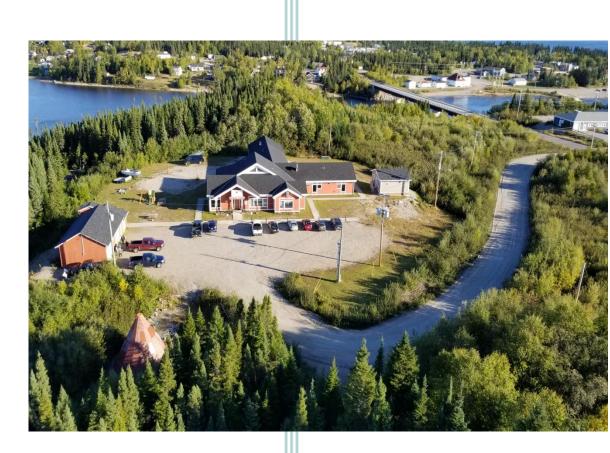


STRATEGIC PLAN 2025-2030

CHARLES J ANDREW



Completed by: YSAC &

CJAY

Approved: January 2025 CJAHC Board of Directors

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Executive Summary

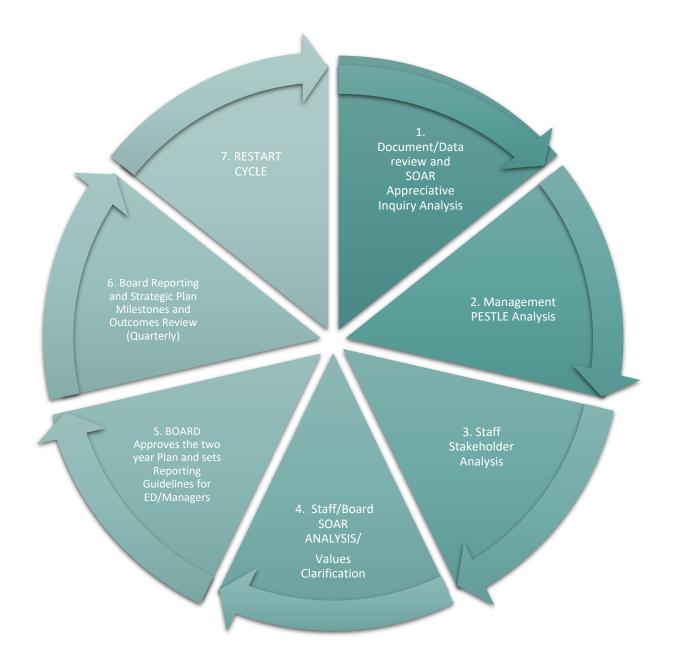
YSAC Centres require transformative quality improvement models that recognize that insight and optimistic growth ideas are needed. Inspired by YSAC leadership experiences with Appreciative Inquiry as both a research and planning methodology, this strategic plan grounds the strength based appreciative 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 five-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, 22,23,24)
- ✓ Workforce Core Competency Assessment Surveys (22, 24)
- ✓ Client Satisfaction Surveys (19-20; 21-22; 22-23)
- ✓ Board Self Evaluations (21,22, 23, 24)
- ✓ 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 five-year strategic planning model is visualized below.



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.



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 Economic Issues	 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 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	 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
Issues	 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	 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	 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	 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 5-year SOAR document analysis by type.

CJAY Board of Directors

STRENGTHS	OPPORTUNITIES
 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 	 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
 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 	 Growing waitlist for family treatment Occupancy rates increase Graduation rates increase Peer mentorship between families Abstinence rates increase after treatment

CJAY Staff

STRENGTHS	OPPORTUNITIES
 Nutshimit program Family treatment + youth treatment Good staff, leadership and board Staff bring personal skills to work 	 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
 Larger facility with family pods More staff to expand programming Ability to provide TX to more families 	 Graduating youth and families stay abstinent Longer times to relapse Reunification of families

Client Satisfaction Surveys

STRENGTHS	OPPORTUNITIES
 Caring, helpful, supportive staff 	 Counselling for older children Expand Innu cultural teachings at Nutshimit Separate men/women sharing circles More programming
ASPIRATIONS	RESULTS
 Larger facility to house more private family pods 	 Significant increase in levels of satisfaction in 10/11 areas of programming High levels of satisfaction in 8 areas re: Staff

Staff Satisfaction Surveys 2023/24?

