

CARRIER SEKANI FAMILY SERVICES

*To Ns' uleh  
Rebuilding Our Nest*



**2018 Annual Report**



# CARRIER SEKANI FAMILY SERVICES

**Creating wellness together.**

## **Annual Report 2018**

© Carrier Sekani Family Services, 2018

987-4th Avenue  
Prince George, BC V2L 3H7  
Phone 250-562-3591  
Toll free 1-800-889-6855  
[www.csfs.org](http://www.csfs.org)

Graphic Design: Marlaena Mann, Director Communications Public Relations and Projects  
Charts: Chris Ross, Director, Privacy and Information









## *Our Logo*

The Late Larry Rosso from Lake Babine Nation, Beaver Clan created our logo in 1991. The mother bear represents protection, safety and wellbeing for all of our Carrier and Sekani citizens. The baby bear cub on the mothers back represents the children being at the centre of all that we do. The helping hand represents the services provided by our agency to support holistic wellness in partnership with our member Nations. Our agency tagline 'creating wellness together' often accompanies our logo to further communicate our partnership in creating wellness with our Nations.



# *Table of Contents*

Our Board of Directors	11
Message From Our President	12
Message From Our Chief Executive Officer	14
Executive Director of Child & Family Services Report	18
Bridging to Employment Prince George	21
Bridging to Employment Burns Lake	24
Community Linkages Program	25
Family Preservation and Maternal Child Health	28
Family Support - Prince George	30
Wrap Around Parent Guidance and Support	31
Indigenous Housing First Project	32
Youth Services Program	33
Guardianship of Children in Care	36
Foster Parent Resources	38
Executive Director of Primary Care, Research and Strategic Services	39
Family Justice Program	45
Intensive Family Preservation Program	46
Executive Director of Health	48
Best Beginnings Outreach Program	50
Vanderhoof Youth Centre	51
Aboriginal Supported Child Development	53
Canadian PreNatal Nutrition Program	55
Children's Oral Health Initiative	55
Early Years Centre, Vanderhoof	57
Early Years Centre, Burns Lake	58
First Nations Health Benefits Program	59
Aboriginal Patient Liaison Program	61
Special Projects - Health	62
National Native Alcohol and Drug Abuse Program	63
Mobile Diabetes Telemedicine Clinic	65

Indian Residential School Program	66
Addictions Recovery Program	67
Aboriginal Child and Youth Mental Health Program	68
Mens Support Program	69
Husna - Land Based Healing Curriculum	70
Opioid Strategy	70
Heal the Healers Community Development	72
Community Mental Health Program	73
Health and Wellness Program	75
Communications, Public Relations and Projects	77
Projects - Administration	79
Information Technology and Security	81
Human Resources	83
Financial Report	84





## *Our Mission*

With the guidance of our Elders, Carrier Sekani Family Services is committed to the healing and empowerment of First Nations families by taking direct responsibility for: health, social, and legal services for First Nations people residing in Carrier and Sekani territory.

## *Our Values*

CSFS is dedicated to serving our First Nations citizens in a respectful, honest, and compassionate manner following the principles that flow from accepted Carrier laws intended to govern the conduct of individuals. Each of these values need to be followed concurrently, with no single principle understood to have greater significance than another.

### **Respect**

Guides the actions of Carrier people in their conduct with each other and then land. Everything is about respect.

### **Compassion**

Making an effort to truly understand the suffering of another, and then making an effort to do something about it.

### **Wisdom**

Wisdom is sometimes referred to as intuition, or 'just knowing'. Providing services with wisdom can mean knowing when to share what resources can help someone, and when it is best to just listen.

### **Responsibility**

Accountability is a part of our great bah'lats system. We are responsible to our clans, our selves and our community. Responsibility is carried in one way or another by



everyone within the system; we are all responsible for the wellness of ourselves, each other and the land.

## Caring

It is the role of everyone in a community to care for each other and the land. Demonstrating that we care is an important Carrier value for everyone.

## Sharing

Supporting each other through sharing and placing value of the community above individuals is important to our way of life. This is demonstrated through our great laws of the bah'lats.

## Balance and Harmony

The concept of interdependence on each other is important to understand when relating to balance and harmony. For a family to be healthy and balanced, their community must be balanced and healthy, Individuals are not separate from each other or the land, and health and balance are interdependent on everything else within an individuals world.





6

7

8

9

10

6

7

8

9

10

hānau

hānau

hānau

hānau

hānau

# Our Board of Directors

## The Carrier Sekani Board of Directors as of 2018

Chief Corrina Leween .....	President, Cheslatta Carrier Nation
Helen Michelle .....	Vice President, Skin Tyee Band
Kim Sam .....	Treasurer, Burns Lake Band
Murphy Abraham .....	Lake Babine Nation
Theresa Nooski.....	Nadleh Whut'en First Nation
Chief Ray Morris .....	Nee Tahi Buhn Band
Priscilla Mueller.....	Saik'uz First Nation
Tannis Reynolds .....	Stellat'en First Nation
Sandra Teegee.....	Takla First Nation
Chief Vivian Tom .....	Wet'suwet'en First Nation
Melissa Joseph .....	Yekooche First Nation
Nancy Williams.....	Elder Representative



Lake Babine



Nadleh Whut'en



Stellat'en



Saikuz  
First Nation





## *Message From Our President*

On behalf of the Board of Directors of Carrier Sekani Family Services, member bands and staff, I offer my greetings to our member Nations, community partners, and friends of our organization.

This year there has been a huge focus on infrastructure and housing to meet the growing needs of our communities. Locally the Safe House located in Burns Lake is finally starting to take shape. This facility will bring much needed violence prevention and intervention housing services to children and families in our area. I had the pleasure to join the executive leaders in a meeting with the British Columbia Minister of Municipal Affairs and Housing to communicate the realities and needs for facilities and housing for children in care in the North.

We were very pleased by the Canadian Human Rights Tribunal decision this year to ensure that prevention services are finally going to be available to keep children with their families. After years of lobbying for these funds, the day has finally arrived to carve out what we need to address the long history of colonization and impacts on our families.

After many long decades of reports outlining the very broken and damaging Child Welfare system, we are very happy to have work commencing around building a framework for Child and Family Services Jurisdiction and Governance for our Nations. I am so excited that meaningful programs and services to address our specific needs will finally be available stemming from this important work.

I would like to thank the CSFS Board of Directors, executive team and staff for all their hard work and dedication in working diligently to improve the health and holistic well-being of our communities. We have lots of successes and knowledge acquired from our past 28 years and have lots of learning to reflect on as we blaze forward toward a bright future.









# Message From Our Chief Executive Officer

Warner Adam

This year has been challenging for many of our communities due to wildfire evacuation alerts and orders. We thank the Creator for the strength of our families during this frightening time. Much thanks to our leaders who withstood provincial policies to ensure the safety of their communities, our staff and other agencies, such as the First Nations Health Authority, for attending to the needs of all the evacuees.

## Child and Family Services

Child and Family Services has been politically active over the past year. Between the 1907 Bryce Report and 2017 Grand Chief Ed John report, there is a collection of evidence from eleven major reports, commissions and reviews that shows the existing governing system, legislative and policy-makers has had a negative impact toward children, youth and their families. The outcomes are dismal. As a result there has been an utter failure, in particular towards Indigenous populations.

The Canadian Human Rights Tribunal (CHRT) is a landmark decision on the inequitable service delivery for effected on-reserve populations. The discriminatory practices of Canada placed our Indigenous families caring for their children in vulnerable situations. Alleging discrimination, both the Canadian First Nations Child & Family Society (CFNCFS) and the National Assembly of First Nations (AFN) filed a complaint against the Government of Canada. In its decision

and retaining jurisdiction, the CHRT found and has ordered compliance reports from Canada to cease its discriminatory acts against Indigenous children, youth and their families' on-reserve, pursuant to the Canadian Human Rights Act.

Finally after 30 years of advocating, of which CSFS along with other Child and Family Services agencies and advocates, the Canadian government and BC government admitted that the systems has failed Indigenous children and their families. Both governments made commitments to reform Child and Family Services. Among several options such as self-government agreements, administrative and sectorial transfer agreements, the Canadian government has opted to accept the National AFN resolution to drawing down federal enabling legislation for Indigenous Child and Family Services. For close to seven decades, the referential incorporation of provincial laws has occurred, pursuant to s. 88 of the *Indian Act*, such that, in the absence of federal laws the provincial laws apply on-reserve.

Moving forward, the federal enabling legislation will create space for Indigenous Nations to establish their own laws based on the main tenants of the federal legislation as assume control over Child Welfare. While this regime does not fully balance inherent rights over child welfare, the legislation will provide opportunities for Indigenous peoples to develop tools and structures that will lead to provisions for safe

environments for those children placed in vulnerable situations.

In 2011, CSFS recognized the need to develop a framework to assume greater control over Child Welfare. Elected Chiefs and Hereditary Chiefs endorsed a plan moving forward at a Bah'lats held in Lake Babine Nation. Our Indigenous law, *Chus* (blowing of feathers), solidified the plan to move forward on reforming the Child and family regime. Unfortunately, the BC government suspended funding commitments to move forward. Nevertheless, after seven years the plan for child reform is back on track.

CSFS is poised to work with our member Nations to examine governance structures, authorities and funding to pursue governance over Child Welfare. A successful framework and philosophy for creating family wellness, child well-being and safety must have a cultural fit, by ensuring traditional values, rooted in the Bah'lats teachings are imbedded in the design, delivery and control over child welfare. While CSFS, has done some work, much more needs to be developed in partnership with the member Nations. The development and enforcement of laws must be build on community structures that promote keeping children safe and support for family healing.

Mary Teegee, Executive Director – Child and Family Services, as a member of Nation Advisory Committee and the Legislative working committee, is instrumental in working with the National AFN to get the mandate for federal enabling legislation.

## Health

Our Health services continue to improve over time. Our First Nations Primary Care model continues to improve and expand physician and other acute care services to our members in all of our communities. To date, we have eight physicians, a Nurse Practitioner (in addition to our Community Health Nurses), Medical office assistance and several specialists (physicians) deployed by our tele-health system. Dr. Travis Holyk continues to work hard in developing a comprehensive CSFS primary care program. He has recently joined the Rural and remote division of family practice as a board member. Travis continues in advancing CSFS Research agenda based on Nation priorities.

As reported by Mabel Louie, our Executive Director of Health Services has initiated training in Early Childhood Education certification as well as Addictions counselling programs. Both programs have been a success. In the long term, CSFS will seek partnerships with a university or college to examine cohort style





education programs for nursing and social workers.

## Data Governance and Systems

Without proper data, we remain blind to the trends and react to situations and crisis without planning. Canada made a commitment to collaborate with First Nations to create a data management system. Similar to many other agencies, CSFS has not had the opportunity to establish comprehensive data management policies, platforms and applications. Leveraging experience from the Medical Office Information System, which record client services by physicians, CSFS is in a good position to develop a community-based prevention services framework for Child and Family Services programs. A robust data governance structure and systems will enable CSFS and member Nations to examine trends and develop preventative and predicable strategies and plans.

## Priorities

The priorities for the next three years are:

- Child and Family Services: work with member Nations to examine child and family well-being provisions, within

Carrier and Sekani Child Wellbeing Law which factors traditional and contemporary legal structures, service delivery plans and training

- Develop a robust data management governance model including systems and applications

- Continue to improve on our Health Service delivery system and health related training.

Mussi Cho to both CSFS Board of Directors, for their continued support, and to all the staff, for their care and support to children, youth and their families. Without these supports and infrastructure, CSFS would not have become one of the best Agencies in the Country. This annual report will demonstrate that CSFS is not just a delegated agency but is an organization that is committed to re-building our communities. Once again, the political landscapes provides us an excellent opportunity to continue moving forward on the path toward wellness. We will work with our member Nations to build capacity to assume more services for re-building their communities.







  
CARRIER SEKANI  
FAMILY SERVICES



# Spirit Bear and Children Make History

Based on a True Story



# *Executive Director of Child & Family Services Report*

Mary Teegee

Tse'ku Zeh, Dene Zeh, Sk'ai Zeh

This past year has been a momentous year in the realm of Indigenous child and family services. The Canadian Human Rights Tribunal (CHRT) ruled that the Federal government must fund agencies to deliver prevention services. The CHRT also ruled that the prevention services must be funded at actual costs, that legal costs are to be covered as well as data management costs. Previous to this ruling CSFS wasn't federally funded to provide prevention services in community; however, we were able to provide some prevention services through proposals and limited provincial funds.

As of February 2018, we are able to bill for actual Prevention services. We have never had this opportunity in BC so we are now able to do so much more to keep the children with their families or at the very least within their communities. CSFS staff have gone out to all the communities to identify what they see as Prevention and to identify staff, resources etc. required by each community. With this information we have developed a Prevention Plan that is based on the CSFS Lifecycle Model. The Lifecycle Model is based on the premise that if you have a healthy baby you will have a healthy child, a healthy child leads to a healthy adult who in turn will be a healthy parent who will then have a healthy baby.

CSFS has the mandate to deliver Legal services however we haven't had the resources to do so. With the CHRT ruling stipulating that Legal costs are

to be covered, we are working to develop legal services including expanding the Family Mediation program to include the Family Law Act, deliver the CSFS Mediation training and practicum, retain in house Council and in developing our own laws based on traditional governance.

