

### Wanaki Team 2021-2022

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### Message from the Executive Director

The end of another fiscal year brings about reflection and gratitude during an unusual time as we all experience the concerns and effects of COVID-19. Throughout this unprecedented time, we have been exceptionally grateful for such a dedicated team.



Staying true to our values

involves examining ways we can serve more people better. We are pleased to share how we have moved forward with Strategic changes and focus on pillars that align our goals with needs. Virtual Programming has provided an option for front line workers who need access to services while meeting them where they're at. Always striving to enhance the continuum of care for individuals who struggle with addictions.

This annual report distinguishes our Core Services delivered and Administrative and Operational outcomes.

Culture as intervention remains an integral part of what we do, ongoing conversation and adaptability fundamental to the implementation of quality cultural programming.

This year, we included a Bilingual Nurse to our team, these added competencies have allowed the Wanaki to further pursue holistic programing by including nutrition, harm reduction and smoking cessation workshops.

Dedicated staff have all contributed to provide clients with an opportunity to reconnect to their identity and find balance emotionally, physically, mentally and spiritually.

A significant portion of the report is dedicated to program matters and data, in addition to a description of our activities in the areas of partnership development and relationships.

As we move forward in 2022-2023, we remember the importance of taking the time to connect with each other and unite for wellness.

In this respect, we are proud to celebrate over 30 years of service to First Nation and Inuit people.

Migwech,

Angela Miljour, Executive Director

## The Wanaki Strategic Plan Core objectives for 2020-2024

The *Wanaki Centre 5-Year Strategic Plan: 2020-2024* concentrates on anticipated Wanaki Centre activities over the next five years. After meaningful dialogue with concerned parties (as outlined in the methodology section), the Wanaki Centre will focus on the needs of the Centre, the needs of the client, and the relationship with communities and partners.

These three goals are to:

# 1

### CREATE AN OPTIMAL ENVIRONMENT THAT PRIORITIZES SAFETY, FOSTERS WELLNESS, AND ENHANCES THE OVERALL WANAKI CENTRE EXPERIENCE

A planned expansion project will increase the residential capacity of the Centre, allow for an improved flow and reorganization of available space and address current safety issues for staff and residents. Overall quality improvement initiatives and a comprehensive Policy & Procedures manual including enhanced Infection Prevention & Control policies will contribute to a safe environment for all.

#### ENRICH THE DELIVERY OF QUALITY PROGRAMMING TO SUPPORT A COMPREHENSIVE CONTINUUM OF CLIENT CARE.

Hiring of additional human resources including a Nurse to oversee medical elements (e.g. medication management) and a resource worker to assist clients in the transition back to their community is planned. Developing emergency and contingency plans will ensure uninterrupted delivery of the program and services.

#### SOLIDIFY COMMUNITY PRESENCE AS AN ESSENTIAL, SPECIALIZED-SERVICE PARTNER

The promotion and delivery of services through outreach initiatives geared towards communities and leadership will be developed through innovative means, such as the use of a mobile team and an increased online presence to provide virtual care.

## Goal 1: Strategic Plan Report Card 2020-2024

To provide a consistent update of the 5 years strategic plan, the following report card will be presenting YEAR 2 outcomes. It is important to note that additional indicators and actions have been added to reflect necessary adjustments due to capital; planning of Phase 2 and the consistent evaluation of COVID risks mitigation.

#### **GRADING LEGEND**

- A: Completed
- B: Partially Completed
- C: Requires additional work
- D: Needs to be re-evaluated

### 1. CREATE AN OPTIMAL ENVIRONMENT THAT PRIORITIZES, FOSTERS WELLNESS AND ENHANCES THE OVERALL WANAKI CENTRE EXPERIENCE

