



Nisichawayasihk Cree Nation
FAMILY AND COMMUNITY
Wellness Centre Inc.



IDENTIFIED GAPS IN SERVICES

Child and Family Services

September 2017



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Executive Summary

The Nisichawayasihk Cree Nation Family and Community Wellness Centre was established in 2001, following an extensive community consultation process. The consultation examined promising community based practices and innovative approaches to achieve holistic family and community wellness. Using this process as the framework for planning, the Centre adopted a strength-based, integrated service delivery approach and a population health promotion model to develop program and services reflective of both Indigenous Western approaches to wellness.

Consequently, the Family and Community Wellness Centre uses a single administrative model to deliver the following wrap around services to the Nisichawayasihk Cree Nation:

- Child and Family Services
- Home and Community Care
- Head Start and Daycare
- Public Health, Maternal Child Health, STAR FASD program and Medical Transportation
- Counselling Services and Family Enhancement

These programs are developed and delivered in accordance with the following Vision, Mission and Core Values.

Vision

“Nisichawayasihk Mithwayawin” We believe community wellness will be achieved through partnership, empowerment, innovation, and shared responsibility.

Mission

To promote, nurture, and foster a sense of holistic wellness through the provision of meaningful, community based and culturally appropriate activities in a safe, respectful, and inclusive environment.

Core Values

Social Justice: We will treat our children and families with respect and adhere to the principles of equity.

Self-Reliance: We will promote personal and family responsibility first.

Intrinsic Worth of People: We will think of everyone as having abilities, talents, and skills that are essential to the overall health of their families and the community.

Sustainability: We will provide services in a way that reflects a commitment to accountability and does not threaten our ability to meet basic human needs over the long term.

Cooperation: We will work together as a community and with collateral agencies and partners to achieve family wellness.

Community Wellness Focus: We will commit to a holistic health promotion and family empowerment orientation to program design and implementation.

The Family and Community Wellness Centre: An Integrated Model that Works.

This integrated approach to service delivery has resulted in improved access to community based mental health services with qualified service providers, improved access to multi-disciplinary services for children and families as well as innovation in family prevention and intervention programming (*Please see attached 2015-2016 Annual Report and 2016-2017 Services Plan for more detailed descriptions of the Family and Community Centre model and programs*)

In addition, the work of the Family and Community Wellness Centre has resulted in real change including:

National interest in the Removal of the Parent Program as a workable model in on-reserve communities.

Reduction of the number of children in care is one of the best among First Nations in Canada. Increases in the numbers are the result of the addition of Extension of Care numbers back into the Children in Care numbers

Enhanced training and programming for families designed and delivered in partnership with internal and external partners.

More positive relationship with the community as a result of a shift in practice to a family empowerment approach focused on building and maintaining family unity.

Development of program manuals and procedural guides which reflect the contexts and needs of the community.

Integration of traditional community values, beliefs, practices and language into program development and service delivery.

The use of Elders to guide program development and service delivery resulting in a more positive sense of self and cultural identity for children and families.

Programming Successes and Challenges:

Many of the programs and services at the Family and Community Wellness Centre have evolved out of extensive consultations with community Elders, are respectful of community values and balance both Indigenous and Western approaches to family wellness.

Program development and service delivery, therefore, are founded in the complex cultural world view and value systems of the Cree people. Central to this worldview is the idea of kinship, or how to preserve and heal our relationships with each other, placing the child at the Centre. Consequently, prevention, early intervention, protection and post care services at the Centre are designed to extend healing beyond a simple family plan and into how people live with each other and their families in healthy and positive ways in our community.

Despite our best efforts to ensure that our programs create transformative and long term

change, the Centre continues to experience funding shortfalls which impact the sustainability and expansion of current programs and services as well as the ability to establish new programs and/or services to address areas of crisis or concern.



Current Programming: Successes and Gaps

This report highlights gaps in programming experienced by the NCN Family and Community Wellness (FCWC) Centre. The Centre has focused on using integrated and collaborative approaches to community wellness using Indigenous

knowledge and the Cree language as a framework for program development and service delivery. Western approaches to wellness are also applied and adapted to meet the unique cultural, social and economic contexts of the community.

Removal of the Parent Program

Removal of the Parent Program is a community based approach to reduce the trauma of child apprehension for children. When a child is deemed in need of protection, the parent, rather than the child, is removed from the home. Families are provided with culturally appropriate counselling and/or care programs offered by the Centre as well as external agencies while the child is supported in-home by family or support staff.

Successes:

- This model has garnered national attention as a trauma informed approach to child apprehension, founded in traditional Cree teachings about the importance of children within the family. Several other First Nations communities have explored the feasibility of this approach in their respective communities.
- Families who have been involved in this program report an increased sense of personal responsibility, increased willingness to access supportive services and improved understanding of their role within the family.

Gaps:

- As a result of sub-standard housing on reserve, many homes do not meet provincial licensing requirements for foster homes. For

example, many homes do not have separate sleeping quarters for each family member or may contain mold. Consequently, for children to remain in their homes, the Family and Community Wellness Centre has had to use capital dollars for renovations and upgrades to meet building codes and licensing requirements.

