

**Kahnawake Community Health Plan  
2012-2013**

<b>RATIONALE</b>	The 2010 Health Plan Evaluation identified seven health priorities, however, some community health activities do not perfectly align to those activities. These activities play an important supportive role in achieving the Community Health Plan.						
<b>GOAL</b>	To identify objectives and activities which contribute to primary health in the achievement of the health plan.						
<b>STRATEGY</b>	To review all community activities and services and ensure they describe their contribution to the health plan.						
<b>OBJECTIVES</b>	<b>Main Activities</b>	<b>Target Group</b>	<b>Title Responsible</b>	<b>Calendar/ Dates</b>	<b>Indicators</b>	<b>Data</b>	<b>Health Impact</b>
To reduce the morbidity and mortality associated with childhood injuries. (child injury prevention)	To develop & deliver monthly/seasonally relevant safety campaigns	0-14 years	Community Health Worker	January – January	Number of events Number of attendees. Decrease in harmful behaviours. Feedback from children, parents, teachers, etc.	Ambulance & CHIRP Statistics	Decrease in injuries related to unsafe behaviours.
	To ensure target areas are valid	0-14 years	Community Health Worker Executive Director – KYC Manager CHU CHIRP Coordinator	Annually	Our injury rate is lower or equal to surrounding communities.	CHIRP Statistics	Areas of concern are targeted for prevention & promotion of activities to decrease incidence & alleviate risks.
	To keep up to date on all new safety prevention and promotion data	0-14 years	Community Health Worker	On-going	New information introduced into campaigns.	As above	Target group receives up to date information on how to protect themselves from injury.
To promote & support breastfeeding as the number one choice for 85% of newborns up to 6 months for health promotion and disease prevention . (CHU Breastfeeding support)	Provide education to the community to increase knowledge and awareness of the health benefits of breastfeeding for all Kahnawakeron.non.	All breastfeeding mothers.	Breastfeeding Support Worker	October	Participation	Sign-up sheet	Knowing the importance of breastfeeding i.e. immunity, ↓ risk of Diabetes, ↓ risk of childhood obesity, etc.

**Kahnawake Community Health Plan  
2012-2013**

Encourage couples to choose breastfeeding as the first choice for feeding their newborn.	Offered to all new parents and infants.	Breastfeeding Support Worker Community Health Nurse	On-going	Pregnant women attending group meeting	Keeping accurate sign-in attendance sheets.	Couples knowing the health benefits for mother and baby.
Assist mothers to increase their skill level with solving breastfeeding problems and supporting one another.	Prenatal classes and all new breastfeeding mothers.	Community Health Nurses and Breastfeeding Support Worker	On-going	Number of new pregnant mothers attending prenatal classes.	Keeping accurate records. # of home visit/phone calls for troubleshooting	All pregnant mothers knowing the importance of breastfeeding for themselves and their newborns.
To educate families about the importance of exclusive breastfeeding until age 6 months.	Community	Breastfeeding Support Worker	On-going	Percentages of mothers breastfeeding exclusively until 6 months	Feedback from community	Knowing that breastfeeding has been mother's choice to breastfeed.
To encourage and educate teenagers to breastfeed.	To have a teens breastfeeding information session/booth.	Community Health Nurse	School year	Pregnant teens/ women attending group meeting/	Personal invitation	Teenagers knowing the importance of exclusively breastfeeding for at least 6 months.
Support mothers/infants who are experiencing breastfeeding difficulties in a timely fashion	B/f women infants, families	Community Health Nurses and Breastfeeding Support Worker	Ongoing	Decrease in breastfeeding problems experienced by mothers & infants	Statistics on breastfeeding initiation & duration. # of home visit/phone calls for troubleshooting	Decrease in premature weaning of infant.  Increased health benefits for mother and infant(s).
Assist women and families to identify resources to support them in their decision to breastfeed.	Pre and post natal clients & community at large	Community Health Nurses and Breastfeeding Support Worker	As needed October Quarterly	Feedback for clients. Attendance at Breastfeeding Support Group Use of resources	Breastfeeding duration rate (80%) way above the provincial and regional norms.	Decrease in premature weaning of infant.  Increased health benefits for mother and infant(s).
Explore innovative ways to educate the community in breastfeeding.	community	Breastfeeding Support Worker	ongoing	New promotion campaigns	promotional materials developed	Increased support for breastfeeding moms & babies

**Kahnawake Community Health Plan  
2012-2013**

To get accreditation as Baby Friendly Community through the Breastfeeding Committee of Canada.(CHU breastfeeding support)	Prepare for accreditation as a Baby-Friendly Community through the Breastfeeding Committee of Canada.		<ul style="list-style-type: none"> <li>• CHU Manager</li> <li>• Breastfeeding Support Worker</li> <li>• Community Health Nurses</li> <li>• Consultant</li> </ul>	August 2011- March 2012	accreditation	accreditation	Improved support for breastfeeding mothers and their babies. Health benefits i.e. decrease risk of diabetes& obesity, better bonding between mom & baby, etc
	To develop policies and procedure to support the Baby-Friendly Initiative.	KMHC staff	<ul style="list-style-type: none"> <li>• CHU Manager</li> <li>• Breastfeeding Support Worker</li> <li>• Community Health Nurses</li> <li>• Consultant</li> </ul>	September 2011- December 2012	Policies are in place.	accreditation	
	To educate the healthcare providers involved in prenatal and post-ppartum care about the Baby-Friendly Intiative, new policies, and local resources to support families in their choice to breastfeed.	KMHC Staff HCW	<ul style="list-style-type: none"> <li>• CHU Manager</li> <li>• Breastfeeding Support Worker</li> <li>• Consultant</li> </ul>	January 2012- March 2012	Attendance list	Attendance list	Improved support for breastfeeding mothers and their babies. Health benefits i.e. decrease risk of diabetes& obesity, better bonding between mom & baby, etc
To decrease morbidity associated with early hospital discharge of neonates and their mothers. (CHU Newborn home visits)	To receive all birth notices for JOL1B0 area code as per the Quebec Public Health Act.	Newborns – 1st week of life and their families	CHU Nurses	On-going	100% of all newborns and their families are contacted and seen within the first week of life Follow up of any problems identified. Medical chart made. First clinic and/or MD visit arranged.	Complete processing of birth notices Birth data base # of newborns per month, per year. # of males # of females age of mother Breast Vs. bottlefed on hospital discharge	Early Identification of any problems for mom or baby for early intervention

**Kahnawake Community Health Plan  
2012-2013**

	To ensure neonates and families have the best start possible	Newborns and their family	CHU nurse	Ongoing	# of referrals 100% of Home visit sheet filled out and charts made 1st time moms vs others # of babies that are seen in clinic	List kept	Appropriate assessment, identification and referral for any early onset problem, e.g. altered parenting
To educate expectant women (and their partners) on how to increase one's potential for a healthy pregnancy and birth, decrease complications in pregnancy. (CHU prenatal clinic)	Provide information re the practice of behaviours conducive to the outcome of a healthy pregnancy (i.e. regular follow up, nutrition, lifestyle etc.).	Pregnant women, & their partners	CHN	Weekly scheduled clinics ongoing	Early detection of problems which may impact on the pregnancy  Increased knowledge re healthy behaviours in pregnancy	# of visits at clinic  Age of moms # of GDM # of low and high birth weights	Healthy babies from healthy moms.
	Provide information on support strategies for labour and delivery	Pregnant women, & their partners	CHN	Quarterly	Increased knowledge re comfort measures in labour & delivery, types of delivery.	Attendance at Prenatal classes	Increased satisfaction re outcome of labour and delivery.
	Provide information re the practice of behaviours conducive to the outcome of a healthy pregnancy.			Individuals seen on a prn basis.		Evaluations from classes Attendance at Prenatal Classes	Optimal outcome of pregnancy for mother / baby(s) / family / community.
To ensure that children (0-4 years) receive early access to assessment, diagnosis, treatment, immunization and referral. (CHU Well baby Clinic)	To assure that children 0-4 are reaching their milestones and any concerns are addressed early.	Children 0-4 yrs.	WBC Nurses CHU secretary	Year round	Number of children attending clinic. Decrease did not arrive rates Medical chart/Rourke reflect visits, growth & development, referral, follow up and immunization.	Clinic attendance stats and number of immunizations given. Clinic attendance stats Number of clinics. Number of clients seen.	Prevention of preventable diseases through immunisation. Milestones (personal/social, fine motor adaptive, language, gross motor & growth & development) are met at each visit. Identify any developmental delay to ensure early intervention.

**Kahnawake Community Health Plan  
2012-2013**

To continue to provide and maintain high-quality mandated responsibilities (immunization).	Children 0-4 yrs	WBC Nurses	Year round	Vaccination rates	6 month audit of immunization cards Number of vaccines given per type.	Immunization is given as recommended. No disease outbreaks for diseases that are covered by immunization.
To refer children to appropriate resources as necessary i.e. for medical consultation, social issues, dentist, ophthalmology, speech therapy, physio/occupational therapy, etc.	Children 0-4 yrs.	WBC nurses	As necessary	Number of children referred. According to service i.e. dentist, ophth, etc.	Collect data per referral area.	Child seen by specialist in the field to get appropriate assessment and/or treatment to ensure early intervention.
To provide case conferences	Children 0-4	WBC nurses	As necessary	Number of children referred	Collect data on number of case conferences held.	Integrated services to child and family improve well-being
To ensure that children beyond age 4 years are followed up.	Children >4 yrs.	WBC nurses	As necessary	All children requiring continued follow up are seen by individual nurse	# of children sent reminder letters.	Child's on-going problem is resolved in the best possible way.
To assure that children 4-6 years old are reaching their milestones and any concerns are addressed early.	Children 4-6 yrs.	WBC Nurses CHU Secretary	Year round	Number of children attending clinic. Decrease did not arrive rates Medical chart/Rourke reflect visits, growth & development, referral, follow up and immunization.	Clinic attendance stats and number of immunizations given. Clinic attendance stats Number of clinics.	Prevention of preventable disease by ensuring that vaccinations are up-to-date i.e. 4year-old booster Milestones (personal/social, fine motor adaptive, language, gross motor & growth & development) are met at each visit. Identify any developmental delay to ensure early intervention.

