



We Beat as One

2021 Annual Report

October 26, 2021

csfs.org

We Beat as One

2021 ANNUAL REPORT
October 26, 2021

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CARRIER SEKANI FAMILY SERVICES

Creating wellness together.

OUR LOGO

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

OUR MISSION

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

OUR VALUES

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

Respect

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

Compassion

Making an effort to truly understand the suffering of another, and making an effort to assist in any way possible.

Wisdom

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

Responsibility

Accountability is a part of our great bah'lats system. We are responsible to our clans, ourselves and our community. Responsibility is carried in one way or another by everyone within the system; we are all responsible for the wellness of ourselves, each other and the land.

Caring

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

Sharing

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

Balance and Harmony

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

2021 CARRIER SEKANI FAMILY SERVICES BOARD OF DIRECTORS

Burns Lake Band	Cecelia Sam
Cheslatta Carrier Nation	Corrina Leween
Lake Babine Nation	Murphy Abraham
Nadleh Whut'en First Nation	Theresa Nooski
Nee Tahi Buhn Band	Joel Morris
Saik'uz First Nation	Priscilla Mueller
Skin Tyee Band	Robert Skin
Stellat'en First Nation	Yvonne George
Takla First Nation	Sandra Teegee
Wet'suwet'en First Nation	Heather Nooski
Yekooche First Nation	Vanessa Joseph
Elder Representation	Nancy Williams



TABLE OF CONTENTS

Corrina Leween, President	8
Warner Adam, Chief Executive Officer	9
Tracey Michell, Senior Policy Analyst & Project Development	11
Mary Teegee, Executive Director of Child & Family Services	12
Jason Morgan, Director of Operations Community & Organizational Development	14
Geraldine Flurer, Community Wellness Manager	16
Stephanie Konefall, Director of Jurisdiction	18
Cheryl Thomas, Director of Prevention Services	19
Joan Conlon, Prevention & Practice Support Manager	25
Rhonda Hourie, Urban Family Preservation Manager	28
Amy Merritt, Director of Youth Services	30
Sonya Rowland, Director of Practice Quality Assurance & Program Development	32
Travis Holyk, Executive Director of Health Services	33
Rachael Wells, Director of Quality & Innovation	35
Rhoda Hallgren, Director of Community Health	36
Lorna Paul, Office Manager / First Nations Health Benefits	38

Dawne Persson, Director of Early Childhood Education	39
Erin Johnson, Maternal Child Health Manager	45
Pauline Gregg, Collaborative Practices Lead	49
Fiona Demers, Intensive Family Therapeutic Services Manager	50
Charlotte Alfred, Special Projects	51
Marilyn Janzen, Director of Health & Wellness	53
Matthew Summerskill, Director of Mobile Diabetes Telemedicine Clinic	60
Carol Reimer, Chief Financial Officer	61
Brad Evans, Executive Director of Human Resources	62
Marlaena Mann, Executive Director of Communications & Data Governance	63
Privacy	65
Andrea Palmer, Director of Communications	66
Greg Condon, Director of Information Technology	67
Financial Statements	68
Sponsors	86



CORRINA LEWEEN, PRESIDENT

On behalf of the Board of Directors at Carrier Sekani Family Services, Member Nations, and staff, I offer my greetings and appreciation to the Nations we serve, community members, and friends of our organization.

2021 marks the 31st year in operation for CSFS. Unfortunately, the COVID-19 pandemic is once again preventing us to all gather in person, but that does not deter from the fact that we are all connected. We are connected with each other, with the land, with our ancestors, and with the Creator. It is our connection with one another that continues to show us the way, and what has helped us through this pandemic so far.

Our connection is bringing our Elders their groceries during lockdown; it is living off the

land and taking what the Creator has given us; it is getting vaccinated to keep our vulnerable communities safe. Our connection with each other runs deeper than we might think.

We beat as one when the lost children across the country were found, and are continuing to be found to this day. We came together to mourn, and to wipe our tears at the former Lejac Residential School site. And we came together across all Indigenous Nations to mourn for each other. As more are found, I know that our hearts will continue to beat as one — as an organization, as a people, and as a nation.

As we continue our vital work at CSFS, it is crucial that we keep our connection strong with one another. When our Elders started CSFS, their connection with each other and with their community was strong. Because of that connection, they were able to identify the problems that needed to be addressed, and what they needed to pass on to the next generation in order to rebuild our Nations — our laws. Without our Sacred, Natural, and Customary laws, we lose everything. Our founding Elders would be so proud to see that we are on the cusp of developing our own laws to take care of our most sacred and precious gift — our children.

I cannot thank all of those at CSFS enough for their endless hard work and dedication during these unprecedented times. To the CSFS Board of Directors, Executive Management, and entire staff — Mussi cho. Without each and every one of you, CSFS would not be as strong as it is today — and because of your hard work, sovereignty and jurisdiction over our own child welfare is closer than ever before. We will accomplish so much as “we beat as one.”

WARNER ADAM, CHIEF EXECUTIVE OFFICER

Without a doubt the COVID-19 pandemic has been challenging for many people, communities and organizations. Despite these unprecedented times, the Nations and members we serve have demonstrated strength and perseverance to adjust to the new normal. While we continue to navigate the reality of the worldwide pandemic, new variants of COVID-19, such as the Delta Variant, seem to bring us back to the beginning. Nevertheless, continuing to be vigilant and exercise the controls based on the guidance from the Provincial Health Office will help us lessen the impacts of COVID.



The greatest prevention measure we have against COVID-19 is the vaccine, and so it is critical that as many as possible get vaccinated. Our work at Carrier Sekani Family Services (CSFS) is dedicated to improving the health and wellbeing of First Nations. Indigenous communities have been deemed more vulnerable to a COVID-19 outbreak, especially our Elders. As such, CSFS has instituted a policy that makes it mandatory for all employees to get vaccinated. History has demonstrated that viruses have had devastating impacts on Indigenous populations. Hence, CSFS will take every precautionary measure to protect the communities we serve from COVID-19 and all its strains.

Despite disruptions stemming from the pandemic, we haven't stopped innovating at CSFS. We have adapted to continue providing our services and programs. One of the most important projects we have undertaken is a Governance and Organizational review, including succession planning. CSFS has now been in operation as a non-profit society for 31 years, and our growth in the last five years prompted this review. Over the past few years we have increased our staffing by 800% and our funding by 500%. The purpose of the review, which was completed by an independent consulting firm, included: assessing the best value of CSFS's existing structures, processes, practices and staffing to identify opportunities for improvement and optimize service delivery; and ensure system structures remain current given the increased expectations, workload pressures, staffing challenges and change management demands. The report has provided several recommendations to improve the overall governance and executive leadership systems and structure at CSFS. Many of the recommendations will be implemented within the next 18 months.

In addition to the Organizational Review, CSFS senior leadership and management convened for a planning session to update and renew the

CSFS strategic plan. The main points of focus that evolved out of this meeting include strategic relationships, organizational capacity, culture, service delivery, infrastructure and funding. All points will be aligned with the Organizational Review, and our renewed strategic plan will provide a blueprint for CSFS to restructure and ensure we have measurable outcomes based on the investments we have undertaken for the next ten years.

One of the poignant matters that continues to disproportionately impact the health and wellbeing of Indigenous people is the opioid and toxic drug crises that has plagued communities in Northern BC. Statistics demonstrate that Indigenous people are **six times** more likely to die from drug overdose compared to BC's non-Indigenous population. We have been vigilant in addressing this crisis with both the provincial and federal government, as well as the First Nations Health Authority (FNHA), with the objective to build a new healing centre. We commissioned the appropriate studies to find an ideal location for such a facility. It was determined that the former Tachick Lake Resort, located on the traditional territory of the Saik'uz First Nation, would be the perfect place to allow a blended model of cultural practices and western medicine.

CSFS president and members of the Board of Directors have met with Minister Marc Miller from Indigenous Services Canada (ISC) and Minister Malcomson from BC Mental Health Ministry. While both governments seem to be very supportive of our efforts to build a treatment facility, the resources needed for construction are severely underfunded. To exacerbate matters, we had to move through cumbersome and time-consuming legal processes to get the land exempted from the Agricultural Land Reserve (ALC). Despite CSFS's attempts to justify the location, the purpose, and the objectives of our healing centre, the ALC denied our first application to build a facility. Additional advocacy was promoted by Chief Corrina Leween and Chief Priscilla Mueller to

continue our application. Our second application was undertaken by the Buckley Nechako Regional District and was accepted for CSFS to build a healing centre, but denied the land to be excluded from the Agriculture Land Reserve. While we can proceed with the build, the ALC may interfere with future developments.

The next challenge is to access the short fall of approximately \$11 million required to build a quality healing centre in alignment with our vision to provide a cultural and evidence-based medicine treatment model. We will continue to pursue government to fund this immediate need to address the Opioid crisis. CSFS has the feasibility study completed as a first step to realizing the vision of our healing/treatment centre building. It has been provided to the First Nations Health Authority, British Columbia (BC) and Canada governments. Our next phase will include having the conceptual plan and design completed, followed by construction. We hope to open the doors to the Tachick Lake Healing Centre in 2023. This will be the only First Nations managed, operated and controlled treatment centre in North Central BC. The demand in our region has been justified.

While we continue to rebuild our communities and culture – I urge the government of BC and Canada to fully implement all 94 of the Truth and Reconciliation recommendations, and make the essential investments needed to make positive and lasting changes within our Indigenous communities. Infrastructure and Indigenous capacity development investments are desperately required to address and elevate indigenous people out of poverty and improve health outcomes. Reversing the negative impacts due to colonization is not a simple task and proper resources are required. True partnerships are necessary to reach the goals and objectives of the government's commitment toward reconciliation. CSFS will continue to innovate in rebuilding the Nations we serve and never cease in our quest of improving the health and wellness of Carrier Sekani people.

TRACEY MICHELL, SENIOR POLICY ANALYST & PROJECT DEVELOPMENT



After 20 years, the First Nations Health Authority (FNHA) capital commitment will fund a 14-bed Healing/Treatment Centre (“Facility”); but community needs call for a 60-bed Facility. The CSFS Board of Directors (BOD) advocated for funding and site location issues; in particular CSFS BOD President and Chief of Cheslatta Corrina Leween, and BOD representative and Chief of Saik’uz First Nation Priscilla Mueller, both forming the Political Task Force.

Selected as the Primary Consultant, the Unison Architecture Ltd. Feasibility Study was accepted by the BOD on 16 October 2020. The BOD approved the purchase of the Tachick Lake Resort, located on the traditional land of the Saik’uz First Nation, on 28 April 2020 for the site of the facility. The BOD projected a positive Agricultural Land Commission (ALC) decision, as Tachick is part of the Agricultural Land Reserve (ALR), despite operating as a resort since the 1960s.

By 31 March 2021, CSFS had not attained ownership of Tachick. Instead, CSFS relied on a Consultant and Legal Counsel to engage with the ALC and the Regional District of Bulkley-Nechako (RDBN) to elevate Tachick to ‘non-farm use’ status. After the July 2020 re-zoning submission and subsequent November 2020 RDBN Public Hearing, the ALC February 2021 decision approved CSFS application, with the exception to only utilize the existing structures. The ALC decision resulted in negative media coverage. Discussions for an alternative process is pending, possibly an Exclusion Application.

In the meantime, the Political Task Force and Technical Team (Warner Adam and Tracey Michell), and the occasional participation of the Operating Team (Marilyn Janzen, Christina Dobson and Randall Brazzoni) collectively

engaged with federal and provincial officials on the funding and land issues. Starting in March 2021, the Political Task Group and Technical Team had ongoing virtual meetings and corresponded with BC Premier John Horgan, as well as ministers and their deputy ministers and senior ministry advisor, specifically Ministry of Health, Hon. Adrian Dix; Min. of Mental Health and Addictions (MMHA), Hon. Sheila Malcolmson, and Min. of Agriculture, Food and Fisheries, Hon. Lana Popham. To date, MMHA has committed nominal capital funding.

Similarly, the Political Task Group and Technical Team continuously corresponded and virtually met with federal officials - with Min. Marc Miller and Associate Deputy Minister (ADM) Valerie Gideon, and BC Regional General, Cathey Lappe - since December 2020 on the funding issue. Around 11 February 2021, Min. Miller and ADM Gideon indicated a decision would be rendered post the 19 April 2021 budget announcement.

The goal is to expand CSFS’s treatment services by adding 16 additional treatment beds, 10 new detox beds, and up to 15 after care beds.

Seeking additional funding and proposal opportunities is a priority for the Technical Team.

Following Mabel Louie’s retirement, effective September 2020, the Regional Steering Committee and Multi-Disciplinary Team Working Group meetings for the Child and Youth Advocacy (“CYAC”) will be deferred, but the provincial and national meeting participation is on-going. The CYAC has transferred to Executive Director (ED) of Children and Families; and the Community Safety Planning has transferred to the ED of Health and Research.



MARY TEEGEE, EXECUTIVE DIRECTOR OF CHILD & FAMILY SERVICES

Imagine the days of old when we were unencumbered by the chains of colonization – a time of balance, harmony and wellness. We as Indigenous people thrived because we were governed by ‘inherent law’ – the law of our ancestors: the Bah’lats. Our hearts beat strongly as one. With the imposition of foreign laws and the atrocities of colonization, our heartbeat was weakened.

The uncovering of the 215 unmarked graves in Tk’emlups te Secwepemc is a stark reminder of all that we lost as Indigenous people. Due to the many deaths of our children and the impacts of residential school, our Nations were weakened but not broken. Today we must remember what our ancestors envisioned for us: a victorious people thriving in our own lands within our own laws.

Our past elders and leaders created Carrier Sekani Family Services (CSFS) for us to become “self-determining in social, health and legal services.” After over 30 years of working as one to overcome the trauma of colonization, we can confidently say we are that much closer to making the vision of our predecessors a reality.

The Canadian Human Rights Tribunal (CHRT) ruled that Canada was at fault of discriminating against Indigenous children in the child welfare system and was ordered to pay for prevention activities at actual cost. With the influx of additional funding, CSFS has provided funding directly to the Nations we serve to develop and provide prevention activities.

CSFS continues to provide prevention support and services to the Nations. The intent of the nation-based funding is to enhance our existing services. The communities worked with CSFS to develop Community Service Delivery Plans (CSDP)

to reflect what the communities deemed as prevention priorities. By CSFS providing funding directly to the communities, we are following our mandate to become self-determining in social services as part of our collective journey toward jurisdiction.

This year we will continue to work with the communities to breathe life into our own laws. This is where we must, for the sake of our children and those not yet born, work together to revive our Nations' ways of being. To ensure we are doing the work with the guidance of our Elders, we developed a model of jurisdiction that includes Chief and Council, our Hereditary Chiefs, family leaders, community, youth and elders. Over the upcoming year, we will be working together with community to develop a robust community engagement process to ensure the work we do reflects the needs of the community and respects Nation autonomy.

Another key goal we are working towards is the development of our own law department. As noted earlier, the mandate of CSFS is to become self-determining in social, health and legal services. Over the past decade, we have developed our own family law model which created our Family Mediation program. We intend to build on this department by retaining family lawyers and advocates. We are preparing for jurisdiction in child and family services with the longer-term plan of having our own Carrier Sekani courts.

I must commend our staff for their tireless work to ensure we were meeting the demands and constraints of working in a COVID world. Staff had to adjust their method of working to still provide services while maintaining safety guidelines. Many of our frontline and outreach staff had to provide in person service to our most vulnerable.

The past year has been stressful and staff have worked above and beyond their roles to ensure we maintain our services. Staff also ensured they provided supports to the families evacuated through this wildfire season.

There will come a day when we are living under our own laws, when we take our place as the rightful owners of the lands of our ancestors. It is only fitting that the journey to jurisdiction starts with our most important resource – our children. Our collective roles will lead us to the day when we realize the vision of our ancestors and Elders of becoming self-governing in all aspects of our life.

Our Bah'lats is our medicine. This is the way we mend our collective heartbreak of colonization. It is our culture, our traditions, our language, our stories and our songs that is balm for our soul. We must lift each other up and strive for the day when our hearts beat strong and our hearts, once again, "beat as one."

Musi to the Board of Directors, the CEO, the Staff and community members for allowing me the privilege of working with you, the Nations, and for the ongoing support and guidance you have provided.

JASON MORGAN, DIRECTOR OF OPERATIONS COMMUNITY & ORGANIZATIONAL DEVELOPMENT

This has been a momentous year for CSFS in the realm of Indigenous child and family services for prevention services at the community level. 2020/2021 represented the inaugural formal funding agreement of prevention services between the Nations we serve and CSFS. This agreement reflects a holistic and life-cycle approach to service delivery and based on each Member Nations' community service delivery plans. The goal of the agreement is to provide the resources for the Nations we serve to deliver prevention programming and activities that are culturally based and reflective of the Member Nations' priorities.