- In order for this program to continue to be a successful model for reducing trauma to children who come into care, it is important that the following considerations are taken into account:
 - That INAC provide a capital building fund to ensure that there are dollars available to ensure that homes used in the Removal of the Parent program as well as part of the Foster Care program are able to meet provincial licensing requirements and standards.
 - That INAC provide funding to support the development of community based foster care standards which reflect the cultural and social contexts of the Nisichawayasihk Cree Nation.

Circle of Care Family Planning Process

Circle of Care Family Planning Process is based on the holistic teachings of the Medicine Wheel and is the mechanism through which coordinated multi-service delivery plans are developed in partnership with families. The Centre's centralized and collaborative administrative model facilitates the coordinated delivery of multiple services to children and families as all programs operate in the same physical space and under the same policies and procedural guidelines. The guiding principles in the Circle of Care process are collaborative planning, shared decision making, shared responsibility and shared accountability.

Successes:

- Families are empowered as they work with the Circle of Care service provider team to identify the programs and services they feel would be most supportive.
- There is increased communication and cooperation between programs within the Centre.
- Targeted planning has improved the coordination of services and reduced duplication.

Gaps:

- For the Circle of Care model to be effective, a staff lead needs to be appointed to coordinate planning meetings, prepare the family plan, follow up with service providers to implement plan goals and monitor progress.
- Funding shortfalls have resulted in client-worker ratios which exceed the 20:1 client-worker case management standard for child protection and family enhancement. Current case levels are 35:1 for child protection and 25:1 for family enhancement. Consequently, frontline CFS staff are overwhelmed and cannot take on the additional

responsibilities for the development and oversight of Circle of Care plans. Given current staffing levels and workloads, the use of this model for short and long term family planning has been disjointed, with limited oversight and follow up.

- For this model to be an effective planning tool for families, the following must be considered:
 - INAC provide additional funding for a 0.5 FTE position to support and oversee the development, implementation and monitoring of Circle of Care plans.

Rediscovery of Families

Rediscovery of Families supports families using the guidance of the Elders and the values, beliefs, language and traditional practices of the Nisichawayasihk Cree peoples. This includes participating in traditional activities such as fishing and berry picking, Cree ceremonies and spiritual practices as well as exploring community histories and historical sites.

Successes:

- Over a hundred families have participated in the Rediscovery of Families program. Anecdotally, families report a stronger sense of identity and connection to Cree cultural and language, improved family functioning while out at camp, and a greater sense of responsibility for their family and members of the community.
- Elders have reported a sense of purpose in guiding and supporting families as well as in transmitting cultural values and knowledge across generations.

Gaps:

- The initial design of the program extended beyond two week family visits to an isolated traditional camp setting. However, due to

funding shortfalls the following components of the camp have not been implemented:

- Follow up meetings with families to strengthen individual family functioning as well as to enhance positive social support networks with other participant families. These meetings were to occur once per week in the first month and later once per month for six months
- Monthly family programming to include: parenting programs, Elders teachings, language classes and family literacy programming.
- Home renovations to ensure that when families returned to their homes following camp they were able to make a fresh start.
- Leadership training to empower families to take a lead in group activities and planning following the completion of the program after six months. Families would be able to access Centre facilities and a small activities stipend for up to one year.

- In addition, funding shortfalls have had impact on our ability to deliver the current program including:
 - Staffing shortages do not allow for the hiring of specific staff to deliver the program on a consistent basis, time permitting. As a result, the camps are only offered to families intermittently as women and men's retreats and one family camp in the summer.
 - As the water is polluted in our community, we need to travel a significant distance to ensure that the fish is safe to eat and plant medicines are safe to harvest. As a result, the

costs to run the program have increased.

In order for the program to be successful, the following investments need to be made in both programming and equipment:

- Salary and benefits on a contractual basis for 2 Elders (Male and Female), 2 support workers and one Cultural/Program Coordinator to oversee programming for families both at the site and in the community once the families return.
- Programming dollars to purchase boats, motors and ski doos to transport families to the camp site, gas and food for families.

Bachelor of Social Work Cohort Program

Bachelor of Social Work Cohort Program in partnership with the University of Manitoba is designed to improve staff retention, service delivery quality and compliance with Child in Care standards through access to post-secondary training.

Successes:

- As a result of additional social-emotional and academic supports provided through the Centre, enrollment in this program has remained consistent.
- There has been an increase in the number of individuals within the community who have appropriate social work training. This has been positive in terms of the recruitment and retention of Centre staff.

Gaps:

- While the Centre has been supportive of staff wanting to pursue their BSW, it has had a tremendous impact on work flow and

service delivery. As staff leave for training, there is a gap in service that remaining staff must fill. As a result, remaining staff have to perform multiple tasks such as attending client meetings for children assigned to other workers or handling existing cases and the intake of new cases at the same time. This has a direct impact on the quality and consistency of home visits as well as on reporting and compliance monitoring.

- To continue to ensure that education programming does not reduce the level of service for clients it is imperative that:
 - Funding be allocated by INAC for 1 FTE position to allow for staff to pursue post-secondary training and ongoing professional learning. The role of this FTE would be provide coverage as needed in the child protection, family enhancement and counselling services program areas.