**Kahnawake Community Health Plan  
2012-2013**

<p>To educate the community on healthy sex and sexuality and to reduce sexually transmitted infections in the community. (HIV)</p>	<p>To promote awareness of healthy sex and sexuality to the general community.</p>	<p>All community members</p>	<p>Prevention worker KSCS communications department (promotion/education worker).</p>	<p>On going throughout the year</p>	<p>Number of information sessions/kiosks completed.          Number of people who participated in the sessions/visited the kiosks.          Knowledge evaluation.          Number of individuals reporting to use condoms or other contraception methods (from client consultation.)          Decrease in the rate of sexually transmitted infections.          Number of articles, radio &amp; television commercials produced. Community feedback. Decrease in the rate of teenage pregnancies.          Number of individuals referred for healthy sex &amp; sexuality counselling. Number of clients who are referred for STI testing (KMHC or other)          Number of clients who are referred for contraception counselling (KMHC or other).          Client feedback</p>	<p>Agenda/activity schedule.          Participation/ Quiz sheets. Listing media work.          Community evaluation forms          Written referral forms.</p>	<p>Increased healthy sex and sexuality behaviours</p>
--	--	------------------------------	---	-------------------------------------	---	--	---

**Kahnawake Community Health Plan  
2012-2013**

	To identify the statistical prevalence of sexually transmitted infections, teen pregnancies and condom use in the community in collaboration with Kateri Memorial Hospital Center (KMHC)	Population of Kahnawake	Prevention worker KSS- school nurse Kateri Memorial Hospital staff	Yearly collection of statistics from necessary resources Quarterly meeting with appropriate staff from KMHC	# of sexually transmitted infections in Kahnawake # of teen pregnancies # of individuals reporting to use condoms or other contraception methods # of meetings with KMHC staff	Self-reporting through the use of awareness/knowledge survey. Statistics from la Societe de Services Socio de la Regie Regional. Statistics from Community Health Unit.	Increased healthy sex and sexuality behaviours. Reduced incidents of STI's Increased condom usage Reduced teen pregnancies
To increase knowledge of preconceptional health issues among future parents in Kahnawake. (Preconceptional health)	Promote the practice of preconceptional lifestyle behaviours that will maximise the potential for a healthy outcome for mother, infant & family	Women of childbearing age & their partners	CHN MD CHU secretary	Ongoing	Clients self referred or referred for counselling Information is taken from display case	Numbers of clients seen each year Restocking count bi-annually January & July	Benefits of 12 month pregnancy include optimal outcome for mother, infant, families, & community. This includes: A less stressful pregnancy due to diminished anxiety RT lifestyle behaviours in first trimester , and Less drain on community resources in dealing with the after effects of health issues related to preconceptional health.
To prevent the spread of disease in Kahnawake. (Reportable disease)	To monitor MADO (Maladies à Déclaration Obligatoire d'origine infectieuse).	Community	Manager CHU	Annually (statistics) monthly or as needed ( reports)	All disease trends are addressed within a short time frame.	# of reportable diseases.	Prevention & promotion activities are in place and are directed at the appropriate age group to reduce the spread of the disease.

**Kahnawake Community Health Plan  
2012-2013**

To continue to follow up all reportable diseases in collaboration with public health authorities.	Community	Manager CHU	as needed	No spread of reportable diseases. Effective, efficient monitoring & surveillance are accomplished.	# of reportable diseases.	No spread of reportable disease in the community.
To manage all vaccine products.	N/A	Manager CHU	On-going	Yearly audit by Agence-Monteregie.	100% compliance with guidelines. # of report of "Brise de chaine de froid".	Safe & effective vaccine management. Health of community not compromised by ineffective vaccines
To monitor for Tuberculosis & educate community.	Staff, students, Volunteers, Physicians Community	Staff health CHU Nurses Manager CHU	On-going	No new cases of tuberculosis	# of cases of tuberculosis	No new cases of tuberculosis
To communicate any calls for vigilance or communiqués from the Direction de Santé Publique to the community	Staff, students, Volunteers, Physicians Community	CHU Manager Communication Officer School Health Nurses	As needed	Community members follow directives i.e. present to clinic with certain symptoms and advise staff i.e. rash for possible measles	# of new cases of communicable disease	Reduce the number of potential cases. Families are able to manage at home appropriately and know when to consult a nurse or physician.
To educate staff regarding infection prevention and control practices as it pertains to different contractibility i.e. contact, droplet, air	Staff, students, Volunteers, Physicians	Infection Prevention and Control Nurse Staff Health Nurse	annually As needed	Staff are following appropriate precautions and are wearing PPE appropriately	Handwashing audits PPE use audits # of needlestick/body fluid exposure incidents (as reported by staff health)	Reduction in risk of cross contamination of clients. reduction in risk to staff to acquire illness. reduction in lost time



**Kahnawake Community Health Plan  
2012-2013**

	To educate staff regarding proper immunisation practices	Community Health Nurses homecare, out-patient clinic and community health nurses	CHU Manager	Sessions at Moneregie are held quarterly if enough sign up. (They are looking at possibly implementing a program on-line) As needed Annually in October	Staff feel confident in providing vaccinations according to the schedule and are able to evaluate immunisation records Staff are knowledgeable about new vaccine Staff are confident in providing Influenza & pneumococcal vaccines to the community.	# of Sessions Attendance	Prevention of preventable communicable disease through proper immunisation according to the Protocole d'immunization de Quebec.
To identify, assess and address student health problems. (School health elementary)	To create a master list of all student health problems.	Parents of students Staff	School Nurse	August/September Once annually	95% of all CSMR are returned to school. All teachers with students with health problems are confident in their ability to deal with problems.	# of CSMR processed. # of student health problems.	Nurses & staff are aware of all potential health problems
	To conduct vision screening for Kindergarten students and other students as referred by their teachers.	Kindergarten students Students with suspected visual problems.	School Nurse	October/November (once a year)	Kindergarten students 100% will be screened. All students referred by teacher will have vision screen.	# of students screened. # of students referred. # of students follow-up.	Potential vision problems are detected at an early age
	To ensure the SAR (Severe Allergic Reaction) Policy is being followed in all school.	Staff Students with life-threatening allergies. Parents of students with life-threatening allergies	School Nurse	August/September	Staff are confident in using EpiPen. All staff received in-service. Staff are successful at mock scenarios. All are aware of their responsibilities and there is 100% compliance.	# of students with severe allergies. Audit sheet of scenarios. List kept of teachers attending sessions.	All severe allergic reactions are responded to properly and according to the protocol.

**Kahnawake Community Health Plan  
2012-2013**

	To assess & address all of the student health concerns brought to the attention of the school nurse.	Staff Students	School Nurse Parents Teachers Administration	On-going throughout School year	# of students seen # of referrals made # of case conferences	Log Book List of indicators	All student health concerns are dealt with appropriately & have lead to the best possible outcome for the student.
To provide information/programs to students and staff to enable them to make healthy choices. (School health elementary)	To provide students with info on puberty, sexual health & body image.	Grade 5 & 6	School Nurse	January/ February	100% of student will describe the changes at puberty (physical, emotional, social).	# of students attending class. # of classes given	Students will have knowledge of puberty, sexual health & body image.
	To provide students with info on sexual abuse prevention & other safety issues.	Grades K-2	School Nurse Social Councillor	Once per year with each class	Each class receives a presentation 95% attendance of eligible students. Child will be able to say how to protect himself and/or what to do if something happens to them.	# of students attending. # of classes given. Informal evaluation at end of class.	To increase students' knowledge of sexual abuse prevention & what to do if it happens.
	To provide students with info on drugs & alcohol, including tobacco.	Grades 5 & 6	School Nurse	January /February	95% of students showed increased knowledge of dangers of drugs & alcohol, tobacco. 95% of Grade 5 + 6 attend 1 presentation per class.	# of classes. # of students attending	A decrease in alcohol, drug abuse. Decrease in teen smoking
	To provide students with info on healthy eating, exercise and safety issues.	Students	School Nurse	Winter	Children are able to verbalize healthy habits, food choices and physical activity options.	# of classes given # of students in class.	Increased knowledge of health and safety. Students will adopt a healthier lifestyle ↓ risk of obesity, diabetes, cancer and heart disease.
	To provide staff with info on heart health.	Staff	School Nurse and Adult Prevention	February	Increased awareness of Heart Health Questions from teachers about exercise, eating right.	Anecdotal	Staff make better choices for healthier lifestyle. Control/prevent diabetes and cardiovascular disease.

**Kahnawake Community Health Plan  
2012-2013**

To ensure a safe and healthy school environment. (School health elementary)	To address Health & Safety issues in schools.	Staff Students	School Nurse Committee Members Health & Safety School Administration	3-4 times a year & prn.	100% of health & safety problems have been addressed. # of first aiders adequate per school population.	# of meetings attended Minutes of mtgs. and list of attendees filed. # of accident reports and types of injuries.	No incidence of serious injuries occurring in the school setting. Health & Safety Committee review incident reports.
	To ensure the school's First Aid Kits are organized, stocked with proper supplies, and placed in strategic locations.	All school personnel	School Nurse Admin. Assistant Education Centre	September January March	0% serious consequences preventable through first aid. Supplies available at all times	# of First Aid Kits per school. # of trained personnel.	
To control & prevent communicable diseases. (school health elementary)	To conduct immunization clinic(s) as mandated by the MSSS.	Grade 4	School Nurse	October April	100% of eligible students received vaccine.	# of consent forms returned. # of shots given.	To prevent of Hepatitis B and HPV infections To prevent cervical cancer related to HPV infection
	To ensure staff & parents are informed regarding communicable diseases.	Staff & parents	School Nurse	August As needed	100% of parents notify school of their child's communicable disease. 100% of staff advise administration when parents' call or send note.	# of communicable diseases reported.	Parents & staff are knowledgeable of general infection control measures and therefore we will see a decrease in communicable diseases and a decrease in absenteeism.
	To inform teachers & students of the Policy & Procedure for blood borne diseases.	Grade 3-6 Staff	School Nurse	September/ October August	Staff attended protocol in- service.	# of teachers attending in- service. # of blood borne incidents.	There is a 0% serious consequence from a blood borne injury. Staff are knowledgeable about blood borne disease protocol.
	Students will receive information on general information on disease modes of transmission and infection control measures.	All students	School Nurse	Fall To be done before cold and flu season	95% of students demonstrate proper handwashing.	# of students attending education sessions.	Children are aware of disease modes of transmission and importance of proper handwashing & general hygiene measures.