Jordan's Principle is still under-utilized by the province of BC. We are currently developing a Group proposal to deliver assessments for all our children and then propose a new and innovative way to get services to our children once assessed through our telemedicine system.

We are also developing a Youth Treatment Centre proposal as there aren't any centers in the North for youth under 19-this will also be a Jordan's principle Group Proposal. We will also be providing our First Nation Child Youth and Advocacy Centre (FNCYAC) proposal under Jordan's Principle.

Under the CHRT ruling, we now have the resources to develop a robust data management system for child and family services. Not only do we want to keep track of our children, we also must consider wellness outcomes and indicators for our children, families and nations. Currently, the current reporting system is antiquated and doesn't meet the needs of our agency therefore I am excited about this project. I have also been in discussion with the University of Toronto in regard to the work they are doing to measure the Social Determinants of



Health. We have also worked with the University of Ottawa-Institute of Fiscal Studies and Democracy (IFSD) to research the cost of prevention and child and family services.

This past May at the Special Chiefs Assembly, I brought forward a Motion to co-develop Indigenous Child and Family Well-being legislation. Because the Indian Act is silent on child welfare, the authority for Indigenous child welfare reverted to the Province under the laws of general application referenced in Section 88 of the Indian Act. The Federal Enabling Legislation (FEL) would allow for nations to draw down jurisdiction for child and family services. As most nations aren't ready to enact their own laws, the proposed federal legislation we are bringing forward is similar to the First Nations Land Management Act and will have principles akin to the Canada Health Act. The three main components of the FEL would be enabling jurisdiction, funding authorities and guiding principles. I am a member of the National Advisory Council on Child and Family Services Reform therefore I have been selected to be a part of the Federal Enabling Legislative Working Group. Currently, we have retained Gowlings WLG to work with us in preparing for the Federal Enabling Legislation.

As you are aware CSFS is in the enviable position of having completed research regarding our traditional governance and health and wellness research. This important data will be the basis for the CSFS Jurisdictional Model we have developed in draft (See Model). The Model will define roles of the nations, CSFS and highlight joint responsibilities. The intent of the model is to incorporate our traditional systems of governance in child welfare

and includes roles for the Chief and Council system.

The Province of BC had announced Amendments to the CFCSA; they did so without consulting with the agencies. As Chair of the BC First Nation Directors Forum, I did protest to the changes however they have gone through the third reading and they will be implemented in November. I am now a part of the Implementation steering Committee to make sure the requisite training is identified and delivered to our agencies and nations.

I have proposed to the Province that they should be planning to harmonize a provincial act with that of the Federal government. The Agency Directors have always maintained that there should be an Indigenous Child and Family Wellbeing act in BC instead of trying to fix the existing BC CFCSA. The province seems receptive to working with First Nations and the Federal Government to vacate the field in child and family services.

I started in the role of Executive Director of Child and Family Services over ten years ago. At the time I stated that I would only take the job if we could do things differently from MCFD and if we could change the system. After working with eleven different Provincial MCFD Ministers, and many Deputy Ministers we have finally come to the day where we can breathe life into what our elders envisioned 18 years ago when Carrier Sekani Family Services was created.

On a personal note on behalf of my family I would like to thank everyone for your support over the past year. Your support and outpouring of love helped us to go on during the darkest hours of our lives. Snachalyia.



Alli Overstreet  
Head - Career Center  
Family Services  
Hennepin County, MN

Sandra Wilson  
Head - Career Center  
Family Services  
Hennepin County, MN



# *Bridging to Employment Prince George*

Samantha Wurtak

Our Prince George Bridging to Employment participants engage in soft and hard skill educational activities, work placements and certificate training in WHMIS, First Aid, Food Safe, First Host, Serving it Right, and Financial Literacy. The focus of these activities is to ensure that our Bridging students have the skills needed to secure employment, or further their education. We aim to assist our students with establishing meaningful connections to viable employment industries which will increase their confidence as they transition into the working world.

Our Nine-week program is offered three times per year starting in April, September and December in Prince George. Applicants must be 16 years old or older, unemployed, seeking education and/or have personal barriers that prevent them from obtaining further education or employment. The program runs from 9:00 am to 2:30 pm Monday to Friday and is located at 1145 Second Ave. Applications can be obtained by visiting our website at <http://www.csfs.org/files/bridging>.

The main goal of our program is to have our students complete the program as a strong team that can act as a natural healthy support system as they reach

their individual goals, overcome barriers, and stay on a positive life path. We continue to maintain contact with participants after the program is complete to see if they need additional supports, if they are following through with their action plans, and if they are going to school or have found employment. We continue to build a strong network of employers and community service providers that our students can connect with so they remain supported and motivated.

This past year we were pleased to have had Raj from Prince George Driving School facilitate the Graduated Drivers Training to the Bridging Students. Eight students attended the training and wrote their Learners test, thus addressing this potential employment barrier. In total, 28 Students were recognized with a teaching / honouring Bah'lats, and each of the students received training certificates in Food safe, First Aid, WHMIS, Serving It Right, Financial Literacy and First Host.

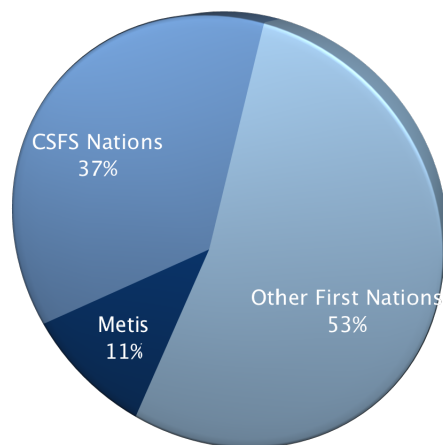
We are excited to have the next Bridging program beginning in Sept 2018. We anticipate to have a strong interest in this program, as we have already received a number of applications. We will continue to work







with the individuals where they are on their career path. For many, our program is the first positive step towards finding meaningful employment and / or life changes (like addressing addictions for example). We have plans to refresh the Bridging Program in the up and coming year, and we will be looking for input from our past participants.



Our Bridging to Employment Prince George program runs a 9 week program in April, Sept, Dec - 5 days a week







Spring Air  
Solutions for Energy Efficiency

RATIONAL

IntelligentCooking

7000

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

100

CAUTION HOT

# *Bridging to Employment Burns Lake*

Diana Batley

The Bridging to Employment program in Burns Lake is available to people 19 years or age or older, who self-identify as Indigenous. The focus of the program is to assist unemployed and underemployed individuals increase their self-awareness with activities leading to self discovery and personal growth. Our program participants are supported to develop and maintain new habits, examine and alter attitudes, and develop the skills needed to become a holistically healthy and fulfilled person, and a reliable skilled employee. We focus on soft and hard skills, with an end goal of supporting program participants to find and maintain employment.

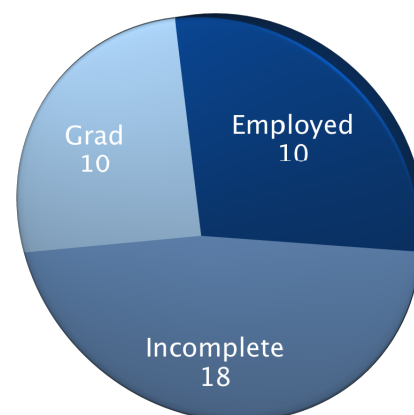
Our ten week program is offered three times per year. The curriculum is filled with customized training based on individual needs, and industry certifications such as; Food Safe, Level 1 First Aid, WHMIS and more. The program concludes with a two week supported work experience placement or with a personalized exploration of post-secondary education. We provide educational programming Monday to Friday, 9:00am to 3:00pm. Applications for the program are available on our website at [www.csfs.org](http://www.csfs.org).

In the fall and winter of 2017/18, we successfully added a weekly community volunteer day within the 10-week program. This proved to be very time consuming but beneficial to the participants and those that were receiving help from the program. Some of our program participants volunteered at The Pines senior home

and others helped elders in the community with snow removal and wood cutting.

In the past year, our goals for program focused on community access and participation. We have established some consistent community partners who support our two-week work experience placements. We have made some meaningful connections with our sponsor employers, who have supported the program by sitting in on mock interviews with our program participants.

The community volunteer program has also been a great success. The participants have consistently expressed great enthusiasm with this portion of the project. Another aspect we added to our program is ensuring visibility of the CSFS Bridging program at the College of New Caledonia First Nations week. We were involved in the fun activities and the lectures provided by CNC and their guest presenters.



Our Bridging to Employment (Burns Lake) program runs a 10 week program, 3 times a year.



# *Community Linkages Program*

Cheryl Thomas

Our Community Linkages program is designed to provide mobile food distribution, support, education, and referrals to Indigenous individuals and families with multiple barriers, including limited access to other community kitchen programs.

The goals of our program are to:

- Support Indigenous individuals and families to improve their health and nutrition
- Collaborate with existing programs in the community
- Improve access for individuals and families to various community services

We primarily offer our services to Indigenous individuals and families; however, no one is turned away. We provide meals at the Active Support Against Poverty (ASAP) shelter in downtown Prince George 4 times per week between 5:30-6:00pm Monday-Thursday. Various canned & dry foods are distributed at the Carney Hill Neighbourhood Centre (CHNC) parking lot between 4:00-4:30pm on Mondays and Wednesdays. Referrals to other programs and services are also provided.

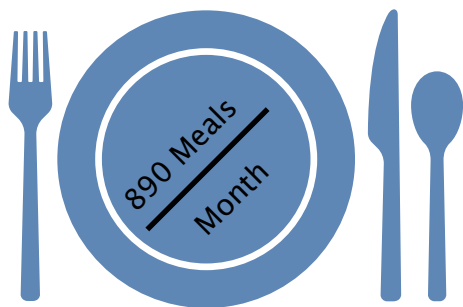
The Program has collaborated with various programs/organizations in the

community including; active Support Against Poverty, Carney Hill Neighbourhood Centre, MSDPR, Prince George Native friendship Centre, Urban Aboriginal Working Group, Prince George Nechako Aboriginal Education and Training Association, Aboriginal Housing Society Prince George, Carrier Sekani Family Services, HIP, the Salvation Army, Prince George Rotary Club, CPAH, and the University of Northern British Columbia.

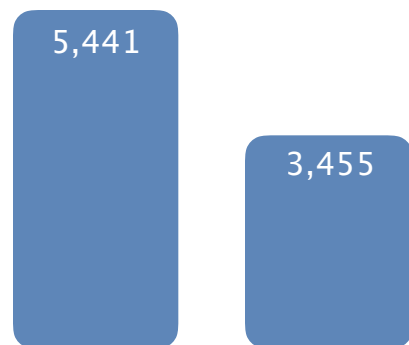
Our main program goal is to continue our service to serve Indigenous individuals and families with multiple barriers, including limited access to other community kitchen programs.

Over the next year we hope to join the Community Linkages Soup Bus program with the CSFS Indigenous Housing First Project (IHFP) as they both provide services to Indigenous people who are homeless or and at-risk of homelessness in Prince George. We believe the programs would work well together well as the Soup Bus can screen possible candidates for the IHFP program, while also providing food service delivery, various transportation needs, and moving furniture for clients.





Meals Delivered



ASAP shelter

Carney Hill Centre







# Family Preservation and Maternal Child Health

Erin Smelly

Our Family Preservation and Maternal Child Health program provides advocacy and support to families to ensure they know their legal rights and process when they are involved with the Ministry of Children and Family Development.

We can:

- Provide referrals to other programs and resources which may be of benefit to meet goals, such as; counselling, treatment, health care needs, legal support, ECE program, etc.
- Provide life skills and parenting education one on one or in groups
- Offer various support groups to help people reach their goals
- Provide pre-natal and early childhood health support and education programs
- Offer information and resources on Ages and Stages child development
- Case manage teams of professionals and other supports to help individuals and families set and achieve goals related to wellbeing of family and child
- Support families to set and achieve goals to address child protection concerns

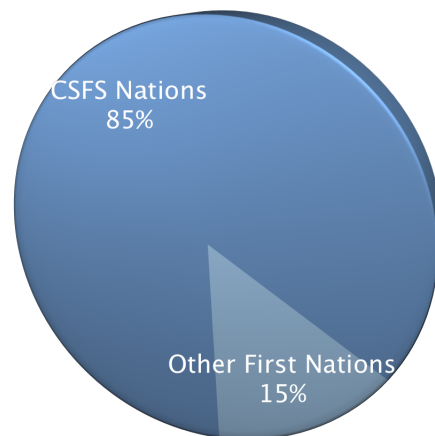
Our services are available in Takla, Yekooche, Saik'uz, Nadleh, Stellat'en, Burns Lake Band, Lake Babine Nation, Wet'suwet'en, and the Southside Nations of Nee Tahi Buhn, Skin Tyee and Cheslatta.

Over the past year, our team has delivered the following workshops and programs to our communities:

- Community Kitchens on a monthly basis

- Kids cooking in the Kitchen
- Car Seat safety and installation workshops
- Food Skill for Families classes
- Domestic Violence workshops
- Protecting our Children
- Keeping kids in Community
- Child Wellness Clinics

This year we were able to team up with Frontier College and Nadleh Community to deliver a 2-week Interactive Literacy Camp, for ages 5-12 yrs. The Camp was held in Nadleh, with 25 kids in attendance each day. This was a pilot project for our area, Nadleh being the first Literacy Camp that Frontier College has offered in this area. With how successful this camp has been this year, we are now looking at expanding to be able to offer this in other communities next summer!