New Programming: Identified Gaps

esiki sha cik Parent Coaching Program

(A full proposal is available upon request)

Almost 50% of families involved with child and family services in Nisichawayasihk Cree Nation have been involved with the agency more than once. This unhealthy cycle of apprehension and reunification is often the result of the limited number of support services available to families once their children have returned home. This issue is compounded by the fact that parents are often unable to recognize trauma in their children because of their own unresolved trauma. Both parents and children alike, need to learn new and healthier ways to relate to each other and collectively heal from the issues which cause the disruption in the family as a way to prevent future involvement with the agency.

This esiki sha cik program was developed to support families who would benefit from in-home parent coaching following the apprehension and the return of their children. After parents have participated in programming such as parenting classes, addiction counselling and family violence with external service providers, the parent coach would continue to meet with families in their homes to provide ongoing mentorship in the use of attachment based and traditional ways of parenting as well as in the development of family life skills. The goal of the program is to support families in raising their own children and reducing reliance on CFS services through repeated child apprehensions.

Key activities in this program would include:

- Family meetings that include discussions about what I liked this week in our family, what solutions did we use from last week that I really like, and a discussion of one problem that needs a solution.
- Family scheduling and activity planning
- Budgeting and meal planning
- Family life skills including banking and applying for identification
- Resource review including what resources have been accessed and what resources need to be accessed

Despite the need, the program was developed but could not be implemented as a result of funding constraints. The program requires investment in the following:

Salaries and benefits for 4 parent coaches to work in home with families to deliver programming

- Although the expectation is that parent coaches will come with at least some post-secondary training in counselling, social work or a related field, a significant investment in professional development will still be required including attachment theory and parenting, how to have crucial conversations, child development and the impact of trauma on individual and family functioning.
- Programming fund to cover the costs of travel, cell phone, vehicle maintenance and repair, computer, books and programming materials.

Little Sisters Keeper

(A full proposal is available upon request)

This project will address sexual assault, sexual abuse and domestic violence against girls and women within the Nisichawayasihk Cree Nation. It

will take a systemic approach including, awareness and education at the school and community level, individual and group counselling, support through the judicial process and capacity building.

The high rate of violence in First Nations communities has been well documented and is the result of multiple factors including but not limited to intergenerational effects of the residential school system, poverty and limited resources. In 2016, there were 461 Assaults and 22 Sexual Assaults reported to the R.C.M.P. However, it is believed the number of violent incidents is much higher. Fear as the perpetrator and the victim live in the same small community and are sometimes related, lateral violence, discrimination, social media, shaming, and lack of support often contribute not only to underreporting and a general mistrust of the justice system.



Women, girls and families affected by sexual abuse and assault who are living in urban settings have access to a number of free services and assessments, such as the New Directions Families Affected by Sexual Assault program, to deal with the impact of the assault on mental health and personal well-being. However, we do not have access to the same level of service on reserve. Moreover, if a specialized assessment is required, we are required to send our children to the Snowflake program in Winnipeg, often resulting in a placement in a group home in the city.

Consequently, there needs to be a targeted investment in sexual and domestic violence prevention and intervention services to ensure that women living in these situations do not have to compete for already limited resources and are able to remain in our community.

Key activities in this program would include:

- Provide support to women to access the justice system through education, advocacy and counselling support.
- Promote the development of law and policies to support victims
- Develop psycho-education programs and informational materials for schools, counselling groups, programs for women
- Increase knowledge and awareness of the impact of victimization, the needs of victims of crime, available services, and relevant legislation
- Network with existing programs and agencies within the community such as RCMP, the Nursing Station, and the school to coordinate services and identify gaps in service.
- Provide training to workers in the community around trauma symptoms and trauma informed practice.

Despite the need, the program was developed but could not be implemented as a result of funding constraints. The program requires investment in the following:

- Salaries and benefits for 1.0 FTE family therapist position to work with women.
- Salaries and benefits for 2 support workers with training in domestic and sexual violence.
- Although the expectation the support workers will come post-secondary training in counselling, social work or a related field, a significant investment in professional development will still be required including the impact of trauma on individual functioning, safety planning, introduction to the judicial system and mental health.
- Programming fund to cover the costs of travel, cell phone, vehicle maintenance and repair, computer, books and programming materials.

Jordan's Principle

With the infusion of some program funding by Health Canada, implementation of this program has begun. However, there continue to be major concerns with implementation including: the competition for specialized services, the allocation of funding for training to the Provincial government rather than First Nations communities, and limited access to specialized mental health services. The following two programs *Wechitotan Kita Mithwayachik Kichawasismina Nak* and *Stepping Out on Saturday* are designed to help address the gap in service and training that exists.



Wechitotan Kita Mithwayachik Kichawasismina Nak- Working together to help our children achieve optimal health and wellness

(A full proposal is available upon request)

Families living with children who have complex needs require access to not only physical/cognitive assessments (OT/PT) but additional mental health services to ensure the ongoing well-being of children and their caregivers. Using this holistic approach to wellness means that psychological and psychiatric services would be incorporated into intervention and support planning for children with disabilities who may have undiagnosed associated mental health issues. Persons with disabilities are often at high risk of mental health problems due to their disability and/or social issues they experience. Caregivers also can experience mental health issues as result of the stress of caring for a child as well as from caregiver burnout. It is estimated that there are 100 children who would benefit from these services in our community.

