

I'm not a story teller, but this is a story. ^ weeks ago, on April 28th, the Mushuau EPH and GH Inc Board opened a combined EPH/GH in Goose Bay, the 5th placement home that was part of the original plan for 5 Innu managed and operated homes for children & youth. Chiefs, Federal and Provincial Officials, IRT participants, invited guests, L&G, it's my duty and pleasure to present a report to you on the "5 Placement Plan".

I'll start by acknowledging what this is NOT. This is not an independent program or project "evaluation". Not an audit on the numbers or costs.. What it is, is a report on the key elements and outcomes of the overall plan. In that regard, it is more of an After Action Report. The journey from 2016-2025.

I realize that many of the subjects and discussions here at the IRT are about problems, and frustrations about timely and effective solutions. This will be a departure from that- it's a success story, something actually worked out. I will be reporting on positive outcomes. I will be thanking all parties for their help, contribution and support, even government officials, past and present. A rare occurrence in this business.



THE 5 PLACEMENT PLAN

- Background (Review)
- Plan ?
- Funding (\$)
- Accomplished/Outcomes
- Current Operations
- Conclusions – Impacts & Lessons



Not to say everything was perfect; far from it, but successful implementation of a plan. Here's the outline/table of contents.....

Brief background to remind everyone where we started. What was the plan? What was the project funding and how was it spent. Summarize the accomplishments - outcome of the work (Homes, Beds, Employment). Describe the situation today. Then we'll summarize the primary and secondary impacts of the projects and look at some of the lessons learned.

While I will be the story narrator, the contributing authors and main characters are here with me today to answer questions, add context and bring the story alive. We also have the pleasure to welcome some invited guests who played pivotal roles in making this happen. I will introduce them as the story unfolds.



THE 5 PLACEMENT PLAN

KEEPING INNU CHILDREN CLOSER TO HOME





Report to IRT Meeting
June 2025



It was 2015, Innu community populations were growing fast (30% in 6 years). 191 Innu children were in care of the Provincial CYFS system – a 15% annual increase, year after year. Another 279 families were deemed at risk and subject to various stages of protective intervention or monitoring. The Innu 2014 Healing Strategy had just been published. Devolution of Income Support was approaching. But CFS was still a distant dream. Nationally, the winds of change in Indigenous CFS were gathering speed and force. Provincially, the CFS org had changed, and efforts were underway to modernize the legislation. NL and Innu were negotiating an updated MOU/WRA to improve CFS operations to include Innu representatives in the process. The Innu had contracted the CWLC to undertake a CFS Needs Assessment to help build a framework for the future. Soon the Innu and NL would agree on the Inquiry.



Labrador Innu Prevention Initiative

- Innu Care Approach – practice framework
- Development of prevention services structure/organization
- **Placement Planning for 5 facilities including SIFN Group Home Transition**
- SIFN request to fill vacant CSSD/SW positions in Sheshatshiu



Coordinated by the IRTS, the Innu planning team and advisors met in Aug 2016 to design a comprehensive *Labrador Innu Prevention Initiative* To present some of the work in a proposal package to help secure funding support to make this happen. The initiative had 3 major elements – Each with their own story, timeline and outcome. I will focus on the 5 Placement Plan.



THE 5 PLACEMENT PLAN

KEEPING INNU CHILDREN CLOSER TO HOME





Going into this, most of us on Innu/IRTS team had very little idea of what we were actually talking about. Luckily, we had a training and development partner, Bluesky/Aurelia, led by Michelle Hawco and Melinda Gogerly, and their team of experts with the knowledge, experience and connections. Although no longer part of Bluesky/Aurelia, Michelle and Mel are with us today. Michelle transitioned to working with SIM/Janet and also works with the IRTS CFS Prevention team. Mel has led the Placement Home training and development work for all 5 homes and has been the main character in establishing and maintaining a unique partnership with the Innu boards, placement home staff and IRTS throughout the process. She continues to provide support to SIM and MEGH.