Our Family Preservation team supports 107 families per month with 1-1 and/or various support groups







# *Family Support - Prince George*

Cheryl Thomas

Our Family Support Services are community-based services in Prince George which assist and support children, youth and their parents / caregivers to ensure the safety and well-being of children and families. We currently provide one on one support to approximately 90 families per month. Our CSFS team members facilitate eleven groups per week, which provide educational and support opportunities to children, youth and parents. Our groups include; children's and youth groups, Women's Group, Skills to Success, Toddler Group, Future Leaders, Anger & Stress Management, PEACE (formerly Children Who Witness Abuse), and a variety of parenting groups. Our Family Support program is open to anyone seeking assistance. Referrals for support are accepted from the Ministry of Children and Family Development, other community agencies and self-referrals. All services are provided from Monday to Friday, 8:30am to 4:30pm.

Goals achieved this year include our team offering two sessions of the PEACE program (formerly the Children Who Witness Abuse). This program is an intervention and prevention-based program for children and youth aged 5-18 who have witnessed family violence their homes. We also offered three sessions of Anger & Stress Management training in partnership with BC Housing and Harmony House (Phoenix Transition Home Society PG). Finally, we received our second instalment of \$5000.00 grant funding from First Nations Food Systems (funded by First Nations Health

Authority and administered by the Heart & Stroke Foundation). The second grant will enable our team to complete the 'Three Sisters Lane' community garden at our 835-3<sup>rd</sup> ave location in Prince George.

Our goals for the up and coming year include providing yearlong service for the Community Linkages Program and the Housing First Program by combining the two programs into one. We also plan to enhance the 'Three Sisters Lane' community garden with the second \$5000.00 grant. Our goals for the garden include fostering an appreciation for growing and eating healthy, local food while improving the health, nutrition, exercise and wellness knowledge of the families we support. Finally, we plan to complete a curriculum for our 'Better Boundaries' group, and facilitate four sessions of this group during the next fiscal year. The 'Better Boundaries' group will be offered in partnership with BC Housing and Harmony House (Phoenix Transition Home Society).

**Our Family Support team supports 90 families per month with 1-1 and/or eleven support groups per week**



# *Wrap Around Parent Guidance and Support*

Lisa Hourie

The Wrap Around Parent Guidance and Support (WAPGS) program started in May 2017 and provides one-on-one family support, parenting education and outreach to families with children from 0-6 years old. Referrals are accepted individuals seeking support for themselves, MCFD, and other community professionals. Our program is focused on identifying and building on strengths, in a supportive and structured environment. We facilitate learning in parenting, life skills, communication, anger / stress management, etc.

Our services are provided in a holistic manner, which focuses on the family as a whole but also meets individual needs. We are located at 2025 Victoria Street in Prince George and operate Monday-Friday 8:30am - 4:30pm. Transportation, and snacks and lunch are provided daily, and there is no cost to attend. Since opening our doors, we have had a gradual but steady increase in client intakes, and are now at full capacity with a wait list for referrals.

Over the past year we implemented an incentive program to reinforce regular attendance for our families. We initiated a food Hamper program for our program participants recently and

also started the process to have our program CARF accredited during the next survey in late 2018. We set a goal to have our staff receive Carrier Cultural Competency, Car Seat Training and Crisis Prevention Institute training this year and met these goals. Finally, we applied for and received an Early Learning Years grant to initiate and teach cultural knowledge through activities for our families: the project we will be making drums and learning protocols with the funding.

In the up and coming year we plan to have our staff trained in understanding 'secure attachment' through the Circle of Security program. We will be using the new knowledge and skills to provide our families education and support to enhance healthy attachment and bonding. We also plan to have a staff training session on communication, and incorporate more community elders in our programming.

We provided support to 55 families this year with 1-1 and support and educational group programming.



# *Indigenous Housing First Project*

Cheryl Thomas

The Indigenous Housing First (IHFP) Project works with the Indigenous homeless people of Prince George with the primary target group of young adults and / or youth. Our team will work to identify potential applicants and work to develop individualized goal plans for each participant in conjunction with community resources and landlords. Services will include helping people find appropriate housing, applying for housing allowances, furnishings, housewares, food, skill development and transportation to and from resources. We will accept referrals from outside organizations as well as other CSFS departments. Hours of service are Monday-Friday 8:30am - 4:30pm with possible flexibility on evenings and /or weekends depending on client needs.

This exciting new program has only begun in January, 2018 – since being transitioned from the Prince George Nechako Aboriginal Education and Training Association (PGNAETA). The transition involved training and relationship development with program participants. PGNAETA was very helpful with the transition the program to CSFS and the upcoming year looks exciting.

With the IHFP only 3 months new, the project will continue to work with its current clientele to help them become self-sustainable. We will also accept more youth applications in the upcoming fiscal year. We can assist others who are not categorized as youth with finding housing and resources from time to time, but do not have funding at this time to support anyone other than youth.



\*This is a brand new program, statistical reporting is being collected and will be provided next year.





# Youth Services Program

## Kayla Brownscombe

Our Youth Services program supports youth aged 8-24 years old in Prince George, and our 11 member Nations as they establish strong cultural ties, healthy relationships, and life skills that lead them to bright futures. We provide year-round Walk Tall programming, therapeutic 1:1 services, culture camps, youth conferences, life-skills coaching and advocacy, in-community workshops and mentorship programs. Our Prince George office, located at 1145 2<sup>nd</sup> ave is open during the school year Monday - Friday 8:30am - 8:30 pm, and 8:30am - 4:30pm during the summer. Anyone can refer to Youth Services by accessing the referral form at <https://www.csfs.org/services/youth-services> or by calling Kayla Brownscombe at 250 564 5643.

## Urban Services

We have a specialized Youth Care worker who works one on one with youth to help them develop the confidence and skills to overcome whatever situation they want help to address. Although 1:1 services are available to all youth, priority is given to youth in care of CSFS Guardianship workers.

## Walk Tall & Jr. Walk Tall (Prince George)

Our Walk Tall program provides youth ages 8-18 years old with an opportunity to receive gender specific, after-school and weekend programming which is composed of:

- Cultural Activities: traditional practices, traditional foods, attending

events in our communities, and learning from knowledge holders.

- Recreational Activities: movie nights, bowling, swimming, hiking, arts, crafts, cooking, and fishing.

- Prevention and Education Workshops: topics such as knowing your rights, traditional practices, healthy sexuality, drug and alcohol harm reduction, lateral violence, healthy relationships, etc.

## Youth Leadership and Development

A youth-lead Walk Tall Youth Council encourages youth to be involved in planning activities, fundraisers, and events for the Walk Tall program. Our Youth Council meets once a week, and provides youth accessing services with an opportunity to provide insight and guidance to CSFS Youth Services staff on the development of CSFS Youth Services in Prince George. The CSFS Youth Council members gain valuable experience and learn life skills such as effective communication, project planning, professional development, and collaboration in an experiential learning environment.

## Culture Camps

Culture camps are held each year to teach traditional practices of member Nations within the Carrier Sekani Territory to our youth, for the gender they identify with. The youth and their chaperones are taught to process fish, hunt, and gather berries and traditional medicine plants. Carrier Sekani Family Services reaches out to elders and knowledge holders from our

communities to support in the delivery of the camps, and cultural teachings.

## Elder Youth Mentorship Program

The Saik'uz Elder Youth Mentorship program aimed to provide opportunities for cultural permanency for youth in care through an Elder Youth Mentorship program. Our first year-long pilot program took place in Saik'uz from March 31<sup>st</sup> 2017 - March 31<sup>st</sup> 2018. With the assistance of amazing elder mentors and community members, our Youth Care workers facilitated bi-weekly programming which brought Saik'uz Youth In Care back to their community. Activities such as the Saik'uz Walking Tour, Clan Crests, cooking traditional foods, teaching Bah'lats, and drumming and singing took place in the program. The Youth Services team also hosted monthly youth events in Saik'uz which were open to all youth; activities included snow shoeing, nerf war, movie night, and a Greer Creek Falls hike to name a few.

Our Youth Services team is proud of our many accomplishments in the 2017 year. The Out-spoken In-Care Youth forums hosted in Prince George (November 2017), Burns Lake (February 2017) and Vanderhoof (April 2018) identified youth and former youth-in care (aged 8-26 years old) to register for a CSFS Youth Advisory Council. The new council will guide and inform a proposed new Carrier specific child welfare model. The Indigenous Girls Empowerment conference held March 26-29<sup>th</sup>/2018 in Prince George focused on building self-esteem and empowering young indigenous girls ages 10-14 years old. In September 2017 our Youth gathered food through a series of food drives supported by

CSFS Staff, community members, and other local agencies to create a barrier free Food Bank for youth. We look forward to growing our Youth Food Bank and offering cooking lessons and recipes for the food provided in the food bank.

In 2018/2019 Our Youth Services Team is looking forward to implementing our Elder Youth Mentorship Program in another one of our eleven member nations, hosting a Warrior conference for young men, establishing our Youth Advisory Councils in Prince George, Burns Lake and Vanderhoof, and expanding our Walk Tall programming to Burns Lake, and Vanderhoof.

Nation	In Care	Attending
Lake Babine Nation	10	15
Saik'uz First Nation	4	6
Takla First Nation	3	8
Stellako Nation	1	3
Yekoochee Nation	3	4
Nadleh Whuten	1	1
Nee-Tahi Bun	1	1
Other Nation(s)	11	48
N/A	1	18
Total	35	104







# *Guardianship of Children in Care*

Sonya Rowland

Carrier Sekani Family Services provides Guardianship care to children, aged 0-18 years who are in the Continuing Custody of the Director of Child Welfare from our 11 Member First Nations. There are three Guardianship teams; one team in each of our offices - Prince George, Vanderhoof and Burns Lake. The Guardianship teams work with both the communities and families to provide permanency for children in care. Our Guardianship team members enjoy attending family and cultural events with children and youth in their home Communities. CSFS is able to work with young adults, to support them in reaching their goals after they have aged out of care. Our staff can also provide services to families who reside in our member communities and require additional support, such as referrals to daycare subsidy, or counselling.

Our social workers and team leaders from Vanderhoof and Burns Lake participated in the Community Engagement Meetings during the past year which focused on gathering input on Carrier specific practices pertaining to child welfare. We also assisted with the youth Forums in Prince George, Vanderhoof and Burns Lake. Many of our Children in Care have had positive experiences this year, including 4 of our youth who graduated from high-school, and two who attended the College of New Caledonia in Prince George. In addition, four of our youth obtained their Learners drivers licenses, two are attending driver's training, and many attended Youth Forums and Conferences. Many of our children/youth in care returned to their

communities throughout the year for visits with family, culture to attend camps, and other community events.

In Prince George the Guardianship & Resource teams worked together with a family and the community of Saik'uz to return a sibling group of 3 to their maternal aunt. In Nadleh Whut'en, a child was returned to live with his mom, and there is currently a court proceeding to rescind the Continuing Custody Order. We are also working on a plan to return another child to her father's care in Saik'uz.

CSFS Guardianship Social Workers continue to work closely with families, and communities to keep children and youth connected to their communities and cultures. A strong connection to both their family and culture is paramount to building a strong sense of identity, and will help our future generations to be strong leaders of their communities and Nations.

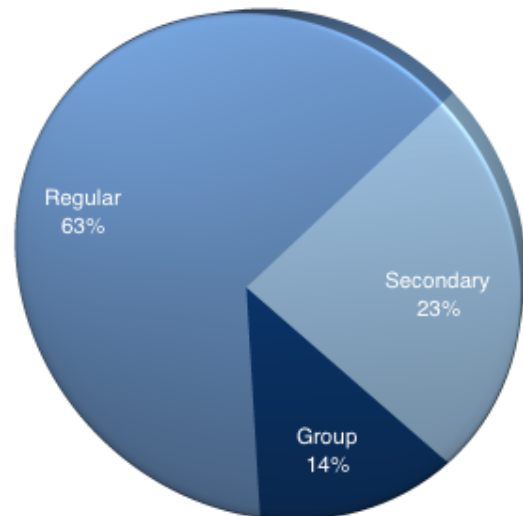
CSFS is working to take over guardianship care of children from our 11-member Nations, who are currently in Temporary Custody with MCFD. This will support connections between children and their families, culture and communities much sooner than if they remain in care with the Ministry for Children and Family Development.

Guardianship Social Workers work closely with our Youth in Care and their care providers to promote education, positive lifestyle choices, and health and wellness so they will have greater opportunity to achieve success in their adult lives.



Band	# CiCs
LBN	39
Takla	6
Nadleh	7
Saik'uz	11
Burns Lake	1
Cheslatta	3
Wet'suwet'en	1
NTB	1
Yekooche	5
Skin Tyee	1
Unregistered	1
Other Nations	2
<b>Total</b>	<b>78</b>

Children in Care from each Nation



Types of Fostering Resources





# *Foster Parent Resources*

## Sonya Rowland

Our Resources program works predominantly with foster parents in Prince George, Vanderhoof and Burns Lake. We continually work to recruit and explore foster home options in our 11 CSFS Nation Communities. In Prince George, we have over 60 foster parents who provide family homes and we also have seven group homes. In Vanderhoof and Burns Lake we have 22 foster homes and one group home. Our foster homes provide care for children in care of Carrier Sekani Family Services, Nezul Be Hunuyeh Child and Family Services Society, and the Ministry of Children and Family Development. We are always looking to recruit people who are interested in fostering, particularly in our First Nation member Communities.