**Kahnawake Community Health Plan  
2012-2013**

To reduce childhood obesity (school health elementary)	To screen for obesity and hypertension	Grade 4 students	School Nurse	October/ April	<ul style="list-style-type: none"> <li>● BMI</li> <li>● Blood pressure</li> </ul>	<ul style="list-style-type: none"> <li>● # of children with increase BMI</li> <li>● # of children with ↑ BP</li> </ul>	↑ awareness of health impact of obesity i.e. ↑ risk for diabetes, heart disease, hypertension, etc
	To increase physical activity	students	school nurse KSDPP school	school year	<ul style="list-style-type: none"> <li>● types of activities</li> <li>● # of activities</li> <li>● # of participants</li> <li>● # of class presentations</li> </ul>	● # of participants	<ul style="list-style-type: none"> <li>● ↓ chronic disease (long-term)</li> <li>● improved energy</li> <li>● ↓ BMI</li> </ul>
	To increase consumption of healthy foods	Parents of students Students	School Nurse Nutritionists KSDPP School	school year	<ul style="list-style-type: none"> <li>● # of articles</li> <li>● # of participants</li> <li>● # of class presentations</li> </ul>	# of participants	<ul style="list-style-type: none"> <li>● improved food choices</li> <li>● ↓ BMI</li> </ul>
To have good collaborative working relationships with other organization members. (school health elementary)	To seek out collaborative partners for community health campaigns/projects.	Select community groups or the community at large.	CHU Nurses	Through out the year	# of collaborative projects/programs.	Number of documented projects.	Better use of community & others' resources & expertise to address health issues.
	To respond to request from others for collaborative projects when feasible.				Increased contacts for networking. A lot of info sharing between contacts.		
	To provide medical information to participants of the Young Adults Program (YAP) & Teen Social Club (TSC).	Special needs clients with physical or mental handicaps.	School Nurse	Ongoing throughout year	Clients have good rapport with nurse and are comfortable asking questions related to different health topics.	# of information sessions # of participants attending Topics covered	Better understanding of health issues and personal care.
To identify, assess and address student health problems. (school health Survival School)	To create a master list of all student health problems.	Students Staff	School Nurse	August/September Once annually	95% of all CSMR are returned to school. All teachers with students with health problems are confident in their ability to deal with problems.	# of CSMR processed. # of student health problems.	Nurses & staff are aware of all student health problems.

**Kahnawake Community Health Plan  
2012-2013**

	To ensure the SAR (Severe Allergic Reaction) Policy is being followed in all schools.	Staff Students with life threatening allergies Parents of students with life threatening allergies	School Nurse	August/September	Staff are confident in using EpiPen. 100% of staff received inservice 100% success at mock scenarios All are aware of their responsibilities and there is 100% compliance	# of students with severe allergies. Audit sheet of scenarios # of teachers in attendance	All severe allergic reactions are responded to properly and according to the protocol.
	To address Health & Safety issues in schools.	Staff Students	School Nurse Health & Safety Committee members School Administration	3-4 times a year & prn.	100% of health & safety problems have been addressed. # of first aiders adequate per school population.	# of meetings held. List of attendees kept Minutes of mtgs # of accident reports	No incidence of serious injuries occurring in schools.
To ensure a safe and healthy school environment. (school health Survival School)	To ensure the school's First Aid Kits are organized, stocked with proper supplies, and placed in strategic locations.	All school personnel	School Nurse Education Center	September January March	0% serious consequences preventable through first aid. Supplies available at all times	# of First Aid Kits per school. # of requests for nursing supplies # of trained personnel	Teachers are knowledgeable of site of First Aid Kits and who is trained.
To control & prevent communicable diseases. (School health Survival School)	To conduct immunization clinic(s) as mandated by the MSSS.	Sec. III	School Nurse	October December May	100% of eligible students received vaccine.	# of consent forms signed. # of shots given	To vaccinate all eligible students. To update all immunizations as per provincial schedule.
	To ensure staff & parents are informed regarding communicable diseases.	Staff & parents	School Nurse	as needed Seasonal i.e for colds & flu	100% of parents notify school of their child's communicable disease. 100% of staff advise administration when parents' call or send note.	# of diseases reported.	Parents & staff are knowledgeable of general infection control measures and therefore we will see a decrease in communicable diseases and a decrease in absenteeism.

**Kahnawake Community Health Plan  
2012-2013**

	To inform teachers of the Policy & Procedure for blood borne diseases.	Staff	School Nurse	August	Staff attended protocol in-service.	# of blood borne incidents. # of teachers attending in-service.	Staff are knowledgeable about blood borne protocol. There is a 0% serious consequence from a blood borne injury.
	Students will receive information on general infection control measures.	All students	School Nurse	Fall	95% of students demonstrated proper handwashing.	# of students completing post test evaluation.	Children are aware of importance of proper handwashing & general hygiene measures.
To have good collaborative working relationships with other organization members. (School health Survival School)	To seek out collaborative partners for community health campaigns/projects.	Select community groups or the community at large.	CHU Nurses	Throughout the year	# of collaborative projects/programs. Increased contacts for networking.	Number of documented projects.	Better use of community & others' resources & expertise to address health issues.
	To respond to request from others for collaborative projects when feasible.				Increased contacts for networking. A lot of info sharing between contacts.		
To promote healthy behaviours & lifestyle choices by providing students with quality health care, accurate information & adequate support services on site. To encourage responsible self-care through a quality, culturally relevant school health program through collaboration efforts with other organizations at KSS. To continue to provide a high-quality mandatory program for adolescent immunization. (School health Survival School)	To ensure a safe and healthy school environment.	Students, Staff	School Nurse EHO's	Yearly, November	Staff student feedback re: air quality, environmental factors.	Subjective: Reports of illness related air quality, environmental factors.	0% serious consequences from illness/injury related to air quality, environmental factors.

**Kahnawake Community Health Plan  
2012-2013**

To continue to provide a culturally relevant, age-appropriate, comprehensive school health curriculum.	Middle School students, Grade 9 biology students, others (as needed)	School Nurse, KSCS – Healthy Sexuality Program Coordinator.	On-going throughout year including planning meetings, prep time & class time.	Each class has a presentation. # of classes. 95% of eligible students attend. # of students attending. Evaluation forms from students.	Agenda: Number of classes provided. Attendance lists.	Improved lifestyle choices for adolescents.
To communicate messages of adolescent wellness, self-care and personal responsibility.	Students	Social Counsellor KSCS Prevention liaison (Team Leader) School Nurse, Other relevant professionals. Academic Counsellor	6-8 weeks On-going relevant to thematic weeks/months, time permitting. And as needed Bi-annually	Feedback from team, students, teachers. 4 information booths in school year. Each information booth initiative involves collaboration with 1 other health care provider.	# of meetings attended # of booths and types of booths Participation via passbooks, surveys by students. From academic counsellor	Improved lifestyle choices for adolescents.
To continue to identify the health & health education needs of KSS students & staff & determine the most effective way to respond to those needs.	Students, staff	School Nurse Administration, Student Services (i.e. Social & Academic Counselors, Resources Teachers, Psychologist, Nurse, KSCS liaison).	On-going daily weekly	Students, staff readily seek health information and support from school nurse. Student issues addressed in a timely, comprehensive manner.	# of students and staff according to categories recorded in logbook. # of Referrals to the student services team for the school nurse	Improved delivery of services to students, staff. Improved delivery of services to students.

**Kahnawake Community Health Plan  
2012-2013**

	To provide school-based holistic health care services to KSS students.	KSS students over 14 years of age, or with parental consent.	School nurse KMHC MD JGH Coordinator	Bi-weekly October - May Ongoing as needed	Positive feedback from students. JGH Residets Maintain student participation as seen by clinic visits Protocols and/or collective prescriptions developed and competency acquired	# of students seen, male/female, categories of visits # of lab tests sent by category Protocols, collective prescription	Improved delivery of health care services to KSS students.
To Continue to develop the Staff Health Program. (staff health program)	To ensure staff immunization is up to date	New employees Staff who need 10 year booster Inpatient Dept. Plant Man. Dept Homecare	Staff Health Nurse & Infection Control Nurse	On-going October/ November	100% of new employees' immunizations are up to date. All reminders sent out Increase of 10% over last year's staff receiving flu vaccine	Chart filed when completed Regie Regionale data base	Staff are knowledgeable of government's recommendations. Immunizations are updated. Decrease in deaths among residents due to influenza
	To provide staff with info on blood borne related disease and their prevention.	At risk staff (Inpatient, OPD, Plant Maintenance) Homecare, Activity Center, Staff with blood borne injury	Staff Health Nurse	Fall	80% of staff (clinical & housekeeping) attend in-service. Protocol followed in all reported blood borne incidents	Attendance lists Analysis of incident reports	Staff are knowledgeable about blood borne diseases and their prevention. Decrease in blood borne related injuries
	To promote Health & Safety in the Workplace	All Staff	Staff Health Nurse	On-going	Number of concerns brought to my attention. Satisfaction with addressing the concerns	Nurses Agenda Anecdotal	All staff are taking an active part in Health & Safety issues
	To promote Health & Safety in the Workplace	All Staff	Staff Health Nurse & Adult Prevention Nurse	Spring – November- April January – February April - May	attendance to activities	Attendance lists	Decrease in absenteeism. Healthier staff (prevention/ management of cancer, heart disease, diabetes, obesity, depression, stress, etc) Decrease injuries