Key activities of this program would include:

- Access to a psychiatric nurse, and one family therapist as part of the holistic care planning process. Additional consultation support would be provided by a child psychologist or psychiatrist on a contractual basis.
- Day and evening programs for children and families to reduce isolate and promote positive mental wellness and social support networks.
- Workshop training for families on child development, parenting a child with complex needs, advocacy, and resources.

In order for the program to be successful, there needs to be a target investment in:

- Salary and benefits for 1 FTE psychiatric nurse and 1 FTE family therapist
- Programming fund to cover the costs of travel, cell phone, vehicle maintenance and repair, computer, books and programming materials.

Stepping Out on Saturday (S.O.S.)

The Stepping Out on Saturday program is designed for children in care or involved with child welfare with a FASD diagnosis or confirmed prenatal exposure to alcohol who have been referred for assessment at the Manitoba FASD Centre.

The S.O.S day program provides children with the opportunity to learn about and practice social skills and self-regulation skills in a safe, structured environment. The program is well established and currently runs in four provincial centres (Winnipeg, Brandon, Portage la Prairie and Thompson) as well as two First Nations communities (Bloodvein and Pauingassi). As a result, it is the Centres' hope to bring the existing

model, program, and partnerships to the Nisichawayasihk Cree Nation.

In order to bring the Stepping Out on Saturday program to our community, the following investment is required:

- Salaries and benefits for one program support staff and one Occupational Therapist to work 0.25 time with families as well as deliver the Saturday program.
- Programming fund to cover the costs of travel, cell phone, vehicle maintenance and repair, computer, books and programming materials.

Administration: Recruitment and Retention of Staff

The Centre has engaged in a number of initiatives to support the recruitment and retention of qualified staff including: staff appreciation activities, wage parity, clarity in roles and responsibilities and an investment in a Bachelor of Social Work cohort program for Centre staff and community members.

Inadequate funding levels have had a tremendous impact on our ability to offer competitive salaries and reasonable workloads. This ongoing issue with hiring and retaining enough qualified staff to meet the needs of the community influences the provision of culturally relevant prevention, early intervention, intervention, and post care programming. The issues related to the shortfall are detailed below:

- Administrative expenses continue to exceed 15 percent of the total Centre budget. However, as salaries increase to accommodate for COLA, INAC continues to use a funding model that does not account for volume or salary increases nor does it reflect the salary scales of social workers

and other related positions working within the provincial system. As a result, should this practice continue the Centre will not be able to offer competitive or matching salaries for social workers working on-reserve. This will have a direct impact on our ability to recruit and retain qualified staff.

- The Centre does not have the ability to hire for key core positions in several areas including information technology, communications, policy and research, and administrative assistant support.
- The hiring of an information technology coordinator is imperative to allow for the coordination and planning of current and future technology needs and upgrades, address technology issues as they occur, enhance data protection mechanisms and incorporate new technologies (such as video conferencing) into the Centre as a cost reduction and improved accessibility measure.

Administration: Professional Development and training

The Centre is located in the semi-remote community of Nisichawayasihk Cree Nation, 8.5 hours north of Winnipeg. Geography and distance significantly limits access to professional learning opportunities as the vast majority of these sessions occur in Winnipeg or other locations with similar distances.

The cost to for social work staff to travel for even basic training about issues such as policies, standards and reporting is cost prohibitive. Consequently, the \$2000 stipend per Federal FTE is depleted after only one trip and does not account for additional training that may be required to address emerging issues or to allow for specialization in areas of need such as child abuse investigations. For example, despite the significant increase in the number of abuse disclosures, funding shortfalls have impeded our

ability to train staff in abuse investigations and trauma informed practices.

In addition to costs for social work staff, there is serious shortage of individuals with accounting qualifications or training in finance procedures and statistics/data analysis. As funding allocations for professional development and training are most often targeted to CFS frontline and Family Enhancement workers addressing this issue is extremely challenging.

In order to ensure that the Centre is able to commit to continuous improvement through ongoing professional learning the stipend per Federal FTE needs to increase to \$5000.00. In addition, funding needs to be made available to support the training of community members in accounting.

Case Management: The provision of Intervention, Protection and Investigation services

The Family and Community Wellness Centre uses a centralized intake model to ensure that the services required by families are coordinated and prioritized at the outset. This approach, combined with the Circle of Care planning approach has resulted in more timely services to families based on the needs they identify.

However, like many First Nations communities, many services both within the community such as the Nelson House Medicine Lodge Alcohol and Drug Treatment Centre and outside of the community such as MacDonald Youth Services specialized treatment for children and youth who have been victims of sexual abuse and/or sexual assault, have long wait lists and most often require the placement of children outside of the community and in urban settings.

Ongoing issues which impact the level of services provided to children and families include:

- Our counselling services program offers both crisis intervention (suicide intervention, family violence, mental health assessments) and longer term counselling services. There are currently 2 part time therapists on staff to provide more intensive counselling to children and families. However, with over 2000 points of contact with community in 2015/16, the need for ongoing counselling support and services far outweighs what the Centre is currently able to provide. As a result, additional funding is required to hire one additional family therapist on a full time basis and two additional crisis response workers.