Placement Capacity

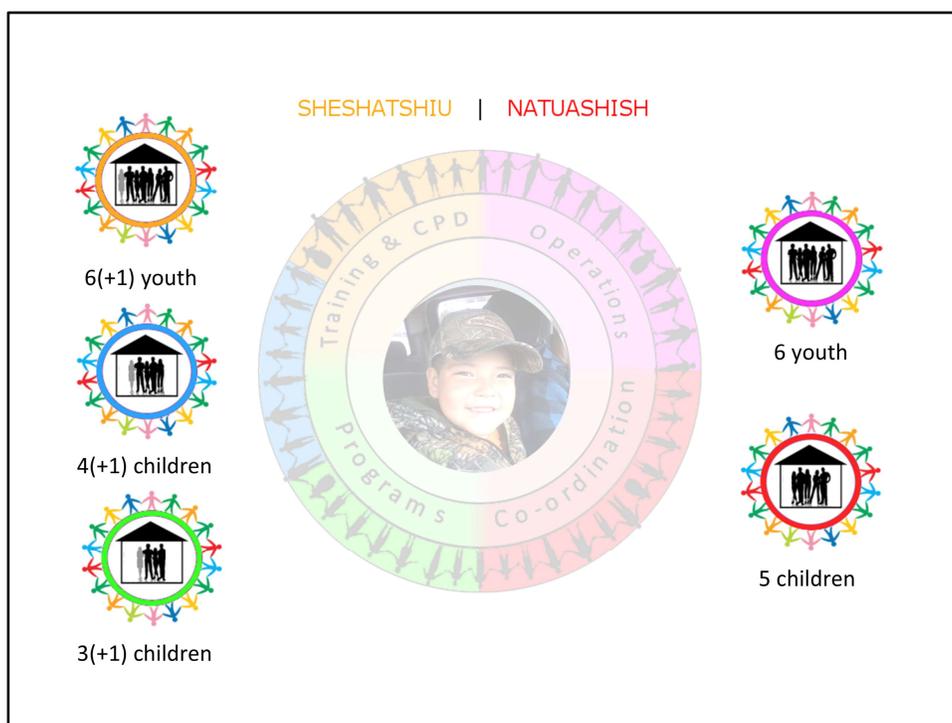
- Objective - to bring Innu children home
- Lack of community placement options
- Need minimum of 5 Placements:
 - SIFN - Group Home and two Emergency Placement Homes
 - MIFN – Emergency Placement Home and Enhanced Group Home
- Oversight Boards



In the planning everyone agreed that the objective was to bring Innu children home to Innu communities as a top priority for their wellbeing. The lack of local placement options was identified as a practical obstacle. The stats indicated places for 60 (15 X 4 bedroom homes) would be required immediately. We eventually settled on a practical objective of 5 homes as a minimum.

The original plan saw the homes operating under each SIFN and MIFN Band councils, perhaps as a new “Dept” within the band structure. However, with the GH in Sheshatshiu 3 months from opening, we discovered the Province could not legally contract the service to another political body, so we had to establish independent oversight Boards in each community and incorporate them as Not-for-profits. SIM and MEGH were born.