**Kahnawake Community Health Plan  
2012-2013**

Walking Club (staff health program)	To prevent injuries in the workplace.	Injured workers	Staff Health Nurse	on-going	Decrease in injuries	CSST claims and Insurance claims and Incident/accident reports.	Staff will be more knowledgeable about preventing accidents
	To maintain a link between injured employee and the workplace	Injured or sick employees	Staff Health Nurse, Human Resources	On-going	100% of this group of staff will be contacted every 2 weeks.	Nurses agenda and notes in staff charts	Staff will have support while on leave from work. Decrease in length of disability
To provide coordination of volunteer services for client service teams and enhances evening and weekend activities. (Volunteer program)	To provide volunteers to client service teams in particular IPD, Activity and Rehab departments	Volunteers, IPD, Activity and Rehab Departments	Volunteer Coordinator IPD/Activity/Rehab Manager or delegate	Annually	Monitor volunteers and distribution within departments	# of volunteers in each department	Participation of community members in health care activities is healthy for the volunteer and for the residents/clients
	To offer hours of service to volunteers in the evening and weekends.	Long term / Short term care residents Physiotherapy clients	Volunteer Coordinator IPD/Activity/Rehab Manager or delegate	Annually	Monitor number of off-hour activities for evenings and weekends	# of volunteer hours on evenings and weekends	More services for residents/clients after peak hours Quality of life for residents. Increased physical/cognitive stimulation
	To maintain / update log of activities and hours for volunteers	Administration	Volunteer Coordinator Activity Department Manager	Annually	Monitor volunteer log book and sign in sheets and times	Total # of volunteer hours and distribution of activities annually	Reduce isolation / depression for LTC / STC residents/clients More opportunities for clients / residents to benefit from volunteer services. (Client / volunteer ratio)
	To increase number of volunteers who are in the Feeding Program and provide training	Present / Future volunteers Clients / Residents	Volunteer Coordinator IPD Nurse Manager Speech Pathologist	Ongoing	Training / Capacity Building	# of volunteers trained for feeding	Improved mealtimes and overall health for clients / residents Personalized care

Goal	To reduce the morbidity and mortality associated with childhood injuries.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To develop & deliver monthly/seasonally relevant safety campaigns	Provide a yearly calendar outlining events to take place. Work in collaboration with schools, youth center, Peacekeepers, etc. to deliver events. Events scheduled monthly	0-14 years	Community Health Worker	January – January	Number of events Number of attendees. Decrease in harmful behaviours. Feedback from children, parents, teachers, etc.	Ambulance & CHIRP Statistics	Decrease in injuries related to unsafe behaviours.	Seasonal Campaigns continue
To ensure target areas are valid	Review CHIRP (Canadian Hospitals Injury Reporting Program) annually	0-14 years	Community Health Worker Executive Director – KYC Manager CHU CHIRP Coordinator	Annually	Our injury rate is lower or equal to surrounding communities.	CHIRP Statistics	Areas of concern are targeted for prevention & promotion of activities to decrease incidence & alleviate risks.	
To keep up to date on all new safety prevention and promotion data	Review journals Review injury sites on internet Network with other injury prevention specialists. Utilize resource people, i.e. Barry Pless, Gary Keays @Montreal Children’s Hospital	0-14 years	Community Health Worker	On-going	New information introduced into campaigns.	As above	Target group receives up to date information on how to protect themselves from injury.	Ongoing.

Goal	To promote & support breastfeeding as the number one choice for feeding all newborns. To increase breastfeeding initiation rate to 85%. To increase breastfeeding duration at 6 months to 85%. To promote awareness of breastfeeding as an important measure for health promotion and disease prevention.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
Provide education to the community to increase knowledge and awareness of the health benefits of breastfeeding for all Kahnawakeron.non.	Breastfeeding information sessions/workshops in conjunction with breastfeeding month	All breastfeeding mothers.	Breastfeeding Support Worker	October	Participation	Sign-up sheet	Knowing the importance of breastfeeding i.e. immunity, ↓ risk of Diabetes, ↓ risk of childhood obesity, etc.	
Encourage couples to choose breastfeeding as the first choice for feeding their newborn.	Encourage attendance at Iontstaronhtha Support Group Meeting through personal invitation or referral. Discussion through prenatal visits and classes.	Offered to all new parents and infants.	Breastfeeding Support Worker Community Health Nurse	On-going	Pregnant women attending group meeting	Keeping accurate sign-in attendance sheets.	Couples knowing the health benefits for mother and baby.	
Assist mothers to increases their skill level with solving breastfeeding problems and supporting one another.	Home and clinic visits post-partum to assist, diagnose and support mothers and infants with breastfeeding difficulties. On-call service for any urgent after hours breastfeeding difficulties.	Prenatal classes and all new breastfeeding mothers.	Community Health Nurses and Breastfeeding Support Worker	On-going	Number of new pregnant mothers attending prenatal classes.	Keeping accurate records. # of home visit/phone calls for troubleshooting	All pregnant mothers knowing the importance of breastfeeding for themselves and their newborns.	
To educate families about the importance of exclusive breastfeeding until age 6 months.	Breastfeeding promotion and education on K103. Act as a resource person and support person. Coordinate and host monthly Iontstaronhtha.	Community	Breastfeeding Support Worker	On-going	Percentages of mothers breastfeeding exclusively until 6 months	Feedback from community	Knowing that breastfeeding has been mother’s choice to breastfeed.	
To encourage and educate teenagers to breastfeed.	Educate at the high school level on the importance of breastfeeding	To have a teens breastfeeding information session/booth.	Community Health Nurse	School year	Pregnant teens/ women attending group meeting/	Personal invitation	Teenagers knowing the importance of exclusively breastfeeding for at least 6 months.	

Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
Support mothers/infants who are experiencing breastfeeding difficulties in a timely fashion	Breastfeeding assessment and follow up 24/7 PRN basis	B/f women infants, families	Community Health Nurses and Breastfeeding Support Worker	Ongoing	Decrease in breastfeeding problems experienced by mothers & infants	Statistics on breastfeeding initiation & duration. # of home visit/phone calls for troubleshooting	Decrease in premature weaning of infant.  Increased health benefits for mother and infant(s).	
Assist women and families to identify resources to support them in their decision to breastfeed.	Distribution of breastfeeding resource packages  Update breastfeeding resource library Referral to Breastfeeding Support Group (pre/postnatal)  Radio show every Int'l breastfeeding week  Assist with newspaper & newsletter articles	Pre and post natal clients & community at large	Community Health Nurses and Breastfeeding Support Worker	As needed  October Quarterly	Feedback for clients.  Attendance at Breastfeeding Support Group  Use of resources	Breastfeeding duration rate (80%) way above the provincial and regional norms.	Decrease in premature weaning of infant.  Increased health benefits for mother and infant(s).	
Explore innovative ways to educate the community in breastfeeding.	Access material from different sources. Adapt for Kahnawake Consult with BSG participants	community	Breastfeeding Support Worker	ongoing	New promotion campaigns	promotional materials developed	Increased support for breastfeeding moms & babies	

Goal	To get accreditation as Baby Friendly Community through the Breastfeeding Committee of Canada.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
Prepare for accreditation as a Baby-Friendly Community through the Breastfeeding Committee of Canada.	Hire consultant to prepare for accreditation. Review criteria for accreditation.		<ul style="list-style-type: none"> <li>• CHU Manager</li> <li>• Breastfeeding Support Worker</li> <li>• Community Health Nurses</li> <li>• Consultant</li> </ul>	August 2011- March 2012	accreditation	accreditation	Improved support for breastfeeding mothers and their babies. Health benefits i.e. decrease risk of diabetes& obesity, better bonding between mom & baby, etc	
To develop policies and procedure to support the Baby-Friendly Initiative.	Review polices from other organizations. Adopt these to apply to KMHC & Kahnawake.	KMHC staff	<ul style="list-style-type: none"> <li>• CHU Manager</li> <li>• Breastfeeding Support Worker</li> <li>• Community Health Nurses</li> <li>• Consultant</li> </ul>	September 2011- December 2012	Policies are in place.	accreditation		
To educate the healthcare providers involved in prenatal and post-ppartum care about the Baby-Friendly Intiative, new policies, and local resources to support families in their choice to breastfeed.	Presentation to the staff in general about the Baby Friendly Initiative. Training for nurses (20-hour) involved in direct care of prenatal and post-partum moms.	KMHC Staff HCW	<ul style="list-style-type: none"> <li>• CHU Manager</li> <li>• Breastfeeding Support Worker</li> <li>• Consultant</li> </ul>	January 2012- March 2012	Attendance list	Attendance list	Improved support for breastfeeding mothers and their babies. Health benefits i.e. decrease risk of diabetes& obesity, better bonding between mom & baby, etc	

**Kahnawake Community Health Plan  
2012-2013**

KMHC : New Born Home Visits

Goal	To decrease morbidity associated with early hospital discharge of neonates and their mothers.									
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/Dates	Indicators	Data	Health Impact	Review		
To receive all birth notices for JOL1B0 area code as per the Quebec Public Health Act.	Respect confidentiality of all birth notices.	Newborns – 1 <sup>st</sup> week of life and their families	CHU Nurses	On-going	100% of all newborns and their families are contacted and seen within the first week of life	Complete processing of birth notices	Early Identification of any problems for mom or baby for early intervention	# of live births within postal code for 2010: 102		
								Birth data base	# Male/Female:	
	Follow up to ensure home visit has been made and/or family contacted.							# of newborns per month, per year.	55/47	
	If birth notice not received follow up with birthing hospital.							Follow up of any problems identified.	# of males	# of babies visited: 49
								Medical chart made.	# of females	1 <sup>st</sup> time moms: 45
	Complete the birth database and collate as per month of birth, year of birth, gender, breast or bottle at discharge, scolarity of mother, date of contact, date of first visit, etc.							First clinic and/or MD visit arranged.	age of mother	Age of Mom < 19: 14 >35: 19
									Breast Vs. bottlefed on hospital discharge	Breastfed: 89 Bottle-fed : 13
										NOTE: these stats will be kept on a spreadsheet from now on.
To ensure neonates and families have the best start possible	Nurse conducted physical assessment of the neonate	Newborns and their family	CHU nurse	Ongoing	# of referrals	List kept	Appropriate assessment, identification and referral for any early onset problem, e.g. altered parenting	# of referrals:		
	Nurse conducted assessment of family coping								100% of Home visit sheet filled out and charts made	
	Nurse assessment of the Home environment								1 <sup>st</sup> time moms vs others	
	Referral to appropriate service as indicated:								# of babies that are seen in clinic	
	Paediatrician, family doctor									
Social service, etc										