Past goals:

Our Prevention Administration Department had set-out the following goals and aspirations:

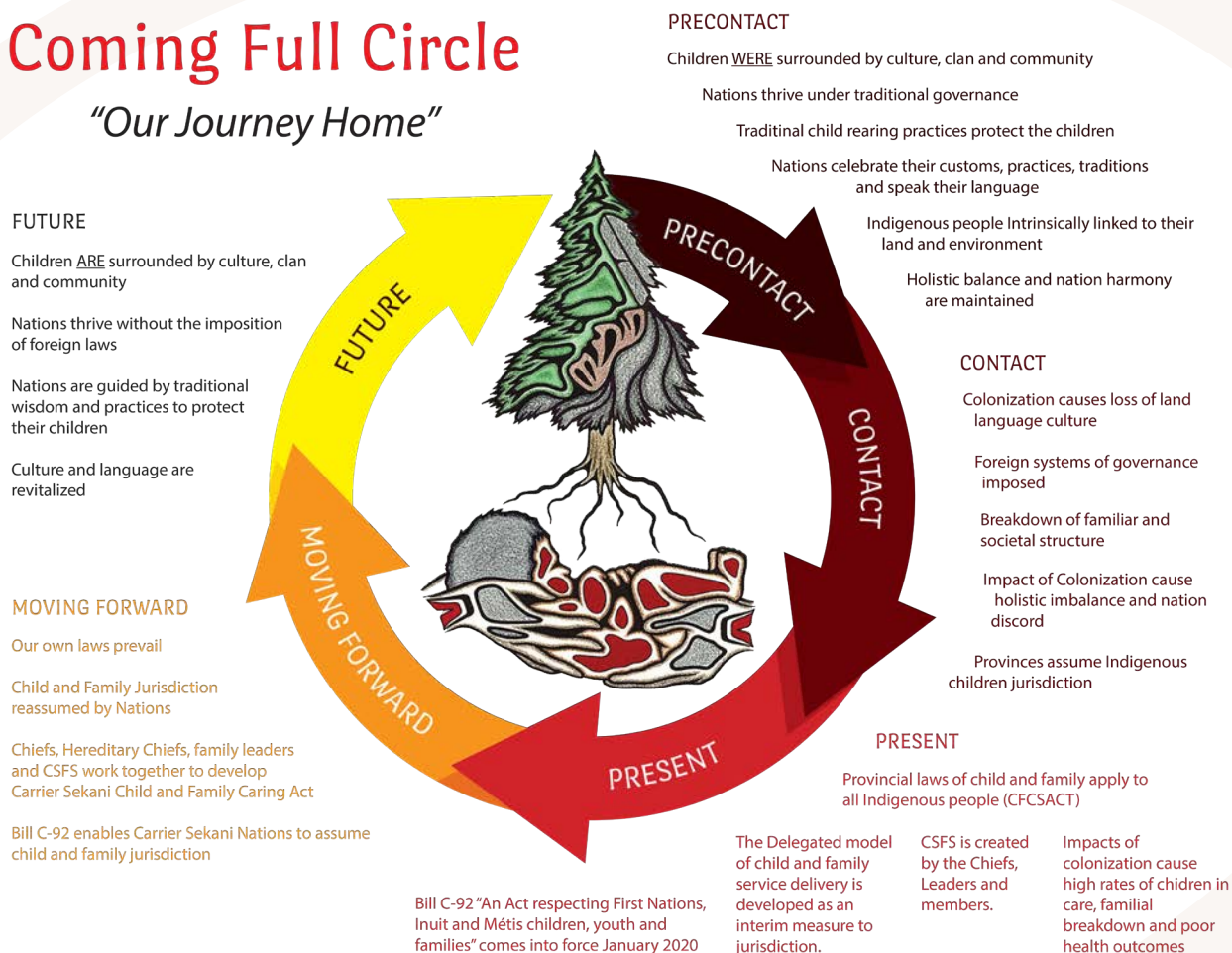
- a. To help support capacity for the Nations we serve.
- b. To develop a plan that is anchored with a strong focus on improving the outcomes for children, families, caregivers, and communities.
- c. Ensure that each Nation we serve has funded core services as outlined by the Canadian Human Rights Tribunal for: (a) Family Advocate; (b) Youth Support Worker; (c) Band Social Development Worker Fund; (d) Land Based Funding; (e) Cultural Programming; and (f) Community Prevention Programming.

2021/22 Goals:

The goal for the upcoming year is the combined funding agreement for health and child and family services funding envelope to be introduced. Currently, we are finalizing the full staffing complement of our Community Service Planners that will be responsible in providing contract, reporting and program management support to the Nations we serve. As well, we are formalizing processes with Indigenous Services Canada on major renovations and modular building applications. Our Executive Director of Child and Family Services will provide updates on the new Capital Directive for New Construction as per the recent Canadian Human Rights Tribunal ruling.

Coming Full Circle

"Our Journey Home"



GERALDINE FLURER, COMMUNITY WELLNESS MANAGER

Community Wellness Teams (CWT): 2020/2021 began with holistic innovative strategies consisting of a term of reference, which provides a structured platform to support the development of the CWT. This will help establish its role within the CSFS team-based model of care in relation to community well-being and all matters pertaining to children and family early prevention and prevention services. The purpose of the CWT is to serve as a community-based committee that reviews current community health and wellness issues and concerns, and works in partnership with other CSFS departments. The CWT will review, discuss and recommend strategies, and always have the best interest of the child and family at the centre of their planning. The CWT will also review and uphold the goals and priorities that support the communities' values, beliefs, customs, best practices and Indigenous laws. The CWT, in collaboration with CSFS, will act as a resource and advocate for the best interests of the Nations we serve and their children in child welfare matters and will assist in the development of plans for their children and make recommendations regarding support and prevention services for potential caregivers and planned care options within the communities.

2020/21 Goals and Achievements:

Our goal for each Nation we serve is to have an advisory committee supported by an assigned Community Wellness Coordinator and a Youth Cultural Support worker. The Nations provide a formal Band Council Resolution (BCR) appointing up to five citizens to each CWT. Our Community Wellness Coordinators consist of Chenelle Holmes (responsible for Saik'uz First Nation, Stelat'en First Nation and Nadleh Whut'en First Nation); Sherry Tibbett (responsible for Ts'il Kaz Koh and Wet'suwet'en First Nation); Wilfred Adam (responsible for Lake Babine Nation) and Tara Quaw (responsible for Cheslatta Carrier Nation, Skin Tyee Nation, and Nee Tahi Buhn Band). The Youth Cultural Support Workers are Meagen John (responsible for Saik'uz First Nation), and Emma Williams (responsible for Ts'il Kaz Koh and Wet'suwet'en First Nation).

Our Youth Cultural Support Workers support community cultural initiatives and events. Their role is to help in promoting our best teachers – our knowledge holders – by offering teaching opportunities for language, sharing cultural knowledge of our place within the Bah'lats and what this means to our future generations. We have had respected elders tell their stories to

our youth, staff, and community members over Zoom during the COVID-19 pandemic. CSFS's newly acquired Tachick Lake Resort held its first successful fish camp and was gifted salmon from Lake Babine Nation. CSFS staff, community members, children-in-care and youth from our various programs were able to participate in the processing the salmon. This was a great team building experience with our knowledge holders teaching the importance of keeping our culture alive. Smokehouses were built by Ronnie Alec and Leonard Adam from Lake Babine Nation, and Brian Thomas, Casey Alexis and Randy George from Saik'uz First Nation. We must acknowledge the generous support from the community members who actively participated daily in making Tachick Lake a place of spiritual significance (soon to be a place of healing and a treatment facility).

2021/22 Goals:

Building community capacity is fundamentally the most important aspiration of our program for culture. In October 2021, CSFS will be hosting a series of customized professional development training and partnering with internal CSFS key personnel and Indigenous Perspectives Society. This training will provide specific details on their roles and responsibilities for the CWT. As well, we will focus on collaborative practices, accountability and transparency when the community is empowered to ensure that we minimize Ministry of Children and Family Development (MCFD) involvement. By having Community Wellness Coordinators and a Youth Cultural Support Worker assigned for each Nation we serve, our goal is to ensure that each CWT has the greatest administrative support and people dedicated to working for their community.





STEPHANIE KONEFALL, DIRECTOR OF JURISDICTION

Jurisdiction works in partnership with the Nations we serve and the federal and provincial governments to achieve authority over child welfare matters under an *Act respecting First Nations, Inuit and Métis children, youth and families* (The Federal Child Welfare Act) and regain control from the province. Under our new law, the Carrier Sekani Child and family Well-being Act, we will meet the holistic needs of children and youth and ensure their safety and well-being. To do this, we will strengthen family and individual wellness and the environment of care for our children and youth within our communities and service delivery areas.

2021/22 Goals:

Based on the Jurisdiction Work Plan, our program has achieved the recruitment of a director, identified key positions, and established relationships with the federal and provincial governments to engage in our jurisdiction journey going forward.

Working groups have been identified, as have goals for engagement with the Nations we serve, current staff and departments, and subject matter experts. Research partnerships have been targeted with key research questions developed and co-creation opportunities with the Nations we serve have been identified based on collaboration sessions held in the last AGA reporting period.

CHERYL THOMAS,
DIRECTOR OF
PREVENTION SERVICES



Wrap Around Parent Guidance & Support Program

The Wrap Around Parent Guidance and Support (WAPGS) program is an on-site parenting program where parents of children aged 0-5 are able to access support, parenting education and outreach services on a one-on-one basis. We are a prevention-based program providing the opportunity to learn something new, increase parent capacity, increase parent satisfaction and confidence, and increase parent/child relationships through attachment-based programs. Our building is parent and child friendly, including two playrooms, a nap room, family-friendly dining area as well as fully fenced playground area outside. Families who are attending the WAPGS program will be able to access services five hours per day biweekly for a three-month period. At the end of the three-month period, families will have the option to extend their program for an additional three months or on a month-to-month basis as they choose. WAPGS accepts referrals from the Ministry of Children & Family Development (MCFD), community agencies, as well as from the families themselves. During enrollment in the program, families will be provided access to their own Family Support Worker who will support the family through role modeling, parenting education, outreach services within the home as well as referrals to other programming when appropriate. Services are provided in a holistic manner, focusing on the family as a whole while still considering individual needs. This program is of no cost to families – transportation to and from the building is provided as well as lunch and snacks. We are located at 2025 Victoria Street in Prince George.

Services provided to the following Member Nations

Lake Babine	4
Saik'uz	2
Stellat'en	2

Successes

During the pandemic we had to temporarily close our doors in order to come up with a safe plan for families and staff. The WAPGS program was back up and running by July 2020 after a successful revision of the program including protocol for safe social distancing, while continuing to provide hands on support in the program during COVID-19. The program has implemented the use of feedback surveys in order to best capture the ideas and opinions of families directly involved as well as the referring agent. With the consistent provision of feedback from participants and community partners, the program is able to change and grow with the needs of those directly accessing services.

Training

During the last year, WAPGS staff have had the opportunity to take part in the following training: Protecting Our Children conference; Pivot Training; When Love Hurts Facilitator training, First Aid, and Circle of Security.

Adult Education

WAPGS offers adult education to parents as well as one-on-one parenting education. This year the program has provided the following educational and training programs to parents: Circle of Security; Stress and Healthy Coping Strategies; Cooking and Life Skills.

Due to COVID restrictions, it was not possible to continue the parent-only education. This is typically a time in which the parents get to interact and learn with each other, as well as provide support to one another.



Child Education

Our Early Childhood Educators provide daily activities for our children in the areas of fine and gross motor skills, social-emotional development, including pre-K skills for the older children. Activities include the parent/caregiver as this provides an opportunity for the caregiver to learn about their child's development and how to encourage the next stages. Parents learn how to work alongside their children; how and when to provide support in these moments, and how learning to read the child's cues and respond appropriately, increase their self-esteem and build their confidence to manage and problem solve on their own.

The main goals of the WAPGS program for the upcoming year are to increase the ability to provide Outreach Services to families experiencing barriers attending our program on a regular and consistent basis.

Further, to implement more of the Circle of Security concepts on a one-on-one basis and in group settings. Circle of Security is an attachment-based program focusing on building and repairing the parent/child relationship by providing the foundational skills that form a secure parent/child attachment.

Family Preservation Outreach

The Family Preservation Outreach Project provides support and advocacy to clients who are searching for housing and to help reduce barriers related to homelessness. In this project, the client will be supported with their search for housing, provided advocacy and support with potential landlords while viewing places, provided information about their rights as a tenant, information on landlord and tenant relations, as well as life skills to maintain housing long term. If families have access to sufficient food and adequate housing, this empowers them to strive to have a better standard of living. Family Preservation Outreach Project further provides these services in order to ensure that children are not removed from their home, as well as to facilitate a quick return to their family and to assist in safety planning. Additional support and advocacy is available to clients with external agencies such as the Ministry of Social Development (MSD), as this can be difficult for families to navigate through at times. The Outreach project provides food hampers as needed and supports the family to ensure food security through life skills development and connection to emergency resources. Outreach refers clients to internal resources such as the CSFS Wellness Program, and Life Skills, to ensure clients are supported according to their individual needs.



2020/21 Goals and Achievements:

Number of families or individuals housed with support from our program: **21**

Number of families or individuals accessed food hampers: **35**

Number of families or individuals given rental supplements: **41**

Number of families or individuals receiving advocacy with social assistance: **16**

Number of Member Nation families or individuals assisted: **29**

Number of Member Nation families or individuals assisted details:

Saik'uz	3
Lake Babine	12
Takla	3
Nadleh	1
Stellat'en	4
Burns Lake	2
Nak'azdli	2
Wet'suwet'en	1
Cheslatta	1

Plus numerous other nations.

2021/22 Goals:

Outreach goals include empowering individuals to utilize CSFS resources, external community resources, and ensuring clients feel supported and respected as they are no longer homeless or at-risk of homelessness. We will be expanding our services with a focus on Burns Lake this year and are planning to have Family Preservation Outreach workers assigned to the Youth Services team in order to provide assistance to youth.

Prince George Bridging to Employment

The Bridging to Employment program is a nine-week program currently offered three times per year for individuals who are 16 and older, unemployed, and seeking access to education and training in order to secure employment. In the Bridging program, the students gain certification in WHMIS, Standard First Aid with CPR, Serving it Right, Financial Literacy, First Aid, Food safe, S100/185 Fire Suppression as well as support to obtain their class 7 learner's Driver's License. Further support is offered to students in order to break down any barriers that are in the way of being able to successfully maintain ongoing employment. The program offers workshops to help break down these barriers in the areas of communication, life skills, assertiveness, self-awareness, personal development and connection to community resources for overall wellness. The Bridging to Employment Life Skills Program is designed to empower the individual student through participation so that they are an integral part of improving their own circumstances.

2020/21 Goals and Achievements:

During the 2020-2021 year, the Bridging program was only able to facilitate two intakes with six participants per intake due to the pandemic. The communities and number of participants served were:

Lake Babine Nation	2M
Stellat'en	1M/1F
Yekooche	1M
Saik'uz	1F
Little Salmon Carmacks	1M
Lheidli T'enneh	1M
Fort McKay AB	1F
Lax Kw'alaams	1F
Kwadacha	1F

In total, there were six males and six females enrolled in the program, with four males and six females completing the entire nine-week program. Out of the participants, eight were on income assistance, two were in receipt of unemployment insurance, while two were supported by family. Out of all 12 students in the program at the beginning, five went on to attend further education/training while five students secured meaningful employment.

2021/22 Goals:

The next program is set to begin in Sept 2021. We will continue to work with all individuals wherever they may be on their career path. As we are still within the pandemic and practicing safety for all through social distancing, we will continue to follow these safety guidelines in the upcoming year in order to ensure health and wellness for staff and students.



Family Empowerment Prince George

*Summary Report Family Empowerment
Apr 01/2020-Mar 31/2021*

The Family Empowerment program provides support and supervised access to parents and family members in order to promote family engagement with children in care in a safe and secure environment. In this program, the worker provides transportation for the children to and from the access visits in order to ensure a safe transition from home to the visit. During access visits, the family will have support in a nonjudgmental, safe atmosphere and be able to access referrals to other programming. During visits, the worker may provide information on parenting such as behaviour management and boundary setting, life skills such as nutritional meal planning and child safety as well as offer tips on personal life skills such as self-esteem and self-advocacy. When providing supervised access visits for clients, the worker adheres to standards of confidentiality and complies with all relevant standards for documentation and reporting. When COVID began, the Family Empowerment Program had to stop in-person visits and resort to online Zoom meetings to conduct visits. In June 2020 Family Empowerment slowly returned to in-person visits. Family Empowerment strictly adheres to the COVID Protocols, ensuring the safety of everyone involved with each visit. Currently Family Empowerment has over 70 open files. Currently, the Family Empowerment Program is offered in Prince George, Burns lake, and Vanderhoof, as well as the Fort St. James area.