GOALS	ACTIONS	INDICATORS
1.1 Phase 2 Building Plans approved, including agreement with KZA <b>B</b>	<ul> <li>The Agreement with Kitigan Zibi Anishnabeg has not yet been formalized, this agreement will include Property allocation, Internet, server and IP systems.</li> <li>Phase 2 plans have been modified as per realistic costs</li> </ul>	<ul> <li>Phase 2 – Capital Project Approved funding by Indigenous Services Canada in November 2021.</li> <li>Planning 12 Private room</li> <li>Contact with Chief and Council</li> </ul>
1.2 Address outbreak management and implement strategies to ensure health and safety <b>B</b>	<ul> <li>Ongoing delivery of Virtual Services</li> <li>Ongoing Policy Review and Development with outside consultant</li> </ul>	<ul> <li>Board Approved Virtual Calendar 2021-2022</li> <li>8 of policies reviewed and approved</li> <li>PPE is sufficient and easy to receive</li> <li>Implemented Systems including (MS 365, AMIS)</li> <li>Maintain COVID measures at the office</li> <li>Reported COVID cases among staff in 2022, ongoing information regarding changing measures has been communicated to all astaff.</li> <li>Staffing of a Full time nurse significantly enhanced health administration and programing</li> <li>Increased % of hand compliance, included in orientation.</li> <li>Increased communication with Public Health CSSSS</li> </ul>
1.3 Adopt and familiarize staff with innovative quality improvement initiatives <b>B</b>	<ul> <li>Ongoing Training (Tech support, clinical and cultural)</li> <li>Social Media Videos to enhance hand washing, and other informational videos.</li> <li>Hand hygiene compliance</li> <li>Evaluate current practices and identify gaps in policy areas</li> <li>Develop a comprehensive Manual for all Policies and Procedure</li> </ul>	<ul> <li>Increased number of training sessions</li> <li>Ongoing review and discussion regarding organisational structure, job descriptions roles and responsibilities to adjust to new programs and services</li> <li>Invested in data collection systems to evaluate outcomes (Survey Monkey, AMIS)</li> </ul>

## Goal 2: Strategic Plan Report Card 2020-2024

## 2. ENRICH THE DELIVERY OF QUALITY PROGRAMMING TO SUPPORT THE CONTINUUM OF CARE FOR ADDICTIONS SERVICES

GOALS	ACTIONS	INDICATORS
2.1 Adapt the Pre-Treatment process to address client readiness, engagement and orientation	<ul> <li>Adapt intake packages for virtual programs</li> <li>Further Develop the Mental Wellness team to promote capacity building and develop outpatient programs</li> <li>Ongoing Review the AMIS Client Pathway</li> <li>Customize AMIS to work with Wanaki data collection needs</li> </ul>	<ul> <li>48 Clients COMPLETED the Virtual program (3 and 4 week)</li> <li>7 of workshops developed and/or enhanced</li> <li>3 Significant investments and modifications made to AMIS</li></ul>
2.2 Enhance Program Delivery by securing essential Human Resource for Medical Leadership and Client Care	<ul> <li>Secure a full-time Nurse</li> <li>Secure Budget with Indigenous Services Canada</li> <li>Staffing process (Posting, interview, orientation)</li> </ul>	<ul> <li>Full time Nurse was hired in September 2021</li> <li>She has Developed 4 program workshops and a comprehensive hand washing policy, including Biligual Videos)</li> <li>Review of medication management policy</li> <li>Staffing of 2 additional Bilingual addiction counsellors</li> </ul>
2.3 Bridge identified gaps within the client wellness continuum with a pro-active and planned approach for improved seamless services <b>B</b>	<ul> <li>Develop Meaningful partnerships to support front line community services</li> <li>Work in collaboration with the Quebec Treatment Centre network</li> <li>Ongoing Contingency Planning</li> </ul>	<ul> <li>Follow up calls will be increased and recorded by the clinical team in 2022-2023</li> <li>Over 25 Front Line Program presentations</li> <li>Consent to transition for ongoing care will be increased and recorded by the clinical team in 2022-2023</li> </ul>