**Chairs – Nympha, Amanda/Thea. Other Board Members?
EDs – Janet and Pauline. Other Staff ?**

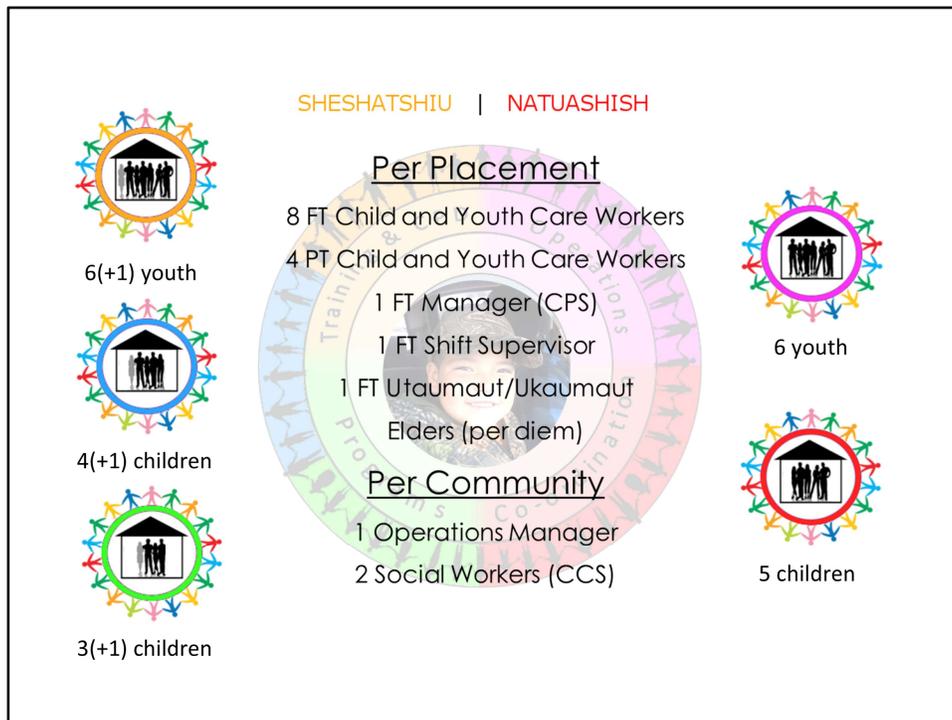


The plan started with the goal to transition the existing GH in Sheshatshiu into a level 4 facility, add then open two Emergency Placement Homes in the community.

In Natuashish, we needed to start with one EPH and somehow establish a much needed Enhanced GH (with wrap around services and supports). This was the challenge.

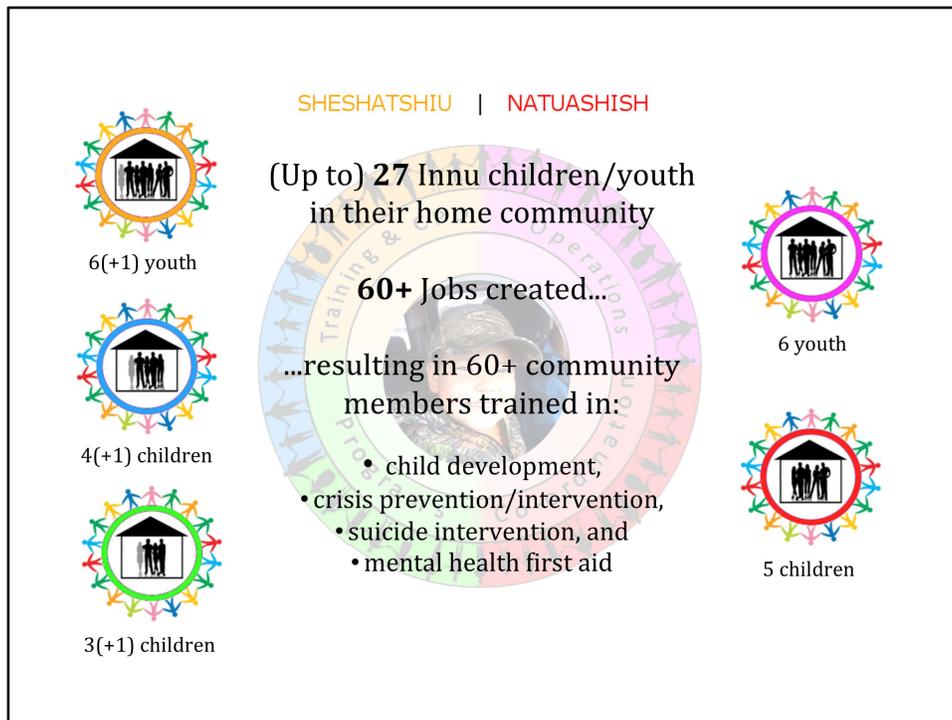
Concept:

- Innu managed and operated in-community placement homes
- Oversight by independent inc Placement Boards
- Primarily Innu staff
- ICA – language, culture and family (ICA applied to child & youth care practices)
- Operate within established NL/CSSD standards and regulations
- Training and cap funded by ISC, homes built/financed by SIFN/MIFN and leased back, homes operate under svc agreement with CSSD (more on that later)



We knew the work (24/7 residential care), with 12 hour shifts, was not going to be easy. We were recruiting for work people had never done before, and it would be challenging. The homes would require a staff complement of 12 (F/PT) staff, managers, supervisors, home parents, and elders. We would also require assistance of clinical SWs for support. – the village to raise the children.