MONTH	Q #1	Q #2	Q #3	Q #4
April 2020	58	60	20	7
May 2020	60	61	34	3
June 2020	60	68	35	6
July 2020	56	69	37	9
Aug. 2020	63	67	41	16
Sep. 2020	59	63	33	9
Oct. 2020	67	67	36	17
Nov. 2020	67	68	39	9
Dec. 2020	65	70	40	9
Jan. 2021	64	71	37	8
Feb. 2021	64	65	33	7
Mar. 2021	62	68	36	3
TOTAL:	745	797	421	103

2021/22 Goals:

To continue providing safe and healthy visits in-person, and ensuring the COVID-19 protocols are adhered to. Also, our goal is to continue providing accurate, well-written reports to the MCFD. Finally, to continue providing assistance for the families involved in the program that include parenting skills, advocacy and self-esteem, and to provide a positive healthy environment for visits and ensure the safety of all involved.

- **Q #1:** How many families are you currently serving?
- **Q #2:** How many families did you serve this month?
- **Q #3:** How many of those families are First Nations?
- **Q #4:** How many new contracts this month?

Calls to Justice

The Calls to Justice Program addresses the historical and systemic issues surrounding missing and murdered Indigenous women along the Highway 16 corridor, spanning from Williams Lake to Haida Gwaii. Within this program, Carrier Sekani Family Services (CSFS) is working to implement Calls to Justice based on the National Inquiry Report on Murdered and Missing Indigenous Woman and Girls (MMIWG) as well as on recommendations from the Highway of Tears Symposium Report. CSFS has worked to provide prevention support to victims of violence, as well as to ensure awareness education is readily available for individuals, communities and service providers who are situated along the Highway of Tears. The Calls to Justice Program provides When Love Hurts support groups, which focus on trauma-informed violence prevention and awareness education rooted in Bah'łats values, utilizing current psychosocial evidence-based research specifically for women. Through this program, CSFS is hoping to coordinate the Highway of Tears Governing Body while collaborating with Indigenous communities, community organizations, educational institutions, municipalities, the RCMP as well as other stakeholders. It is our hope to revive a Highway of Tears Indigenous-led civilian oversight committee with which to reinforce positive police relationships with the goal of increasing safety for Indigenous individuals and communities.

2020/21 Achievements:

The Calls to Justice program was implemented on February 1st 2021 which limits our reporting time frame to two months only. During this time, CSFS has instated an Indigenous Calls to Justice Focus Group with representation from family members of MMIWG as well as from communities located along the Highway of Tears. CSFS has engaged with federal, provincial as well as local governments in order to reinvigorate support for our Highway of Tears Initiative and to be able to instate ongoing multi-year funding. CSFS completed a literature review of all MMIWG reports and recommendations within the media,

government, academia and non-government organizations dating back to 1995 to inform our next steps.

2021/22 Goals:

Our goals for the 2021/22 year are to effectively rewrite our Highway of tears MMIWG Community Safety toolkit to a national toolkit including adaptable relevance to Indigenous communities across Canada. Further, CSFS will be able to facilitate the training of trainers within each province and territory spanning the country in order to assist and support Indigenous communities to create and implement their own annual MMIWG safety plans utilizing our toolkit. We will then create and launch a national website hosting the toolkit while providing ongoing updates for national awareness and education on the Highway of tears and MMIWG. Ideally, we will also create online programming on MMIWG in partnership with educational institutes, while further launching a national media awareness and educational campaign on the Highway of tears and MMIWG in Canada. On a final note, CSFS will be hosting the National MMIWG and Highway of Tears Symposium in Vancouver in 2022.





JOAN CONLON, PREVENTION & PRACTICE SUPPORT MANAGER

Family Preservation, Family Empowerment, and Bridging to Employment - Burns Lake

In collaboration with the Nations, Community Prevention Services continued to provide service throughout the pandemic. Creative use of technology and with innovative use of virtual connections, prevention staff were able to provide advocacy and support in keeping families connected while involved with the child welfare system. After much discussion with community Emergency Operating Committees (EOCs), we were able to begin to provide safe essential person services; most important supervised access for children in care (CICs). We delivered care hampers to children and families, including food, clothing and hygiene supplies. We also provided outreach, advocacy and support to those involved in the child welfare system

or judicial system. In addition, families were supported to reach goals, outlined by the family. Support workers were trained this year in many areas such as culturally appropriate parenting skills, trauma informed practice, principles of harm reduction, and build their knowledge base which includes legislation that impacts our families, and how to best advocate on their behalf with newly defined laws.

The staff also concentrated on linking families to other services offered by CSFS such as primary health care, housing supports, mental health, and addictions recovery, all while maximizing supports for families in a holistic creative approach. While this year has been challenging for us, the team has learned how to provide services in an incredibly innovated way.

One area that impacts family wellness is food security and housing stability, and this still remains a challenge in our communities. Staff support families in securing and maintaining stable and safe housing as this is seen as a predominant challenge for our families who are involved with the Ministry of Children and family Development (MCFD). Staff have worked hard in our rural and remote communities to access safe housing for families, even during challenging times.

Totals by Nation:

Family Preservation

Lake Babine Nation	85
Wet'suwet'en First Nation	18
Cheslatta Carrier Nation	2
Nadleh Whut'en First Nation	2
Stellat'en First Nation	2
Burns Lake Band	4
Takla First Nation	1

Family Empowerment

Lake Babine Nation	5
Cheslatta Carrier Nation	3
Stellat'en First Nation	1
Takla	23 FPP
Yekooche	10 FPP, 2 FEP
Saik'uz	32 FPP, 10 FEP
Nadleh	17 FPP, 2 FEP
Stellat'en	9 FPP, 0 FEP
Non-member	20 FPP, 0 FEP
Non-Indigenous	5 FPP, 1 FEP

The Bridging to Employment Program is a prevention program that has served many community members and supported participants to become job ready, but so much more is involved. Job readiness changes the lives of families and individuals. A number of our participants got job experience, and many have gained employment. It was an honour to watch a number of graduates move on to employment with their Nations and community. Well Done!

Prevention Services continues to build their skills in an effort to improve wellness in our communities. Ultimately, prevention services are seen as pivotal in mitigating risk for families. The CSFS Prevention Team, Family Preservation and Family Empowerment will continue to focus on building skills and capacity in an effort to optimize effectiveness and service delivery. CSFS Prevention staff will continue to work alongside Nations as they build their staff, and to help learn together to offer holistic, skilled services.

Safe House

The Dzee Ba'yugh Safe House provides temporary shelter to women and children fleeing family violence. We have six family rooms with a total of 22 beds. Total days a family can stay is 30 days, however individual and community circumstances (i.e.: housing shortages) are considered. Our program provides safe shelter, emotional and life skills support and advocacy.



2020/21 Goals and Achievements:

We have supported 42 women and children and kept them safe from family violence for a total of 2,694 bed nights. We have supported women in accessing housing, second stage housing, and improving life skills. We've supported safety planning and wrap around care using services available to our clients through Carrier Sekani Family Services and each individual clients' home community.

2021/22 Goals:

We are aiming to implement a traditional food harvest program for the safe house winter supply as well as enough for women to take with them when they move on from the safe house. We will also be developing and building capacity of Safe House Staff to deliver in-house programming and groups such as structured life skills.

Summary Report Dzee Ba'yugh Safe House Fiscal Year Apr 01/2020-Mar 31/2021

	Intake	Bed Nights	Non-Intake Refused Services No show	Non-Intake Did Not Meet Eligibility	Non-Intake Waitlisted
Lake Babine Nation	30	1363	2	0	0
Burns Lake Band	0	0	0	0	0
Cheslatta Carrier Nation	6	590	0	1	0
Skin Tyee Nation	0	0	0	0	0
Nee Tahi Buhn	2	110	0	0	0
Wet'suwet'en First Nations	2	628	0	0	0
Nadleh Whut'en	0	0	0	0	0
Stellat'en First Nations	0	0	0	0	0
Saik'uz First Nations	0	0	0	0	0
Yekooche First Nations	0	0	0	0	0
Takla Lake First Nations	0	0	0	0	0
Non CSFS Member Nation	2	3	1	4	0
TOTAL:	42	2,694	3	5	0

RHONDA HOURIE, URBAN FAMILY PRESERVATION MANAGER

The goal of Urban Family Preservation is to help our clients acquire the skills and support they need to develop and strengthen family wellness. We work with families who are involved with the Ministry of Children and Family Development (MCFD), families at risk of MCFD involvement, or families seeking support and information on parenting and life skills. Our workers are dedicated to supporting families in their health and well-being in a holistic and respectful manner. We also offer the following groups: Parenting, Women's Group, Adult Life Skills, Farmers Market Program, Anger Stress Management, When Love Hurts Support Group, PEACE Program, Rainbows, Prism, and Kaleidoscope.

2021/22 Goals:

Urban Family Preservation completed a proposal to open a daycare in Prince George with 16 spaces for children 36 months and under. There are also 22 spaces for 30 months to school age. The location of the daycare is to be determined.

We have also completed a proposal for the Centre of Hope. This is supportive housing for women who are struggling with mental health and/or substance use, are pregnant or new mothers who are at risk of involvement from MCFD.



**Carrier Sekani Urban Family Preservation Program Monthly Caseload Statistics Summary
Apr 01/2020-Mar 31/2021**

BAND	NUMBER OF FAMILIES											
Lake Babine Nation	18	6	15	8	17	17	16	19	19	18	20	23
Takla	6	6	10	7	7	5	7	4	4	6	8	8
Nak'azdli	0	0	0	0	0	0	0	0	2	2	2	2
Tl'azt'en	4	3	5	3	3	3	3	2	3	2	3	2
Saik'uz	4	3	4	7	5	3	7	5	3	11	10	7
Yekooche	1	1	1	1	1	1	2	1	1	2	2	2
Stellat'en First Nation	1	1	2	2	2	2	2	1	2	2	2	1
Wet'suwet'en First Nation	0	0	0	1	2	3	3	3	3	5	4	5
Skin Tyee	1	2	1	1	1	1	1	1	1	1	1	1
Nee Tahi Buhn	0	0	1	0	2	0	0	2	2	2	2	2
Nadleh Whut'en	1	2	3	3	2	1	3	1	0	2	2	3
Burns Lake Band	0	0	0	0	0	0	0	0	0	1	0	1
Cheslatta	1	1	1	1	2	2	2	1	2	2	2	2
Metis	5	6	6	7	6	5	1	5	5	3	4	4
Non-Aboriginal	8	10	12	14	10	22	20	25	18	21	22	18
Other Bands: Gitaanmax, Tsay Keh Dene	17	23	24	26	18	16	21	21	28	24	26	27
Unknown	2	3	11	5	3	5	4	4	0	1	4	3
Intakes	7	3	1	5	4	9	7	4	7	6	7	11
Courtesy	11	18	12	18	27	37	41	36	39	47	49	45
MONTH/YEAR	Apr. 2020	May 2020	June 2020	July 2020	Aug. 2020	Sept. 2020	Oct. 2020	Nov. 2020	Dec. 2020	Jan. 2021	Feb. 2021	Mar. 2021

AMY MERRITT, DIRECTOR OF YOUTH SERVICES

CSFS Youth Services supports youth aged 8 to 29 years old in Prince George, Vanderhoof, Burns Lake, and the Nations we serve. Youth programs help clients establish strong cultural ties, healthy relationships, and life skills that support them to feel proud, loved and inspired. We provide year-round programming, including: Walk Tall, 1:1 youth support (life-skills, advocacy, etc.), Youth Advisory Council, and Elder Youth Mentorship (EYM) programs and have two Youth Centres: Sk'ai Zeh Yah (Prince George) and the Vanderhoof Youth centre.

Our Youth Services team is proud of its accomplishments this past year, including:

We have continued to provide services safely to our young people throughout the pandemic. Initially we provided our services virtually, but following Provincial Health Officer regulations, we were able to transition back to in-person services by the summer of 2020 and have continued direct service delivery since then.

During the year, our youth programming has provided cultural opportunities for staff, children and youth. Youth Services Manager, Kayla Brownscombe, has developed a Culture Camp Curriculum and training program. The training is designed to support communities to plan and implement safe Culture Camps that embody the cultural teachings and traditions of each unique community.

Our Elder Youth Mentorship (EYM) program adapted to the COVID-19 pandemic restrictions by initiating a beading group twice a week with COVID-19 protocols in place. The youth in the Beading Group have practiced their beading

skills, and completed projects such as earrings, lanyards, and pop-sockets while making new friends.

EYM Coordinator Julie Scoble collaborated with John Howard Pacific to deliver 3 sessions of employment training (2 in Prince George, 1 in Vanderhoof) which included First Aid, WHIMIS, and Fire Suppression. The workshops had consistent attendance, and high graduation rates.

Youth Advisory Council (YAC) is a group for youth aged 16-18 years old led by Youth Care Workers Wyonna Batoche and Jessica Kilpatrick. The purpose of the council will be to provide feedback to those working with children and youth in-care, with the goal of improving overall experiences of children and youth in-care and their post-care outcomes.

One of the accomplishments we are most proud of is the opening of our Prince George Youth Centre: Sk'ai Zeh Yah. The centre serves as a "one-stop" wrap around resource for youth and young adults. Many of our clients struggle with a high-risk, unsafe lifestyle, with no safe housing (and sleeping on the streets or in shelters). Our services include: food support, showers, laundry services, clothing, storage, and cultural and recreational activities. Staff assist clients with life skills, employment, identification and housing (to date ten individuals accessing Sk'ai Zeh Yah supports now have secure housing). A CSFS Primary Care nurse attends Sk'ai Zeh Yah weekly to address client health needs. Youth Workers also provide outreach and advocacy to those experiencing homelessness. We increased this support during the coldest months in winter and during the heatwave this summer.

The Vanderhoof Youth Centre (VYC) provides drop-in and group services. The VYC is now able to transport youth after programming with the purchase of a passenger van.

Burns Lake Youth Services continues to expand, supporting the surrounding member Nation youth through group and 1:1 services. We look forward to collaborating with our CSFS Health Department as we develop the Burns Lake Foundry in the coming year.

Youth Services' Goals for 2021/22 include:

- Facilitating Back to the Land Culture Camp Training in-person.
- Finalizing and distributing the Elder Youth Mentorship toolkit to CSFS Member Nations.
- The life-skills team is developing a culturally focused life skills curriculum that will be available to CSFS programs and the Nations we serve as a resource for life-skills facilitators.
- Youth Services staff will continue to deliver consistent afterschool programming, one-to-one Services, and specialized groups (i.e. Rainbows Grief and Loss) for youth in Prince George and surrounding area.
- Sk'ai Zeh Yah will be expanding their existing housing support with a housing outreach program.
- The Vanderhoof Youth Centre has hired a new supervisor and are expanding their activities (both in and out of the centre) in the coming year by offering more one-to-one services.
- Burns Lake is involved in the development of the Foundry resource, and will be co-located with this health resource, strengthening holistic, low-barrier service to our community youth.

Prince George Youth Services' Nation Participants:

Saik'uz	18
Nadleh Whut'en	2
Stellat'en	3
Lake Babine Nation	39
Takla Lake First Nation	8
Yekooche	1
Wet'suwet'en First Nation	2
Cheslatta	3

Prince George Prevention Services:

1:1 Active	37
Walk Tall Sr. Boys	9
Walk Tall Jr. Boys	9
Walk Tall Jr. Girls	10
Walk Tall Sr. Girls	10
Walk Tall leadership	8
EYM	32

Prince George Sk'ai Zeh Yah Drop-In Youth Centre:

- Sample Daily stat: Average of 27 clients per day (average age of 24) accessing services.
- Of those, 54% are former CSFS youth and half are from our eleven-member Nations.

Vanderhoof:

Walk Tall Jr Boys	7
Walk Tall Jr Girls	9
Drop in (daily average)	20
1:1 Active	1

Burns Lake:

1:1 Services	22
• Staff also assist with groups at Burns Lake Secondary School *20-30 youth.	



SONYA ROWLAND, DIRECTOR OF PRACTICE - QUALITY ASSURANCE & PROGRAM DEVELOPMENT

Delegated Services - Guardianship & Resources

The mandate of our resource program is to provide safe alternate care for children from the Nations we serve to promote their well-being. Our team's focus is to work collaboratively with programs such as Family Preservation to support children to be cared for by family or community members. We provide on-going training to caregivers, care providers and community members.