Wanaki Annual Report 2021-2022

## Goal 3: Strategic Plan Report Card 2020-2024

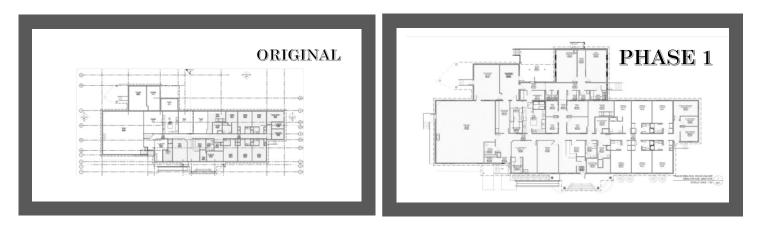
## 3. SOLIDIFY COMMUNITY PRESENCE AS AN ESSENTIAL SPECIALIZED SERVICE PARTNER

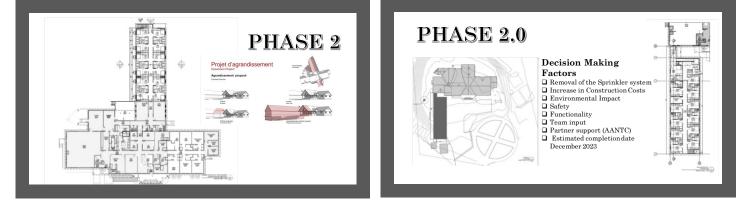
GOALS	ACTIONS	INDICATORS
<b>3.1</b> Engage in community outreach initiatives that promote the Wanaki Centre as an established community resource	<ul> <li>Explore potential of mobile team – community visits</li> <li>Increase virtual care through online platforms</li> <li>Increase Wanaki Social Media Promotion         <ul> <li>Tik Tok</li> <li>Facebook</li> </ul> </li> </ul>	<ul> <li>Program Evaluations are completed using Survey Monkey</li> <li>Agreement with CHUM hospital for virtual mental health and OAT assessments ongoing discussions.</li> <li>Weekly Zoom Circles</li> <li>Monthly Wanaki Challenges</li> <li>Youth Programming Assessment, Development and Delivery, outcomes were positive.</li> </ul>
3.2 Formalize Strategic Alliances, partnerships, and likages with regional and community agencies.	<ul> <li>Outreach to various partners in the continuum of care to enhance service continuum.</li> <li>Developed Service offers to account for organisational support and services</li> </ul>	<ul> <li>Increased Partnerships         <ul> <li>Algonquin Communities (Leadership, Front Line)</li> <li>Indigenous Services Canada</li> <li>Santé Public</li> <li>Treatment Centre Network</li> <li>Thunderbird Partnership Foundation</li> <li>Ecenter Research</li> <li>Canador College</li> <li>MSSSS</li> <li>CSSSPNQL</li> <li>Centre de Détention AMOS</li> <li>Montreal Organizations (5-10)</li> </ul> </li> </ul>
<b>3.3</b> Engage Leadership in meaningful dialogue regarding the positive role of the Wanaki on the continuum of care	<ul> <li>Attend and support the participation in various meetings</li> </ul>	<ul> <li>CSSSPNQL Governance meeting 1</li> <li>6 Administrative Board member meetings</li> <li>2 Special Chiefs Meetings</li> <li>12 of Regional Treatment Centre meetings</li> <li>30-50 National Treatment Centre working group meeting (AMIS, Virtual, Naloxone)</li> <li>Meetings with Public Health</li> <li>Justice – Detention Centres</li> <li>Canador College</li> <li>CHUM Hospital</li> <li>Thunderbird Partnership Foundation</li> <li>National Capital Commission</li> <li>University of Ottawa</li> <li>Carleton University</li> </ul>

## Capital Projects Successes! Phase 1 complete moving on to Phase 2

You can refer to further details regarding the capital project reporting submitted to ISC in June 2022. You can contact <u>angela.miljour@wanakicentre</u> if you wish to review this report.

- Complete clinic with medication room double locked.
- Increased number of offices 10 additional spaces as old bedroom were modified for office space
- Appropriate space for individual sessions
- Improved Dining space, Gym and library
- Additional Janitor, Gym, Recreational, and laundry rooms
- Additional Washroom in the common space
- Improved storage space
- Improved outdoor cultural space
- Additional exits





## Virtual Program Services Summary

### April 1, 2021, to March 31, 2022

The Wanaki Centre Virtual program had its inaugural cycle in June 2020. The program cycles (English/ French) have continued to be delivered since that time. The program was initially delivered as a 3-week program from its first cycle until December 2021. This also included 2 Wellness Weeks



which were delivered in early summer and prior to the holiday season of each year. After a careful review of client recommendations both written and verbal and in preparation at the time for the reopening of the Residential Program in 2022, it was decided that the Virtual Program would be modified to be delivered to go from a 3-week to a 4-week program. The intent was to have the same number of weeks for the Virtual as for the Residential program.