Our office hours are Monday - Friday 8:30 - 4:30 We are able to work outside of these office hours to accommodate families and services as necessary.

Our Resource Recruitment and Retention worker, Vivianne Vanderpool, has been working with our 11 CSFS Nation Communities to identify people who might be interested in fostering. This work is given priority, in the hopes that if children are removed from their family, there will be a home in their own community where they can be placed. Our home studies are prioritized for applicants who are of Indigenous ancestry and live in one of the 11 Carrier Sekani Family Services member Nations.

We have over 20 families working through the home study process to

become foster parents in urban and rural locations including Prince George, Yekooche, Takla, and Lake Babine Nation (Tachet and Woyenne). We offer fostering information workshops to the Communities we serve.

In partnership with the Family Preservation program, our Resources team co-facilitated a "Keeping Kids in Community" workshop in Nadleah in July 2018. Resource staff also attended summer Community events including the Cheslatta camp and Skin Tyee health fair.

The Resource team focuses on finding and supporting wonderful people to open their hearts and homes to children who are brought into foster care. The caregiver goes through rigorous training and a home study, in order to attain skills and ensure foster parent standards are met. Once a caregiver meets our standards, we support and work with them to provide stability, culture and connection for children in their homes.

One of our main goals over the next year is to increase cultural capacity in foster homes, so that children, who are not residing in Community or with family, have daily access to their culture. We continue to assist our caregivers in attending and connecting with Communities of the children they care for. If you have ideas on how we can improve, or can assist facilitation of capacity building, please give us a call at any of our CSFS locations!



# *Executive Director of Primary Care, Research and Strategic Services*

Travis Holyk

It is great to be back on the Southside in order to present at this year's AGA. Key areas of focus for the program this past year include preparing for our accreditation survey, health research initiatives, Burns Lake Primary Care Business case, improved data management and sharing, integrated service delivery, and the development of a Prince George primary care clinic.

## **Primary Care**

CSFS has a compliment of eight physicians providing care to our member First Nations, with various amounts of time provided to CSFS primary care. We hope to add two additional physicians starting in the fall. While our total physician clinic visits declined by 248 visits from last year, Telehealth (+199) and phone visits (+200) increased. We continue to have specialist services visiting community as well as physiotherapy and medication reviews by a pharmacist.

CSFS continues to be a leader in the area of virtual care, which is now being recognized around the world as critical to improving access to rural and remote communities where service is

not always available. As society changes so does communication and cell phones, text messaging, email, and videoconferencing are becoming the norm. With the structure of our model, a physician is available to community Monday to Friday during CSFS business hours. In remote communities such as Takla, a physician is available on call after hours as well.

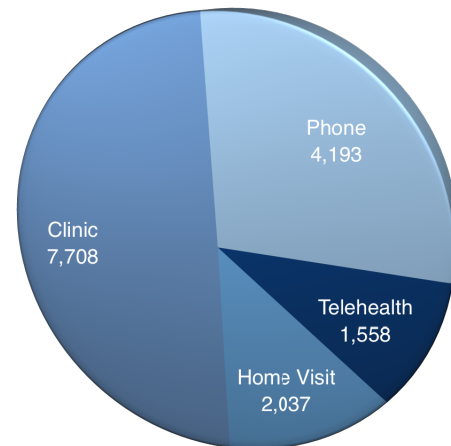
An evaluation of physiotherapy, completed by UBC Department of Physical Therapy MPT students indicated that in the four communities where we are currently providing physiotherapy services, there were a higher number of users than national averages. However, despite higher averages, the majority of patients only attended PT once. Based on the evaluation, we are looking at ways to increase and improve physiotherapy services.

In order to better serve communities, Carrier Sekani Family Services is also pleased to announce the opening of the new Primary Care Clinic located in Prince George.



Sherry Sherba, a Family Nurse Practitioner (NP), will be providing a wide range of direct health care services for under-served populations living in Prince George who are without a primary care provider. The PG Primary Care Clinic will also provide continuity of care, following our team approach to care, for CSFS community members who live in community and must travel to PG. Through the use of our electronic medical record, information can now be shared seamlessly between PG and our communities so if a community member is in PG they can stop by this clinic and their health information from community can be accessed.

The focus of the primary care team in the upcoming year will be to prepare for a successful accreditation survey, enhance primary care in Burn Lake and Prince George, continue with research projects implemented, improve electronic medical record data and institute quality improvement projects.



Types of Primary Health Care visits in the past year

Health Visits (2017-18)	Clinic	Note/phone	Telehealth	Home Visit
Physicians	3471	1878	1568	87
Nurses	4083	2315	0	633
Home Care				1317
Physio	154			





## Research

CSFS was very successful in applying to the Canadian Institutes of Health Research this year. According to CIHR statistics the overall success rate when applying for a grant is 15%. CSFS, in partnership with UNBC and UBC, applied for 4 grants and was successful on all 4 attempts! The grants will focus on women's health, suicide, spirituality and health, exercise and lung health.

### Women's Health

This study aims to increase access and coverage of cervical cancer screening in under-screened rural and urban Indigenous women living in northern BC. Barriers to screening include personal fears/beliefs, geographic isolation, challenges with health system, and mistrust of healthcare system. To improve access/coverage in under-screened Indigenous women living in Northern BC, the investigators plan to build a novel service for HPV self-collection and screening, where women can do the test themselves. At-home screening involves easily collecting one's own sample for cervical cancer screening that is then tested for human papillomavirus (HPV), which is the known cause of cervical cancer. The process of self-collection is used in other places around the world but is not standard of care in BC. In this study, we want to see if offering at-home screening is a good way to get women to screen who otherwise would not.

Cervical cancer can be prevented through regular screening, early detection and treatment. This screening test, like any screening test, does not prevent cervical cancer but it can detect if a person is at increased risk of

cervical cancer and detect early changes that could lead to cancer.

Meetings have taken place with women in a number of CSFS communities in order to gain their input into the project.

### Suicide Research

The Strength Within project builds on the youth suicide research previously completed by revising the Nges syi manual, to make it more appropriate to an older (25-45) population.

The Strength Within Suicide Manual has been approved by our Community Advisory Committee and we continue to provide workshops in community.

As one of the recommendations of the Advisory Committee, we have been working on short videos to accompany the training manual focusing on Carrier people addressing the Carrier values that are part of the training. These can then be used by the facilitators to highlight specific areas of the training.

### Lung Health

The objective of this study is to estimate how many people within CSFS communities have Chronic Obstructive Pulmonary Disease (COPD). COPD is a lung disease that includes chronic bronchitis and emphysema. This will be done by completing lung function tests in community. Typically, people must receive a referral and leave the community in order to have their lungs tested. We believe this has resulted in an underreporting of COPD based on symptoms reported through work with communities.



Based on direction from our advisory committee, we are also looking at the relationship between inhaled pollutants and symptoms. This is done by testing air quality, carbon monoxide and dioxide and fine particulate, and visual inspection of problems associated with mold in homes and community buildings of those who agree to participate.

To date, 43 spirometry tests were completed in the communities of Saik'uz and Nadleh. In addition, 41 Participants completed a health questionnaire, answering questions about their health (specifically lung health), any health symptoms they might have, and any risk factors in their life such as home air quality, health conditions and diseases. With participant consent, spirometry and

health information is provided to primary care for inclusion in the person's medical record. As another component of the study, 16 houses and community buildings were tested for carbon dioxide, monoxide and fine particulate as well as visual inspection for problems associated with mold.

### Exercise

The overall goal of the exercise project is to develop and evaluate a pulmonary rehabilitation program for members of the 11 First Nations served by CSFS. The first part of this project is to gain a better understanding of the physical activity of people in our communities and how these activities impact physical, mental and spiritual health, including challenges to participation in









physical activities. We will use that information to develop and evaluate education materials. Finally, we will examine the feasibility of implementing a pulmonary rehab program that is reflective of the CSFS communities.

A meeting took place with the CSFS Research Advisory Committee on June 7, 2018 to discuss the project and get community feedback as to how we could best carry out this project. Some of the items discussed included an overview of chronic lung disease, understanding of physical activity in different communities and possible methods of measuring activity such as taking pictures of physical activity and then discussing why the activity is important, use of Fitbits, Actigraph (measures steps, how fast, how often—more detailed), and/or GPS monitoring devices.

## Spiritual Health

The purpose of this research is to build a holistic approach to wellness by focusing attention on the importance of spirit. The project has consisted of a number of community meetings with knowledge holders determined by the community, designed to gather knowledge about the role of spirit in healing and determine interventions for bringing the spirit back to community.

At the Nadleh health fair, individuals provided us with their definition of a healthy spirit filled community and this, as well as instruction from the advisory committee, has been guiding the work we do and the manner in which we will determine if it was successful.

In partnership with our advisory committee, Nadleh is providing a number of activities such as collecting firewood for Elders, kayaking, culture camp, all of which include ceremony to start as land-based approaches to wellness and spirit.



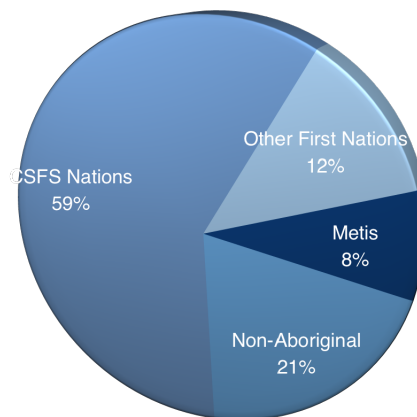
# *Family Justice Program*

Pauline Gregg

The Carrier Sekani Family Services Family Justice Department offers specialized facilitation for families in crisis or needing extra support to resolve a dispute. This program is based on research conducted around Carrier decision-making practices to ensure that families receive culturally relevant support to address their needs. A variety of voluntary services are available and include the following: Family Group Conferences (Carrier Family Decision Making Meetings), Youth Transition Conferences, Family Case Planning Conferences, Prevention Meetings, Permanency Planning Meetings and Comprehensive Plans of Care. Please contact, our Collaborative Practices Lead or any of our skilled facilitators toll free at 1 800 889 6855 or by emailing [familyjustice@csfs.org](mailto:familyjustice@csfs.org)

Our plan for the upcoming fiscal year is to increase referrals from our member Nations by increasing awareness about the benefits of utilizing our services. We will do this by visiting and sharing information with key community members involved in child welfare matters within each community. We would also like to enhance our service delivery to include more traditional Carrier ways that can be appropriately implemented into our

meeting processes. We will ask families who have been referred to us about ways they would like traditional ways to be included.



Our Family Justice program staff facilitated 147 family meetings in the past year



# *Intensive Family Preservation Program*

Fiona Demers

The Intensive Family Preservation Services (IFPS) program delivers an in-home counselling and crisis intervention program aimed at preventing the unnecessary out of home placement of children. Our program serves families in Prince George whose children are at imminent risk of having children placed in the care of the Ministry of Children and Family Services. Our services typically last 28 days during which a clinical counsellor spends 8-10 hours per week with the family and is available to the family for support 24 hours per day, 7 days a week. We receive all of our referrals through the Ministry of Children and Family Development.

The responsive and flexible nature of the program has allowed us to successfully support 26 families from April 2017 to March 2018 resulting in 55 children remaining with their parents at the conclusion of our services and 11 children who remained with their parents after the early conclusion of the intervention.

The Intensive Family Preservation Program has become a flagship of what CSFS can accomplish with the capacity it has as an organization. Beginning in 2011, CSFS worked with our communities to devise an approach to child welfare practices that is rooted in traditional values and focus on the

contemporary needs of communities. 13 communities from our 11 member nations participated in the engagement process with a total of 26 focus groups were conducted. Focus group participants included 139 Knowledge Holders and 59 Youth.

Major themes based feedback from communities included:

- Implement culturally relevant services
- Utilize a prevention first approach
- Immediately reduce the number of Aboriginal children in care.

After extensive literature reviews to explore programs aimed at reducing the number of children entering care, CSFS implemented the Intensive Family Preservation Services (IFPS) program, based on the Homebuilders model. Since its inception, 165 children who were at immediate risk of coming into care, have remained with their parents or family. This program is an excellent example of best practices in child welfare.

Since our programs inception, 165 children who were at immediate risk of coming into care have remained with their parents or family, while only 21 have been removed and another 9 were placed with family (an 89% success rate overall).







# *Executive Director of Health*

Mabel Louie

Greetings and thank you for allowing us to do our business on your homelands despite having the forest fires ravish through your communities.

The Health programs are mainly funded by FNHA on behalf of Takla First Nation, Yekooche First Nation, Saik'uz First Nation, Nadleh Whut'en, Stellaquo First Nation, Burns Lake Band, Wet'suwet'en First Nation, Skin Tyee First Nation, Nee Tahi Buhn First Nation, and Cheslatta Carrier Nation. The programs consist of the Band Health Contracts, Early Childhood Development, Health and Wellness programs, on and off Reserve patient travel for the above communities and the Patient Liaison at the Prince George hospital. We also have the Mobile Diabetes program which is a Northern program that provides service to the whole North. MCFD funds the majority of our Early years programming and the Child and Youth contracts. I have also been overseeing the development of our Child Advocacy Centre which will provide much needed service for our Northern Children and families.

Past Goals and Achievements for the year ending March 31, 2018

The wages and benefits for all Health staff have been updated to compete with industry standards.