Our guardianship program is responsible for the care and well-being of children in care from the Nations we serve who are under a Continuing Custody Order. Our approach is situated in the life cycle model and the Aboriginal Operational & Practice Standards & Indicators (AOPSI) with the child in the centre of their circle of support – surrounded by family and community. Our program works closely with family justice facilitators to engage in regular family group conferences and youth transition conferences.

The core of our work with children in care and caregivers focuses on developing holistic care plans with an emphasis on connection to family, culture, and community.

Goals and Achievements for this past year:

- We continue to provide ongoing supports and funding to former children in care through the extended measures program (19 – 27 years old).
- We are proud of the five youth in care who are pursuing their post-secondary goals through university, college or technical institutions.
- We have opened more foster homes on-reserve who can be an emergency option for children who need another place to stay temporarily.
- This past year, we were able to support six children to live with a parent or extended family member.

Our guardianship and resource program goals for the 2021/22 year are:

- To increase the number of children living with a parent, or an extended family member.
- To take on more out-of-care home studies for children from Nations we serve.
- To expand guardianship services to children in temporary care from Nations we serve.
- To expand our services to Vancouver, Houston, and Smithers.





TRAVIS HOLYK, EXECUTIVE DIRECTOR OF HEALTH SERVICES

This year has been an incredible challenge, and yet, through that challenge I am extremely grateful to those who have worked so hard to roll out the vaccine, shifted how they provide services or provided care in ways that ensured access while maintaining their safety and the safety of clients/patients. I would also like to sincerely acknowledge those who have lost their lives or have had family members who have lost their lives to the COVID-19 virus.

As many of you are aware, Mabel Louie announced her retirement at our AGA last year and retired from her position as the Executive Director of Health Services for CSFS as of November 30, 2020. Mabel is dedicated to the health and wellbeing of the Carrier people and I thank her for all she has taught me over the years.

To provide a little explanation of our new structure, I have assumed the role of Executive Director of Health Services and will provide strategic direction and program service delivery structures for all health programs.

Rhoda Hallgren, Director of Community Health Programs, has the primary responsibility for community engagement, and to plan and coordinate the development of Community Health Services for the health transfer communities. She will liaise with Chief and Council, General Managers, and Community Health Staff to facilitate the development of health transfer programming and initiatives.

Marilyn Janzen, Director of Health and Wellness, continues to oversee all operational day-to-day functions of the Health and Wellness and Addiction Recovery Programs.

Dawne Persson, Director of Early Childhood Development, will continue to be responsible for implementing programs and planning programs and services for Aboriginal Supported Child Development, Children's Oral Health Initiative, Canadian Prenatal Nutrition Program, Best Beginnings Outreach Program, Early Years Preschool, Maternal Child Health and Indigenous Urban Head Start.

Rachael Wells, Director of Quality and Innovation, will be responsible for leading the development of the CSFS Quality Improvement strategy in order to support innovation and improve our reporting on program performance. This department will also be responsible for evaluation, accreditation and our learning strategy.

Primary Care and Nursing Services

Our commitment to primary health care has resulted in ongoing growth of our physician team, which now has 12 doctors providing care to the Nations we serve. In the past year we have added Dr. Mary Koziol and Dr. Rebekah Eatmon providing service to the Takla and Yekooche, and Dr. Suzanne Campbell providing care in Saik'uz. Dr. Cody Kaskamin joined us and we are

Health visits (2020)	Clinic	Notes/phone	Virtual Care	Home Visit
Physicians and Nurse Practitioners	3784	8635	5462	242
Nurses	4288	0	2400	466
Home Care RCA	0	0	0	2122
Physio	418	0	0	0

excited that he chose to live and work in the community of Burns Lake. Dr. Lauren Taylor is providing support in the Burns Lake area while Dr. Jaya Bastedo is on maternity leave. Dr Danette Dawkin, is working in Stella (temporarily for Dr. Montana), in Burns Lake and area in September and October and in Nadleah late fall. Dr. Dawkin is President-Elect of BC Family Doctors and I acknowledge the work that our doctors do provincially. To that end, congratulations to Dr. John Pawlovich for his appointment as the UBC Chair in Rural Health.

In the last year, the Yu Be-Yah Clinic staff in Prince George has grown to include a part-time Perinatal Clinician, focusing on the social and mental health needs of our patients, and a part-time Perinatal Nurse, who in addition to the Nurse Practitioner, provide medical support to new and expecting parents. This has strengthened the clinic's focus on perinatal care, working with families on reducing barriers to health care, and to supporting families with MCFD involvement.

An exciting development is the start of designated perinatal clinic days and family group visits. The Perinatal Clinician, Perinatal Nurse and Nurse Practitioner are on hand for these visits, enabling wrap around care in one visit. Pregnant clients are encouraged to bring their children to prenatal visits, allowing the opportunity to be seen by both the NP and RN in a supportive environment where light snacks as well as transportation are provided when needed.

As of the writing of the report, 2136 vaccinations for COVID-19 had been provided by CSFS, representing 1225 people who were vaccinated.

In 2020 there were also 593 immunizations provided by CSFS nurses.

Compared to last year, the number of in-person clinic visits provided by our physician and NP teams was down by 1594 visits, however notes and phone calls were up by 4257 and virtual care (video and telephone consults directly with the patient) increased by 2781 visits. The numbers reflect finding ways to provide safe care during a pandemic while still making sure people have access to primary care. The number of physiotherapist visits, which include telehealth and in-person visits, more than doubled over last year.

My goals for the upcoming year include focusing on recruitment so that people have timely access to the services they require. We will continue to work towards integrated service delivery in line with the CSFS vision of holistic care. We are currently working on the health transfer evaluation, required as part of the 10-year agreement with FNHA, and will be working with community to develop new community health service plans to guide health services provided as part of our next 10-year health transfer agreement. We also have some major capital projects including securing additional funding for the treatment center, securing a location of Foundry in Burns Lake, and having our new location of Yu Beh Yah clinic Prince George ready to go by 2022. In the coming year as the province opens up, we can also get back to providing research that directly benefits people such as the lung function assessment and programming for Elders as part of the Elder strength for all research grant.



RACHAEL WELLS, DIRECTOR OF QUALITY & INNOVATION

Building on the accreditation, research and evaluation efforts to date, CSFS enhanced its quality improvement activities through the creation of a Quality and Innovation Department. The mandate of the Quality and Innovation Department focuses on providing support for all programs in their quality improvement efforts by developing program-based performance measures and analytics, achieving accreditation standards, and implementing evaluation and research activities that align with the overall strategic priorities and goals of CSFS and the Nations we serve. The Quality and Innovation Department also works with programs to offer supports to our staff and community partners in meeting their learning, education and skill development goals.

The Quality and Innovation Department recruited 5 new positions to build on past evaluation, research and accreditation efforts. Rachael Wells, Director Quality and Innovation leads the QI team to ensure quality improvement activities and processes support CSFS to achieve its

strategic goals and objectives. Michelle Devereux, Program Assistant supports the QI team's administrative functions.

Bianca Michell, Research Associate and Emma Rossnagel, Research Manager support Dr. Holyk in his long-standing research program focused on suicide prevention across the life cycle. The current study, Strength for All, focuses on elder suicide prevention and mental wellness and is funded by the Canadian Institute for Health Research over the next 4 years.

Tom Paterson, Learning, Community and Staff Development Coordinator provides opportunities to enhance the capacity and sustainability of both CSFS Services and the communities we serve, through on-going, learning opportunities.

Cathy Scott, Accreditation Lead is preparing CSFS staff who have CARF Accredited programs for their upcoming CARF survey in summer 2021. Cathy chairs the CSFS COVID-19 Pandemic Task Force and co-chairs the Emergency Response

Committee to support CSFS in developing policies and procedures to create a safe workplace and meet our Worksafe requirements. In an ever-changing environment with evolving Public Health Orders, Cathy mentors staff through new safety protocols and safety standards to ensure that CSFS service provision continues to keep our clients and communities safe.

Georgia Betkus, Evaluation Lead will begin to support all programs to define their performance indicators and evaluate the efficacy of the programs through consistent monitoring of data and program reports. Janna Olynick, Data Analyst is the newest member of the QI team and will focus on developing data modelling and forecasting for future service delivery; reports on community wellness and performance indicators; gathers, reviews, interprets and analyzes data for CSFS programs.

For general inquiries to the Quality and Innovation Department, please email us at qualityandinnovation@csfs.org

2021/22 Goals:

Moving forward, the Quality and Innovation Department will focus strengthening quality and innovation activities at CSFS. We will support all CSFS programs to confirm our strategic performance improvement measures and data analytics to develop a CSFS Quality Improvement Plan. We will undertake an evaluation of our health transfer services and mental health programs to inform our service delivery planning.

Continuing to maintain our CARF Accreditation status, the QI team will support programs to undertake a successful CARF survey to achieve a 3-year Accreditation for 2022-2025. As we undertake current research activities with our Academic partners, the QI team will continue to seek opportunities that build research capacity at CSFS and address priorities for the Nations we serve. We will also conduct a scan of learning and professional development needs for CSFS staff and Community members to further develop partnerships for training and education needs.



RHODA HALLGREN, DIRECTOR OF COMMUNITY HEALTH

The 2021 CSFS AGA and this report culminates my first year with CSFS as the Director of Community Health. In the summer/fall of last year, I had the pleasure of accompanying the former Executive Director of Health Services, Mabel Louie, to meetings with elected Chief and Council, General Managers, Health Coordinators and other health staff which was integral in becoming familiar with the communities that we serve and the health transfer agreements with each Nation. Not long after those visits, communities were diligent in maintaining the safety of their population by implementing a lockdown to prevent the spread of the COVID-19 virus. It has been an interesting first year with many challenges brought upon by the pandemic. As the health service agency for the member Nations, we took to virtual platforms to meet safely while continuing to conduct business.

Though I learned to primarily utilize email and Zoom to communicate with colleagues and community health staff, one thing that I am definitely looking forward to is getting back into collaborating in-person and connecting with the people who make this work worthwhile once again; and I am sure that I am not the only one with this sentiment.

As the Director of Community Health, I oversee and provide support to the health administration staff and the medical transportation program (aka patient travel). I also provide support to the ten member Nations under health transfer mostly providing assistance with navigating funding avenues and administrative support. I work with other CSFS staff to develop funding agreements, network with shareholders, as well as attend meetings and planning sessions.

This past year, the priorities that required the most amount of attention was COVID-19 preparation and planning, Wild Fire support, and addressing the Opioid Crisis.

There were quite a few positions that became available within the health sector this last year within Northern Health Authority, CSFS member Nations and within our own departments for which I provided support with recruitment. One area that we find challenging is recruitment and retention efforts within our region. Mabel Louie was instrumental in encouraging our young Indigenous people in entering post-secondary educational endeavours within the health sector. In an effort to continue Mabel's legacy in supporting those who enter health related programming, we finalized the creation of the Sarah Hein Memorial Bursary & the Judith Sandford Bursary with UNBC. These two bursaries will be awarded in April 2022 for those students who meet eligibility requirements and apply as students enrolled in the UNBC Nursing program.

CSFS Health Programs also approved scholarships for students from the ten member Nations who have completed their degrees in both the health and social services sector. During the pandemic, the CSFS health and wellness team provided planning and implementation support to member nations utilizing FNHA COVID-19 grants. This

process allowed for CSFS to assist with the purchase of supplies and with the delivery to households in order to maintain COVID-19 safety protocols.

The health and wellness team meets with the Executive Director of Health Services, Dr. Travis Holyk, on a quarterly basis to ensure that we work in collaboration with one another and to ensure that our work complements the member communities' priorities.

2021/22 Goals:

- Finalizing the health planning updates within each member Nation under health transfer.
- Contribution agreement negotiations with FNHA complete and reflective of the collaborative and individual priorities highlighted within the updated community health plans.
- Re-negotiate contract with Northern Health for the Aboriginal Patient Liaison program.
- Assisting the communities with developing a recruitment strategy to fill the positions at the community level and to provide training for retention.
- Awarding the Sarah Hein Memorial Bursary & the Judith Sandford Bursary.
- I am currently enrolled in NVIT educational endeavours to hone my current skillset and establish additional skills.
- Develop strong working relationships with CSFS health staff.
- Continuing to build relationships within the communities by providing assistance within funding areas and administrative support.



LORNA PAUL, OFFICE MANAGER / FIRST NATIONS HEALTH BENEFITS

FNHB Medical Transportation Program offers our community members patient travel services. The program assists BC First Nation clients by supplying supplementary funds for travel to medically required health services that cannot be obtained on the reserve or in the community of residence. Services are provided to support patient travel for individuals at any stage in the life cycle on an as needed basis, within the eligibility criteria outlined by Aboriginal Affairs and Development Canada.

Frances Lind has accepted a term position for the FNHB Clerk. The FNHB Department has successfully updated its Mustimhuw system. Five First Nations Communities were successfully trained with FNHB Region Office.

FNHB will be putting together a FNHB pamphlet, this will include what they are eligible for, how to apply for services and seeking assistance from Jordan's Principle.

DAWNE PERSSON, DIRECTOR OF EARLY CHILDHOOD EDUCATION

Hohudul'eh Bayoh Indigenous Head Start

Our program is a part of the Aboriginal Head Start Association of BC, which was created in 1995 to allow programming to deliver holistic teachings that are culturally relevant to the child and families involved.

We believe in following six key components to guide our care for young children:

- Culture & Language Education
- Health Promotion
- Nutrition
- Social Support
- Parental & Family Involvement
- Respecting, honouring, and promoting every child's spiritual, emotional, intellectual, and physical growth.

Hohudul'eh Bayoh Headstart number of children:

Infant and Toddler _____ 8

Ages 3-5 _____ 16

On waitlist _____ 23

2020/21 Achievements:

We wanted to be able to offer family gatherings, cultural nights, and start up a parent advisory board. We were able to host a few cultural nights and set up a parent advisory board. This has been limited due to regulations with the pandemic and not being able to run in-person groups.

2021/22 Goals:

1. We would like to increase the amount of family gatherings and cultural nights for families.
2. We would like to expand our outdoor play space to allow children to have more activities outdoors.



Aboriginal Supported Child Development

The Aboriginal Supported Child Development Program (ASCD) works with children aged 0-18 years. ASCD is a voluntary and family-centred program that works in partnership with families so that children with extra needs can be included in a variety of settings. Families know their child best and ASCD programs work to include families in decision making in regards to services for their child. ASCD staff provide supports, developmental screening, and assessments and work with the family to achieve developmental goals for the child.

Children should meet any of the following three criteria:

1. Child is between newborn to 12 years (Services for children 13 to 19 may be provided on an individual basis).
2. Child has a developmental delay or disability in one of four areas:
 1. Physical,
 2. Cognitive,
 3. Communicative,
 4. and Social/Emotional/Behavioural.
3. Child requires additional support in a childcare setting. No diagnosis is required to receive services.

Services are delivered to:

- Yekooche First Nations,
- Takla Lake First Nation,
- Saik'uz First Nation,
- Stelat'en First Nation,
- Nadleh Whut'en First Nation,
- Burns Lake Band,
- and Lake Babine First Nation.