- The CFS standards require 30 day face to face contact meetings with the assigned case manager. This is a significant challenge when children in care are placed outside of the community as the costs associated with travel are not funded. Consequently, additional monies need to be allocated to cover the travel costs associated with out of town visits for children in care.
- Families who are involved with Child and Families Services often do not have the life skills or experience to advocate and

navigate the court process. As the goal is always to try to reunify the family, it is important that parents are involved in the decision making process. In order to ensure our families are actively involved in the court process, additional monies are required for 1 FTE family court support worker position. The support worker would be responsible to deliver educational workshops about the child and family services system and the legal process, attend court proceeding with families and assist with finding and accessing lawyers.

Conclusion

The Nisichawayasihk Cree Nation Family and Community Wellness Centre has used innovative practices and Indigenous ways of knowing to create a workable service delivery model. We have integrated our programs to ensure that families are able to access a multiplicity of support designed to promote individual wellness and improved family functioning. Several of our programs have been recognized nationally by other First Nations communities, looking to improve practice and reduce trauma. Despite our success, our organization continues to struggle to provide the services that families living off-reserve are able to access. We continue to be forced to place our children outside of the community, away from their social support systems, language and culture. We are forced to find bandaid solutions to problems, rather than create meaningful and transformative change in our community. Addressing our gaps in service is truly about creating equity in our services and in our system and keeping our children home.



Nisichawaysihk Cree Nation Family and Community Wellness Centre

Needs Assessment Template for Sept 7, 2017

Agency general information:

Name	NCNFCWC
Address	Nelson House
Authority	Northern CFSA
Number of Bands	1
Type (Super-large, Large, Medium, Small)	Medium
Number of Offices	6

Statistics on population served: Dec 2016

Statistics as per: March 2017

	On- reserve	Off-reserve	Total
0-18 Population	1727	872	2599
Number of families (pop/3)	576	291	867
Multiple problem families	44	155	199
Number of CIC	203	211	414
Number of licensed foster home beds	40	59	99
% CIC (Mar 2017)	11.8%	24.2%	15.9%
% Families in need	7.6%	53.3%	23.0%

<i>Distinct Need or Circumstance</i>	<i>Associated Costs to Meet the Need \$000</i>		<i>Funding increase required \$000</i>		<i>Factors that Impact the Delivery of Child and Family Services. Include here non-dollar answers to questions or non-dollar data to support dollar requests</i>
	<i>Federal</i>	<i>Provincial</i>	<i>Federal</i>	<i>Provincial</i>	
Operations					
1. Salaries					
1.1. Salaries to pay Staff with above the average salaries					Is this meant to be above funded levels? Most Northern CFS workers are below funded levels, while most Winnipeg workers are above funded levels. Calculations in 1.5 assume every position is budgeted at funded levels and there should be an overall surplus that would go to training.
1.2. Below current collective Agreement rates					All staff are currently below the current collective agreement. Calculations are contained with the figures in 1.5
1.3. Staff needed to deal with above case load assumptions.	196	1,552	196	1,552	Used CIC 1:25 (CIC cases) Foster Care 1:30 (CIC cases) FS/FE 1:20 (Family Files & EPS) Supervisors 1:6 (CFS Workers) Admin Support 1:5 (CFS Workers & Supervisors)
1.4. Staff needed to deal with level 4 and 5 Children					Agency is unable to determine at this time due to time and workload constraints
1.5. Additional dollars needed to meet current MGEU salary rates	2,249	2,165	193	334	When the Agency is unable to hire at competitive rates, are unable to hire BSWs as BSW will not apply
2. Administration Overheads	562	691	152	30	Multiple locations create the need for multiple computer servers, phone systems, meeting spaces, shared spaces. Costs differences between Communities and Winnipeg is often greater than the 5% included in the funding model
3. Benefits (amount of payroll benefits - CPP, EI, Workers Comp, health, insurance)	338	325	0	59	Federal benefit funding is sufficient and is adequate as funded at 20.45%. Surplus currently goes to offset other shortfalls within the funding model

Distinct Need or Circumstance	Associated Costs to Meet the Need \$000		Funding increase required \$000		Factors that Impact the Delivery of Child and Family Services. Include here non-dollar answers to questions or non-dollar data to support dollar requests
	Federal	Provincial	Federal	Provincial	
4. Staff training	243	173	174	167	All Provincial Training \$ is coordinated through JIU. However, no travel costs are covered for Agency and most training is offered in Winnipeg. Training offered does not always meet Agency needs (BSW, Computer literacy, IT, stats, Finance, writing)
	Cover 95	Cover 89	Cover 95	Cover 89	Coverage while staff are at BSW training
5. Board	Mtgs 23 Training 7	Mtgs 33 Training 8	Mtgs 2 Training 7	Mtgs 3 Training 3	Agency would also like to see some ability to add an Elder and Youth representation at Board level. Travel Costs is a large cost driver for Board meetings as 3 of 4 members will have to travel for every meeting. This does not include the cost of staff to attend, these costs are reflective in staff travel.
6. Travel	340	175	40	175	Travel costs are impacted by number of offices, Senior Management positions seem to get called to meetings by Province/Northern Authority often and on short notice. AS Senior Management Team is also located in a number of offices, quarterly or bi-monthly meetings will always require travel costs.
6.1. How does remoteness or/and having multiple offices affect travel costs?					Supervision issues for Senior Management
6.2 travel for staff training,					Travel Costs for any program meetings, internal training,
6.3 What are the costs of children having contact with the family? How many trips are planned to connect children with their families? Are they within Manitoba and/or outside of the province?					Travel for staff training is always a major component for staff training, It is not always feasible for trainers to go up to regional offices. Provincial JIU training, CFSIS training ALWAYS occurs in Winnipeg or Thompson