Goal	To educate expectant women (and their partners) on how to increase one's potential for a healthy pregnancy and birth. To Decrease in complications of pregnancy.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
Provide information re the practice of behaviours conducive to the outcome of a healthy pregnancy (i.e. regular follow up, nutrition, lifestyle etc.).	Prenatal clinic: Prenatal screening according to the guidelines i.e. BP, urinalysis, weight, etc. Education appropriate to stage of pregnancy Referral to dietician as needed Referral to prenatal classes (PNC) Consultation with physician Administer RhoGam as needed	Pregnant women, & their partners	CHN	Weekly scheduled clinics ongoing	Early detection of problems which may impact on the pregnancy  Increased knowledge re healthy behaviours in pregnancy	# of visits at clinic  Age of moms # of GDM # of low and high birth weights	Healthy babies from healthy moms.	# of prenatal visits: (april 1-Feb 21) 371  # of GDM: 2 # type 2: 2  Note: GDM & type 2 patients are followed elsewhere as considered high-risk.  Birth Weight: < 5 lbs.: 1 > 10 lbs.: 0
Provide information on support strategies for labour and delivery	Prenatal Classes and/ or one on one education Info on labour & delivery Info on labour techniques & partner support Info on infant feeding choices Information re community resources (WBC, Iontstaronhtha, etc) to assist new parents	Pregnant women, & their partners	CHN	Quarterly	Increased knowledge re comfort measures in labour & delivery, types of delivery.	Attendance at Prenatal classes	Increased satisfaction re outcome of labour and delivery.	# of classes: 2 series of 2 classes
Provide information re the practice of behaviours conducive to the outcome of a healthy pregnancy.				Individuals seen on a prn basis.		Evaluations from classes Attendance at Prenatal Classes	Optimal outcome of pregnancy for mother / baby(s) / family / community.	# of participants: total of 8 moms





Goal	To ensure that children (0-4 years) receive early access to assessment, diagnosis, treatment, immunization and referral.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To continue to provide and maintain high-quality mandated responsibilities (immunization).	Immunization to target population according to the PIQ (Protocol Immunization Quebec).  Anticipatory guidance for parents.  Promotion/Prevention as per age group.	Children 0-4 yrs	WBC Nurses	Year round	Vaccination rates	6 month audit of immunization cards  Number of vaccines given per type.	Immunization is given as recommended.  No disease outbreaks for diseases that are covered by immunization.	
To refer children to appropriate resources as necessary i.e. for medical consultation, social issues, dentist, ophthalmology, speech therapy, physio/occupational therapy, etc.	Referral to physician. Referral to KSCS Prevention & Support Services Referral to Montreal Children's Hospital Referral to Parenting group at KSCS as needed Referral to paediatric consultants. Referral to Step by Step Child & Family Center (for developmental delay) Follow up by nurse. Referral to KSCS social work	Children 0-4 yrs.	WBC nurses	As necessary	Number of children referred.  According to service i.e. dentist, ophth, etc.	Collect data per referral area.	Child seen by specialist in the field to get appropriate assessment and/or treatment to ensure early intervention.	

Goal	To ensure that children (0-4 years) receive early access to assessment, diagnosis, treatment, immunization and referral.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To provide case conferences	Hold case conferences in collaboration with all agencies involved with child & family.	Children 0-4	WBC nurses	As necessary	Number of children referred	Collect data on number of case conferences held.	Integrated services to child and family improve well-being	
To ensure that children beyond age 4 years are followed up.	The nurse ensures children that need follow up are either followed in school and/or parents are made aware of need and follow up with family physician or appropriate service.	Children >4 yrs.	WBC nurses	As necessary	All children requiring continued follow up are seen by individual nurse	# of children sent reminder letters.	Child's on-going problem is resolved in the best possible way.	
To assure that children 4-6 years old are reaching their milestones and any concerns are addressed early.	<p>Review immunisation records and provide immunisation according to the recommended schedule as per "Protocole d'immunization de Quebec"</p> <p>Address all aspects of health/family care utilizing the assessment tools – Rourke, CHU/WBC procedure and Denver Developmental.</p>	Children 4-6 yrs.	WBC Nurses	Year round	<p>Number of children attending clinic.</p> <p>Decrease did not arrive rates</p>	<p>Clinic attendance stats and number of immunizations given.</p> <p>Clinic attendance stats</p>	<p>Prevention of preventable disease by ensuring that vaccinations are up-to-date i.e. 4year-old booster</p> <p>Milestones (personal/social, fine motor adaptive, language, gross motor &amp; growth &amp; development) are met at each visit.</p>	

	Provide holistic care to children and their families addressing their physical, emotional, mental and social needs.  Register vaccinations in the Vaxin (database)		CHU secretary		Medical chart/Rourke reflect visits, growth & development, referral, follow up and immunization.	Number of clinics.  Number of clients seen.	Identify any developmental delay to ensure early intervention.	
--	--	--	---------------	--	--	---	--	--

Program: HIV (Healthy Sex and Sexuality)								
<b>Goal</b>	To educate the community on healthy sex and sexuality and to reduce sexually transmitted infections in the communitiy.							
<b>Objectives</b>	<b>Main Activities</b>	<b>Target Group</b>	<b>Title Responsible</b>	<b>Calendar/ Dates</b>	<b>Indicators</b>	<b>Data</b>	<b>Health Impact</b>	<b>2010 Review</b>
To promote awareness of healthy sex and sexuality to the general community.	<p>Healthy sex and sexuality information sessions and kiosks throughout the community. (Healthy sex and sexuality focuses on providing information/awareness on HIV/AIDS and Sexually transmitted infections, contraception.)</p> <p>Media campaign focusing on providing information/awareness on HIV/AIDS and Sexually transmitted infections, contraception.</p> <p>One-on-one healthy sex &amp; sexuality referral sessions with KSCS clientele.</p>	All community members	<p>Prevention worker</p> <p>KSCS communications department (promotion/education worker).</p>	On going throughout the year	<p>Number of information sessions/kiosks completed.</p> <p>Number of people who participated in the sessions/visited the kiosks.</p> <p>Knowledge evaluation.</p>	<p>Agenda/activity schedule.</p> <p>Participation/</p>	<p>Increased healthy sex and sexuality behaviours.</p> <p>Increased healthy sex and sexuality behaviours.</p>	<p><u>Information Booths &amp; Activities:</u>                      * <b>May 17/10:</b> Drug booth at KSS, 272 students                      * <b>June 3/10:</b> Racers for Health, 700 people                        * <b>June 5/10:</b> Dragon Boat Race, 400 people                        * <b>Nov16, 17.18. 19</b> Family Preservation Conference 95 people exposed to information                        * <b>Feb 11/11</b> KSCS Lobby 60 people</p>

**Kahnawake Community Health Plan  
2012-2013**

Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact	2010 Review
					Number of individuals reporting to use condoms or other contraception methods (from client consultation.)  Decrease in the rate of sexually transmitted infections. Number of articles, radio & television commercials produced.  Community feedback.  Decrease in the rate of teenage pregnancies.	Quiz sheets.  Listing media work.  Community evaluation forms		* <b>Feb 14/11</b> KSS Info Booth, 272 students  * <b>May 6/10:</b> Mother’s Day Walk, 150 people  * <b>May 18/10:</b> Safe Grad Presentation, 32 KSS graduating students  <u><b>Television:</b></u> <ul style="list-style-type: none"> <li>• June 21/10: “Teen Safety”</li> <li>• Dec 14/10 “Mohawk TV – Teen Pregnancy – Importance of Contraception</li> </ul> <u><b>Radio:</b></u>

**Kahnawake Community Health Plan  
2012-2013**

Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact	2010 Review
					<p>Number of individuals referred for healthy sex &amp; sexuality counselling.</p> <p>Number of clients who are referred for STI testing (KMHC or other)</p> <p>Number of clients who are referred for contraception counselling (KMHC or other).</p> <p>Client feedback</p>	<p>Written referral forms.</p> <p>Written referral forms.</p> <p>Written referral forms.</p> <p>Evaluation forms.</p>		<p>* Feb 8/11 – Healthy Relationships &amp; Sexuality</p> <p><b><u>Newspaper</u></b></p> <ul style="list-style-type: none"> <li><b>June 2010:</b> “ Teen Fathers” &amp; “HPV: new vaccine use”</li> </ul> <p><b><u>Trainings:</u></b></p> <p>* <b>Aug 20/10:</b> Needs Assessment, 25 staff attended</p> <p>* <b>May 27/10:</b> Love Hurts Training, 1 worker attended</p> <p>* <b>July 3/10:</b> HPV Conference, 1 worker attended.</p> <p>* <b>Feb 2011:</b> Sexual Abuse Prevention Training 14 participants</p> <p>* <b>Jan27 /11</b> Oversexualization of Young Girls Training 44 participants</p>

**Kahnawake Community Health Plan  
2012-2013**

Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact	2010 Review
								<p>* <b>Feb 18/11</b> Sexpressions Training 15participants</p> <p><b>Requests:</b></p> <p>* <b>April 19/10:</b> 1 worker requested information for client</p> <p>* <b>August 2/10:</b> 1 worker requested information</p> <p>* <b>Jan 18/11</b> Requested information for client</p> <ul style="list-style-type: none"> <li>• <b>June 18/10:</b> Referral for healthy sexuality education to teen female 13yrs old under YP.</li> </ul> <p><b>Total # of participants: 2089</b> <b>Total # of activities: 22</b></p>