Services include:

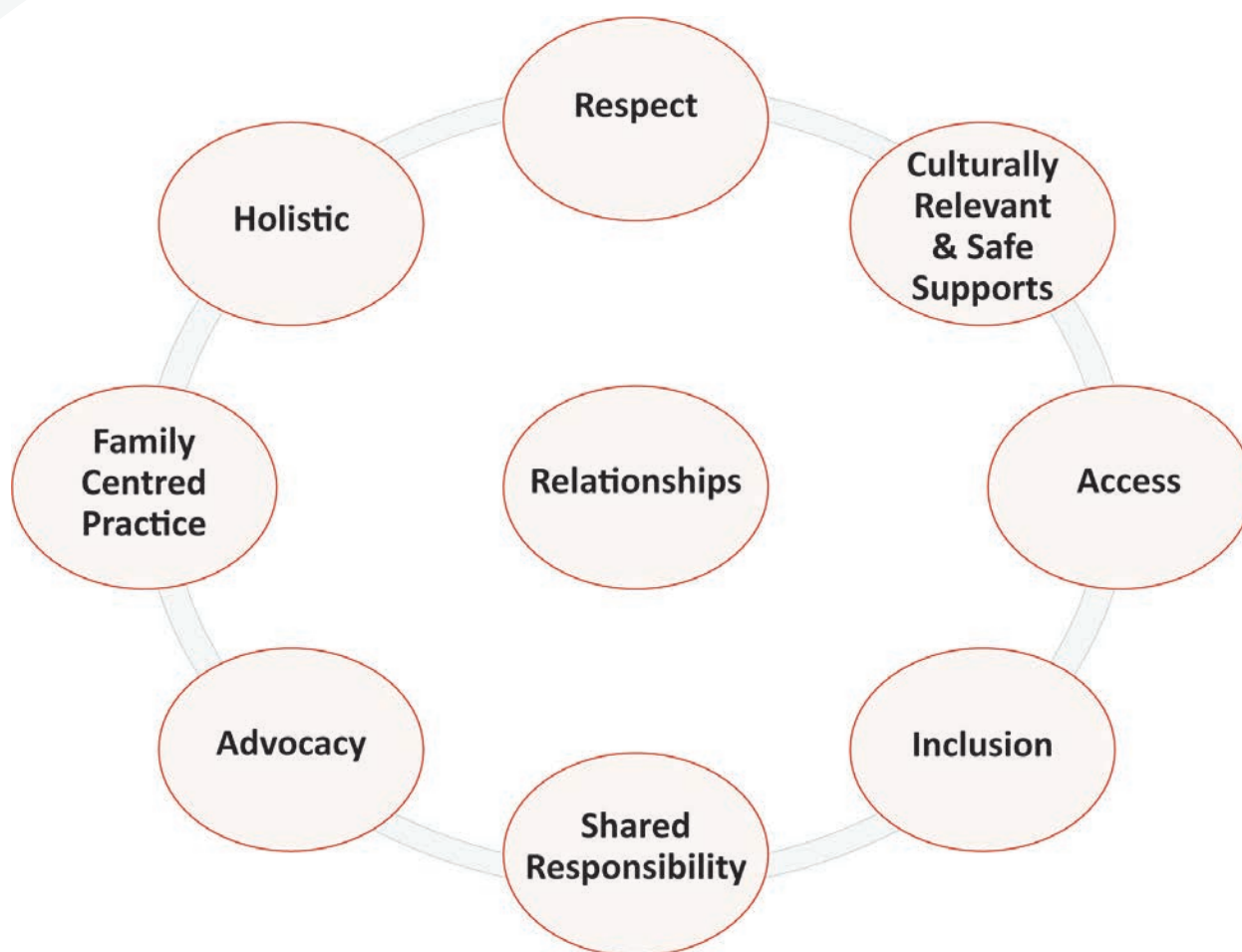
- Consultation
- Developmental screening assessments
- Individual program planning
- Culturally relevant programming
- Help for families and childcare providers to access community resources

Aboriginal Supported Child Development number of clients in each community:

Lake Babine Nation (Woyenne Daycare)	8
Burns Lake Band (Little Angels Daycare)	13
Vanderhoof	5
Fraser Lake	5
Saik'uz First Nation	5
Stelat'en First Nation	2
Nadleh Whut'en	4
Takla First Nation	13
Yekooche	5



The Aboriginal Supported Child Development Program (ASCD) Core Values



2020/21 Achievements:

1. We were wanting to increase education for our support workers that are currently working in the daycares by having them start their Early Childhood Certificate (ECE) courses to work towards their ECE certificates – some staff enrolled into the ECE certificate program.
2. We were wanting to increase the delivery of the partnership training for the daycare staff in the communities, including FASD training and Behavioural management. Due to the closures of many of our daycares due to COVID, this training wasn't able to take place. However, our staff did many accounts of informal training throughout the year.

2021/22 Goals:

1. We would like to continue to have our support workers trained in Early Childhood Education. We will be looking into options for them to do schooling throughout the year to increase their skills.
2. ASCD would like to increase our delivery of group programming in childcare programs such as the Moe the Mouse program.



Best Beginnings Outreach Program

The Best Beginnings Outreach Program (BBOP) is a team of professionals working together to support families in helping to ensure the best outcomes for their children aged 0-6 years. BBOP focuses on the child's well-being and development as a whole; physical, mental, emotional, social and spiritual.

Our team can help children with:

- Motor delays
- Speech delays
- Problem solving
- Attention control
- Behaviour management
- Physical activities
- Social skills

Our team consists of a Speech and Language Pathologist, Occupational Therapist, Rehabilitation Assistant, Physiotherapist, and Early Years Outreach Workers. BBOP services are provided to Yekooche First Nation, Takla Lake First Nation, Nadleh Whut'en First Nation, Stellat'en First Nation, Saik'uz First Nation, Lake Babine Nation (Fort Babine, and Woyenne Kindergarten). Appointments can be offered in the setting of the parent or guardian's choice.

Services offered include:

- Consultation
- Developmental screenings and assessments
- Speech and language therapy
- Occupational therapy
- Culturally relevant programs and workshops
- Help for families and caregivers to access community services and resources
- Art/craft groups
- Toy lending
- Group activities

Best Beginnings Outreach Programming number of clients in each community:

Saik'uz First Nation	3
Nadleh Whut'en First Nation	3
Stellat'en First Nation	3
Takla Lake First Nation	5
Yekooche First Nation	17
Woyenne Kindergarten	11

In the Early Years Outreach Programming 138.5 hours of group programming was provided.

2020/21 Achievements:

We were wanting to increase our group programming in the daycares and communities. This was done through implementing more groups such as circle times, craft times, play groups as well as other drop-in sessions. All groups were expanded out to reach more families.

2021/22 Goals:

We are wanting to add additional therapy services as we have a high caseload and recognize that the children need more services. We will continue to seek out additional funding to be able to support this initiative and find ways to bring in more paraprofessionals.

Children's Oral Health Initiative (COHI)

The Children's Oral Health Initiative (COHI) is a free program offered by First Nations Health Authority (FNHA) in the communities of Nadleh Whut'en and Stelat'en First Nations.

Families with children aged 0-7 years receive screening, oral health education, fluoride varnish, sealants and temporary fillings as well as supplies such as toothbrushes, toothpaste and floss to keep teeth healthy. We also provide screening and education to women during pregnancy.

Our Team:

- COHI Aide
- Dental Hygienist

Services include:

- Prevention through education
- Fluoride Varnishing (reduces decay by 40-56%)
- Sealants and simple fillings, as needed

Referrals may be made by:

- Parents, guardians or family members
- Childcare providers
- Physicians
- Community health nurses
- Social workers

Children's Oral Health Initiative for Stelat'en First Nation:

Age 0 to 4 _____ 18

Age 5 to 7 _____ 24

Children's Oral Health Initiative for Nadleh Whut'en First Nation:

Age 0 to 4 _____ 18

Age 5 to 7 _____ 21

2020/21 Achievements:

We wanted to provide educational sessions to families in a variety of different settings to ensure we were reaching a large demographic area. However, COVID protocols affected our ability to implement and continue programming during the year.

2021/22 Goals:

1. We would like to provide more educational sessions in a variety of settings.
2. We would like to seek out additional funding to be able to offer the program in more communities.



Early Years Preschool

At Early Years Preschool, it is our responsibility to provide positive care and guidance to enable all children to achieve their full potential in a play-based environment that stimulates all areas of development. We also provide developmentally appropriate opportunities for optimal growth through discovery, problem solving, exploration, dramatic play, social and emotional growth, language and communication, and expression of individuality.

Early Years Preschool number of children:

Attending _____ 32

On waitlist _____ 16

Preschool Admission

All children must be 3 years of age by December 31st of the current enrollment year. As children are unique, a two-and-a-half-hour preschool class may not be suitable for everyone. If there are difficulties at any time, a consultation will be set up between the educator and the parent(s) to determine what might be best for the child.

Our activities include:

- Play Interactions
- Art Time
- Gym Time
- Outdoor Play
- Field Trips
- Circle Time

Preschool Class Hours

The preschool is open on Tuesday and Thursday each week. If there is a change in the schedule, parents will be notified immediately.

- AM Class: 9:00AM - 11:30AM
- PM Class: 12:30PM - 3:00 PM



Preschool Fees

The fee per child for preschool is \$150.00 per month. Monthly payments are due the first of each month. Cash and cheque payments are accepted.

2020/21 Achievements:

We were wanting to attain some new equipment for the preschool to allow the children more access to new educational materials. We were successful in attaining a grant that allowed us to purchase new equipment for the preschool. Due to COVID-19, the preschool had to close early, but was able to re-open for September 2020.

2021/22 Goals:

We are exploring the potential of expanding our preschool classes to include another two days per week. The demand from the community meets the need, however securing adequate funding to run additional spots for children is not readily available, leaving us to search out grants.

ERIN JOHNSON, MATERNAL CHILD HEALTH MANAGER

Canadian Prenatal Nutritional Program (CPNP)

CPNP offer post and prenatal supports for families until their babies reach 7 months. Our pregnancy outreach program for Vanderhoof offers accessible, culturally appropriate support to both Indigenous and non-Indigenous women.

A variety of services are offered to assist women in having a healthy pregnancy and a smooth transition into parenthood. Weekly moms' group, prenatal vitamins, individual breastfeeding, nutrition, education and support are some of the services provided. Home visiting is available at various times and is scheduled at the convenience of the client.

By giving women the opportunities to access resources, build a network in their community and receive unbiased information, women experience an increase in self-esteem and create a healthy lifestyle for themselves and their families. Through collaboration with other services in community, CPNP provides optimum access to services for program participants.

Referrals can be made by:

- Public Health Nurses
- Doctors
- Self-Referral
- Community Service Providers
- Guardians or Family Members

Join us for mom's group at:

- Neighbour link Monday 10 am (Sept-June)
- Thursday 3:30 pm (Sept-June)

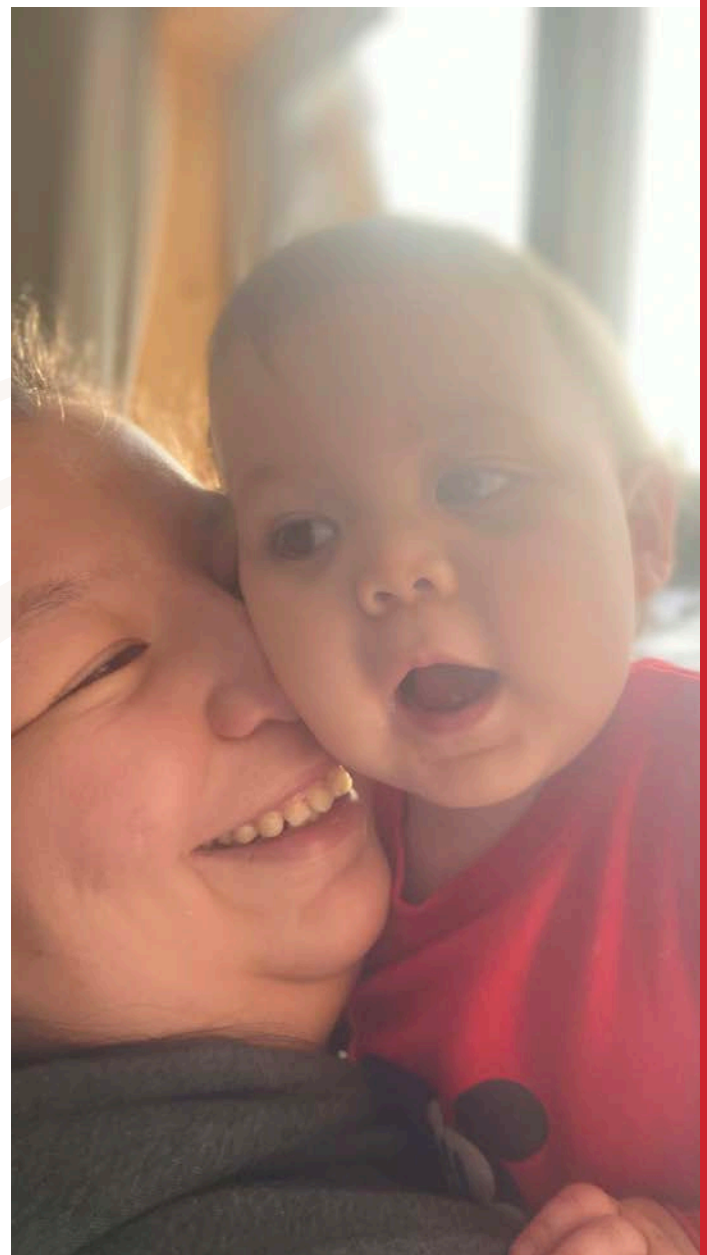
CPNP number of clients:

Breastfeeding Supports _____ 149

Clients _____ 28

2020/21 Achievements:

The Canadian Prenatal Nutrition program was successful in receiving funding to address food insecurity, and so we were able to provide good food bags to participants. We were also successful with offering breastfeeding supports both in St. John's Hospital in Vanderhoof, and home visiting services. We were able to provide breastfeeding educational sessions for the Nursing staff at St. John's hospital to enhance best practices and continuity.



2021/22 Goals:

The Canadian Prenatal Nutrition Program will move under the Maternal Child Health program, which will enhance continuity within the program. The program will be looking for funding sources for this year in order to continue to address food insecurity.

We will be looking at ways to provide labor and delivery education to clients to increase preparedness for birth.

Canadian Prenatal Nutrition Program Referral Reason

Referral Reason	#	%
Single Parent	2	4%
Other	3	6%
Breast Feeding Support	10	20%
Inadequate Nutrition	1	2%
Low Income	1	2%
Mental Health Concerns	3	6%
Nutrition Concerns	1	2%
Pre-Pregnancy BMI <18.5	2	4%
Limited Support	2	4%
Postpartum Support	15	31%
Prenatal Education	4	8%
Pregnancy Support	5	10%



Maternal Child Health

Maternal Child Health Program for Carrier Sekani Family Services offers resources and support to Indigenous pregnant women and parents of infants and young children from 0 to 6 years of age. We are available to provide service to both on and off reserve Indigenous Clients from all Nations we serve.

We offer:

- Pre and postnatal support
- Outreach Services
- Baby Bags
- Medical Advocacy
- Home Visits
- Hospital Visits
- Transportation for medical appointments (reviewed on case-to-case basis)
- Breastfeeding Support
- Nutrition Support
- Developmental Assessments (home visit/ clinic visits)
- Community Kitchens (in collaboration with Family Preservation and ECD)
- Child Wellness Clinics (in collaboration with CSFS Nursing and ECD)

Providing support to:

- Primary Health Care Team
- Family support
- Access to free prenatal vitamins
- Access to food vouchers
- Assist with securing shelter
- Baby Necessities (diaper, formula, breast pumps, etc.)
- Clothes Closet
- Special Events and Programming

Providing information about:

- Indigenous Health Care Benefits
- Nutrition
- Breast feeding
- Harm Reduction
- Parenting
- Childhood Growth & Development
- Perinatal Postpartum and Anxiety

2020/21 Achievements:

This past year has been dedicated to enhancing awareness of the Maternal Child Health program. Our team has been working hard to make connections in the communities and build relationships with the intent to ensure that all families with children aged 0-6 years are receiving our services. We were able to start services in the Prince George region and offering supports to off-reserve families. Due to the needs identified in Prince George and the increase in caseloads, we were able to add an additional position to the area. We were also able to fill the position in Fort St. James, offering services to Yekooche, Takla and off-reserve clients residing in Fort St. James. We continue to have recruitment challenges for the Burns Lake area and as a result continue to have vacancies.

Faced with restriction from COVID-19, we had to adjust our service delivery in the communities. We continued to see all clients in home for essential visits, following all COVID-19 policies put in place by the Provincial Health Office. Our team was able to offer virtual Community Kitchens on the Carrier Sekani Family Services Facebook page, along with weekly deliveries to the participants of the Maternal Child Health program. In collaboration with the Early Child Development team, Family Preservation team and Nursing Team, we have been delivering monthly Child Wellness kits to participants of the programs. These kits are meant to engage participants through education of health and safety issues, increase child/parent interactions through activities, and incorporate nutritional snacks and ideas for children.

2021/22 Goals:

The Maternal Child Health Team will be working on gathering and documenting traditional birthing and childrearing practices that can be incorporated into our service delivery. Our goal is to increase our knowledge of these practices, along with connecting with community members to provide the cultural information necessary to achieve this goal.

Our team will also be working towards returning to in-community group sessions, offering workshops, cooking groups, and other relevant groups, under the direction of the community needs. We will continue to follow all COVID- 19 recommendations and protocols set out by the communities, Carrier Sekani Family Services and the Provincial Health Office.

The Maternal Child Health Team will continue to enhance our connection and relationships with the communities to ensure that families with children 0-6 years of age are receiving services. Our focus is on prevention and early intervention and ensuring that families are provided with supports to reduce risk. This year, we will be adding two additional positions to the Prince George region due to high demand of the program. We will also be working towards recruitment for the Burns Lake area as we continue to have two vacancies in this area.