STRENGTHS	OPPORTUNITIES	
 Support for Professional Development Uses evidence-based processes Motivating, inspiring workplace culture Weekly huddles enhance communication 	 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 	
ASPIRATIONS	RESULTS	
 A larger facility with family pods Rebuild at Lobstick Newer passenger vans Outreach Worker 	 Seeing the family's graduate Families reunified with their children Increased qualified workforce 	

Stakeholder Analysis and Accountability Measures

Board of Directors	Funders
•Approve Policies	 Indigenous Services Canada - Annual
Help Set Strategic Direction	Reporting of program and financials
	•Jordan's Principle
Program Outcomes	International Grenfell Association
•Support staff as a whole	
 Transparency 	
Elders	Communities
 GuidanceTeaching 	•AGM
•Knowledge	•Open House
•Respect	•Annual Reporting of Program
•Connection to Culture	Outcomes
	Referral Workers
Clients & their Families	Staff
•Offer relevant holistic cultural	•Set Policies
programming	•Support Staff
•Trust in CJAY	Meet Quality Standards of Care
Canadian Accreditation Council	YSAC
 Meet Standards of Quality Care 	•Reporting
Theet Standards of Quality Care	Benchmarking
	Best Practices
Partnerships	Chief and Council
•Innu Round Table	•Appointment of Board members
Mary May Healing Centre Child Control Results of the second sec	•Community Outcomes
•Child Senior & Social Development	
Public Health	
•RCMP	
Diabetes Inititaitve	

Strategic Directions

Strategic Plan at A Glance

Image: Strategic Goal One:Strategic Goal One:Enhance program curriculum with attention to strength and addiction knowledgeExpand and enhance program curriculum in partnership with the YSAC network and Thunderbird Partnership Foundation (TPF)Build community partnerships to enhance specialized programming. IE. Public health education, opioid dependence program, art therapy, various Jordan's principle initiativesExpand and enhance education programAnnual risk management review with Board and staffAnnual review of client satisfaction surveys	Z Strategic Goal Two: Improve Environment, Building and Grounds Resolve major ongoing sewer issues Secure funding for Capital Projects and Needs Expand facility for family pods and office space Acquire a new building for Lobstick land-based program Secure funding for a generator for the Centre Secure funding for solar power for the land-based program
3 Strategic Goal Three: Enhance Cultural and Traditional Practices Increase various traditional and cultural teaching practices in program delivery Foster cultural diversity, awareness and Inclusion with clientele and staff Strengthen external resources in program such as elders, knowledge keepers and resource people	4 Strategic Goal Four: Build a Quality Workforce Enhance Competency Based Recruitment and Retention strategies Participate in Wage Parity Initiatives Annual review of staff satisfaction surveys Increase the number of certified staff
5 Strategic Direction Five: Broaden and Expand the ContInuum of Care Increased availability of additional levels of care ie. Suboxone and methadone Pilot 12-week residential program Enhance Outreach Services Increase Community Awareness and Education IE. Harm reduction week Enhance Pre-Post Client Care Services	G Strategic Direction Six: Strength-Based Branding of The Centre Partner with marketing agency on rebranding and awareness of CJ programming Continue and maintain accreditation status Continue to build Board of Director capacity and expertise

Enhance Program Curriculum With Attention to Strength And Addiction Knowledge

In the next five years CJAY will work towards enhancing its programming to include: all family members; genderbased programming; Indigenous cultural programming