**Kahnawake Community Health Plan  
2012-2013**

Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact	2010 Review
<p>To identify the statistical prevalence of sexually transmitted infections, teen pregnancies and condom use in the community in collaboration with Kateri Memorial Hospital Center (KMHC)</p>	<p>To collect the statistics from KMHC and Montérégie regarding the Kahnawake population.</p>	<p>Population of Kahnawake</p>	<p>Prevention worker</p>	<p>Yearly collection of statistics from necessary resources</p>	<p># of sexually transmitted infections in Kahnawake</p>	<p>Self-reporting through the use of awareness/knowledge survey.</p>	<p>Increased healthy sex and sexuality behaviours.</p>	<p>Total # of participants: 0</p>
	<p>To utilize information gathered from KMHC and Montérégie to design prevention campaigns and KSCS programs</p>		<p>KSS- school nurse</p>	<p>Quarterly meeting with appropriate staff from KMHC</p>	<p># of teen pregnancies</p>	<p>Statistics from la Societe de Services Socio de la Regie Regional.</p>	<p>Reduced incidents of STI's</p>	<p># of STI's in Kahnawake: unknown</p>
			<p>Kateri Memorial Hospital staff</p>		<p># of individuals reporting to use condoms or other contraception methods</p>	<p>Statistics from Community Health Unit.</p>	<p>Increased condom usage</p>	<p># of teen pregnancies in Kahnawake: unknown</p>



**Kahnawake Community Health Plan  
2012-2013**

Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact	2010 Review
					# of meetings with KMHC staff		Reduced teen pregnancies	# of individuals reported condom or other contraceptive use: 0  # of meeting with KMHC staff: 0

Goal	To increase knowledge of preconceptional health issues among future parents in Kahnawake.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
<p>Promote the practice of preconceptional lifestyle behaviours that will maximise the potential for a healthy outcome for mother, infant &amp; family</p>	<p>Preconceptional counselling on an individual basis (self-referred or consultation). Referral to a professional for follow up care (i.e. MD, dietician) Provide physicians with material, which is appropriate for their clients who are seeking to become pregnant Update preconceptional health materials Distribution of preconceptional health package. Maintain preconceptional health information in display case</p>	<p>Women of childbearing age &amp; their partners</p>	<p>CHN    CHN &amp; CHU secretary  CHN &amp; MD   CHU secretary</p>	<p>Ongoing</p>	<p>Clients self referred or referred for counselling  Information is taken from display case</p>	<p>Numbers of clients seen each year  Restocking count bi-annually January &amp; July</p>	<p>Benefits of 12 month pregnancy include optimal outcome for mother, infant, families, &amp; community. This includes: A less stressful pregnancy due to diminished anxiety RT lifestyle behaviours in first trimester , and  Less drain on community resources in dealing with the after effects of health issues related to preconceptional health.</p>	<p>Continues to be a consultative service.  Education materials replenished on a regular basis.  Radio commercials continue</p>

Goal	To prevent the spread of disease in Kahnawake.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To monitor MADO (Maladies à Déclaration Obligatoire d'origine infectieuse).	Review MADO for regional trends from statistics provided by and reports received Direction de Santé Publique Montérégie .  Inform appropriate personnel so program can be delivered in the problem areas.	Community	Manager CHU	Annually (statistics) monthly or as needed ( reports)	All disease trends are addressed within a short time frame.	# of reportable diseases.	Prevention & promotion activities are in place and are directed at the appropriate age group to reduce the spread of the disease.	
To continue to follow up all reportable diseases in collaboration with public health authorities.	<ul style="list-style-type: none"> <li>● Receive notifications from Direction de Santé Publique Montérégie</li> <li>● Discuss case as to how to proceed with follow-up</li> <li>● Follow up as per each disease protocol.</li> <li>● Send back reports as required by Direction de Santé Publique Montérégie</li> <li>● Advise, support &amp; inform clients involved.</li> <li>● Education/Prevention of recurrence and/or spread of</li> </ul>	Community	Manager CHU	as needed	No spread of reportable diseases.  Effective, efficient monitoring & surveillance are accomplished.	# of reportable diseases.	No spread of reportable disease in the community.	

**Kahnawake Community Health Plan  
2012-2013**

To manage all vaccine products.	Management of vaccines in accordance with “Protocole d’immunisation du Quebec” MSSS.	N/A	Manager CHU	On-going	Yearly audit by Agence-Monteregie.	100% compliance with guidelines. # of report of “Brise de chaine de froid”.	Safe & effective vaccine management. Health of community not compromised by ineffective vaccines	0 report of break in cold chain this year.
---------------------------------	--	-----	-------------	----------	------------------------------------	---	--	--

Goal	To prevent the spread of disease in Kahnawake.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To monitor for Tuberculosis & educate community.	Provide tuberculosis screening for employees, trainees/students and regular volunteers. To promote awareness about tuberculosis	Staff, students, Volunteers, Physicians  Community	Staff health CHU Nurses  Manager CHU	On-going	No new cases of tuberculosis	# of cases of tuberculosis	No new cases of tuberculosis	
To communicate any calls for vigilance or communiqués from the Direction de Santé Publique to the community	Have documents from Direction de Santé Publique translated Send any communiqués to the communication officer for distribution to the radio & TV stations, newspaper, newsletter within the community Send communiqués to the schools for distribution to student Advise staff re: how to handle calls, follow-up, precautions, vigilance, and treatment Be available to answer any questions from community members.	Community      Staff, students, Volunteers, Physicians	CHU Manager Communication Officer School Health Nurses	As needed	Community members follow directives i.e. present to clinic with certain symptoms and advise staff i.e. rash for possible	# of new cases of communicable disease	Reduce the number of potential cases. Families are able to manage at home appropriately and know when to consult a nurse or physician.	2011-2012 communiqués include: measles coli related raw walnuts West Nile virus





Goal	To identify, assess and address student health problems.						
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact
To create a master list of all student health problems.	Confidential school medical record (CSMR) is sent to all parents. Confidential school medical record (CSMR) is sent to all parents. Returns are processed. Parents called for clarification.  List compiled of students with health problems. List distributed to appropriate teachers. Teaching re: various health problems.	Parents of students         Staff	School Nurse	August/September Once annually	95% of all CSMR are returned to school.   All teachers with students with health problems are confident in their ability to deal with problems.	# of CSMR processed.   # of student health problems.	Nurses & staff are aware of all potential health problems
To conduct vision screening for Kindergarten students and other students as referred by their teachers.	Organizing and implementing the vision screening and retests  Notification to parents and consults completed for children needing referral. Follow –up with parents that their child was seen.	Kindergarten students    Students with suspected visual problems.		October/November (once a year)	Kindergarten students 100% will be screened.  All students referred by teacher will have vision screen.	# of students screened.  # of students referred.  # of students follow-up.	Potential vision problems are detected at an early age





Goal	To provide information/programs to students and staff to enable them to make healthy choices.						
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact
To provide students with info on puberty, sexual health & body image.	Determine content & number of sessions for each grade. Review teaching materials. Send letter to grade 5 parents. Coordinate times with teacher. Give info on puberty change, reproductive systems, and menstruation.	Grade 5 & 6	School Nurse	January/ February	100% of student will describe the changes at puberty (physical, emotional, social).	# of students attending class.  # of classes given.	Students will have knowledge of puberty, sexual health & body image.
To provide students with info on sexual abuse prevention & other safety issues.	Discussion with class about feelings (good and bad). Discussion about private/public parts of body. Discussion about what to do if it happens to you, coloring book to bring home.	Grades K-2	School Nurse  Social Councillor	Once per year with each class	Each class receives a presentation  95% attendance of eligible students. Child will be able to say how to protect himself and/or what to do if something happens to them.	# of students attending.  # of classes given.  Informal evaluation at end of class.	To increase students' knowledge of sexual abuse prevention & what to do if it happens.
To provide students with info on drugs & alcohol, including tobacco.	Coordinate classes with teachers. Discussion with classes about addictions, things people can become addicted to and how to prevent addictions	Grades 5 & 6	School Nurse  Social Councillor	January /  February	95% of students showed increased knowledge of dangers of drugs & alcohol, tobacco.  95% of Grade 5 + 6 attend 1 presentation per class.	# of classes.  # of students attending.	A decrease in alcohol, drug abuse.  Decrease in teen smoking.
To provide students with info on healthy eating, exercise and safety issues.	Plan content Acquire resources Coordinate times with teachers Meet with classes	Students	School Nurse	Winter	Children are able to verbalize healthy habits, food choices and physical activity options.	# of classes given # of students in class.	Increased knowledge of health and safety. Students will adopt a healthier lifestyle ↓ risk of obesity, diabetes, cancer and heart disease.

<b>Goal</b>							
To provide information/programs to students and staff to enable them to make healthy choices.							
<b>Objectives</b>	<b>Main Activities</b>	<b>Target Group</b>	<b>Responsible Contact</b>	<b>Calendar/ Dates</b>	<b>Indicators</b>	<b>Data</b>	<b>Health Impact</b>
To provide staff with info on heart health.	Plan an activity in February in collaboration with Adult Prevention.	Staff	School Nurse and Adult Prevention	February	Increased awareness of Heart Health  Questions from teachers about exercise, eating right.	Anecdotal	Staff make better choices for healthier lifestyle. Control/prevent diabetes and cardiovascular disease.
<b>Goal</b>							
To ensure a safe and healthy school environment.							
<b>Objectives</b>	<b>Main Activities</b>	<b>Target Group</b>	<b>Responsible Contact</b>	<b>Calendar/ Dates</b>	<b>Indicators</b>	<b>Data</b>	<b>Health Impact</b>
To address Health & Safety issues in schools.	Coordinate Health & Safety Committee meetings. Address issues brought to committee. Assure all school safety issues are addressed. Review accident reports. Insure with administration that the required number of First aiders are adequate as per school populations. Education session with teachers to stress importance of incident reports not to place blame but to look for problems/trends.	Staff  Students	School Nurse  Committee Members Health & Safety   School Administration	3-4 times a year & prn.	100% of health & safety problems have been addressed.  # of first aiders adequate per school population.	# of meetings attended..  Minutes of mtgs. and list of attendees filed.  # of accident reports and types of injuries.	No incidence of serious injuries occurring in the school setting.  Health & Safety Committee review incident reports.
To ensure the school's First Aid Kits are organized, stocked with proper supplies, and placed in strategic locations.	Inventory all kits 2-3 times a year. Order supplies & bill to school Refurbish kits prn. Names of trained staff & kits are in designated areas.	All school personnel	School Nurse  Admin. Assistant Education Centre	September  January March	0% serious consequences preventable through first aid. Supplies available at all times	# of First Aid Kits per school.  # of trained personnel.	