The modification from 3-weeks to 4-weeks

required adding some additional workshops which had not been included previously. Several workshops were added including 4 in the important area of health, which is delivered by the nurse, as well as a few others which come to enrich the program by building upon the individual client's strengths as a foundation of balance and guided by the 7-Grandfather (sacred) teachings. The 2 Wellness Weeks were also maintained as part of the overall program as were the weekly individual

sessions. These individual sessions are an important part of the program because they allow clients to engage in one-on-one discussions with the counselor they have been assigned. All sessions are delivered via the Zoom platform. The changes that were made to enhance the program have led to the program being more robust and responsive to client expectations and needs. This was confirmed through the client evaluations.



The Virtual program is under regular review to ensure that the program responds to the needs of the clients and that quality control of content and delivery methods are reviewed to make changes if required, During the period of April 1, 2021, to March 31, 2022, some 76 client files were received and reviewed. There were 28 clients that had been accepted but were not able to proceed to engage or complete the program because they were no longer available for the session or withdrew during the program because of employment, health, or other related personal issues. Half of the applicants were referred by a NNADAP front-line workers. Some 48 clients were successful in completing the program which meant that they were present for all the workshops that were presented which is a

Internal Data Collection April 1, 2021to March 31, 2022										
Activity report	Assessed	Graduated	Withdrew No show	Self Terminated	Terminated by the Center	Referred by NNADAP	Self referal/ other	Refered by Justice system	Refered by DPJ	Other
1. VIRTUAL FR - March 22, 2021 to April 9, 2021	3	2	1			3				
2. VIRTUAL EN - April 26, 2021 to May 14, 2021	10	6	1	3		9				1
3. VIRTUAL Bilingual Wellness week May 24, 2021 to May 28, 2021	11	7	2	2		5	3			2
4. VIRTUAL FR - June 7, 2021 to June 25, 2021	4	2	2			1	1		2	
5. VIRTUAL EN - July 12, 2021 to July 30, 2021	28	14	13	1		24			5	
6. VIRTUAL FR - August 16, 2021 to Sept. 3, 2021	2	1		1						
7. VIRTUAL EN - Sept. 13, 2021 to Oct. 1, 2021	10	5	4	1						
8. VIRTUAL FR - October 18, 2021 to Nov. 5, 2021	3	1	2							
9. BILINGUAL Wellness week Nov. 15, 2021 to Nov.19, 2021	5	5								
10. VIRTUAL EN - Nov. 29, 2021 to Dec. 17, 2021	16	6	6	4						
11. VIRTUAL FR - Jan. 10, 2022 to Feb. 4, 2022		0	1							
12. VIRTUAL EN - Feb. 21, 2022 to March 18, 2022		9	5	2						
TOTAL	76	48	<mark>28</mark>	14	0	38	11	0	16	11

basic requirement to get a Certificate of Completion.

During 2021-22 we have moved away from preparing a binder of material through photocopying and have moved to developing 2 client books that are printed at a local printer. One is a workbook in which clients are encouraged to reflect and write their thoughts about the workshops as per the questions being asked. The second contains all the workshop PowerPoints being presented as a program reference but also as a reference for the future. These 2 books are printed and bound in a professional manner with additional information contained in each book. Each client that is accepted into the program and has completed a precontact with their designated Counselor is sent a Welcome box which contains the following: 2 program books; 4 medicines-tobacco; sage; sweetgrass and cedar. The box also contains a smudge bowl, feather, and kit to make a medicine wheel. The medicine wheel workshop includes the making of a medicine wheel by each client therefore the client has all the materials to make one. It is important to note that the Welcome boxes are very much appreciated by the clients.