Maternal Child Health Program Stat Report

Community	Number of Interactions with Clients per Community
Saik'uz	553
Vanderhoof	595
Stellat'en	65
Fraser Lake	64
Nadleh	123
Fort Fraser	14
Takla	210
Yekooche	289
Fort Saint James	121
Prince George	1226
TOTAL:	3260

Yearly total for families in all communities that received Virtual Community Kitchen: **3375**

Yearly total of families that received Child Wellness Kits in all communities: **360**

PAULINE GREGG, COLLABORATIVE PRACTICES LEAD

CSFS offers specialized facilitation for families in crisis or needing extra support to resolve a dispute where children may be impacted. The Collaborative Practices Program facilitates the following collaborative meeting processes:

- Family Group Conferences (FGC),
- Permanency Planning Meetings (PPM),
- Family Case Planning Conferences (FCPC),
- Youth Transition Conferences (YTC),
- and Prevention Meetings.

We accept referrals from Social Workers, parents, family and community members, service providers, advocates, children and youth who want to contribute to collaborative planning processes to safely keep children with their families or connected to their extended family, community and culture.

Past Goals:

The CSFS Collaborative Practices Program continues to exceed its contractual obligations year after year. This year the program facilitators have completed 122 Family Case Planning Conference compared to last year's number of 105. The program has completed 51 Family Group Conferences and last year that number was 42. This year we have completed 25 Youth Transition Conferences, well above the nine completed last year. We completed two Prevention Meetings and last year that number was at three. Overall the team of facilitators completed 200 planning meetings in the 2020-2021 fiscal year.

2021/22 Goals:

Our program goal, as always, is to increase the number of children and families we serve while adding to our culturally appropriate service delivery skills with an emphasis on professional development opportunities for facilitators focusing on mediation skills, trauma informed practice, addiction, mental health and domestic violence.





FIONA DEMERS, INTENSIVE FAMILY THERAPEUTIC SERVICES MANAGER

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

2020/21 Achievements:

Despite the many challenges posed by the pandemic this past year our program has continued to successfully prevent children from being taken into care. Over this past year our staff has demonstrated great flexibility and creativity in delivering services. We continued to provide counselling, skill teaching, advocacy and to meet any concrete needs the families had. In addition, we continued to connect our families with other supports and services within Carrier Sekani Family Services to ensure wrap around care and ongoing support.

A highlight of the past year was several young parents who had aged out of care and were able to keep their own children in their care.

2021/22 Goals:

With the end of the pandemic in sight and our increased capacity to deliver services both in person and virtually we are poised to pursue our goal of expanding the program to Vanderhoof and Burns Lake during the upcoming year.

The Intensive Family Therapeutic Services (IFTS) Program Stats

Number of families worked with:	18
Number of children with their parents/caregivers at close of services:	18
Number of children in foster care:	3
Total children remaining in the home since 2014:	284



CHARLOTTE ALFRED, SPECIAL PROJECTS

The Aboriginal Patient Liaison Worker (APLW) liaises between First Nation, Metis, Inuit communities, and the UHNBC Hospital healthcare staff to help facilitate healing. The program is designed to bridge gaps by offering in-hospital support, information on community resources, translation if needed, applying for health benefits, attend family meetings when requested, and attend doctor rounds.

During the COVID Pandemic, the APLW services remained available. The UHNBC administration ensured our APLW worker was safe by providing PPE equipment and supplies. For Wellness Day (Aboriginal Day), the program purchased pens and sanitizer with FNHA Wellness Day funding. We had to improvise our activities due to local COVID rules of maintaining distance and not gathering; therefore, the APLW worker gave out the sanitizers and pens to UHNBC patients. We want to announce that UHNBC hired Ryan

Dirnback, Indigenous Clinical Coordinator, Lead for Capacity Development and Education. Ryan is sharing office space with our APLW worker. We look forward to developing a positive relationship with him.

In addition, our APLW services are available at the Vanderhoof and Fort St. James hospitals.

We are also responsible for:

- Assisting the Research Team in delivering the health service evaluation; visited the ten communities and went door to door requesting feedback of community health services from community members.
- Assisted with developing the Funding Agreements.
- Assisted with coordinating community meetings.
- Provided assistance to community health staff in reporting requirements and documentation.
- Gathering all health reports for review and notifying departmental directors of concerns.
- Was able to secure funding from Canada Summer Jobs program for two summer students; one was employed with the Health & Wellness program in Burns Lake and one was employed as the administrative assistant in Vanderhoof.

2020/21 Goals and Achievements:

Approximate APLW statistics for the 2020 fiscal year, stats are from northern interior areas as far as Haida Gwaii.

Off Reserve Indigenous, Metis, and Inuit served _____ 576

On Reserve Indigenous, Metis, and Inuit served _____ 893

2021/22 Goals:

- Work with the administration team to increase the APLW annual funds.
- Build a stronger relationship with Northern Health staff including, Julie Dhaliwal, Director of Community Services, Ryan Dirnback, Victoria Stewart who supports NHA APLW workers, and Jack Jenkinson who offers clinical support to the program.
- Continue applying for infant car seats with BCAA.
- Continue applying and planning for FNHA Wellness Days for Aboriginal Day Celebration.
- Fill the gaps of health care service for off and on reserve members.
- Network for a stronger discharge planning for off and on reserve community members.
- Build a stronger relationship with UHNBC physicians and nurses to ensure racism is dealt with at all levels.
- Strengthen communicating cultural and community protocols to all medical staff.

Other Goals:

- Assist with the Funding Agreement; we require leadership signatures and to notify leadership of any changes to the agreements.
- Develop the Funding Agreement and have it sent out to the communities in a timely manner.
- Continue advocating for community health staff needs.





MARILYN JANZEN, DIRECTOR OF HEALTH & WELLNESS

Health and Wellness Program (HAWP)

The Health and Wellness Program is an amalgamated mental health and addictions program that includes four main programs:

- Child and Youth Mental Health (CYMH),
- Community Mental Health (CMH),
- Addictions Recovery Program (ARP),
- and Support Services.

Child and Youth Mental Health

Our Child and Youth Mental Health (CYMH) program provides culturally safe and relevant clinical services to children, youth, and families/ caregivers to all 13 nations in 15 Carrier communities. Offices are located in:

- Prince George,
- Vanderhoof,
- Fort St. James,
- and Burns Lake.

In Burns Lake, our CYMH team is the sole provider of child/youth mental health services. Children and youth referred are typically between the ages of 6 and 19; referrals for younger children are explored to determine the most appropriate intervention/service including CYMH. Service provision is between the hours of 8:30 and 4:30 with the exception of Critical Incident Stress Management (CISM) response.

Services Include:

- Intake/referral with connection to additional services if not offered through CYMH.
- Comprehensive holistic mental health assessment and a range of relationship-based intervention options for children and youth experiencing, or at risk of developing, a significant mental health challenge.
- Work alongside caregivers/family to collaborate in supporting children and youth.
- Individual and group therapy, and family work
- Community partner collaboration, consultation and service coordination in community.
- Pre-clinical work to increase community connections with those who might benefit from therapeutic services but are not yet ready to engage clinically.
- Maintenance and monitoring of waitlist if needed due to high demand, while providing support and recommendations for options until more intensive services can begin.

Highlights:

- Increased in-house training, case consultation and team building.
- Enhanced community relationships.
- Increased ability to offer services virtually
- Team completed the Foundations in Infant and Early Mental Health Certificate Lecture Series online.
- One clinician completed the Indigenous Focusing-Oriented Therapy and Complex Trauma Certificate while another completed the Graduate Certificate in Complex Trauma and Child Sexual Abuse.

Past goals:

Past goals for our program included increasing staffing with Mental Health Support Workers (MHSW) and increasing practicum placements within HAWP. One Master of Social Work student through the University of Northern BC completed a placement with another planned for spring. We hope to increase this in the near-future, as COVID-19 regulations made therapy placements challenging. There is a newly created CYMH Clinician position in Prince George supporting children and youth living off-reserve. Our program continues to work to increase the complement of Mental Health Support Work positions (Bachelor level) to support clinicians and enhance services in community.

COVID-19 and its restrictions brought significant challenges that impacted families and communities, which make it difficult to consistently connect with some children and youth, particularly those not in school or attending sporadically with barriers to accessing virtual services. Significant concerns regarding suicidal risk were present throughout this time. Clinicians found creative ways to engage difficult to reach youth, consistently assessed risk and planned for safety working alongside children/youth, their caregivers and broader circle of care.

2021/2022 Goals:

- Increase elder engagement in all aspects of our programming.
- Enhance caregiver engagement.
- Increase group programming possibly co-facilitating groups with community partners.
- Strengthen community collaboration/partnerships for holistic wrap-around services.
- Increase coordination with primary care supporting children/youth.
- Increase clinical training opportunities and in-service education.



Addictions Recovery Program

The Addictions Recovery Program provides a 28-day residential treatment during the summer months and both in community and online programs during the winter months. The Addictions Recovery Program (ARP) has a mission statement: “To create a healing environment by utilizing a holistic approach that promotes a cultural lifestyle free from addictions and restores a sense of pride in the Carrier and Sekani culture. We believe the Carrier Sekani culture and spiritual way of living, which honours and respects all of creation, will empower our communities and strengthen our First Nations. We believe culture is healing and incorporate a blend of traditional healing practices along with evidence-based best practices in addictions treatment reflective of our program’s vision statement: “Culture is Healing.”

Past goals:

The program fully launched its addiction recovery program virtually as result of the COVID pandemic, including outreach support, individual counselling, and peer support groups. The Addictions Recovery program provides clients with the opportunity to continue on their healing journey.

Create a full vision of treatment for our program that aligns with a stages of change model that includes pre-treatment, detox, treatment, and aftercare.

Highlights this year include:

The purchase of the Tachick Lake site, which is located on the traditional land of the Saik’uz First Nation, for the proposed new treatment centre and the approval from the Agricultural Land Reserve (ALR) allowing for the future construction of a new treatment facility. The new treatment centre will allow for CSFS to provide a year around facility that will better serve the communities.

The reintroduction of elders to the program after COVID restrictions were temporarily lifted, and supporting CISM work in communities.

2021/2022 Goals:

The goal for the 2021/2022 year is to further develop an addiction awareness program for youth and develop educational material that is specific to CSFS staff and clinicians, and to continue to offer counselling support and educational sessions.

Revamp the current treatment program from a 28-day cohort program to a longer continuous intake program. This will provide quicker access for clients who wish to attend a residential treatment program.

Add a full-time cultural position as an integral part of the addiction recovery team.

Community Mental Health

Under the Health and Wellness Program, Community Mental Health (CMH) serves adult populations in ten communities, including off-reserve in Prince George, Burns Lake, Vanderhoof, and Fort St. James.

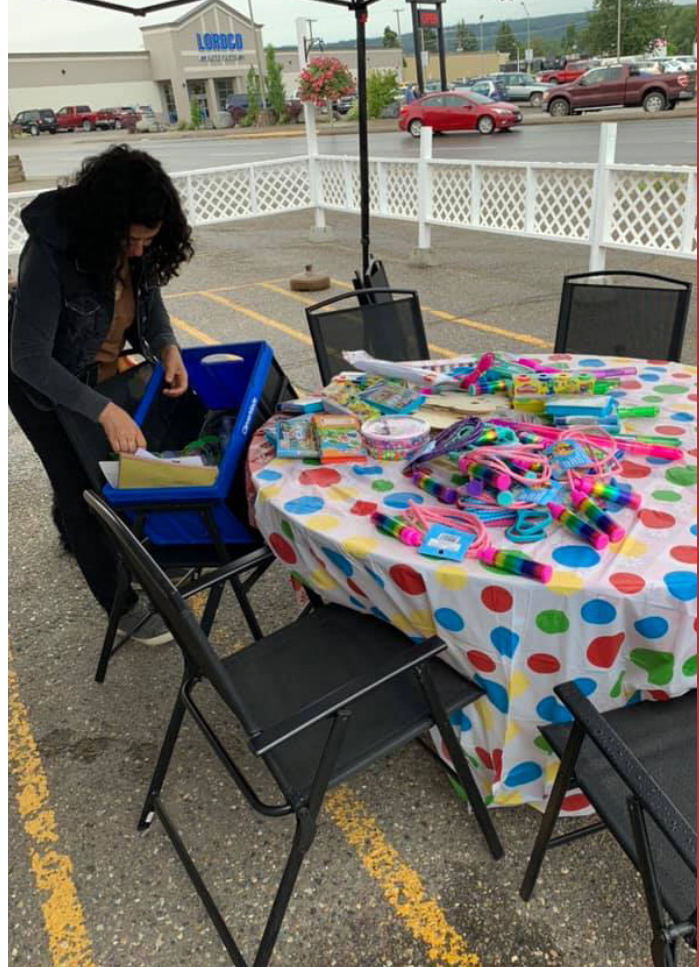
Due to the COVID-19 pandemic, clinicians reached clients through various modes such as over the phone, Zoom, and face-to-face. Yekooche and Takla members received mental health support face-to-face during the pandemic with social distancing in place.

Despite the pandemic our Mental Health team has been out ensuring clients have access to services. This year our program worked with internal CSFS partners to attend Integrated Care Team Meetings (ICT), release three booklets on (1)Trauma, (2) Grief, and (3)Mental Wellness, and host online events for Mental Health Week. This year our focus has been on reminding clients to “Name it, don’t Numb it” as our mental health campaign.

Clinicians worked for Critical Incident Stress Management (CISM) whenever requested. This past year we had 4 CISM events in communities. Our CISM program sometimes confuses community members due to the name. Our program is not a Crisis service program, other agencies such as the hotlines we promote and distribute, the RCMP, and Hospitals all receive funding for crisis services, we do not. We would like to gently remind people that if they need crisis services to please seek it through one of those venues. We have worked very hard to strengthen our partnership with KU-UAAS crisis lines to support the members CSFS serves. This crisis line is created by and for Indigenous populations.

Past Goals:

Critical Incident Stress Management (CISM) response has been a continued part of our CMH program and this year we responded to six CISM events in community, some of which lasted 14 days. This year, clinicians led or participated in workshops on grief and trauma.



Due to the pandemic, our program relied heavily on technology to support clients. This also increased our ability to host workshops online.

Our program increased to include Mental Health support workers. These workers have more time to support educational requests in communities, as well as provide one-on-one support to individuals with decreased risk. We currently have increased staff by three positions. These positions complement the clinical work done by our clinicians, and are not a replacement.

2021/22 Goals:

Upcoming goals include increasing the number of elders we use to support individuals through a cultural lens. We will soon be offering elder engagement sessions for our program. We have also decided to put more focus on trauma in our work. This will utilize the four trained clinicians who have been trauma certified.

Support Services

Support services are a branch within the HAWP department and include support services such as our:

- LGBTQ2+ program,
- Indian Residential Schools Resolution Health Support Program,
- and the CSFS Wellness Workers.

LGBTQ2+ Nanki Nezulne

Nanki Nezulne (Our Two-Spirits) provides health and wellness support for LGBTQ2+ individuals who reside in the 11 Member Nations that CSFS serves. The development and implementation of the program services is determined by working with LGBTQ2+ community members and allies. Our priority of community involvement advances the eventual self-governing of LGBTQ2+ human services by the Carrier and Sekani First Nations People. This program is offered entirely online and accepts both professional and self-referrals.

Nanki Nezulne (Our Two Spirits) aims to provide social, emotional, and health related protective factors through counselling, education, and celebration.

Nanki Nezulne offers mental health and wellness services such as outreach support, individual counselling, and group counselling to LGBTQ2+ individuals 18+ years old. Due to the criteria of the grant for this program, it is unable to directly serve individuals under the age of 18. To

indirectly impact youth, the program also offers counselling sessions and information sessions with parents/guardians and family members of LGBTQ2+ youth.

LGBTQ2+ education sessions are created by the program based on western and traditional knowledge. Education sessions are available both within and outside of CSFS upon request.

Nanki Nezulne is also working to help create LGBTQ2+ celebrations withing CSFS and communities.

Past Goals:

The program fully launched in the last fiscal year and is actively offering its counselling services, including outreach support, individual counselling, and peer support groups.

Nanki Nezulne has also created educational material that is delivered through educational sessions at request.

The program also created, built, and launched a dedicated website that hosts educational LGBTQ2+ material, lists support and resources for members of the LGBTQ2+ community, and holds information specific to the program. Educational material created by staff will also be posted on the website as a resource. This year, our funding was extended by two years, making this one-year project into three.

2021/22 Goals:

Develop educational material that is specific to CSFS staff and clinicians complete with presentation, handouts, and booklets. This will not replace the current educational sessions offered but will be an addition.