Five communities participated in Community Safety planning starting in mid 2015. To date 2 of the 5 have completed their safety priority setting. Each program including Band Health programs participated in planning sessions to assist with charting out program priorities. Last year we began

developing a community driven Opiate strategy. This was meant to build on what FNHA and the Province are developing. This work is ongoing. After years of requesting enhanced funding for our Health and Wellness programs we got the green light for enhancement funding in February 2018. This will mean that the Health Transfer funding will no longer have to pay for additional mental health FTE's. This funding can then be used for other priorities. We continue to wait for the funding to flow.

In addition, we have been in discussion with MCFD to add 2 FTE's for the Burns Lake Child and Youth Wellness program area. We have also had positive response to our request to build a new Treatment centre and next stage would be visiting a Treatment facility and then begin designing stage.

Work continues on the Recovery Home proposal development. Two of our clinicians began their masters in complex trauma and child sexual abuse program in the lower mainland. They will be completed their 18-month studies in November.

CSFS in partnership with FNHA and PGNEATA sponsored a Chemical Addiction program in Burns Lake. A total of 20 students began the program, 14 remained for most of the duration and so far, 8 have completed their necessary requirements. Graduation for the program will take place on October 29th, in PG. We have also provided bursaries to the Early childhood education students that are currently studying in Saik'uz. We also



have received approval to build Professional accommodations in Yekooche. This was on the previous Chief Allen's wish list for a few years. FNHA is currently working on the design for the accommodations. Goals for the upcoming year: We would like to build on the work that FNHA began concerning Lateral Kindness. We hope to have workshops for health centre and band staff and utilizing the Healing the Healers and men's groups leading the way for communities.

We have been approved to build a Head start for 24 seats. The renovations will be taking place at the old St. Joseph's school in Vanderhoof. There will be 8 infant/toddler and 16 3-5-year-old spaces. We have been allocated two training spots for people who would be interested in taking their ECE online. Our goal is to continue to seek resources to hire a therapist that works

with children in the early years as well as art and play therapy support. We continue to advocate for more resources to hire an additional Patient Liaison Worker for the Prince George hospital as well as a position for the Vanderhoof and Fort St. James hospitals. One of the areas that I will be working with communities is discussions regarding health coordination at community level. To date Saik'uz and Takla and Yekooche have a system in place.

We continue to encourage and support capacity building initiatives for communities as well as provide two students per year with \$2,500.00 bursaries per year of full-time course load program studies completed. These bursaries provide an incentive to students that come from our health transferred member nations that choose a health-related career field of studies.

Takla	Saik'uz	Nadleh	Stellat'en
Nathan Teegee, Primary Care Physician	Melanie LeBatch, Registered Nurse	Alicia Heathcliff, Registered Nurse	Carissa Duncan, Licenced Practical Nurse
Rhiannon Teegee, Bachelor of Psychology	Esame Rothfusz, Registered Nurse		
	Nicole Thomas, Lab Technician		
	Kirsty West, Bachelor of Psychology		



# *Best Beginnings Outreach Program*

Dawne Persson

The Best Beginnings program (BBOP) provides Occupational Therapy, Speech-Language Pathology, and Rehabilitation assistant support for children 0-6 years of age in the communities of Takla, Yekooche, Saik'uz, Nadleh Whut'en, Stellat'en, Fort Babine, and the Woyenne Kindergarten.

The program provides meaningful information and services for children and their families to promote healthy development. We offer one-to-one services at daycare facilities and home visits, provide professional assessments and referrals, facilitate parent education and support programs, and assist families to plan

activities that will encourage optimum development for their children. Any family or care provider can refer to the BBOP program. Our referral form can be obtained at the CSFS Vanderhoof office.

We set a goal last year to attain additional funding to help us provide more parenting courses and additional therapy resources. We were successful in getting a couple of small grants which have helped increase some of our resources for families. Our main goal for the up and coming year is to provide more group programming in the daycares and communities.

Community	Number of Clients	Number of Group Programs provided to community
Saik'uz First Nation	20	3
Nadleh Whut'en First Nation	5	9
Stellat'en First Nation	11	3
Takla Lake First Nation	12	5
Yekooche First Nation	16	3
Woyenne Kindergarten	8	7
Fort Babine Nation	6	0





# Vanderhoof Youth Centre

Dawne Persson

The Vanderhoof Youth Centre is dedicated to promoting and advancing the health and well-being of its citizens and communities in a dignified, respectful, and culturally appropriate manner. We are located on 183 1st Street, and are open on Tuesday, Wednesday, and Thursday for drop-in from 3:00 pm - 6:00 pm.

The goal of the Vanderhoof Youth Centre is to provide a safe and inclusive environment for everyone who enters the Centre. All Youth between the ages of 12 - 19 are welcome, regardless of culture, gender, and social class.

In our first year of programming, the Vanderhoof Youth Centre has been offering a variety of programming such as teen yoga, Food Safe Level 1, open mic night, art time, storytelling, "Living Life to the Fullest " training and movie nights. We would like to obtain additional funding to offer more programming and extend our hours to provide services five days a week.

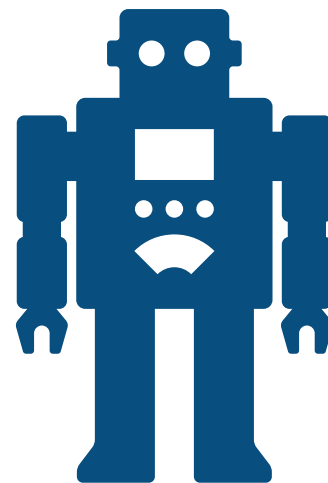
## 53 Youth Total

34 Male

17 Female

2 Transgendered

\*This is a brand new program! We are collecting statistical data, and a full year report will be provided next year.







# *Aboriginal Supported Child Development*

Dawne Persson

The Aboriginal Supported Child Development program currently provides service to Saik'uz, Nadleh, Stellat'en, Yekooche, Takla, Burns Lake Band, and Lake Babine Nation. We also provide services to Vanderhoof & Fraser Lake for families that are living off-reserve.

The program is designed to support children 0-18 years of age and their families with additional needs or developmental concerns. We help children who require extra supports to be included in their community programs. Our program also offers home visiting, parenting programming and help to connect families with appropriate resources.

Any family or care provider who has concerns that a child may have a developmental delay in any domain may refer children to the program. Our referral form can be obtained through the CSFS Vanderhoof office.

Program Goals:

- To have more interest from community members for taking the ECE trainings. We had a small portion of community members in the area pursue the ECE training in some of the communities
- To increase education for our support workers that are currently working in the daycares by having them start their ECCL courses to work towards their ECE certificates.
- Increase the delivery of the partnership training for the daycare staff in the communities; this includes

FASD training and Behavioural management.

We have been approved to build a Head start for 24 spaces. There will be 8 infant/toddler and 16 3-5-year-old spaces available. The renovations will be taking place at the old St. Joseph's school in Vanderhoof. We have been allocated two training spots for people who would be interested in taking their ECE online. Our goal is to continue to seek resources to hire a therapist that works with children in the early years as well as art and play therapy support.

One of the areas that I will be working with communities is discussions regarding health coordination at community level. To date Saik'uz and Takla and Yekooche have a system in place.

Other goals for the up and coming year include increasing education for our support workers that are currently working in the daycares by having them start their ECCL courses to work towards their ECE certificates. We further plan to Increase the delivery of the partnership training for the daycare staff in the communities; this includes FASD training and Behavioural management.

Community	#of Clients	# of community group programming provided
Lake Babine Nation (Woyenne Daycare)	4	6
Burns Lake Band (Little Angels Daycare)	3	7
Vanderhoof	5	5
Fraser Lake	4	2
Saik'uz First Nation Headstart	6	5
Stellat'en First Nation Headstart	5	3
Nadleh Whut'en Headstart	3	5





## *Canadian PreNatal Nutrition Program*

Dawne Persson

Our CSFS Canadian Prenatal Nutrition Program (CPNP) provides services to families living in the Vanderhoof area. We provide supports to families who are expecting or have babies who are less than 7 months of age. Nutritional support, prenatal vitamins, breast feeding education, prenatal and postnatal resources, and information and referrals to other agencies is provided by our team. We provide our services through home visits, drop in sessions, craft and cooking circles, and one on one support. Referrals to our program can be made by public health nurses, physicians, community service

providers, legal guardians, or by anyone who wishes to receive our

services. A goal we have had over the past year is to expand the program to more communities and have the opportunity to hire more staff to provide additional support to families. We were unable to achieve this goal due to a lack of funding, however we have been collaborating with other programs to fill in gaps for services. In the up and coming year hope to provide more group educational opportunities for families such as prenatal classes and breastfeeding support.

## *Children's Oral Health Initiative*

Dawne Persson

Our Children's Oral Health Initiative (COHI) Program is an early childhood tooth decay prevention program for children aged 0-7 and their parents and caregivers in Stellat'en and Nadleh Whut'en. COHI services include annual screening, fluoride varnish applications, sealant application and temporary fillings.

A dental therapist or dental hygienist and a COHI aide delivers the program. The COHI aide supports the dental professional and act as an essential link between the dental professional and the community. The services provided by COHI aides include: obtaining authorization from families to enrol children in the program, applying fluoride varnish, giving one-on-one oral health education to

children and adults, and improving overall community health.

A goal for last year was to be able to provide more educational sessions for families and to the children in the program. We wanted to do at least 4 presentations in both communities throughout the year. We are pleased to report that our COHI program was able to provide 5 presentations to the communities throughout the past year. In the up and coming year, we would like to provide educational sessions to families in a variety of different

Stellat'en First Nation	(0-4's) 15 enrolled (5-7's) 34 enrolled
Nadleh Whut'en First Nation	(0-4's) 19 enrolled (5-7's) 15 enrolled





# Early Years Centre, Vanderhoof

Dawne Persson

Our Early Years Centre (EYC) in Vanderhoof provides early childhood services and supports for children aged 0-6 and their families from the Vanderhoof area and Saik'uz First Nation. We also have up to date information on child care spaces in Vanderhoof and other Early Years programming and events offered in the community. Information and resources are available at our Vanderhoof office located at 240 West Stewart Street. Some of the programming we offer includes: a toy lending library, preschool, summer programming, and other drop in programs. We are open for drop in's Monday - Friday 8:30am - 4:30pm. Some of our programs require pre-registration.

One of our goals for the past year was to secure a building for a permanent location for our Early Years Preschool.

The building we currently occupy was sold in April 2018. We have been successful in attaining a new location, at the Gospel Chapel in Vanderhoof. To increase our communications with the local schools, we have set a new goal to be able to attain more information from local schools regarding gaps and needs for families that are coming into Kindergarten. The EYC plans to take this information and help local childcare centres and programs for young children address the concerns through developing different program opportunities.

Programs Provided:	Average # Attendees
Toy Lending Library	10 adults, 12 children
Preschool	32
Group sessions in Saik'uz Headstart	16
Nature Exploration Camp	20





Photo Courtesy of Lakes District News

## *Early Years Centre, Burns Lake*

Dawne Persson

The Burns Lake Early Years Centre provides services to the community of Burns Lake, Lake Babine Nation, Burns Lake Band, and surrounding areas. We offer services for both Indigenous and non-Indigenous families and information on events and programming in the community. Some of the programs we currently have running are the toy lending library, an art and craft group, and the Words on Wheels (WOW) mobile learning bus. Families can stop in to the centre Mondays, Tuesdays or Thursdays from 8:30am - 3:30pm at the Muriel Mould Learning Centre Building.

We set a goal last year to have additional programming running in the community for children and families. We also hoped to continue

collaboration with other ECE programs in the community to strengthen our existing programs. Our centre was successful in collaborating with other agencies to contribute to programs so we can provide additional programming for families. We have also been connecting with other local programs to ensure we are pooling resources to better provide programming. Our goal for 2018 is to increase our outreach services throughout the year to ensure we are reaching all potential program participants in the area.

Programs Provided:	Average # Attendees
Toy Lending Library	28 families
Art and Craft Group	15
WOW bus summer	20
Spring Break	22



# First Nations Health Benefits Program

Lorna Paul

The First Nations Health Benefits (FNHB) program serves the following First Nations: Burns Lake Band, Skin Tyee Band, Cheslatta Carrier Nation, Nee Tahi Buhn, Wet'suwet'en First Nation, Saik'uz First Nation, Stellat'en First Nation, Nadleh Whut'en, Takla First Nation and Yekooche First Nation. Any members from these Nations who live in British Columbia are eligible for assistance. Our office is located at the Carrier Sekani Family Services Office in Vanderhoof. We accept calls from 9:30am to 12:00pm, and from 2:00pm-4:30pm Monday to Friday. Eligibility for service is based on a referral being provided to the closest available specialist, and the appointment must be covered by the British Columbia Medical Services Plan.

As of April 1st, 2018, the catchment area for our FNHB program has been downsized to include only our 10-member health transferred Nations, for individual and families living on and off reserve. All other enquires are redirected to the First Nations Health Authority Regional FNHB office. Our program has continued to encourage direct deposit payments, and going as paperless as possible by using an electronic filing system.

One of the goals for the FNHB program is to utilize the Northern Health Connections, BC Bus and the local transit, whenever possible. Effective Oct 1, 2018 CSFS will no longer have an account with Greyhound. We have a yearly goal it to visit each CSFS Member community and attend their local Health Fairs to provide public education on the policies laid out by

our funders, which our program must follow.

The program will be also be encouraging the use of Telehealth equipment for Doctors visits and Specialists visits when possible.