A major decision that was made at the beginning of 2022 was to fully integrate the AMIS data system into the work being conducted by all that are involved with clients. There is also a database collection for recorded events, telephone calls received and made as well as other elements for data collection. Although it was challenging at first, the AMIS system data collection system has proven to be a most valuable tool to maintain all aspects of a client file as well as to be able to generate data when such is required. Although this is a work-in-progress, all clinical staff are finding greater ease to enter clinical notes and have access to client files and all other pertinent information to their work,



Clients completing the Wanaki program receive a Migwech box which contains a Certificate of Completion, a letter acknowledging their work, and some promotional materials. Also, clients who have made a request for a Narcan kit (Harm Reduction) after the workshop presentation during the program will be sent a kit as requested. Most clients do request a kit once they have gotten the required information.

Clients that have completed the program have shared their satisfaction with all aspects of the program from the application to the completion of the program. Periodically we get suggestions that we consider approaches to continuous improvement. It should be noted that we get far more applications for the English cycles than for the French. We continue to work on communication strategies as well as work to deploy them to have increased numbers for the French cycles. Additionally, it is important to note that we are able to lend out fully loaded tablets to individuals who are accepted into the program and who do not have the necessary tools to connect. The numbers of tablets loaned vary from cycle to cycle. The Wanaki has some 10 tablets that it can loan at any given time.

The clinical staff delivers the various workshops of the program as well as conducts the individual sessions. It is my observation that each has brought their strengths and delivery approaches to the program to make it a well-rounded program. The addition of 2 Counselors brought on to the Team has raised the number to 3 Team Leads and 4 Counsellors for the Virtual Program at this time. When the residential program reopens, a Team Lead and 2 Counselors will be assigned to deliver the residential program. A Team Lead and 2 Counselors will then deliver the Virtual program. The Cultural Support Team Lead will subsequently provide support to each program (Virtual-Residential) but with more focus on the residential program.

The Virtual program has allowed the Wanaki Centre to continue to deliver important healing/wellness services to members of various communities. This has met a critically important need during the COVID period as well as the renovation period which is ongoing. There is no doubt now that the Virtual program must continue to be an integral part of the Wanaki Centre services.

The Virtual program is the mainstay of what the Centre has been doing since June 2020. It is important to note

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that other support services have also taken place. These have included regular contacts with frontline workers to provide support and promote the program. Counselors have provided counseling support services to past clients, at times individuals calling for the first-time and frontline workers. Some of the contacts were done over the telephone and others were done through Zoom or texting. On one evening of each week, at this time it is Wednesday evenings, and a Sharing Circle is held online. Any interested First Nation or Inuit individual can join to share and connect with others. The first part for a duration of an hour is in French and the second is in English. 2 Counselors coordinate these Sharing Circles. All of these are important support services that the Centre has been able to offer and will continue to provide. This has required a certain measure of time flexibility on the part of certain members of the Clinical Team.

Another service that was provided this fiscal year was a bundled program for 2 youth who were not 18. This request came from a grandmother and a social worker that were unable to locate a program for 1 youth who was in a detention center. We at the Centre discussed the request and after reflection decided that we would offer a bundle of workshops to the youth as a pilot/trial. A schedule was set up and shared with the youth. The program went well, and the workshops gave the youth the opportunity to reflect on and consider modifying their life habits to be more balanced as they moved forward. We are proud of what was accomplished with this initiative.

I am proud to confirm that all aspects of the Virtual online approach have proven to be successful to meet the needs of clients. As previously mentioned, the program is continuously reviewed for quality and client needs. We will be moving to add 2 new workshops for the coming sessions that were internally developed and will come to enrich the existing program. This will bring the number of program workshops to 41. We have learned after speaking with other Centres that the Wanaki Centre

has developed a unique quality virtual program with added value services for which we should all applaud as it is based on the contribution of everyone.

I want to thank all members of the Board, the Executive Director, and all the clinical staff for their support and work in making the Wanaki Centre Virtual program and services one that we can all be proud of. We will continue to improve because we have created a powerful base.