Enhance Program Curriculum



Indigenous Cultural Teachings



Fostering Diversity

	Key Actions				
•	Review current curriculum to determine gaps and to keep current of trends in addictions/mental health and quality care	 Increased Client satisfaction for culturally specific Indigenous cultures (Innu/Inuit/First Nations) Development of language Provide education sessions to both staff and families of LGBTQ2+ people Empowering and enhancing education and support for the 			
>	Develop treatment sessions that are appropriate for various age groups	camps to learn and revitalize native languages to Innu/Inuit clients and communitydiversity of staff, clients and community membersPartnership with various			
>	Measurements in place to monitor the effectiveness of the newly developed program	 members Increase Indigenous traditional ceremonies in program Develop holistic care plans 			
	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				
>	Staff Evaluations will provide acceptance and support of the new program length				

Improve Environment Building and Grounds

In the next five years we will seek funding and develop proposals for building enhancements to accommodate families at the Centre and a newly developed structure for our land-based program.



Secure funding for Capital Projects/Needs



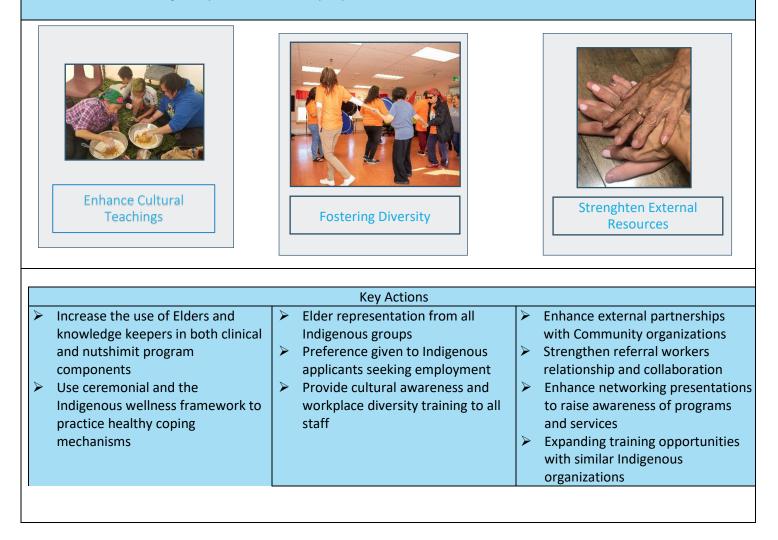
Develop Capital Proposal for Facility Restructuring



Develop Process for a new structure at Lobstick

Enhance Cultural and Traditional Practices

In the next five years CJ will increase various traditional and cultural teaching practices in program delivery, while fostering diversity and inclusion of different Indigenous groups. CJ will strengthen external resources in program delivery such as Elders, knowledge keepers and resource people.



Strategic Goal Four: Build a Quality Workforce

Build A Quality Workforce Based On Core Competencies and Enhance Recruitment and Retention Strategies

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

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 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 	 Key Actions Undertake task analysis for position descriptions To engage an HR consultant or organization to assist with the results of position task analysis Revise job descriptions as required post-task analysis 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 Provide the needs assessment to the funding agency for wage parity

Strategic Goal Five: Broaden and Expand the Continuum of Care

Expansion of Outreach Services and Strengthen the Aftercare Framework

In the next five 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 participants of CJAY's healing program.



Enhance Outreach Services



Community Awareness & Education



Aftercare Framework & Supports

- Develop and create an Outreach Framework
- Hold community events such as open house
- Provide opportunity for graduated alumni clients to attend evening sharing circles to participants attending program
- Continue to strengthen interagency relationships and partnerships
- Human Resource considerations for a newly developed Outreach Worker position
- Seek and secure ongoing funding
- Initiate a community needs assessment

Key Actions

- 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
- 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, Family supports etc.)
- Aftercare support will monitor relapse and sobriety length
- Monitor family reunification rates

Improve External Communications and Strengthen Awareness of the Centre

	te our program and services widely v ild Board of Director capacity and expe	with a marketing partnership, maintain rtise.
Accreditation standards of care and bo	Accreditation	Board Governance
	Key Actions	
 Increase social media presence Create a video production of CJ 	 Maintain accreditation practices and status Educate all staff on the accreditation process 	 Build Board of Director capacity and expertise Keep current on by-laws Quarterly/Annual reporting of
 Increase in recruitment strategies 		outcomes

Quality Assurance and Improvement Plan

What is Quality in Residential Treatment?