Continue to offer individual counselling, peer support groups, and outreach support to LGBTQ2+ individuals ages 18 and above, and counselling support to family members/guardians of youth.

Implement LGBTQ2+ celebration-based events that are open to LGBTQ2+ individuals and LGBTQ2+ allies.





Indian Residential Schools Resolution Health Support Program

Warning – some may find the material in this report triggering or distressing. If you are suffering or need someone to talk to, the National Indian Residential School Crisis Line is available 24 hours a day, and can be reached at 1-866-925-4419.

The Indian Residential Schools Resolution Health Support Program provides mental health and emotional supports to those who attended former Indian Residential School, and their families. The support is offered before, during and after their participation in the Settlement Agreement processes and includes:

- Common experience payments
- The independent assessment process
- Truth and reconciliation commission events and commemoration activities

Past Goals:

The IRS program continued to work with CSFS members who were in the process of completing the required documentation to file claims for the day school programs. We supported applicants individually and referred to the Mental Health program as necessary.

We continued to provide educational resources to members who were unsure of the process to apply for the day school program and, as a result, were able to provide services to an increased number of clients.

This year we also adapted the program to work virtually and to continue to provide services to clients.

This program saw an increase in demand as we supported clients that were impacted as a result of the children found in the unmarked graves.

2021/22 Goals:

To continue to support clients that are working through the residential day program.

To continue to support all that were negatively affected by residential school in the Nations we serve by assisting clients to secure the resources that they need while working through the challenges that they are facing.

To continue to provide support to clients that are undergoing retraumatization as a result of the children found in unmarked graves. Also to work with clients that are experiencing retraumatization as a result of the residential day program application process and are turning to substances to deal with the trauma.



Wellness Workers

The wellness workers program supports the community in reducing the high levels of alcohol and other substance abuse within the 11 communities that CSFS serves. The goal of the program is to build the addictions services capacity within the communities and to develop and deliver community-based addictions services.

Most of the National Native Alcohol and Drug Addiction Program (NNADAP) activities are included in the following three areas of emphasis:

- Prevention and Intervention
- Treatment referral
- After treatment support

Past goals:

Highlights this year include:
Increasing staff to four full time wellness workers; two in Prince George, one in Vanderhoof, and one in Burns Lake. Increased the services provided to members both in securing treatment for drugs and alcohol and providing ongoing aftercare support.

The wellness workers provided educational awareness programs in communities and worked with members both living in community and living on the streets and provided outreach and emotional support. We also completed

presentations at the PG Detox unit to support people exiting detox and entering treatment.

We also continued work on strategies to reduce the impact of opioids and was an active contributor to the CSFS Opioid Crisis committee. We received a \$5,000 grant from the City of Prince George for a homeless outreach that lasted four months from December 2020 to March 2021. We handed out approximately 150 bagged lunches per month along with warm clothes, jackets, toques, gloves, hand & foot warmers, blankets and harm reduction supplies.

Collaboration with other organizations within Prince George and with the Nations we serve. Supported those who were experiencing homelessness during the summer by handing out freezies, smoothies, and Gatorade during the hottest days in the summer.

We also did the 13-week training for the Virtual Vancouver Sun run, 10km walk and the 5km walk for MMIWG, and the Tears to hope 10km walk in Prince George!

2021/2022 Goals:

The goals for the wellness program in the 2021/2022 year include:

- Develop educational material that is specific to CSFS, and to continue to offer counselling support, outreach services and educational sessions.
- Host Wellbriety circles with our clients, including virtually.
- Walking groups with an emphasis on talking about the importance of taking care of ourselves.
- Continue to support those who are experiencing homelessness with basic needs and education and to promote breaking the cycle of addiction.
- Provide ongoing support to clients wishing to attend residential treatment.
- Provide substance abuse awareness workshops to communities and members.
- Continue to work with the mental health clinicians to provide ongoing support to their clients.

MATTHEW SUMMERSKILL, DIRECTOR OF MOBILE DIABETES TELEMEDICINE CLINIC

Mandate: to elevate the health and wellness of Indigenous peoples living with diabetes. By increasing access to evidence-based diabetes services, the Mobile Diabetes Telemedicine Clinic (MDTC) provides culturally safe screening, education, and prevention services.

For who: any members living with Diabetes or Pre-Diabetes.

Services offered: laboratory testing, screening, education, assessment, counselling, nursing services, dietitian services, diabetes technology services, medication education, eye screening, endocrinologist consultation, and on-going follow-up via telehealth. Annual in-person service visits across 70 northern communities. A self-referral for a virtual visit (video or phone) can be made at any time.

Highlight goals in past year:

- Used pandemic as an opportunity to reach more people more often via telehealth.
- Assisted Northern region in administering COVID vaccine, and caring for those living with COVID-19 and chronic diseases like diabetes.
- MDTC touted as a ‘success story’ in publication/evaluation by the Canadian Journal of Diabetes. Review found improvement/stabilization in the overall health status in the majority of individuals served by the MDTC.



Goals for coming year:

- MDTC strives to increase its service reach (encounter numbers) in order to have a greater influence on the health outcomes it has been proven to help elevate.
- Each year since 2012, the number of people served by the MDTC has steadily increased.
- Integrate dietitian/nutrition services within the MDTC framework.
- In the coming year, the MDTC strives to secure more funding that would enable a dramatic increase in encounters via a broad range of MDTC service (e.g., nursing, nutrition-dietitian, traditional wellness, pharmacy, mental wellness, foot care, etc.).

Quick stats:

Overall encounters	
for the year	3,352
Virtual	2,921
In-Person	431



CAROL REIMER, CHIEF FINANCIAL OFFICER

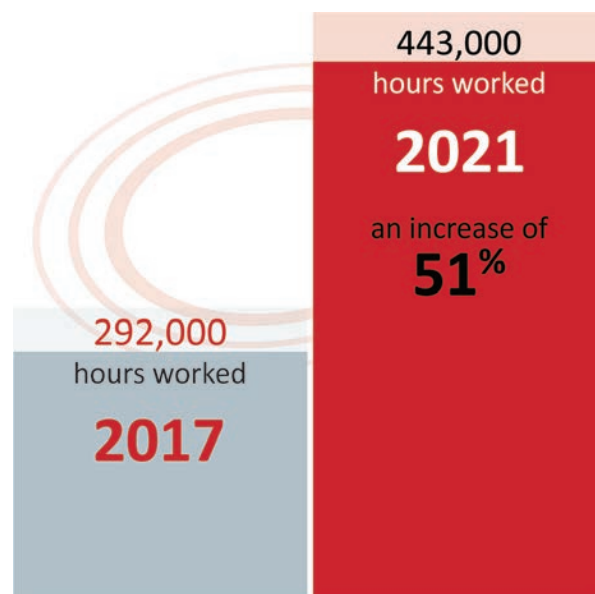
It's been a busy year of growth. Our job in the Finance department is to keep it all moving forward by paying staff and vendors, supporting staff and reporting to funders. We are working hard to use our digital accounting system to make processes as efficient as possible and share our data as widely as possible with managers. The finance department continues to focus on prudent fiscal management and clear and transparent accountability of the funds entrusted to us as we move through these stages of growth.

It's been a long road looking back when I first joined Carrier Sekani Family Services in June 2000 with 4 million in revenue and 45 employees. Looking back over the last four years we have

seen enormous growth in our agency. Since receiving prevention money as a result of the CHRT ruling, we have seen a 76% increase in revenue in four years. Revenue went from \$25.1 million up to \$44.2 million in 2021 and budgeted for upwards of \$50 million in 2022. Looking at our work force in 2017, we worked 292,000 hours. In 2021, we worked 443,000 – an increase of 51%.

This year again we engaged KPMG to complete our audit and have been given the opinion that the accompanying financial statements have been presented fairly, in all material respects, the financial position of the Society as of March 31, 2021. We had a clean audit with no adjustments required from our internal management statements.

Financial results for the year ending March 31, 2021 show an increase in assets of \$6,449,000 largely due to cash on hand at the yearend. Liabilities were up \$4,450,000 largely due to the increase in deferred revenue due mostly to COVID slowing our ability to complete funding projects. Revenue was down slightly from the previous year to \$44,237,000, while expenditures were up significantly from \$37,301,122 to \$42,242,000 leaving a small surplus of \$1,996,000. This increased our net assets to \$14,501,000.





BRAD EVANS, EXECUTIVE DIRECTOR OF HUMAN RESOURCES

Located in Prince George, the Human Resources (HR) division is part of Internal Services Department, and is a specialized service focus area within CSFS, providing a comprehensive suite of HR services. HR manages the employee life cycle, and advises on a wide range of people matters, including recruitment and retention strategies, training, learning, professional development, succession planning, employee relations and engagement, total compensation, job evaluation, and workplace occupational health and safety.

The HR department continues to provide services across the organization to help CSFS achieve its strategic goals as CSFS continues to grow. In the 2019-2020 fiscal year, the HR team was instrumental in recruiting many new staff. In 2021, the growth trend continued, and CSFS now has more than 350 employees. At the 2020 AGA, we reported that CSFS had 270 employees, and in 2021, as of August 27, 2021, our workforce has grown by 80 more employees, or approximately 23%.

Some exciting goals that the HR department accomplished during the 2020/21 fiscal year includes:

- Implementation of LinkedIn Recruiter as a strategic recruiting tool.
- Completed an HR and Legal Review of the APM that was approved by the Board of Directors on March 10, 2021 and subsequently rolled out to all staff.
- Finalized the Compensation Job Evaluation Classification and Wage Structure in August 2021.

2021/22 Goals:

HR will continue to work on achieving the HR Strategic Goals based on the 2020 to 2023 HR strategic plan, as well as helping CSFS achieve the strategic goals determined at the Chase BC July 2021 Strategic Planning Session. As well, HR will also work with the CSFS ELT to implement the recommendations outlined in 2Mi's Succession Planning & Organizational report completed in August 2021. Another significant goal the HR team will be working is to redesign the Annual Employee Reviews to simplify the process and make it more meaningful and effective.



MARLAENA MANN, EXECUTIVE DIRECTOR OF COMMUNICATIONS & DATA GOVERNANCE

Communications and Data Governance play a key role in ensuring the staff at CSFS get the support they need to provide excellent services to community members. Both programs pride themselves on providing excellent support to programs based on industry best practices and using relevant advancements in research and technology.

We have now completed our second year of having a full complement Communications department. This past year, we saw a lot of

changes within the department with half of our staff changing within the past few months. In February, we welcomed Andrea Palmer as our new Director of Communications. Andrea has a variety of relevant experience in communications leadership including from Northern Health, the PG Public Library and CBC radio.

Communications provides a variety of core functions to support CSFS programs including social media management on Facebook, Twitter, Instagram, LinkedIn and YouTube. We also assist with messaging, Communications plan and campaign development, media, website and brand management, training, and quality assurance / best practice research. Our content creation includes putting out our Goozih Dust'lus newsletter six times per year. Government Relations activities are centered around announcements, information sharing and the hosting, promotion of and support to ministerial/ political needs at multiple levels, including Nations, municipal, regional, provincial, and national.

Based on the CSFS Strategic plan, one of the key areas Communications has been working on is expanding our services for internal communications. This will help ensure our staff have easy access to communication and information from the executive team and with each other to best support the needs of communities we serve. Over the past year we have created an executive platform for messaging via quarterly 'all staff' zoom meetings, and have also incorporated Executive and CEO messaging as a regular part of our Goozih newsletter. Work continues on our internal communications platform – the intranet – which will consist of an inward facing website enabling staff to share program information and better communicate and collaborate. The ground work is now complete for the intranet, and content creation will be occurring over the next year followed by a formal launch of the platform.

The CSFS Communications program has been hard at work providing information about new services, as well as information regarding the pandemic. With the arrival of the pandemic, one of our key focus areas has been to ensure

that CSFS community members have access to accurate and evidence-based information on how to stay safe, delivered in a culturally relevant manner.

In our Information Technology (IT) program, we are very pleased to have welcomed our new Director of Information Technology and Data Governance, Greg Condon, to the CSFS family in June 2021. Greg is passionate about providing quality services aimed at helping our staff serve community members and ensuring that systems are in place to organize documents and data so that they can be utilized to move Indigenous holistic wellness forward. His background includes IT leadership work at a multinational food company as well as for a few prestigious universities, including UNBC. Greg is joined by Jeff Speirs, who has worked for the organization for many years and most recently has assumed the role of Information Technology and Security manager.

Jeff and the rest of the IT team worked hard over the past year to implement our Voice Over Internet Protocol (VOIP) project. The project essentially moved our CSFS telephone system from a wired system to operating over the internet. This new system has provided us with savings on our telecommunications spending as well as increased functionality to make communicating easier – one of which is via an included video conferencing platform called Business Connect.

With the recent rise in cyber-attacks, the IT team implemented a new cyber security solution to limit receipt of spam email received. Our department has continued to provide ongoing privacy training for staff, as well as implementing a variety of new functions for existing platforms aimed to help create work flow efficiencies for staff.

Greg has been working with the team to meet all security needs within the department as well as developing short, midterm and longer-term goals. An overarching goal includes the development of a formal governance framework and data governance strategy. The first step taken to address this need has been focused on investigating data management tools and

meta data naming categories. Next steps will include socializing how data management and governance can help to ensure buy-in across the organization. We will then be examining data roles and responsibilities (based on OCAP principles - ownership, control, access, and possession) and then taking an inventory of data held in the organization. Finally, we will work with data owners within the organization to research software needed to meet business intelligence requirements. These software solutions will enable staff members to use data to create a predictive environment, meet reporting requirements, and demonstrate goal progress and achievement.

Nowh Guna' Cultural Competency Training

Work on the Nowh Guna' 'Foot in Both Worlds' Carrier Culture training has continued this year despite pandemic setbacks. The training provides an introduction for non-Indigenous professionals to understand their own biases, learn about the history of Carrier people and culture, and how to show up. Our main goal from last year was to adapt the curriculum to an online format delivered over Zoom. This has been completed and very positively received and in the spring we were honoured to receive an inaugural BC Reconciliation Award for the training. The training was also accredited this year for medical professionals to receive professional credits for attendance through the College of Family Physicians of Canada.

In July our hearts were broken when we lost our very dear Elder Educator, the late Sarah Hein. Sarah was an integral part of our team and we will ensure her legacy will live on in the training. We are working to have new Elder Educators brought on board to help with the training in addition to training alternative facilitators. This will be a key focus in the up-and-coming year.



PRIVACY

The CSFS Privacy Office works with program designates to ensure privacy protection is built into every major function of work involving the use of personal information. The office is responsible for investigating and reporting on all suspected breaches of privacy. At CSFS, only those supporting or directly providing care have access to a patient's personal health information.

All CSFS Clients have the right to:

- Confidentiality
- Ensure your personal information held and protected by CSFS is accurate
- Understand who has access to your personal information and for what purpose
- Understand how your information has been used
- Understand how and when your personal information is shared

Report any concerns regarding the privacy or handling of your personal information! Privacy protection co-exists with our holistic services to enable health and wellness for community members. CSFS staff are here to support you with any questions that you have. Inquires around privacy or privacy breaches can be made to privacy@csfs.org or by contacting Marlaena Mann at 250-562-3591.



ANDREA PALMER, DIRECTOR OF COMMUNICATIONS

The role of communications is to keep staff informed while also engaging with the Nations we serve and external partners. Our work is directly tied to supporting all of CSFS's strategic values, mission and priorities, as well as supporting the communities we serve in alignment with community health and wellness goals. We share information in a manner that is factual, and represents the core cultural values of our organization. We craft original CSFS content, support events, manage our brand and visual identity, support government and community relations, media relations and manage

online content. The team can be reached at communications@csfs.org, and are available weekdays from 8:30 am until 4:30 pm.

2020/21 Achievements:

The team has continued to work hard to ensure our staff, partners, and community members have all the information they need in a way that works best for them. We increased the number of Goozih editions last year and also updated our brand standards and created some resources for staff to know how we can help them reach their goals and mandates.

2021/22 Goals:

In the past year we have completed the research and preliminary planning work to get an internal communications hub up and running. This project is yet to be named but currently called the 'Intranet'. It will provide more tools for our staff to connect with each other and the organization as a whole. We intend to work with programs to have the content created and project launched within the next year.

Other 2021-2022 goals include continuing to improve how we communicate in our outreach with communities (Provincial health orders allowing), expanding our newsletter subscriptions, increasing consistent use of our visual identity, increasing social media followers, and sharing more information about CSFS programs and stories about the services we provide.