Goal	To control & prevent communicable diseases.						
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact
To conduct immunization clinic(s) as mandated by the MSSS.	<b>Hep B &amp; HPV Program:</b> Send authorization forms home for signature. Show video to students. Coordinate the date with other nurses. Organize the clinic	Grade 4	School Nurse	October  April	100% of eligible students received vaccine.	# of consent forms returned.  # of shots given.	To prevent of Hepatitis B and HPV infections  To prevent cervical cancer related to HPV infection
To ensure staff & parents are informed regarding communicable diseases.	Give parents & staff list of communicable diseases that need to be reported to school. Give parents letter on lice prevention & pamphlet on how to treat. Make contact with parents of repeat cases or persistent lice.	Staff & parents	School Nurse	August  As needed	100% of parents notify school of their child's communicable disease. 100% of staff advise administration when parents' call or send note.	# of communicable diseases reported.	Parents & staff are knowledgeable of general infection control measures and therefore we will see a decrease in communicable diseases and a decrease in absenteeism.
To inform teachers & students of the Policy & Procedure for blood borne diseases.	Information to older students.  In-service to teachers on prevention & procedure of blood borne diseases including: Universal precautions Proper clean up of body fluids	Grade 3-6  Staff	School Nurse	September/October  August	Staff attended protocol in-service.	# of teachers attending in-service.  # of blood borne incidents.	There is a 0% serious consequence from a blood borne injury.  Staff are knowledgeable about blood borne disease protocol.

Goal							
To control & prevent communicable diseases.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact
Students will receive information on general information on disease modes of transmission and infection control measures.	Meet with classes, demonstration of proper handwashing & general hygiene measures.  Show video to older classes.	All students	School Nurse	Fall To be done before cold and flu season	95% of students demonstrate proper handwashing.	# of students attending education sessions.	Children are aware of disease modes of transmission and importance of proper handwashing & general hygiene measures.
Goal							
To reduce childhood obesity							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact
To screen for obesity and hypertension	<ul style="list-style-type: none"> <li>Send letters to parents explaining program</li> <li>Obtain consent for measurement</li> <li>Check height, weight and blood pressure</li> </ul>	Grade 4 students	School Nurse	October/ April	<ul style="list-style-type: none"> <li>BMI</li> <li>Blood pressure</li> </ul>	<ul style="list-style-type: none"> <li># of children with increase BMI</li> <li># of children with ↑ BP</li> </ul>	<ul style="list-style-type: none"> <li>↑ awareness of health impact of obesity i.e. ↑ risk for diabetes, heart disease, hypertension, etc</li> </ul>
To increase physical activity	<ul style="list-style-type: none"> <li>education re: ↓screen time to &lt; 2 hours / day &amp; ↑ playtime to &gt;1 hour/day</li> <li>collaborate with KSDPP, Quebec en forme, &amp; the schoolyard animator for strategies to ↑playtime activities</li> </ul>	students	school nurse KSDPP school	school year	<ul style="list-style-type: none"> <li>types of activities</li> <li># of activities</li> <li># of participants</li> <li># of class presentations</li> </ul>	# of participants	<ul style="list-style-type: none"> <li>↓ chronic disease (long-term)</li> <li>improved energy</li> <li>↓ BMI</li> </ul>

<p>To increase consumption of healthy foods</p>	<ul style="list-style-type: none"> <li>● education about nutrition             <ul style="list-style-type: none"> <li>● articles                 <ul style="list-style-type: none"> <li>- newsletters</li> </ul> </li> </ul> </li> <li>- aionkwataritake             <ul style="list-style-type: none"> <li>- Eastern door                 <ul style="list-style-type: none"> <li>● presentations at parent/teacher interviews</li> </ul> </li> </ul> </li> </ul>	<p>Parents of students Students</p>	<p>School Nurse Nutritionists KSDPP School</p>	<p>school year</p>	<ul style="list-style-type: none"> <li>● # of articles             <ul style="list-style-type: none"> <li>● # of participants                 <ul style="list-style-type: none"> <li>● # of class presentations</li> </ul> </li> </ul> </li> </ul>	<p># of participants</p>	<ul style="list-style-type: none"> <li>● improved food choices             <ul style="list-style-type: none"> <li>● ↓ BMI</li> </ul> </li> </ul>
---	---	---	--	--------------------	--	--------------------------	--

Goal	To have good collaborative working relationships with other organization members.						
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact
<p>To seek out collaborative partners for community health campaigns/projects.</p> <p>To respond to request from others for collaborative projects when feasible.</p>	<p>Attendance at meetings.</p> <p>Co-development of programs/projects &amp; lesson plans, etc.</p>	<p>Select community groups or the community at large.</p>	<p>CHU Nurses</p>	<p>Through out the year</p>	<p># of collaborative projects/programs.</p> <p>Increased contacts for networking.</p> <p>A lot of info sharing between contacts.</p>	<p>Number of documented projects.</p>	<p>Better use of community &amp; others' resources &amp; expertise to address health issues.</p>
<p>To provide medical information to participants of the Young Adults Program (YAP) &amp; Teen Social Club (TSC).</p>	<p>Meet with participants 1.5 hours each week to provide information/education relevant to their needs.</p>	<p>Special needs clients with physical or mental handicaps.</p>	<p>School Nurse</p>	<p>Ongoing throughout year</p>	<p>Clients have good rapport with nurse and are comfortable asking questions related to different health topics.</p>	<p># of information sessions</p> <p># of participants attending</p> <p>Topics covered</p>	<p>Better understanding of health issues and personal care.</p>

Goal	To identify, assess and address student health problems.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	REVIEW
To create a master list of all student health problems.	Confidential school medical record (CSMR) is sent to all parents.  Returns are processed.   Parents called for clarification.  List compiled of students with health problems. List distributed to staff involved. Teaching re: various health problems.	Students   Staff	School Nurse	August/  September   ANNUALLY	95% of all CSMR are returned to school.  All teachers with students with health problems are confident in their ability to deal with problems.	# of CSMR processed.  # of student health problems.	Nurses & staff are aware of all student health problems.	KSS – 72%  198 out of 275



Goal	To ensure a safe and healthy school environment.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	REVIEW
To ensure the SAR (Severe Allergic Reaction) Policy is being followed in all school.	In-service to all staff in Sept. , including demonstrated competency.  EpiPens are kept in a designated area – list kept of expiry dates. Post pictures of children in designated areas. Teaching to child & parent prn  Put up new posters of procedures to follow in designated areas.  Ensure all are responsible for their outlined duties.	Staff  Students with life-threatening allergies.  Parents of students with life-threatening allergies	School Nurse	August/  September	Staff are confident in using EpiPen.  100% of staff received in-service. 100% success at mock scenarios.  All are aware of their responsibilities and there is 100% compliance.	# of students with severe allergies.  Audit sheet of scenarios.  # of teachers in attendance	All severe allergic reactions are responded to properly and according to the protocol.	KSS - 5 Students with SAR.  32 staff attended.
To address Health & Safety issues in schools.	Attend Health & Safety Committee meetings.  Address issues brought to committee.  Assure all school safety issues are addressed. Review accident reports.  Ensure with administration that the required number of First aiders are adequate as per school populations.	Staff  Students	School Nurse  Health & Safety  Committee Members School Admin - istration	3-4 times a year & prn.	100% of health & safety problems have been addressed.  # of first aiders adequate per school population.	# of meetings held.  List of attendees kept.  Minutes of mtgs.  # of accident reports.	No incidence of serious injuries occurring in schools.	KSS - 1 meeting held May 2010. No meeting held in new school year. # of accident reports to be verified with admin.

Goal	To ensure a safe and healthy school environment.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	REVIEW
To ensure the school's First Aid Kits are organized, stocked with proper supplied, and placed in strategic locations.	Inventory all kits 2-3 times a year.  Order supplies & bill to school  Refurbish kits prn.  Names of trained staff & kits are in designated areas.	All school personnel	School Nurse   Education Centre	September  January  March	0% serious consequences preventable through first aid.  Supplies available at all times	# of First Aid Kits per school.  # of requests for nursing supplies. # of trained personnel.	Teachers are knowledgeable of site of First Aid Kits and who is trained.	Replenished x 3.

Goal	To control & prevent communicable diseases.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To conduct immunization clinic(s) as mandated by the MSSS.	Provide information in class time on immunizations. Show video to students.  Coordinate the date with other nurses.  Organize the clinic for <b>Gardasil, dcaT booster</b> and other immunizations prn.	Sec. III	School Nurse	October  December  May	100% of eligible students received vaccine.	# of consent forms signed.  # of shots given.	To vaccinate all eligible students. To update all immunizations as per provincial schedule.	
To ensure staff & parents are informed regarding communicable diseases.	Give parents & staff list of communicable diseases that need to be reported to school. Give parents letter on lice prevention & pamphlet on what to do.  Make contact with parents of repeat cases.	Staff & parents	School Nurse	as needed  Seasonal i.e for colds & flu	100% of parents notify school of their child's communicable disease.  100% of staff advise administration when parents' call or send note.  100% of staff advise administration when parents' call or send note.	# of diseases reported.	Parents & staff are knowledgeable of general infection control measures and therefore we will see a decrease in communicable diseases and a decrease in absenteeism.	

Goal	To control & prevent communicable diseases.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/Dates	Indicators	Data	Health Impact	Review
To inform teachers of the Policy & Procedure for blood borne diseases.	In-service to teachers on prevention & procedure of blood borne diseases. Information to older students.	Staff	School Nurse	August	Staff attended protocol in-service.	# of blood borne incidents. # of teachers attending in-service.	Staff are knowledgeable about blood borne protocol. There is a 0% serious consequence from a blood borne injury.	KSS # not reported. 32 staff attended.
Students will receive information on general infection control measures.	Provide a booth with infection control measure. Provide classes as needed on specific disease, handwashing, etc.	All students	School Nurse	Fall	95% of students demonstrated proper handwashing.	# of students completing post test evaluation.	Children are aware of importance of proper handwashing & general hygiene measures.	KSS poster campaign.

Goal	To have good collaborative working relationships with other organization members.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/Dates	Indicators	Data	Health Impact	Review
To seek out collaborative partners for community health campaigns/projects.	Attendance at meetings.	Select community groups or the community at large.	CHU Nurses	Throughout the year	# of collaborative projects/programs. Increased contacts for networking.	Number of documented projects.	Better use of community & others' resources & expertise to address health issues.	
To respond to request from others for collaborative projects when feasible.	Co-development of programs/projects & lesson plans, etc. Co-development of programs/projects & lesson plans, etc.				Increased contacts for networking. A lot of info sharing between contacts.			