<i>Distinct Need or Circumstance</i>	<i>Associated Costs to Meet the Need \$000</i>		<i>Funding increase required \$000</i>		<i>Factors that Impact the Delivery of Child and Family Services. Include here non-dollar answers to questions or non-dollar data to support dollar requests</i>
	<i>Federal</i>	<i>Provincial</i>	<i>Federal</i>	<i>Provincial</i>	
6.4 Staff interacting with families, including housing, meals, etc.?					If children are required to be placed in Winnipeg this does affect the ability for families/extended families to stay connected
7. Building Repairs specify per building by location	500		500		
8. Information Technology: Additional capital needs (i.e. computers) and additional money for IT support	Staffing 73 Capital 154	Staffing 109 Capital 196	Staffing 20 Capital 154	Staffing 56 Capital 196	Provincial funds for IT Support and IT Capital is funded outside of the current funding model and is not guaranteed to continue
8.1. Are all sites connected to Internet? If not, then how much will it cost to achieve full internet connectivity?					South Indian is not connected. Costs for connection at this point are not determinable
9. Corporate legal costs	23	27	8	3	As the Agency grows it is seeing an increase in legal work being done with respect to non-CIC work (HR, legal agreements, issue management)
10. Legal costs of CIC (average per year over a five-year period of time)	90	Funded through Mtce	37	0	
11. Insurance	44	66	20	0	Province does additional insurance reimbursement outside of the funding model, but that funding stream is not guaranteed
12. Audit Costs	20	30	12	18	
13. Training for foster parents	40	30	40	30	Federal portion of funding model provides Recruitment and Training position, but no funds for training costs
13.1. Recruitment and retention of foster parents - problems and solutions?					Foster Parent rates have not changed since Oct 1, 2012, Fewer people are willing to take in children as they do not see the monetary support sufficient in relation to commitment and work associated with taking in children

<i>Distinct Need or Circumstance</i>	<i>Associated Costs to Meet the Need \$000</i>		<i>Funding increase required \$000</i>		<i>Factors that Impact the Delivery of Child and Family Services. Include here non-dollar answers to questions or non-dollar data to support dollar requests</i>
	<i>Federal</i>	<i>Provincial</i>	<i>Federal</i>	<i>Provincial</i>	
13.2 Do you have a recruitment/retention strategy for foster families? If so, how much does it cost to implement foster parent recruitment/retention efforts?					
14. Intake/after-hours function	170	75	66	75	Province does not identify any workload issue associated with accepting, assessing, assigning/ coordinating work received from ANCR. Identifying one SP4 position to deal with Winnipeg ANCR
14.1. Emergency Placement Resources are limited to 20 beds per agency. Does this meet your needs? If not, how many would you like to see and at what are the costs in terms of shift-staff, where needed?					Agency is not currently at 20 bed limit.
14.2 Do you work with other agencies/ organizations to help address emergency placement requirements? If yes, does this require additional investments?					
15. Receipt, assessment and investigation of child protection reports	60	70	60	70	Currently due to funding issues the Child Abuse tasks is shared amongst the Operations Manager and DIA Supervisor
16. Child Service Purchase Amount (in-home supports)	Staff 85	Staff 80	Staff 85	Staff 80	Two position (One North/One South) to recruit, screen and manage timesheets. Costs associated with CIC in home supports are reimbursable under maintenance

Distinct Need or Circumstance	Associated Costs to Meet the Need \$000		Funding increase required \$000		Factors that Impact the Delivery of Child and Family Services. Include here non-dollar answers to questions or non-dollar data to support dollar requests
	Federal	Provincial	Federal	Provincial	
Maintenance					
17. Child maintenance	40	90	40	90	This is for Finance and stats staffing as do not believe that the Funding Formula properly recognizes the impact of transactions related to Child Maintenance
	50	45	50	45	Circle of Care Lead
	95	90	95	90	Court Worker – support and educate families regarding CFS court system
17. 1. Outstanding maintenance reimbursements	86	3,200	86	3,200	Agency struggles to keep up with reconciling the Provincial billings system and documentation requirements.
18. Do you support the age increase for CIC to 25 years old? If so, what would be the costs associated with this increase?					Yes – costs are unknown as it would depend on the policy and program expectations.
Prevention					
19. Screening and establishing preventative first-line services. Weechitowin	350	350	350	60	Staffing included in 5.1 Agency diverts a majority of F/E dollars on Provincial side to offset inadequate funding on protection and Core. Could spend a lot more than what is funded
19.1. Prevention Workers (including improvements in caseload assumptions)					
19.2. Training for Family Enhancement	100	100	100	100	
19.3. Prevention Purchase Service	Staff 85 Support 300 Crisis 250	Staff 80 Support 300	Staff 85 Support 300 Crisis 250	Staff 80 Support 300	
19.4. Are you able to spend Family Enhancement dollars?					