First Nation	# persons served
Burns Lake	15
Cheslatta	24
Nadleh	129
Nee Tahi Buhn	146
Saikuz	128
Skin Tyee	248
Stellaten	85
Takla	889
WFN	35
Yecooche	466

We provide access to transportation to access medical services to our 10 Nations with Health Transfer Agreements





# *Aboriginal Patient Liaison Program*

Charlotte Alfred

The Aboriginal Patient Liaison Program offers services to ensure First People who are utilizing services at the University Hospital of Northern BC have support to have their cultural needs met. We work with the Chief Social Worker with the Northern Health Authority to ensure that technical support was provided as needed, while our staff ensured that services were offered within our contract parameters and policies. We have had a staff change in our program with a former Patient Liaison Worker returning to the program in September 2018. Our main focus for the program is to add more support workers for the program, as the needs for support from this position are heavy.

This year our former Liaison Worker participated in the Aboriginal Patient Liaison Worker gathering in Prince George. The gathering offered a great opportunity for Tania to meet other colleagues and note the similarities and differences between the services offered by NHA Navigators and CSFS Aboriginal Patient Liaison Worker. Goals for this year include continuing to have UNBC practicum students join our program. We also hope to develop a summer student position this year

with the support of the First Nations Health Authority. I will also continue working with Northern Health Authority to advocate for increased support services to the APLW program in Prince George, and also extend CSFS Aboriginal Patient Liaison services at the Vanderhoof Hospital. This has been an ongoing discussion and we hope to come to a funding agreement with the Northern Health Authority. Having one worker at the Prince George Regional Hospital to offer services to all First Nations communities is not sufficient.

Over the past year, we have provided support to 628 clients who live on reserve, and 530 who live off reserve



# *Special Projects - Health*

Charlotte Alfred

Reporting to the Executive Director of Health Services, our Special Projects Manager for the Health Programs oversees the community Aboriginal Patient Liaison program, health service agreements, health grants, reports, proposals, schedules quarterly Community Health Representative meetings, health manger meetings and health staff meetings.

One of the projects I have been working on with contracted CSFS worker Tracey Michell is to develop a Child and Youth Advocacy Centre for the Prince George region. Tracy has been developing partnerships with surrounding organizations in Prince

George to offer wrap around services to children who have been sexually abused.

Goals for the up and coming year include assisting the community health staff in any areas required to ensure quality services to the community members are on-going, and ensuring that reports are gathered as needed.

The health transfer agreements were signed in a timely manner this year to avoid rushing in later months to get everything signed. We plan to continue getting all the agreements signed in a timely fashion.

Community	Number of Clients	Number of Group Programs provided to community
Saik'uz First Nation	20	3
Nadleh Whut'en First Nation	5	9
Stellat'en First Nation	11	3
Takla Lake First Nation	12	5
Yekooche First Nation	16	3
Woyenne Kindergarten	8	7
Fort Babine Nation	6	0





# *National Native Alcohol and Drug Abuse Program*

Randall Brazzoni

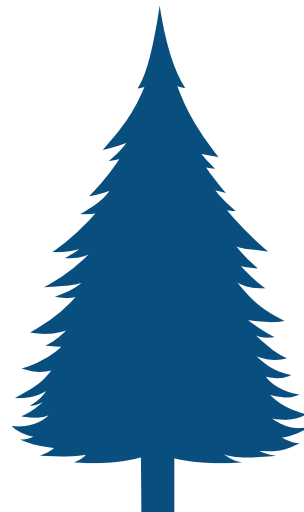
CSFS provides mentorship to the National Native Alcohol and Drug Abuse Program (NNADAP) workers in our member Nation communities. We support the NNADAP workers in establishing and delivering culturally relevant, community-based programs aimed at reducing substance misuse. The role of the CSFS Addictions Liaison is to provide the NNADAP workers in the community with more support, mentoring, and additional training to support their success in helping their communities.

As part of our capacity building efforts, over the past year CSFS has been sponsoring the Nicola Valley Institute of Technology's Chemical Addiction Worker Certificate program in Burns Lake. The cohort, consisting of representation from each of our Nations, is scheduled to complete the one-year program in July 2019. We are anticipating that 14 students will graduate! Graduation celebrations will take place in Prince George on October 29<sup>th</sup>, 2018. We are thankful for funding from the First Nations Health Authority and the Prince George Nechako Aboriginal Employment and Training Association to make this possible.

Each of the NNADAP workers were offered computer training in order to be more proficient in their monthly reports, and assist with homework if necessary. Computer training also serves to prepare the NNADAP workers for the eventual electronic charting they will have to do as we transition

files from a paper based system to an electronic system.

Our Addictions Liaison worker followed up on last year's NNADAP teams strategic plan to work on an addiction's treatment aftercare strategy. We implemented a detailed review process which required all NNADAP workers to produce a yearly work plan and also created an after-care resource tool kit. This multi-faceted approach was designed to effectively evaluate each worker's performance over the previous year, and create a forum to encourage essential dialogue with their supervisors and plan for / support individual training needs. Over the past year our CSFS Addiction Liaison worker also assisted all NNADAP workers who held planned events during NNADAP week in collaboration with other health colleagues.





JOHN DEERE

I ❤️ SMOLTS



# Mobile Diabetes Telemedicine Clinic

Matthew Summerskill

Across the Northern region, the Mobile Diabetes Clinic continues to deliver diabetes clinics that our clients and communities value. We provide education, assessments, and support to First Nations living with diabetes. On site lab testing allows for near immediate results and education onsite; thus, preventing what would otherwise be 3 appointments. During a clinic, education may be provided in the form of understanding challenges related to living with diabetes, and identifying problems that could arise in relation to diabetes. Clients are given a copy of their results, what they mean, and agreed upon goals to work towards.

The MDTC is run by nurses with specialist training in diabetes who meet one-to-one with clients in approximately 55 communities across Northern BC. The service is dependent on partnerships with host communities, and especially, the work of Community Health Representatives (CHR's) to determine suitable times, community interests, and partner in education, screening, and follow-up. CHRs, nurses, or people with diabetes can contact the MDTC directly to arrange an in-person or community visit.

We have achieved the following goals over the past year:

- Helped many people attain a better health status (\*priority goal\*)
- Increased inter-professional partnerships (i.e., traditional healers and estheticians) for more holistic health care
- FNHA support for second retinal camera, and lab equipment for program expansion
- Recruited 2 additional diabetes nurses
- Developed further eye-catching engagement tools for health fairs
- More intensive follow-up conducted with clients

Increasing access to holistic diabetes health services remains a leading priority moving forward; access to screening, education, and to people who can help. We will continue to advocate for funding increases so we can intensify the needed 'reach' of our services. Clients must be granted the time to be heard, and health providers the time to learn and grow with the people they serve. With good care, many problems associated with diabetes are preventable.

"You guys were so welcoming and compassionate. I felt like all my questions were answered and I was treated with much respect and kindness." - LBN client

In the past year we screened 560 people for diabetes, and saw 350 people for diabetes support



# *Indian Residential School Program*

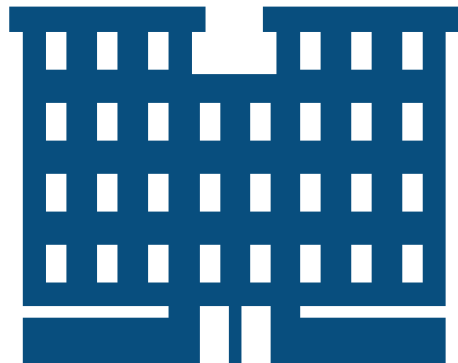
Randall Brazzoni

The Indian Residential Schools (IRS) Program provides mental and emotional health supports to all former Indian Residential School students, their families and individuals who were impacted by the residential schools in all of our member CSFS communities. The IRS program works with the community understanding that the health of our program participants who are struggling with the effects of IRS attendance are a vital piece to the health and wellness of their families and communities. Many of these men and women, young and old, attribute their substance abuse to the trauma they endured as a result of the residential school legacy.

The program uses culture to assist individuals with their healing journeys, with a focus is on assisting individuals to make positive changes in their lives. The IRS team is available throughout the year to provide our culturally based programming.

As this program is in its final year, we have had difficulties in obtaining program staff, as qualified individuals who understand the impacts of residential school and possess the cultural knowledge and skills are often not interested in accepting a short-term

position. The Addictions Recovery Program and Mental Health staff have provided coverage to program participants who need support from this service. Our main goal for the upcoming year is to find appropriate staff who are capable of delivering the program to our communities.





# Addictions Recovery Program

## Randall Brazzoni

We provide a 28-day residential treatment program during the summer months (from April to October), which is conducted on Nadleh Whut'en territory at Ormond Lake. During the winter months (November through March) a 20-day Outreach Program is available to communities upon request. Our program participants are men and women, 18 years old and up who struggle with substance abuse. Referrals to the program are accepted from community resources and from clients themselves.

Issues that lead to substance abuse and addiction can include:

- Systemic discrimination and abuse
- Alcoholism / addiction in families of origin
- Poverty
- Childhood trauma
- Loss of traditions and attempted erasure of cultural identity
- Tragic events and abuses stemming from Residential School attendance or intergenerational effects, etc.

Goals for the up and coming year include the construction of an elders building at the Ormond Lake facility to encourage elders to participate in the residential treatment program. We also hope to increase the number of community outreach programs we offer, and to increase the cultural components of our programming by employing a designated cultural counsellor. Finally, we plan to will work with the communities to develop and deliver a long-term aftercare program

that will take place within the communities in our service delivery area.

As reported last year, we are continuing to work on acquiring funding to transition the Residential program from a six-month summer program, to a year-round operation in a new facility with the possibility of also providing detox services.

Persons served at Ormond Lake	79
Education Groups	442
Therapeutic Groups	8
Emergency Groups	260



# *Aboriginal Child and Youth Mental Health Program*

Marilyn Janzen

Our CSFS Aboriginal Child and Youth Mental Health (ACYMH) program provides community-based clinical counselling services to children (living off reserve) and their families. We also provide outreach services to children and youth living on reserve. Cultural approaches are incorporated in all aspects of our assessment, treatment and intervention processes in order to support improvement of emotional, physical, mental and spiritual health. Preventative services as well as treatment and other support services which incorporate community healing practices and cultural traditions are provided. Our clinicians work with children and their families who are experiencing severe challenges. Our four staff members work in 15 Carrier communities from our offices located in Vanderhoof, Fort St. James, and Burns Lake. We provide services to children who are over the age of 5 and referrals are accepted by any other CSFS programs, or other community programs.

The primary role of our ACYMH staff is to support and promote cultural enhancement, affect emotional and behavioural change and support positive growth for children experiencing, or at risk of experiencing any mental health problem. Our program focuses on helping children and their families address issues which are causing significant distress and/or impairment of development and functioning in the child's home, school or community.

Group programming implemented by our program included the mental

health check in with high school students, and girls' groups for elementary school students. We also developed and delivered various workshops including anti-bullying, cyber safety, and lateral violence for youth ages 13 and up.

Staffing shortages were felt in our program for five months in the Burns Lake area, and we also had a clinician leave from the Vanderhoof area. We were able to successfully fill all of our staffing vacancies after a three-month period.

Our team members participated in Suicide prevention training, art therapy, and Aboriginal focused oriented therapy. We had a post-secondary practicum student in our program during the early months of the fiscal year.

Our Goals for the up and coming year includes advocating for more funding to provide more services within our program. We currently have a need for significantly more staff. We provide Mental Health prevention, intervention and support services for children and youth for all of our communities despite the staffing shortfalls. We would also like to increase our outreach initiatives in all of the communities that we serve. Finally, we have a goal to increase our collaborative work with other CSFS departments as part of our Integrated Care Teams.

**In the past year we spent more than 570 hrs working with over 63 children and youth**



# *Mens Support Program*

Bryan Clyne

In working with our member Nations and CSFS staff, we have identified that men are an underserved population who experience worse health outcomes than many other population groups. To combat this issue, CSFS has endeavoured to develop Men's Groups as a harm reduction strategy in each community. Men's groups are intended to provide a safe place for men to develop positive social networks to help support healthy behaviours.

The program serves adult Men living both on and off reserve who are willing to attend meetings. Currently there are Men's Groups meeting regularly in Nadleh Whut'en, Burns Lake, and Takla Nation. Other Men's Groups are in the process of being established in Saik'uz and Yekooche.

The Men's Groups are offered on a weekly basis in an informal setting on reserve. The men participate in a variety of healthy and engaging activities which are meaningful to the group participants. Referrals to the groups are optional, but are not needed.

Our goals from last year were to:

- Host a second Men's Group facilitator training session

- Establish more Men's Groups
- Work with other existing Men's Groups to form a network of support

CSFS was able to achieve all of these goals. The second Men's Group Facilitator Training occurred from March to June with three separate trainings and a special fourth meeting where the trainee facilitators and previously trained facilitators were able to meet and discuss strategies for their respective Men's Groups. A third Men's Group has formed with more showing good promise.

Men from the groups have been able to go to Yekooche, Tsay Keh Dene, and meet with the Prince George Dude's Club. The men have also had opportunities to work with FNHA to work on developing a network of support for Men's Groups. In the upcoming year, the Men's Groups would like to:

- Have a refresher training for facilitators.
- Establish more Men's Groups
- Build a larger network
- Get out to meet with other Men's Groups more often.