Goal	To promote healthy behaviours & lifestyle choices by providing students with quality health care, accurate information & adequate support services on their turf, on their time & on their terms. To continue to encourage responsible self-care behaviour among KSS students. To Continue to develop & provide a high quality, culturally relevant school health program. To continue to encourage and promote collaborative efforts by other organizations at KSS. To continue to provide a high-quality mandatory program for adolescent immunization.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To ensure a safe and healthy school environment.	Coordinate annual inspection by Environmental Health Officer (EHO) from KSCS.	Students, Staff	School Nurse EHO's	Yearly, November	Staff student feedback re: air quality, environmental factors.	Subjective: Reports of illness related air quality, environmental factors.	0% serious consequences from illness/injury related to air quality, environmental factors.	Will re-contact EHO d/t complaints of air quality in new building
To continue to provide a culturally relevant, age-appropriate, comprehensive school health curriculum.	Provide middle school healthy sexuality classes, relevant classes in Grade 9. Biology, other classes on as needed basis depending on nurse availability, in collaboration with KSCS.	Middle School students,  Grade 9 biology students, others (as needed)	School Nurse,  KSCS – Healthy Sexuality Program Coordinator.	On-going throughout year including planning meetings, prep time & class time.	Each class has a presentation.  # of classes.  95% of eligible students attend. # of students attending. Evaluation forms from students.	Agenda: Number of classes provided.  Attendance lists.	Improved lifestyle choices for adolescents.	

To communicate messages of adolescent wellness, self-care and personal responsibility.	Participation in KSS/KSCS Prevention Initiatives Meetings.	Students	Social Counsellor KSCS Prevention liaison (Team Leader)	6-8 weeks	Feedback from team, students, teachers.	# of meetings attended	Improved lifestyle choices for adolescents.
	To organize information booths & activities in conjunction with thematic weeks/months, in collaboration with external resources (i.e. KSCS, KMHC, KSDPP, KPK, etc.).	Students	School Nurse, Other relevant professionals.	On-going relevant to thematic weeks/months, time permitting. And as needed	4 information booths in school year. Each information booth initiative involves collaboration with 1 other health care provider.	# of booths and types of booths	Improved lifestyle choices for adolescents.
	To continue to coordinate KSS Career & Health Fair biannually.	Students	School Nurse, Academic Counsellor	Bi-annually	Feedback from students	Participation via passbooks, surveys by students. From academic	Improved lifestyle choices for adolescents

Goal	To promote healthy behaviours & lifestyle choices by providing students with quality health care, accurate information & adequate support services on their turf, on their time & on their terms. To continue to encourage responsible self-care behaviour among KSS students. To Continue to develop & provide a high quality, culturally relevant school health program. To continue to encourage and promote collaborative efforts by other organizations at KSS. To continue to provide a high-quality mandatory program for adolescent immunization.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To continue to identify the health & health education needs of KSS students & staff & determine the most effective way to respond to those needs.	To continue to provide individual or group consultations in a holistic manner.	Students, staff	School Nurse	On-going daily	Students, staff readily seek health information and support from school nurse.	# of students and staff according to categories recorded in logbook.	Improved delivery of services to students, staff.	
	To continue to collaborate with Student Services Team.	Students	Administration, Student Services (i.e. Social & Academic Counselors, Resources Teachers, Psychologist, Nurse, KSCS liaison).	Weekly	Student issues addressed in a timely, comprehensive manner.	. # of Referrals to the student services team for the school nurse	Improved delivery of services to students.	
To provide school-based holistic health care services to KSS students.	<p>Continue to coordinate KSS Youth Wellness Clinic. Negotiate clinic schedule with JGH-FMU education coordinator &amp; Dr. D. Golberg.</p> <p>Collaborate with CHAL lab services via KMHC. Ensure comprehensive, age-appropriate health issues are addressed at clinic visits. Collaborate with MD, other professionals to develop potential new protocols/policies. (i.e. nurse-initiated oral contraceptive pill, (OCP) and sexually transmitted infection screening.</p>	KSS students over 14 years of age, or with parental consent.	School nurse, KMHC MD, JGH Coordinator.	Bi-weekly, October – May  On-going as needed	<p>Positive feedback from students. JGH residents.</p> <p>Maintain student participation as seen by clinic visits.</p> <p>Protocols and/or collective prescriptions developed and competency acquired</p>	<p># of students seen, male/female, categories of visits</p> <p># of lab tests sent by category</p> <p>Protocols, collective prescription.</p>	Improved delivery of health care services to KSS students.	<p>April 2010-March 22, 2011 9 clinics held.</p> <p>56 students seen – 51 female, 5 male. AVG – 6 students/clinic</p> <p>81 lab tests sent out for above time period.</p>

Goal	To Continue to develop the Staff Health Program.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To ensure staff immunization is up to date	Obtain new staff's immunization records.  Make recommendations according to the PIQ for health care workers.  Immunize and/or do PPD test.  Send Tb booster reminder.  Flu Campaign – short in-service for staff in “at risk” department.	New employees  Staff who need 10 year booster  Inpatient Dept.  Plant Man. Dept  Homecare	Staff Health Nurse  Staff Health Nurse  Staff Health Nurse & Infection Control Nurse	On-going    On-going   October/ November	100% of new employees' immunizations are up to date.   All reminders sent out  Increase of 10% over last year's staff receiving flu vaccine	Chart filed when completed  Regie Regionale data base	Staff are knowledgeable of government's recommendations.  Immunizations are updated.  Decrease in deaths among residents due to influenza.	
To provide staff with info on blood borne related disease and their prevention.	Yearly in-service on Policy & Procedure.  Investigate incidents.  Provide support to injured staff prn.  Follow-up	At risk staff (Inpatient, OPD, Plant Maintenance)  Homecare, Activity Center, Staff with blood borne injury	Staff Health Nurse	Fall	80% of staff (clinical & housekeeping) attend in-service.  Protocol followed in all reported blood borne incidents	Attendance lists Analysis of incident reports	Staff are knowledgeable about blood borne diseases and their prevention.  Decrease in blood borne related injuries	

Goal	To Continue to develop the Staff Health Program.							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To promote Health & Safety in the Workplace	Investigate Health & Safety issues brought to my attention. - Gather data re: Health & Safety regulations. - Give recommendations. Coordinate with other agencies if needed. - Coordinate with Infection Control if needed. -Adapt new regulations as needed.	All Staff	Staff Health Nurse	On-going	Number of concerns brought to my attention.  Satisfaction with addressing the concerns	Nurses Agenda Anecdotal	All staff are taking an active part in Health & Safety issues	
To promote Health & Safety in the Workplace	Continue stairway to health activity. Change poster Q 2 weeks.  Coordinate with Adult Prevention to find activities for staff for Heart Health Month, Canada Health Day.	All Staff	Staff Health Nurse & Adult Prevention Nurse	Spring – November-April  January – February  April - May	attendance to activities	Attendance lists	Decrease in absenteeism.  Healthier staff (prevention/ management of cancer, heart disease, diabetes, obesity, depression, stress, etc)  Decrease injuries	



Goal	Walking Club							
Objectives	Main Activities	Target Group	Responsible Contact	Calendar/ Dates	Indicators	Data	Health Impact	Review
To prevent injuries in the workplace.	Preliminary inquest of accident.  Interview employee.  Get their input on how to prevent similar accidents.  Make recommendations	Injured workers	Staff Health Nurse	on-going	Decrease in injuries	CSST claims and Insurance claims and Incident/accident reports.	Staff will be more knowledgeable about preventing accidents	
To maintain a link between injured employee and the workplace	Keep in contact with employee if off work for more than 2 weeks.  Provide support. Communicate with CSST on their behalf if need be (language barrier). Communicate with MD and/or Rehabilitation prn.	Injured or sick employees	Staff Health Nurse,  Human Resources	On-going	100% of this group of staff will be contacted every 2 weeks.	Nurses agenda and notes in staff charts	Staff will have support while on leave from work.  Decrease in length of disability	

Goal	To provide coordination of volunteer services for client service teams and enhances evening and weekend activities.						
Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
To provide volunteers to client service teams in particular IPD, Activity and Rehab departments	Continued training of volunteers  Coordinate schedules for volunteers	Volunteers, IPD, Activity and Rehab Departments	Volunteer Coordinator  IPD/Activity/Rehab Manager or delegate	Annually	Monitor volunteers and distribution within departments	# of volunteers in each department	Participation of community members in health care activities is healthy for the volunteer and for the residents/clients
To offer hours of service to volunteers in the evening and weekends.	To schedule volunteers for evenings / weekends with Department Managers / delegates	Long term / Short term care residents  Physiotherapy clients	Volunteer Coordinator  IPD/Activity/Rehab Manager or delegate	Annually	Monitor number of off-hour activities for evenings and weekends	# of volunteer hours on evenings and weekends	More services for residents / clients after peak hours  Quality of life for residents.  Increased physical / cognitive stimulation
To maintain / update log of activities and hours for volunteers	Continued data entry and statistics	Administration	Volunteer Coordinator	Annually	Monitor volunteer log book and sign in sheets and times	Total # of volunteer hours and distribution of activities annually	Reduce isolation / depression for LTC / STC residents/clients

**Kahnawake Community Health Plan  
2012-2013**

Objectives	Main Activities	Target Group	Title Responsible	Calendar/ Dates	Indicators	Data	Health Impact
	Volunteers provide and assist with activities  Provide collated charts and graphs.		Activity Department Manager				More opportunities for clients / residents to benefit from volunteer services. (Client / volunteer ratio)
To increase number of volunteers who are in the Feeding Program and provide training	Volunteers help feed clients / residents who require assistance at mealtimes	Present / Future volunteers Clients / Residents	Volunteer Coordinator IPD Nurse Manager Speech Pathologist	Ongoing	Training / Capacity Building	# of volunteers trained for feeding	Improved mealtimes and overall health for clients / residents Personalized care