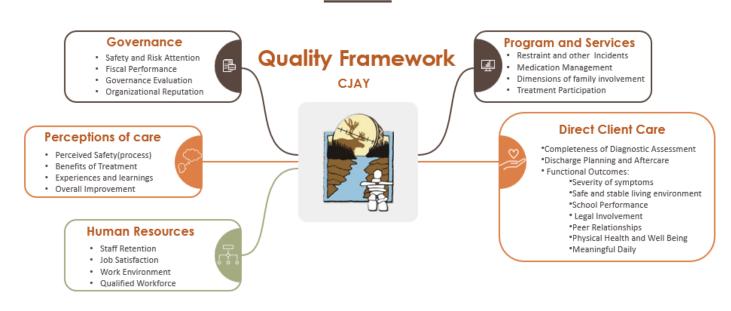
Quality is a term that specifies elements of the best service possible. AT YSAC centres, this means targeted attention to a complex set of processes that are going on simultaneously during a client's healing journey. The YSAC Quality assurance and improvement planning template helps individual YSAC centres 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	Quality	CJAY Practice/Policy	CJAY	CJAY Data Mechanism		
Area	Indicator		Education/Orientation			
	Source					
Safety and Risk Attention	(American Association of Children's Residential Centers, 2009; Committee on Quality Health Care in America, 2001)	 CJAY Risk Management Plan CJAY Strategic Plan Process Occupational Health & Safety Committee AED on site Risk Management policy and Risk Review Meeting Regular Building and Equipment Inspections Universal Precautions Practice Security Cameras on premises Recruitment Screening 	 Risk Management for Boards Quality and Outcome Collection Course Safe Food Handling CPR/First Aid Infection Control Training # of YSAC trainings related to mental health and addictions and quality of care 	 Incident Reporting in AMIS Centre Based incident collation with debriefing after the incident/end of program/annually # Certified staff in relevant safety areas # Front line workers trained in CPI # Front line workers trained in First Aid 		
Fiscal Performance	(American Association of Children's Residential Centers, 2009)	Screening CJAY template board reporting Annual Reporting to Stakeholders Financial policies Human Resource policies Program Policies By Laws	 Regular communication with Funding Agency (Variance reporting) 	 Centre Annual Audit Annual reporting deliverables 		
Governance Evaluation	None	 By Laws Standard Board reporting template Quarterly Board of Director Meetings Annual AGM Representation from MIFN, SIFN, NG, APC 	 Governance Training every 2 years Orientation for new Board Members 	YSAC Board Governance Evaluation Annually		
Organizational Reputation	None ervices (Design	 Open House Social Media Presence Stakeholder Needs Assessment 	Ethics Training	 Attendance records Engagement records 		
Indicator Area			CJAY	CJAY Data Mechanism		
mulcator Area	Quality Indicator Source	CJAY Practice/Policy	Education/Orientation			
	000100					