## *Husna - Land Based Healing Curriculum*

Janice Nooski

The Husna Curriculum was developed to increase the overall wellness of people who live in the Carrier Sekani Family Services member communities. The curriculum was inspired by other personal development programs which create a space for profound healing for participants, but lack cultural and wellness teachings from a Carrier and specific Nation based perspective. The key learnings in the curriculum were identified through community focus group input, and community interviews and research were further carried out to complete the five-day program.

This program consists of a five-day session that will be hosted by member

bands with the help of CSFS Health and Wellness Program Staff. The program is based on Carrier cultural practices and ways of learning and is set out to take place 'culture camp style' out on the traditional territories. In addition to Nation specific cultural practice teachings, other curriculum items include; history of colonization and its impacts, Carrier pre-contact history, Nation specific history, parenting, education, attachment, relationship skills, and spirituality.

A pilot of the program is being explored with Wet'suwet'en First Nation, whose elected leaders have expressed interest in hosting a session on their traditional lands.

## *Opioid Strategy*

Christina Dobson

In response to the tragic increase in opioid overdoses and deaths in the past few years, we have developed an Opioid strategy. Our Primary Care Physicians, Nurse supervisor, Addictions Team Lead, and the Health & Wellness Senior Advisor developed the plan with a focus to prevent and treat opioid addiction in all CSFS member Nation rural communities, as well as in local urban areas. The team explored a myriad of ways to treat opioid addiction in communities to determine the best approaches to meet local needs.

The opioid strategy includes the provision of educational events in each community. The events will educate community members on preventing opioid addiction, how to respond to an overdose, and how to treat addiction.

Another important goal of the strategy is to provide opioid addiction prevention and treatment education to our CSFS staff, to develop a plan to provide addiction treatment in communities, and to begin providing Suboxone treatment in communities.







# *Heal the Healers Community Development*

Janice Nooski

We are a year and a half into the three year Heal the Healers project. Our junior elders Heal the Healers group has worked hard this past year, and look forward to the training and support sessions which take place every two months in each community (on a rotating basis). To date the group has completed the following training:

Year One: Group Cohesion & Historical Understanding

- Colonization facts, impacts, understandings, and reflections
- Individual exploration, reflection, and strengthening
- Traditional ways - exploring traditional community function, as well as parenting, healers, and elder roles

Year Two (Current): Helping Skills Development

- Individual helping skill development
- Group facilitation skill development
- Culture as Intervention

Minnie Thomas was contracted to do a workshop on Traditional Medicines in each of the 10 Communities. We had opened this up to the public as we had a lot of interest from College's, different programs in communities. The Heal the Healers jr. elders were in attendance to support Minnie and learn her way of preparing and administering medicines. The workshops were a huge success, Minnie will be providing workshops in Yekooche First Nation and Takla Nation in the up and coming months.

Gladys Michell, Roxanne Stump and Verna Thomas provided Basic Sewing workshops in each of the 10 CSFS

heath transfer communities. Each community was provided with sewing machines which are located at each Health Centre.

Four sewing projects were presented to the participants:

- Baby burb pads
- Baby quilts with borders
- Beach bags
- Wristlet handbags

There was a lot of interest in each community and we received lots of positive feedback for our facilitators along with requests for more workshops in the future. More material and thread will be delivered to each of the 10 communities.

Over the up and coming months, Christina Dobson, Marilyn Janzen and Janice Nooski will be meeting with the Chief and Council of each CSFS member Nation to determine how we can incorporate the Heal the Healers members into working with their respective communities.





# Community Mental Health Program

Marilyn Janzen

Our Community Mental Health Program provides qualified clinicians to provide services in communities for a specified number of days each week. Community clinicians work with the community wellness workers to provide psychosocial education and direct counselling services. The Community Mental Health program is available on reserve in all 10 of the CSFS member health transfer communities. The mandate of the program is to provide mental health services to any Nation member who wants assistance. Our programs all operate under an "every door is the right door" policy for accessing services, so referrals can come from anyone, including from individuals seeking services. The Community Mental Health Program works to ensure that critical incidents are responded to within 24 hours. This year we utilized our Critical Incident Stress Management (CISM) response team on two occasions in the Burns Lake area, once in the Fort St. James area, and again in Prince George to support wildfire evacuees.

Community events we support or facilitated included Aboriginal Day celebrations, health fairs, cultural camps, traditional medicine harvesting, chair yoga, mindfulness groups, healing circles, walking groups, canoe trips, men's groups in communities, blue Christmas, wellness education and support. Workshops provided have included healthy relationships, suicide awareness and prevention, grief and loss, self-care, recognizing trauma and its role in the cycle of violence, healthy relationships, drug and alcohol effects

on the brain, and relationship violence prevention. We also support other agency programs to provide expertise and participate in Integrated Care Teams, and discharge planning with treatment centres and hospitals.

Over the past year our staff received the following training: Complex Trauma and Childhood Sexual abuse, MOIS (electronic record system) training, CSFS Cultural Competency training, and Recognizing and Responding to Suicide Risk Assessment.

In the up and coming year we will be continuing with our "Stay Connected" campaign, which lists all of the 24/7 crisis lines available. Finally, our program is working to partner with Kuuas Crisis services to ensure that all of our communities have Suicide protocols in place.

Persons served	250
Clinical hrs/ month	128
Prevention hrs/month	114
Education Groups	63
Therapeutic Groups	72
Emergency Groups	24





# *Health and Wellness Program*

## Marilyn Janzen

Our Health and Wellness Program is delivered by our multi-disciplinary team in on-reserve communities and to off-reserve First Nations in Prince George, Vanderhoof, and Burns Lake. The program provides access to professional Mental Health Clinicians and Addiction Workers who provide a full spectrum of holistic, culturally appropriate counselling services for individuals, families and groups. We collaborate with traditional healers and knowledge holders to provide culturally appropriate services. Our program offers:

- Aboriginal Child and Youth Mental Health - clinical counseling for children and families (pg. 68)
- Addictions Recovery, including a residential treatment program for six months of the year (pg. 67)
- Addictions Liaison - NNADAP Mentorship Program (pg. 63)
- Community Mental Health (pg. 73)
- Indian Residential School Survivors Support Program (pg. 66)
- Opioid Strategy (pg. 70)
- Critical Incident Stress Management (CISM)
- Psychological Assessments

As a part of our ongoing wellness services, CSFS provides psychometric assessment services through our psychologist Dr. Michael Hoff in Prince George and the 10 outlying health transfer communities. Psychometric assessment is a method by which skills, aptitude, personality and mental states are objectively measured in order to determine and outline possible educational, mental health and financial supports that might be provided to a child, youth, adult, and or family. After

assessments are completed, Dr. Hoff works closely with individuals, families, and other professionals to ensure that identified needs are addressed in the best way possible to support overall health and wellness.

This past year we continued to focus on Suicide awareness, prevention, and intervention. We started a "stay connected" campaign in which we developed magnets that have all of the 24/7 crisis lines available for people to access. We have also partnered with Kuuas Crisis Support to ensure that all of our communities have suicide protocols in place.

Another goal was to ensure that all of our staff were using the MOIS (electronic record keeping system). Currently the MOIS program is in operation for our program, and all of our staff are using it at varying levels. Training is taking place for our staff on a one on one basis to ensure we are using the MOIS system efficiently.

Over the next year we look forward to working within Integrated Care teams in all of the communities we serve. Currently, there are Integrated Care Team's in some of our communities. Our goal is to ensure that the Health and Wellness Team staff are actively participating in the teams to ensure continuity of care for our clients.

We are also working on a goal to have male and female clinicians available to all of our communities. We have been working towards this goal with new hires and by increasing the use of our Telehealth services to reach this goal.





# *Communications, Public Relations and Projects*

## Marlaena Mann

Over the past year we have continued to work hard on ensuring that our various partners have the information they need about Carrier Sekani Family Services when they need it and in a way that works best for them. Our external communications outlets include our website, social media accounts, quarterly e-blast and print edition newsletter and branded templates such as posters, program brochures, etc.

Goals for the up and coming year include continuing to provide as much advance notice as possible for events and programming, and increasing the quality and relevance of information shared. To accomplish this goal our communications strategy will be updated this year, and key indicators identified and tested through an assessment tool. Input from our assessment will be used to further update and refine our strategy and report on outcomes.

We are in the process of updating the program information on our website to ensure that program information, populations served, and contact information is easy to access. We will also be adding a media kit to the site to ensure that required media information is easily accessible.

Our Facebook likes, engagement and followers have all increased substantially in the past year at 23%. This is due to increased follower-ship and our team honing in a better understanding of the kinds of content our audience wants to see from us. We continue to work with the Youth

Services program to engage youth on our Instagram account.

Due to a lack of engagement on our Twitter channel, we only use this medium to monitor social feeds regarding our agency or other related news items.

Email Subscription List  
594 recipients  
34% open rate (10% above industry standard of 24%)

Our email subscription list has increased by 8% this year. We have combined our quarterly Goozih Dust'lus e-blast and quarterly print edition newspaper into one quarterly stream which is shared both in print and online. In the up and coming year we intend to use our email list to share other relevant information about programming and services with subscribers.

## Safe House Project

We were finally able to solidify all of the funding requirements this past year for the Burns Lake area Safe House in partnership with Lake Babine Nation. The safe house will provide shelter to women and children as well as outreach services to address family violence. The project was multifaceted with numerous partners and multiple funders which made some of the work time consuming. The project has now been passed onto a new hire who will be overseeing the build, and will work with the Executive Director of Child and Family Services on operations to open the doors in early 2019.



## Nowh Guna' Carrier Cultural Competency

The second phase of our Carrier Cultural Competency Training was implemented this year following the release last year of our 'Nowh Guna' printed culture resource book. The booklet provides a basic facts and knowledge about our agency, our member Nations, the history of colonization, languages, cultural philosophy, governance, and cultural practices. To build onto the learning that can be obtained from reading the book, we have developed a two-day training session which provides further information on the book topics and also touches on examining personal imagined realities and biases, interconnected ways of thinking, and addressing racism. The training utilizes first people's principles of learning and teaching and relies heavily on experiential learning, land-based learning and storytelling from knowledge holders and elders.

Over the past year we have provided the training to over 120 CSFS staff and foster parents, and over 30 external partners from agencies such as the Ministry for Children and Family Development, Native Friendship Centre, the YMCA of Prince George and medical students from University of Northern British Columbia. Our goal for the up and coming year is to ensure that all new CSFS staff and Foster parents receive this introductory training. We also plan to extend our training further to more external partners who work with our community members and Nations. Finally, development will commence on a follow-up training which will focus on helping staff and programs to ensure that their specific practices are culturally specific to the needs of individuals and families, and that specifics around trauma informed practice from a Carrier perspective are incorporated into practice.



# *Projects - Administration*

## Regina Toth

Overall general services is the provision of Project Management for capital project management, strategic and administrative planning, systems analysis and evaluation of programs and services, arrangement and negotiation of legal land leases, management of project professional services.

These functions serve the entire Carrier Sekani Family Services area in all its locations and capacities and is mainly all project based with defined goals and objectives.

### Safe House Project

We held a ground blessing ceremony on May 25, 2018. The road & land clearing commenced on May 28, 2018. For phase two; pre-Construction and design phase, the architect blueprints were completed in June 2018, the class A cost consultant estimates were completed upon 90% completed drawing. Human Resource Recruitment has completed and a Safe House Manager was recently hired.

The Construction Phase will conclude on March 31, 2019, at which time we expect the Safe House building phase to be complete. A construction Manager was hired on May 28, 2018, (Innova Projects. Sub-contractors were sourced (e.g., Structural, Mechanical, Electrical, Civil, Geo-technical). A legal agreement for development and operational phases has been drafted up between CSFS and Lake Babine Nation. Job Opportunities for Safe House professionals will be posted, and a grand opening event will be planned.

The post-construction, or operational phase will commence on April 1, 2019. We have been working with INAC for start up and operational funding to hire staff, etc. We have also started working with other Indigenous Safe House Directors to ensure the very best services are implemented. A Grand Opening event will be planned for April or May 2019.

### Corporate Administration Office

CSFS has arranged for an on Reserve Lease renewable every three (3) years at the Lheidli T'enneh Lands (North Shelley) beginning in March 31, 2018, with occupancy expected for October 1, 2018. The location is co-shared on a lot with the BC Assembly of First Nations. This arrangement has enabled CSFS to save on development and engineer costs.

### Burns Lake Office

At print time, the development of a land lease along with the costing of an office structure is in the midst of preparation. Along with the negotiating of a legal land lease and determining capital building costs, other associated tasks such as surveys, engineering and geo tech analysis are being conducted. This project is still in the initial pre-development phases. Occupancy may happen within the calendar year if all factors align.







# *Information Technology and Security*

Christopher Ross

Overall, the major role of the office is to ensure privacy protection is built into every major function involving the use of personal information. The office is also responsible for investigating and reporting on all suspected breaches of privacy.

Carrier Sekani Family Services (CSFS) is proactively integrating information technologies and systems into the evolution of health and social services. Today, technology is a major part of all health and social services, and our Information Management and Information Technology (IMIT) team manages those technologies. For example, our IT team is responsible for maintenance and support of more than 300 computers, printers, and servers, as well as the more than 200 staff and community members who utilizes the technologies; however, the most significant responsibility for our IMIT team is managing the secure information transfer between the 16 geographically separate CSFS offices and health centres.