Stats from 2020/2021 year	2020	2021	Increase
Facebook followers	5216	5504	5.5%
Twitter followers	333	453	36%
Instagram followers	861	1024	19%
CSFS YouTube channel subscribers	202	299	48%
LinkedIn subscribers	209	824	294%
Goozih subscribers	799	860	7.6%



GREG CONDON, DIRECTOR OF INFORMATION TECHNOLOGY

CSFS IT's (Information Technology) mandate is tasked with providing and maintaining all of the computer, telephone resources, security/privacy and data governance. This includes Wide Area Network (WAN) connections for our offsite and community locations, Local Area Network (LAN) connections for on-site locations, cellular phone support, server and workstation support, End-User support, and Voice Over Internet Protocol (VOIP) phone system.

2020/21 Achievements:

A significant part of 2020/21 was consumed with providing remote services to those working from home due to the pandemic. This quadrupled the number of Remote Desktop Services connections for staff and doubled the number of allowable VPN connections. All of the work from home

staff had to be individually set up according to their usual working specifications. Alternate communication methods such as Zoom and Business Connect were rolled out to facilitate meetings. The VOIP system and network upgrades were completed at all CSFS sites.

2021/22 Goals:

The focus for the coming fiscal year is to evaluate document management systems, data governance needs and Microsoft Office and service desk software. We will also be enhancing the IT disaster recovery (DR) procedures to ensure systems recovery in the event of catastrophic failure, develop SOPs (Standard Operation Procedures) for IT operations and IT workflows (process mapping).

Financial Statements of



**CARRIER SEKANI FAMILY
SERVICES SOCIETY**

And Independent Auditors' Report thereon

Year ended March 31, 2021

CARRIER SEKANI FAMILY SERVICES SOCIETY



Table of Contents

	Page
Independent Auditors' Report	
Statement of Financial Position	1
Statement of Operations	2
Statement of Changes in Net Assets	3
Statement of Cash Flows	4
Notes to Financial Statements	5 - 13



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INDEPENDENT AUDITORS' REPORT

To the Members of Carrier Sekani Family Services Society

Opinion

We have audited the financial statements of Carrier Sekani Family Services Society (the "Society"), which comprise:

- the statement of financial position as at March 31, 2021
- the statement of operations for the year then ended
- the statement of changes in net assets for the year then ended
- the statement of cash flows for the year then ended
- and notes to the financial statements, including a summary of significant accounting policies

(Hereinafter referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Society as at March 31, 2021 and its results of operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the "***Auditors' Responsibilities for the Audit of the Financial Statements***" section of our auditors' report.

We are independent of the Society in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada and we have fulfilled our other ethical responsibilities in accordance with these requirements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charges with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.



In preparing the financial statements, management is responsible for assessing the Society's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Society or to cease operations, or has no realistic alternative but to do so.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit.

We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion.

The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Society's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Society's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the Society to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation



Page 3

- Communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Report on Other Legal and Regulatory Requirements

As required by the Society Act (British Columbia), we report that, in our opinion, the accounting policies applied in preparing and presenting financial statements in accordance with Canadian accounting standards for not-for-profit organizations have been applied on a basis consistent with that of the preceding period.

A handwritten signature in black ink that reads 'KPMG LLP' in a cursive, stylized font, with a horizontal line drawn underneath the text.

Chartered Professional Accountants

Prince George, Canada

August 27, 2021



CARRIER SEKANI FAMILY SERVICES SOCIETY

Statement of Financial Position

March 31, 2021, with comparative information for 2020

	2021	2020
Assets		
Current assets:		
Cash	\$ 18,539,320	\$ 10,605,277
Accounts receivable	889,586	2,517,560
Sales tax receivable	61,298	70,625
Prepaid expenses	146,680	84,884
	19,636,884	13,278,346
Tangible capital assets (note 2)	4,922,525	4,832,015
	\$ 24,559,409	\$ 18,110,361

Liabilities and Net Assets

Current liabilities:		
Accounts payable and accrued liabilities	\$ 4,760,859	\$ 3,318,702
Wages payable (note 3)	1,765,243	1,321,435
Deferred contributions (note 4)	3,532,372	964,900
	10,058,474	5,605,037
Net assets		
Investment in tangible capital assets	4,922,525	4,832,015
Unrestricted surplus	9,578,410	7,673,309
	14,500,935	12,505,324
Commitments (note 6)		
Contingencies (note 9)		
Subsequent event (note 14)		
	\$ 24,559,409	\$ 18,110,361

See accompanying notes to financial statements.

On behalf of the Board:

Director

Director



CARRIER SEKANI FAMILY SERVICES SOCIETY

Statement of Operations

Year ended March 31, 2021, with comparative information for 2020

	2021	2020
Revenue (note 7)	\$ 44,237,367	\$ 45,197,363
Expenses:		
Advertising	3,410	976
Amortization	958,200	720,052
Annual general assembly	31,223	134,721
Band contracts	5,221,389	2,702,704
Bank charges	5,753	9,720
Board governance	11,378	57,531
Catering	227,045	356,166
Consulting fees	2,119,602	1,667,031
Contingency	73,860	261,140
Cultural events	13,228	140,804
Equipment leasing	66,326	69,277
Exceptional costs	191,748	68,521
Fostering	6,722,430	6,370,598
Honorarium	33,710	275,694
Insurance	264,923	222,086
Materials and supplies	1,102,442	1,296,179
Medical travel	547,538	973,413
Meetings	28,228	550,001
Memberships	40,625	26,365
Moveable capital asset reserve	240,517	74,858
Office and general	804,106	751,585
Pandemic	365,621	52,585
Prenatal	4,329	7,027
Professional fees	368,804	189,782
Rent	766,412	473,156
Repairs and maintenance	666,218	587,876
Respite care	131,934	161,457
Salaries and benefits	18,974,940	15,666,088
Telephone	804,096	540,332
Traditional healing	43,907	90,097
Training	567,235	1,144,111
Travel	563,615	1,473,353
Utilities	276,964	185,836
	42,241,756	37,301,122
Excess of revenues over expenditures	\$ 1,995,611	\$ 7,896,241

See accompanying notes to financial statements.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Statement of Changes in Net Assets

Year ended March 31, 2021, with comparative information for 2020

	Investment in Tangible Capital Assets	Unrestricted Surplus	Total 2021	Total 2020
Balance, beginning of year	\$ 4,832,015	\$ 7,673,309	\$ 12,505,324	\$ 4,609,083
Excess (deficiency) of revenues over expenditures (note 5)	(1,234,393)	3,230,004	1,995,611	7,896,241
Purchase of tangible capital assets	1,347,403	(1,347,403)	-	-
Proceeds on disposal of tangible capital assets	(22,500)	22,500	-	-
Balance, end of year	\$ 4,922,525	\$ 9,578,410	\$ 14,500,935	\$ 12,505,324

See accompanying notes to financial statements.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Statement of Cash Flows

Year ended March 31, 2021, with comparative information for 2020

	2021	2020
Cash provided by (used in):		
Operations:		
Excess of revenues over expenditures	\$ 1,995,611	\$ 7,896,241
Items not involving cash:		
Amortization	958,200	720,052
Loss (gain) on disposal of tangible capital assets	276,193	(16,926)
	3,230,004	8,599,367
Change in non-cash operating working capital:		
Accounts receivable	1,627,974	(1,100,302)
Sales tax receivable	9,327	(9,134)
Prepaid expenses	(61,796)	(14,610)
Accounts payable and accrued liabilities	1,442,157	(674,479)
Wages payable	443,808	387,225
Deferred contributions	2,567,472	(1,076,244)
	9,258,946	6,111,823
Investing:		
Purchase of tangible capital assets	(1,347,403)	(2,573,789)
Proceeds on disposal of tangible capital assets	22,500	16,926
	(1,324,903)	(2,556,863)
Increase in cash	7,934,043	3,554,960
Cash, beginning of year	10,605,277	7,050,317
Cash, end of year	\$ 18,539,320	\$ 10,605,277

See accompanying notes to financial statements.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements

Year ended March 31, 2021

Carrier Sekani Family Services Society (the "Society") is a non-profit society to develop and deliver health, social, family corrections and legal services to the Carrier and Sekani Nations. The Society is incorporated under the Societies Act (British Columbia), is a not-for-profit organization pursuant to Section 149(1)(l) of the Income Tax Act.

1. Significant accounting policies:

(a) Basis of presentation:

The Society's financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations.

(b) Cash and cash equivalents:

The Society considers deposits in banks, certificates of deposit and short-term investments with original maturities of three months or less as cash and cash equivalents.

(c) Revenue recognition:

The Society follows the deferral method of accounting for contributions.

The Society is funded primarily through agreements with various ministries of the provincial and federal governments and the First Nations Health Authority. Contributions pursuant to these agreements are recognized as revenue evenly over the course of the relevant agreements. Where a portion of a contribution relates to a future period, it is deferred and recorded on the statement of financial position as deferred contributions.

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Contributions restricted for the purchase of tangible capital assets are deferred and amortized into revenue at a rate corresponding with the amortization rate for the related tangible capital assets.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

1. Significant accounting policies (continued):

(d) Tangible capital assets:

Tangible capital assets are stated at cost, less accumulated amortization. Amortization is provided using the following basis and annual rates:

Asset	Basis	Rate
Buildings	Straight-line	20 years
Leasehold improvements	Straight-line	Term of lease
Vehicles and equipment	Straight-line	4-7 years

Purchased tangible capital assets are recorded at cost. Contributed tangible capital assets are recorded at fair value at the date of contribution. Repairs and maintenance costs are charged to expense. Betterments which extend the estimated life of a tangible capital asset are capitalized. When a tangible capital asset no longer contributes to the Society's ability to provide services, its carrying value is written down to its residual value.

(e) Use of estimates:

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the year. Items subject to such estimates and assumptions include the carrying amounts of accounts receivable, tangible capital assets and accrued liabilities. Actual results could differ from those estimates.

(f) Financial instruments:

Financial instruments are recorded at fair value on initial recognition. Equity instruments that are quoted in an active market are subsequently measured at fair value. All other financial instruments are subsequently recorded at cost or amortized cost, unless management has elected to carry the instruments at fair value. The Society has not elected to carry any such financial instruments at fair value.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

1. Significant accounting policies (continued):

(f) Financial instruments (continued):

Transaction costs incurred on the acquisition of financial instruments measured subsequently at fair value are expensed as incurred. All other financial instruments are adjusted by transaction costs incurred on acquisition and financing costs, which are amortized using the effective interest rate method.

Financial assets are assessed for impairment on an annual basis at the end of the fiscal year if there are indicators of impairment. If there is an indicator of impairment, the Society determines if there is a significant adverse change in the expected amount or timing of future cash flows from the financial asset. If there is a significant adverse change in the expected cash flows, the carrying value of the financial asset is reduced to the highest of the present value of the expected cash flows, the amount that could be realized from selling the financial asset or the amount the Society expects to realize by exercising its right to any collateral. If events and circumstances reverse in a future year, an impairment loss will be reversed to the extent of the improvement, not exceeding the initial carrying value.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

2. Tangible capital assets:

			2021	2020
	Cost	Accumulated amortization	Net book value	Net book value
Buildings	\$ 3,002,831	\$ 1,840,680	\$ 1,162,150	\$ 1,474,321
Leasehold improvements	1,112,373	127,226	985,147	558,352
Vehicles and equipment	8,531,799	5,756,571	2,775,228	2,799,342
	\$ 12,647,003	\$ 7,724,477	\$ 4,922,525	\$ 4,832,015

3. Wages payable:

	2021	2020
Government remittances	\$ 125,996	\$ 62,483
Employee savings plan	131,965	91,294
Vacation payable	1,011,452	845,512
Wages payable	424,814	272,348
Pension payable	71,016	49,798
	\$ 1,765,243	\$ 1,321,435



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

4. Deferred contributions:

Deferred contributions is comprised of the following:

	2021	2020
AEST Training	\$ 297,273	\$ -
BC Housing	69,300	-
Canadian Mental Health	-	84,000
CIC Cultural Funding	80,000	-
City of Prince George Grant	11,404	-
Comm Emergency Planning	12,921	-
FNHA - Communication Support	36,510	-
FNHA - Mental Health	782,472	636,969
Foundry	122,749	-
ISC Safehouse	665,568	-
INAC Indigenous Support	98,702	-
INAC National Toolkit	383,902	-
INAC Overpayment	118,859	-
INAC Service Coordination	54,246	-
INAC Urban Covid Relief	300,023	-
Medication Management	33,000	-
Ministry of Health	30,000	60,000
Nechako Valley Rent	2,940	-
Northern Health	10,000	-
Opioid Response Grant	64,385	-
Province of BC Highway of Tears	45,000	-
Province of BC Perinatal	147,308	-
Provincial Health	60,000	45,000
Preschool fee	1,134	-
UBC Funding	84,676	24,674
Vic Fdn - Stella Fridge	20,000	114,257
	\$ 3,532,372	\$ 964,900

Deferred contributions represent unspent externally restricted funding for specific programs provided by various ministries of the provincial and federal governments.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

5. Net assets:

	2021	2020
Excess (deficiency) of revenues over expenditure:		
Amortization of tangible capital assets	\$ (958,200)	(720,052)
(Loss) gain on disposal of tangible capital assets	(276,193)	16,926
	(1,234,393)	(703,126)
Excess from unrestricted operation	3,230,004	8,599,367
	\$ 1,995,611	\$ 7,896,241

6. Commitments:

In 2016, the Society entered into an agreement with A.B.C. Allen Business Communications Ltd. to provide broadband services to various areas serviced by the Society for annual fees of \$2,400, paid monthly. The agreement expires in November 2022.

In 2019 the Society entered into an agreement with Telus to provide telecommunication services for annual fees of \$15,600, paid monthly. The agreement expires on December 31, 2023.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

7. Revenue:

	2021	2020
First Nations Health Authority	\$ 11,637,236	\$ 10,986,475
Indigenous Services Canada	18,503,163	19,749,855
Ministry of Children and Family Development	11,219,153	11,000,582
Ministry of Jobs, Tourism, and Skills Training	-	138,466
Northern Health Authority	263,019	328,711
Solicitor General	135,000	120,000
Other income	1,665,293	1,638,803
Aboriginal Headstart	542,904	792,629
Prince George Nechako Aboriginal Employment and Training Association	211,599	271,821
University of Northern British Columbia	60,000	170,021
	\$ 44,237,367	\$ 45,197,363



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

8. Financial risks:

The Society's financial instruments consist of cash and cash equivalents, accounts receivable, accounts payable and accrued liabilities, wages payable and deferred contributions. It is management's opinion that the Society is not exposed to significant interest rate, currency or credit risks arising from these financial instruments and that the fair value of these financial instruments approximate their carrying values.

(a) Market risk:

On March 11, 2020, the COVID-19 outbreak was declared a pandemic by the World Health Organization. This has resulted in the Canadian and Provincial governments enacting emergency measures to combat the spread of the virus. The situation is dynamic and the ultimate duration and magnitude of the impact on the economy and the financial effect on the Society is not known at this time.

At the time of approval of these financial statements, the Society has experienced the following indicator of financial implications in relation to the COVID-19 pandemic:

- general increases in costs of goods and services rendered

The current challenging economic climate may lead to adverse changes in cash flows and working capital levels, which may also have a direct impact on the operating results and financial position of the Society in the future.

9. Contingencies:

Under the terms of the agreements with Indigenous Services Canada ("ISC"), the British Columbia Ministry of Children and Family Development ("MCFD"), and the British Columbia First Nations Health Authority ("FNHA"), certain surpluses may be recoverable and/or repayable to ISC, MCFD, and/or FNHA.

10. Income taxes:

The Society is non-taxable as a result of its status as a non-profit organization under section 149(1)(l) of the Income Tax Act.



CARRIER SEKANI FAMILY SERVICES SOCIETY

Notes to Financial Statements (continued)

Year ended March 31, 2021

11. Economic dependence:

A substantial portion of the Society's funding is derived from certain federal and provincial ministries and the First Nations Health Authority. The Society's ability to operate certain programs is dependent on continued funding from these sources.

12. Budget:

Budget figures reported in the supplementary schedules have been approved by the Board and were not subject to audit or review procedures. The budget figures are amended in response to changes in the Society's funding agreements during the year.

13. Employee remuneration:

For the 2021 fiscal year, the Society paid remuneration of \$75,000 or greater to fifty-eight employees, whom received total remuneration of \$5,832,612.

14. Subsequent events:

Subsequent to the year end, the Society purchased commercial property in the amount of \$1,000,000 and land for \$775,000.

15. Comparative amounts:

The financial statements have been reclassified, where applicable, to conform to the presentation used in the current year. The changes do not affect prior year excess of revenue over expenditures.

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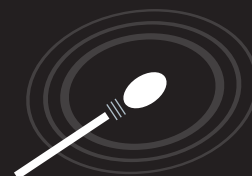


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