	2009)	report and debrief	training De-escalation training	time
Medication Management	(AACRC, 2009)	 Policy with incident report and debrief Medication audit (personnel and process) Medication storage 	 YSAC Med Management certified training 	 Incident report trends over time Audit records
Incidents	(AACRC, 2009)	 Incident policies Incident report template in AMIS 	 Biweekly incident review and debrief Debrief for critical incidents Incident training modules attached to other trainings 	 Incident report trends over time (quarterly)
Dimensions of family Involvement	(AACRC, 2009)	 Policies on family contact Visits/phone calls Safe family space Families involved in graduation Family circle and elder involvement 	 NWA (Native Wellness Assessment) and belonging indicator 	 CJAY Client satisfaction survey Reunification rates of families
Treatment Participation	(AACRC, 2009)	 Clinical and Land Based structure and treatment components 	 AMIS (Pre-post) YSAC Treatment Planning Training 	 AMIS- Measures across Continuum In program session attendance and daily progress notes AMIS Graduation/reasons for leaving rates in % Levels of care (AMIS)
Human Resource	ces (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)	 CJAY turnover indicators Incentive programs (celebratory, benefits and financial) Clear HR polices Clear Job Descriptions EAP program 	 YSAC HR Management Module YSAC Diversity Course 	 Staff Satisfaction Q# Core Competency Q#
Job Satisfaction		 Routine supervision (formative and summative) 	 Orientation checklists and processes 	 CJAY & YSAC Staff Satisfaction National Collection Annual in December

Work Environment Qualified Workforce	(American Association of Children's Residential Centers, 2009; Mitchell & MacDonald, 2014) (American Association of Children's Residential Centers,	 Ethics policies Promotion of healthy work environment – Wellness Committee Open communication practice Performance Assessments Clinical Supervision Competency based hiring strategy with qualification scoring Orientation process Mandatory and 	 YSAC Module Motivating Employees YSAC workplace CARE Clear grievance process and policy Suite of Courses available to meet key risk areas and key counseling function areas 	 CJAY Staff Satisfaction Work Engagement Profile Six Seconds Org Vital Signs Complaint and grievance records CJAY Staff Sat Q # AMIS Annual Report certification Rates YSAC Core Competency National Survey
	2009; CCSA, 2017)	 annual training Learning plans and development records 		
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)	 Client readiness and motivational interviews External admission assessments Medical clearance Education assessments 	 YSAC Tx Planning and DUSI/NWA assessments YSAC Outcome Collection Course 	DUSI/NWA
Discharge Planning and Aftercare		 Formalized discharge summary and aftercare plan AMIS aftercare level of care 	YSAC Tx Planning	 AMIS Data #aftercare admissions Outreach report numbers Client call back logs
Severity of symptoms (Functional Outcome)	(American Association of Children's Residential Centers, 2009; Mitchell & MacDonald, 2014)	 Pre-post assessment policies Medical and other partnerships for symptom management or specialized care 	 YSAC Treatment Planning Course YSAC Outcome Collection Course 	 DUSI- Overall problem density score
Safe and stable living environment (Functional Outcome)	(American Association of Children's Residential Centers,	 Outreach follow up Transition supports Referral Advocacy 	 YSAC Treatment Planning Course YSAC Outcome Collection Course Trauma Informed 	 NWA Scores POST(Belonging) DUSI POST- Scale #

School Performance	2009; Mitchell & MacDonald, 2014) (American Association	 Modified education programs in centre 	Care	 NWA Scores (Belonging) Education report cards pre
(Functional Outcome)	of Children's Residential Centers, 2009; Mitchell & MacDonald, 2014)	 Support for mainstream reconnection/enroll ment Connect with teachers in home communities for student placements in the NL curriculum 		and post treatment
Legal Involvement (Functional Outcome)	American Association of Children's Residential Centers, 2009)	 Intake package Probation Partnerships 		DUSI- Scale #
Peer Relationships (Functional Outcome)	American Association of Children's Residential Centers, 2009)	 Positive peer programming Peer mentorship/leadershi p practices 		 DUSI- Scale # YSAC aftercare survey
Physical Health and Well Being (Functional Outcome)	American Association of Children's Residential Centers, 2009)	 Scheduling incorporates physical activities Environmentally good rec space Holistic Case Plans Cultural Ceremonies Harm reduction initiatives 	YSAC Mental Health Course	 NWA global score (measure of holistic health) DUSI
Meaningful Daily Activities (Functional Outcome)	American Association of Children's Residential Centers, 2009)	 Holistic Care Plans Cultural Ceremonies, Sweat ceremonies, cultural programming 	 Clients have inclusion in their Cultural Supports 	 NWA (Purpose/Meaning) DUSI
Perceptions of C Indicator Area	Care Quality	CJAY Practice	CJAY	CJAY Data Mechanism
	Indicator Source		Education/Orientation	
Benefits of Treatment	American Association of Children's Residential	 Admission package and website promotion of intended benefits 		 CJAY Client Satisfaction CJAY Referral Survey