<i>Distinct Need or Circumstance</i>	<i>Associated Costs to Meet the Need \$000</i>		<i>Funding increase required \$000</i>		<i>Factors that Impact the Delivery of Child and Family Services. Include here non-dollar answers to questions or non-dollar data to support dollar requests</i>
	<i>Federal</i>	<i>Provincial</i>	<i>Federal</i>	<i>Provincial</i>	
19.5. Do you have specific Prevention Programs that might be adopted regionally as Pilot Projects? If so, what are the wise practice projects?					
20. Promoting health and well-being					
20.1. Are you able to offer cultural camps (land based education) for children, families and staff? If not, what would you need to be able to do so?	2,000		1,830		
20.2. Needs for other programs					
Dragon Fly Program	400	400	400	400	Help Children/Families with attachment issues when CIC are returned home
Little Sisters Keeper	450		450		Project will address sexual abuse,sexual assault and domestic violence
Wechitotan Kita Mithwayachik Kichawasismina Nak	450		450		Intervention /support planning for families with children with disabilities
Stepping Out Saturdays	65		65		Programming for CIC with FASD to learn and practice social skills and self regulation
21. Using the services already available in the community					

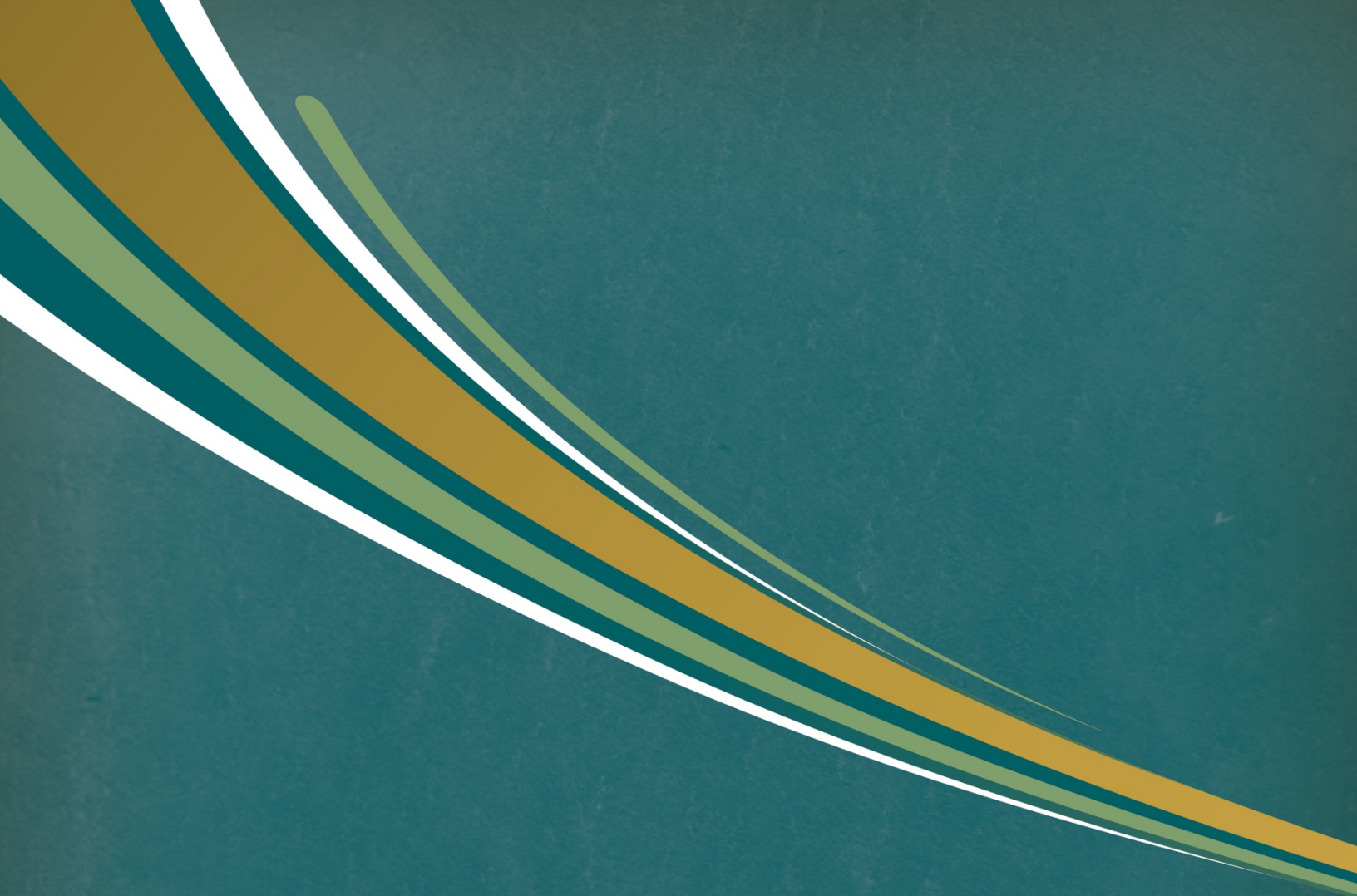
Distinct Need or Circumstance	Associated Costs to Meet the Need \$000		Funding increase required \$000		Factors that Impact the Delivery of Child and Family Services. Include here non-dollar answers to questions or non-dollar data to support dollar requests
	Federal	Provincial	Federal	Provincial	
21.1. Are there other organizations in your community/communities that provide Prevention programs? Or, is your agency expected to provide them all? What types of prevention and/or community development programming is available in your community/communities? What opportunities exist to partner with community development and/or other NGOs and organizations involved in prevention programming?					Agency also partners with Brighter Future, Building Health Communities. Family Violence, NAYSPS to run Wellbeing programs/ Counselling that are also available to children in care/families
21.2. Need to access off-reserve services (by location).					
21.3. Housing need on reserve to deal with prevention intervention for parents/kids?	100		100		Deal with living conditions related to removal of parent program
Total					