CSFS IMIT manages the information and data transfer between the offices and health centres via a Wide Area Network (WAN), and the security and reliability of the WAN continues to be a major priority. The major advantage of having a CSFS WAN is that it is a private business network, enabling secure data transmission to and from our various sites. Our WAN is a seamless and fully meshed network reaching all CSFS serviced sites, allowing staff to access technology and

information systems that enhance service delivery.

CSFS has very robust network security policies restricting the number of technical vulnerabilities and attempts to exploit those vulnerabilities: such as, WIFI Security, Mobile Device Security, Phishing, Ransomware, Malware. The CSFS model is based on a spoke and wheel design, with an information hub. The hub site reduces costs, as it requires less overall hardware, firewalls, bandwidth and redundancies.

In addition to technical safeguards controlling access to sensitive information, the Office of Policy and Privacy Information oversees all ongoing activities related to the development, implementation, maintenance, and adherence to CSFS policies and procedures covering the privacy of and access to, patient/client information. The privacy office ensures that policies and the organization's information privacy practices are compliant with federal and provincial laws. In addition, the privacy office is responsible for the development, implementation, assessment, and revision of the program controls relating to the security of client patient information. The office also supports the ability of staff to monitor compliance and foster a culture of privacy within the organization. We are working towards ensuring that all staff receive training on appropriate information sharing, and how staff can prevent information incidents. It is key that CSFS staff understand and support an organizational culture that is aware of

its privacy obligations and shares informant responsibly and that staff respond effectively when privacy and security breaches occur.

Phishing and email-based malware are the most prevalent forms of social engineering that affects CSFS. In response to educate staff and reduce the risk of a business email compromise, we have begun a series of “Phishing Campaigns.” The goal is to increase staff ability to spot phishing emails and other threats. Since November we have run 4 phishing campaigns and provided training on 10 modules of information security. Since the first campaign, which ran from November 2017 through December 2107, to the most recent campaign, we have seen a reduction in the failure rate This means that staff are becoming more aware of how to identify phishing security threats.

### Your Privacy Rights

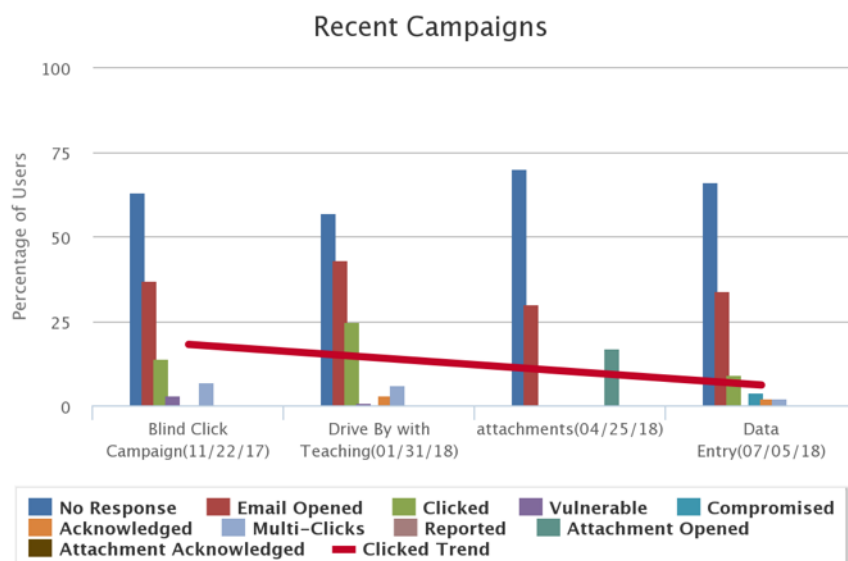
CSFS recognizes the value of sharing information for the purpose of assessing, planning, and developing health and social programs. With the advent of the Integrated Care Teams, and a more holistic approach to care, it

has become necessary revise the processes by which clients/patients are oriented to CSFS services. While an interdisciplinary approach to care improves patient outcomes, it does not minimize or affect your privacy rights. Only those supporting or directly providing care have access to a patient’s personal health information.

### You have the right to:

- Confidentiality
- Ensure your personal information that we hold and protect is accurate
- Understand who has access to your personal information and for what purpose
- Understand how your information has been used
- Understand how and when your personal information is shared
- Report any concerns that you see regarding the privacy or handling of your personal information

We recognize privacy protection can co-exist with the holist care system that enables health and wellness for community members. Our staff is here to support you with any questions that you may have.





# Human Resources

## Carol Remier

At CSFS we are committed to creating a safe, healthy and supportive workplace where the well-being of our employees is paramount. We recognize this commitment to a healthy workplace helps drive our ultimate goal of promoting and advancing the health and well-being of our clients and member communities. We encourage each employee to take a holistic approach to health and wellness and offer a wide range of perks, benefits and assistance through our Health and Wellness initiatives (#csfswellness).

We strive to create a culture that values and respects diversity and inclusion. All qualified applicants will receive consideration for employment without

regard to race, national origin, age, sex, religion, disability, sexual orientation, marital status, veteran status, gender identity or expression, or any other basis protected under the Human Right's Code. As a BC First Nations organization, CSFS is committed to increasing the number of First Nations and Aboriginal employees within our organization. Currently, CSFS has over 200 staff members in positions including areas such as Mental Wellness Clinicians, Community Nursing, Resident Care Aides, Administrative Assistants, Social Workers, Youth Workers, Support Child Development, Family Empowerment, Employment Coordinators, Life Skills and Research.



# *Financial Report*

## Carol Remier

The report that follows is a summary of financial activities for the year ending March 31, 2018. The report should be read in conjunction with the audited financial statements of Carrier Sekani Family Services for a full representation of the financial matters of the organization for the period.

KPMG was appointed by the Board of Directors to perform an audit on the financial statements which include the statement of financial position as at March 31, 2018, the statements of operations, changes in net assets and cash flows and the accompanying notes. In their opinion the financial statements present fairly, in all material respects, the financial position of Carrier Sekani Family Services as at March 31, 2018, and its results of operations and its cash flows for the year ended in accordance with Canadian accounting standards for not-for-profit organizations.

Carrier Sekani Family Services continues to be a strong organization delivering a variety of health and social services to our communities. We continue to grow our services while ensuring fiscal accountability of the resources entrusted to us from our partners. Each year budgets are prepared for program based on contracted revenue and spending priorities. Variances are tracked by management to ensure strong financial accountability.

Revenue this fiscal year was \$27.5 million (25.1 million, 2017) with the largest portion coming from First Nations Health Authority in the amount

of \$11.4 million (10.7 million, 2017). This funding is a multi-year contract focusing on health and wellness with a next term end date of March 2020. Our next largest funder is the Ministry for Children and Family Development in the amount of \$8.7 million (7.7 million, 2017). Following this is Indigenous & Northern Affairs with 4.9 million (4.1 million, 2017). These three funders make up 91% of the funding for Carrier Sekani Family Services. Revenue over last year is up 9.3%, a continued pattern of growth for the agency.

Expenditures this fiscal year were \$28.4 million (25.4 million, 2017) with the largest areas of spending coming in Wages & Benefits, foster care and travel. The largest areas of increase are in the education and training (97%), program expenses (24%), and travel (15%).

Of significance this fiscal year in February 2018 the Canadian Human Rights Tribunal settled a case between First Nations Child and Family Caring Society of Canada, the Assembly of First Nations and the Attorney General of Canada (representing the Ministry of Indigenous and Northern Affairs Canada). With this ruling First Nations will receive additional funding for prevention and front line support to address under funding in the models from Indigenous and Northern Affairs Canada. This is good news going forward for many First Nations families. One of the immediate effects is that Carrier Sekani Family Services is able to increase our staff wages to be on par with other government agencies providing the same or similar work. Retro for current staff covering a two

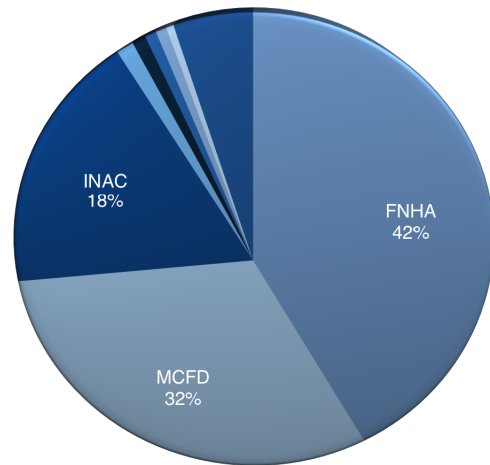


year period was paid in the amount of \$1.1 million in this fiscal year with partial reimbursement expected in the next fiscal year from Indigenous

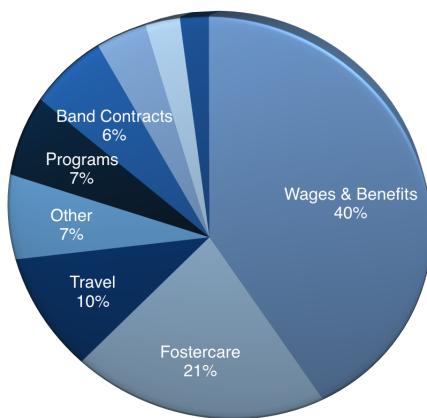
and Northern Affairs Canada. Going forward we expect to see new prevention programs rolling out.

## *2018 Revenue*

The majority of our funding comes from the First Nations Health Authority, Ministry for Children and Family Development and Indian and Northern Affairs Canada - other revenue is obtained through proposal writing and smaller negotiated contracts



## *2018 Expenditures*



The majority of our expenditures include staff wages and benefits to provide programming and administration, foster care, and travel to provide services in our communities.

For full details, see our financial statements at [www.csfs.org/news/2018](http://www.csfs.org/news/2018)  
[Financial Statements](#)



Carrier Sekani Family Services Statement of Operation (Summary) For the 12 Months Ending March 31, 2018		2018	2017
Revenue			
	First Nation Health Authority	11,432,473	10,670,639
	Ministry for Children and Family Development	8,736,320	7,749,211
	Indigenous & Northern Affairs	4,886,874	4,085,252
	PGNAETA	303,510	170,831
	Canada Revenue Agency	241,266	391,208
	Ministry of Transportation	197,313	43,945
	Ministry of Jobs & Skills Training	186,632	186,780
	Rental Income	129,753	128,543
	Other Income	1,351,390	1,691,885
Total Revenue		\$27,465,532	\$25,118,294
Expenditures			
	Wages & Benefits	11,246,881	10,134,120
	Fostercare	5,966,115	5,364,858
	Travel	2,850,771	2,480,657
	Other Expenses	1,980,878	1,937,294
	Program Expenses	1,824,222	1,465,986
	Band Contracts	1,691,268	1,659,830
	Professional Fees	1,048,064	913,338
	Occupancy Costs	686,270	648,800
	Education & Training	558,609	283,516
	Amortization of Capital Assets	517,793	526,590
Total Expenditures		\$28,370,871	\$25,414,989
Net Surplus (Deficit) for the Year		-\$905,339	-\$296,695





*Mussi Cho to our 2018 AGA Sponsors!*



CARRIER SEKANI  
FAMILY SERVICES



*Congratulations to  
CSFS on 28 years of  
service!*

## The Strength Within

*Offering Suicide Prevention and Wellness Promotion  
Workshops based on Carrier Values*

*Call to set up a 3 day workshop in your community  
Benna Rathburn 250-562-3591 or Tina Strudsholm 250-960-5121*

*The Strength Within: Suicide Prevention in Northern British Columbia Project is a partnership between Carrier Sekani Family Services and University of Northern British Columbia; funded by Canadian Institutes of Health Research*









Call Bob Cassie at  
Prince George Ford  
(250) 563-8111



*Whether you are in the market for yourself or your FLEET,  
Bob can help!*



***Thank you for your patronage!***

***Stop in any time for great parts, service and sales!***

***1473 Hwy 16 East, Vanderhoof***

***250-567-4781***



- Company Jackets & Hats •
- Custom Logos & Design •
- Team/School Uniforms •
- Jackets •
- Sweatshirts •
- T-Shirts •
- PROMOTIONAL •
- SAFETY APPAREL •

**EMBROIDERY, PROMOTIONAL PRODUCTS & SILKSCREENING LTD**

1313- 1st Avenue  
 Prince George, BC V2L 4W8  
[info@cap-abilities.com](mailto:info@cap-abilities.com)  
[www.cap-abilities.com](http://www.cap-abilities.com)

**250-564-CAPS(2277)**

Fax: 250-564-8883  
 Toll Free: 1-877-604-8548

**"OUR GOAL IS TO PROMOTE YOU"**



**The Prince George Nechako Aboriginal Employment & Training Association (PGNAETA) is proud supporters of the 2018 Carrier Sekani Family Services Annual General Meeting.**

**PGNAETA wishes the Carrier Sekani Family Services (CSFS) a successful AGM!**



# LEADING THE NORTH

SUPPORTING  
OUR REGION

**HD CKPG**

*the River*  
1013

**99.3 Drive**  
CLASSIC HITS

**CKPGToday.ca**  
*Everything Northern BC!*



PROUD MEMBERS OF THE JIM PATTISON BROADCAST GROUP LP

The most trusted name in insurance products.

Home

Commercial

Auto

1198 Victoria Street, Prince George

[www.brownridgeinsurance.com](http://www.brownridgeinsurance.com)

Phone: 250-564-0002



Brownridge  
& Company  
Insurance

# CREATING WELLNESS TOGETHER

Since 1990



CARRIER SEKANI  
FAMILY SERVICES





