	Kitchen	Food Borne Illness	L	Marginal to Severe	<input type="checkbox"/> All kitchen staff trained in safe food handling <input type="checkbox"/> Scheduled cleaning and sanitization <input type="checkbox"/> Proper food storage <input type="checkbox"/> Proper food temp	Medical attention Audit of practices Food destruction
Work life Client Safety	Kitchen	Staff slip and fall	M	Marginal to Severe	<input type="checkbox"/> Wet floor signage is available and utilized <input type="checkbox"/> Salting/sanding walkways when weather indicated	Incident debriefs OH&S walk through and meetings Policy reviews
Holistic Continuum	Outreach	Evidence Informed presentations	L	Marginal	<input type="checkbox"/> Ensure peer/staff review of materials <input type="checkbox"/> Create research time in annual workplan	Program revisions
Evidence Based	Outreach	Lack of program outcomes data	M	Marginal	<input type="checkbox"/> Ensure use of pre-post DUSI/NWA <input type="checkbox"/> Institute program follow up protocols <input type="checkbox"/> Ensure HR time to complete	No harm
Client Safety	Program	Unethical behaviors	L	Severe	<input type="checkbox"/> Staff orientation boundaries training <input type="checkbox"/> Staff pre-screening of criminal record	Personnel Policies and clinical supervision practices

					and vulnerable sector check	Signing and abiding by the code of ethics
Safety	Building	Water Damage	L	Marginal	<input type="checkbox"/> Posters and schematics for the water system partitions and shut off valve locations <input type="checkbox"/> Add water shut off training to facility staff orientation	Orientation Revisions Annual review of water damage clauses on facility insurance
Safety	Building	Evacuation planning	L	Marginal	<input type="checkbox"/> Post evacuation plan and staff are aware of the protocol	Safety of clients and staff
Safety	Grounds	Wildlife preparedness	L	Marginal-Severe	<input type="checkbox"/> Client and staff teaching <input type="checkbox"/> Maintenance Prevention <input type="checkbox"/> Wildlife number posted around Centre	Medical Attention if required
Work life Reputation	Human Resources	Disgruntled Employee reputation damage	L	Marginal-Severe	<input type="checkbox"/> Strong interview and screening policies <input type="checkbox"/> Annual staff satisfaction report and debriefings <input type="checkbox"/> Evaluation during probation <input type="checkbox"/> Clear and communicated grievance policy <input type="checkbox"/> Board and leadership regular review of grievance policy <input type="checkbox"/> Regional Partnership Protocol for complaint handling?	Community Partnership & debriefings
Safety	Natural Disaster	Forest Fire Flood Road Closures	L	Marginal-Severe	<input type="checkbox"/> Evacuation Plan <input type="checkbox"/> Community Evacuation Plan	Ensure staff know the proper protocols and procedures in the event of a natural disaster