Budget issues

Federal	
22. Do you have a surplus/deficit in INAC/provincial funding? If yes, then how are those monies re-allocated within your CFS envelope of programming?	Deficits are subsidized by Federal CSA Funding. 17-18 Provincial Deficit is projected to be \$ 628,148 16-17 Provincial Deficit was projected to be \$470,720 17-18 Federal Deficit is projected to be \$ 217,251 16-17 Federal Deficit is expected to be \$ 244,935
23. How much money is taken from Prevention and Family Retention to meet core and protection shortfalls? And, what is the average protection shortfall for the last five years?	In Federal, majority of funds are taken from Prevention /Protection to fund Core shortfall. In Provincial, majority of Prevention funds are used to cover Protection, some goes to cover Core. Remainder is covered by Federal CSA

<p>24. Could you have handled a speedier phasing in of new INAC funds 2016-2020? What are your suggestions for making the funding allocation process more seamless and timely to your community/communities/agency/authority ?</p>	<p>Yes. Would like to see the Province adopt a budget faster in a fiscal year. It seems that it is getting later and later for passing of the Provincial budget and thus longer and longer delays in seeing budget adjustments flown to the Agencies. Would like to see the Province adopt a % based funding allocation like Federal. A criticism of that is that the non First Nation Agencies would see a huge increase. However, with the realization that First Nation individuals are over represented in the system, I think there is a rational basis to have the % based on historical trends. Yes it would mean a different % being used for Authorities, however, the underlying basis would be the same. However, even if percentages are used instead of case counts, there would still likely be a lag in the updating of those % if the Province</p>
<p>25. To what extent have new INAC dollars in 2016-17 and will those promised in Budget 2016 help to resolve your funding problems?</p>	<p>As most staff in northern communities are not BSW, they are paid at applicable SP rates (ie dependent on qualifications are underfilled at SP1, SP2 or SP3.) Excess funds are used to fund training and positions (HR clerk, QA monitor) While the funding level provides some training dollars for the Agency. The longer the funding levels lag behind volume growth, salary levels and inflation the more the ability to train will disappear. Provincial funding is significantly inadequate</p>
<p>26. How much flexibility do you have to move dollars around in your budget and to switch funding for one position to another? For the new funding model would you prefer more or less flexibility in how your funding allocation must be spent?</p>	<p>Have significant flexibility. Flexibility has not been a problem on the Administration side. The flexibility was more difficult with using Administration funds to cover off Maintenance funding shortfalls. AANDC wants the Agency to use Federal CSA funds to cover off Federal Maintenance funding shortfalls (up until the 16-17 fiscal year)</p>
<p>27. What amount of anomaly funds were received from INAC 2015-2016?</p>	
<p>28. What is the ideal number of years over which the budget cycle should be spread: 1, 3 or 5 years?</p>	<p>I would say 3 years, for most Agencies I believe the population growth and CFS case counts show are fairly consistent relational trend. There are blimps in the cases which I think can be traced back to policy/attitude change, ie Phoenix Sinclair inquiry where social workers are now afraid to NOT apprehend.</p>
<p>29. Are there other areas of need or particular circumstances that impact on your agency?</p>	<p>Policies outside of CFS – housing, medical, Employment Support – all those policy areas that affect the socio-economic of communities CFS policies that are hard to implement with current staffing and infrastructure levels;</p> <ul style="list-style-type: none"> • foster home – separate beds, criminal checks, state of housing) • 30 day face to face • CFSIS inputting (workload/infrastructure)

Province	
30. Did your Agency receive stabilization funding in 2015-2016? 2016-2017?	15/16 = \$ 637,800 16/17= \$ 95,218
31. What were the funding clawback amounts by the Province of Manitoba and any deduction amounts for 4% turnover in 2015-2016?	CSA - \$ 698,264 Turnover - \$ 127,048
32. What decisions are still centralized at the provincial-level that should have been devolved to the authority/agency/community-level?	IRAP - Special Needs funding. This was at one time devolved to Agencies below a certain level. One of the biggest areas that cause work is IRAP documentation to Province for reimbursement of billings IT Support/IT Capital – this funding is determined by Province, changes ever year and is funnelled through the Northern Authority
33. What is the average length of time for maintenance reimbursement in weeks?	Have not had time to analyze in a long time.
34. What is the degree of flexibility for Provincial funding allocations?	Degree of flexibility on the Administration funding is acceptable
35. Are there any other issues with provincial funding?	Reimbursable Allowances within Maintenance have not be adjusted for inflation for years (initial clothing, Age of Majority) \$1,500 scope for requirement to submit documentation for maintenance expenditures. Funding model (Federal & Provincial) are missing some key Senior positions (Communications, Policy Research & development Lack of Capital dollars (Furniture & Equipment) Maintenance Block Funding – allowing 1% growth when recent history has been 8-10% annually.



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