Migwech,

Gilbert W. Whiteduck

Gilbert W. Whiteduck Virtual Team Lead



## Virtual Culture

This year has been very positive despite restrictions and making contact with communities regarding our virtual program. Its peculiar to think elders teachings and ceremony are being shared through virtual programming today. I believe we are adjusting to the best of our capacity in meeting the needs of our people seeking support from the Wanaki Center.

In regards (Culturally) 21-22 has been going rather smoothly. The cultural lead has been

conducting different workshops and activities maximizing our clients knowledge on the different strength based trauma informed approaches to healing.

Here is some of the work that's being done.

- Introductions to Ceremony which entails the different ceremony that takes place in our territory
- <u>7 Grandfather Teachings</u>
- The Medicine Wheel clients get to make their own as well as learning about the 4 aspects to ourselves along with other important points, eg. Importance of Volition when seeking healing
- <u>Stages of Use and Change</u> Clients benefit from an overview of what makes substances addictive then end with examples of change in behavior finishing with a workshop on Naloxone as a harm reduction
- **<u>MMIWGGD</u>** Overview on whats happening in regards to the missing and murder indigenous women and girls and gender diversed and how it affects us today
- Knowledge is Power based on importance of sustaining language
- **<u>Family Tree</u>** Looking at family objectively
- <u>Teachings on Madidoson (Sweatlodge) and smudging</u>
- **Pride of our Nation** Clients get to come up with what makes them proud to be indigenous and presented by clients



### Mental Wellness Team

**Coordinator:** Tiffany Dumont, started October 2020

Host Agency: The Wanaki Treatment Centre

Reporting Period: April 1, 2021, to March 31, 2022

**Communities being served:** Kitigan Zibi Anishinabeg Maniwaki, QC Numbers & type of other professionals who are members or the MWT:

- Louise Charbonneau Retired Psychologist
- Robin Decontie
   Health Director
- Angela Miljour
   Treatment Center Director

A complete annual report will be included in this years submission, here are some highlights for this year.

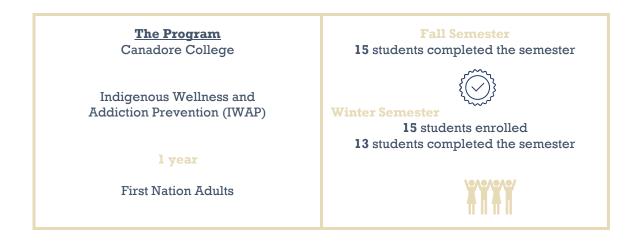
Clinical supervision and front-line support

**<u>Reporting:</u>** Main Themes in clinical supervision were

- ✓ Adaptation, loss of the work unit and change in services provided.
- ✓ Many front-line workers struggled in the changes that took place to their home and work responsibilities due to COVID-19. The flexibility that was demanded on workers to change there in person services and programs to virtual settings was challenging.



## Training for students to become certified indigenous wellness and addiction prevention (IWAP) counsellors



### The land-based learning experience

- Setting up their land-based space, fabricating their own rattles and learning songs.
- Learning how to harvest maple syrup, the teachings around harvesting and giving



thanks for what we are taking from mother earth. They participated in the process of collecting, boiling and jarring.

- They also took part in the preparation and participated in a naming ceremony. They were given teachings as to why we give spirit names and for those who wished received theirs.

- We finalized our land-based learning with an outdoor cook out. Students wanted to cook on an open fire and

learn how to set it up. They also prepared their own feast, followed by a closing ceremony.



## Communication and Rebranding

https://www.wanakicenter.com

In 2016, the Wanaki Facebook page was created with the intension to staying connected with residents after treatment and to reach out to a wide population using

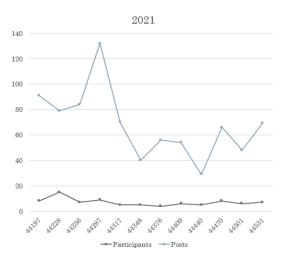


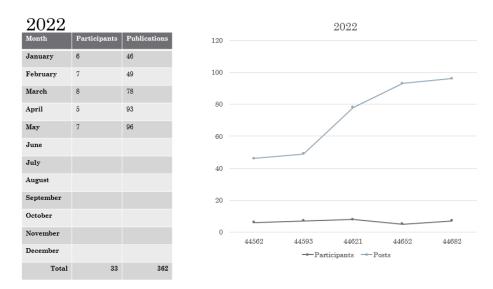
an effective social media tool. Our Facebook page is increasing views and we are receiving an important amount of inquiries through our messenger. We are working to improve roles and



responsibilities to manage communications as regular monitoring and posting is valuable tool for outreach and aftercare services. Here are some statistics from 2021-2022 Facebook Challenge.