	Centers, 2009)	Community Outreach		
Experiences and learnings	American Association	Graduation		CJAY Client Satisfaction
and learnings	of Children's	Celebration and Certificate		Treatment/Discharge Summary
	Residential	Ongoing Treatment		
	Centers,	Plan and Case Plan		
	2009	Reviews		
Overall	American	All above data		CJAY Client Satisfaction
Improvement	Association	collection		CJAY Referral Survey
	of Children's	mechanisms		Board Survey
	Residential			NWA
	Centers,			DUSI-R
	2009)			Follow Up/Aftercare
				Discussions

Risk Management Plan 2025-30

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 risks 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	Μ	Marginal to Severe	 The Board has implemented a policy (by-law) and mandate for BOD Quarterly meetings are held Annual Board evaluations AGM Board Orientation package Regular governance review and training Board abides by Code of ethics and meet board appointment criteria Board Direntation package
Financial Controls	Funding	Continuation of funding	L	Marginal	 Completion of an annual external audit Meet reporting requirements Annual and regional reports to funding agency & Board
Work life, Client Safety	Treatment	Client aggression	Η	Marginal to Severe	 All staff trained in nonviolent crisis intervention Counselling and relational prevention Staff ratios promote connection and relational care Staff trained in de-escalation

Client Safety	Treatment	Infection Control	Η	Marginal to Severe	 Infection control manual with annual review Trauma informed staff training (Stigma/privacy/prevention/protection) Partnership with local public health Staff & clients vaccinated TB testing prior to treatment Medical of clients prior to admission 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	Н	Severe	 All staff trained in trauma informed practice through YSAC MH course or YSAC Tx Planning Course or other Staff recognize behavioral triggers
Client Safety	Kitchen	Food Borne Illness	L	Marginal to Severe	 All kitchen staff trained in safe food handling Scheduled cleaning and sanitization Proper food storage Proper food temp
Work life Client Safety	Kitchen	Staff slip and fall	Μ	Marginal to Severe	 Wet floor signage is available and utilized Salting/sanding walkways when weather indicated Incident debriefs OH&S walk through and meetings Policy reviews
Holistic Continuum	Outreach	Evidence Informed presentations	L	Marginal	 Ensure peer/staff review of materials Create research time in annual workplan
Evidence Based	Outreach	Lack of program outcomes data	Μ	Marginal	 Ensure use of pre-post DUSI/NWA No harm Institute program follow up protocols Ensure HR time to complete
Client Safety	Program	Unethical behaviors	L	Severe	 Staff orientation boundaries training 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	 Posters and schematics for the water system partitions and shut off valve locations 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	 Post evacuation plan and staff are aware of the protocol Safety of clients and staff
Safety	Grounds	Wildlife preparedness	L	Marginal-Severe	 Client and staff teaching Maintenance Prevention Wildlife number posted around Centre
Work life Reputation	Human Resources	Disgruntled Employee reputation damage	L	Marginal-Severe	 Strong interview and screening policies Annual staff satisfaction report and debriefings Evaluation during probation Clear and communicated grievance policy Board and leadership regular review of grievance policy Regional Partnership Protocol for complaint handling? Community Partnership & debriefings debriefings
Safety	Natural Disaster	Forest Fire Flood Road Closures	L	Marginal-Severe	 Evacuation Plan Community Evacuation Plan Community Evacuation Plan Ensure staff know the proper protocols and procedures in the event of a natural disaster