2021		
Month	Participants	Publications
January	8	91
February	15	79
March	7	84
April	9	132
May	5	70
June	5	45
July	4	56
August	6	54
September	5	29
October	8	66
November	6	48
December	7	69
Total	85	853





## Quality Improvement Activities

The accreditation process has been a journey we proudly partake into to allow the constant

improvement of the quality of our services. This same process has allowed us to overview are day to day tasks, our overall programming as well as our policies and procedures in place to ensure a safe, caring and client informed environment for not only our residents partaking in our program but for our team facilitating. Over this past year, we have been challenged with multiple changes due to covid-19 but have taken great opportunities to grow within those challenges.



The NEW Wanaki virtual world allowed for clients and the team to have access to flexible and accommodating services for individuals wanting to improve their quality of life. We have observed many positive outcomes such as the increased individual seeking alternative forms of addiction and mental health support and increase in formal team connections.

I have included the results from the last work life pulse survey conducted in June 2022, we know that work transitions have been challenging following COVID closure announcements and I am pleased but not surprised that the Wanaki Team has not only grown through the closure process but have greatly improved the capacity of our services.

## Addiction Management Information System



**Addictions Management Information System** Système de gestion de l'information sur les toxicomanies This past year has encouraged us to utilise and develop the AMIS use and capacity at the Wanaki Centre. We have worked in collaboration with Ecentre research to enhance our platform to include tracking of incident reports, call logs and

cleaning. It is our belief that improved data collection will improve tracking and our evaluation methods of various programs. We have limited data entry for virtual services as we did not have clients complete the DUSI-R online at this time. NNADAP referral information sessions are planned for the next fiscal year to support virtual clients to complete the Drug and Alcohol Screening Tool DUSI-R.

The increase implementation of AMIS does require planning in terms of day to daytime management of staff and training requirements moving forward. We recognise the value in ongoing work on operational information management and will continue to enhance our system. Please refer to the AMIS report for data outcome review, keep in mind some data clean up will be necessary to rectify virtual cycle data entry in 2022-2023.

## Financial Highlights – Wanaki Centre

Some important investments in 2021-2022

- □ Increased the number of staff
  - $\circ$  Adding to the team a full time nuse and two additional addiction counsellors
- Policy Review contract
- Cultural Space and Algonquin Flag installation
- **Customization of the Addiction Information Management System**
- □ Capital Phase 1 Project complete

\*\*\* Note refer to the Financial Statement March 2021 for further details

## In closing

Looking back on the 2021-2022 fiscal year, I feel privileged to have been part of the Wanaki Team. We have had the opportunity to maintain and develop strong connections with communities and Public Health service partners.

We strive to improve the continuum of care for First Nation and Inuit peoples and support healing across the land. Community development initiatives and increasing overall human resources is an important factor that will determine enhanced quality outcomes.

As we anxiously await the reopening of our residential facility in January 2024, the Wanaki will continue to provide and evaluate virtual services to individuals in need. We also recognize that the NEW Wanaki Virtual Service has come to fill many gaps within many systems and we strongly believe that we need to maintain and deliver both Residential and Virtual services in 2024.

We continue to learn and create discussions around culture and intervention, mental health and mainstream approaches to learning. We have developed more sustainable approach and continue to invest in key human resource capacities for the future.

In closing I would like to take this opportunity to recognize and thank those who have participated in the Wanaki Program, those who contributed to the Wanaki Center's success; the devoted Wanaki staff members, the Board of Directors, the community partners, as well as our funders at Indigenous Services Canada. Together we are making a difference!

Contact us for more information on our programs and services!



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