We all knew the Child Welfare stats and even though it was early days on the Public Inquiry idea, we all knew what was the outcome for many Innu children and the tragic ending for some. Everyone seemed to understand profoundly, silently, and in their own way, that we were in the life-saving business, and therefore “Failure was not an Option.”



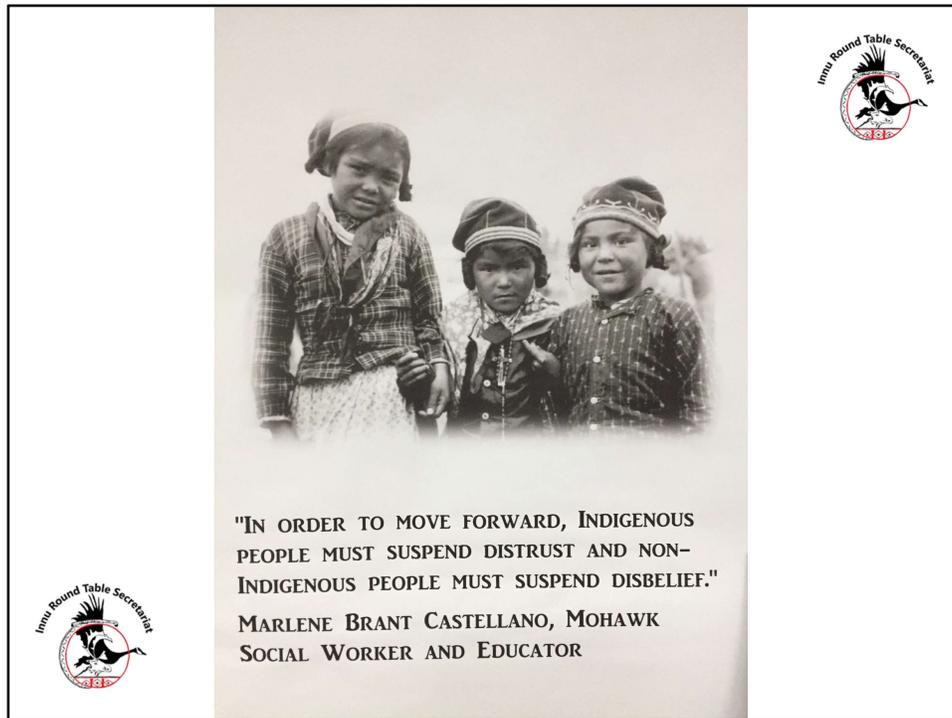
Our placement planning was designed to focus on the five facilities which could handle a total of about 26-27 Children. In addition to meeting the placement needs, the operation would also require a staff of about 60 people. Many community members would end up being trained in child care and related service in an Innu-run home. Basically, an Innu CYCW program.

There were many skeptics..... On all sides of the challenge. The feds/ISC initially figured we were on a “fools errand” and chasing govt \$ for a good cause but unrealistic outcome. Most senior officials at NL/CSSD were doubtful, some even concerned we were setting ourselves up for failure which would only create more frustration with the child protection system. Innu themselves were unsure if this could be done or if they could do this. Some even openly questioned if we could find enough people willing to train/work.

The plan was coordinated by IRTS. We had multiple partners involved: ISC, NL/CSSD, Bluesky Family Care (Seafair/Aurelia), OKT, Innu (SIFN/MIFN – SIM and MEGH). All parties learned and adapted along the way, as we “broke trail”. Govt skepticism and disbelief evolved into neutral observers, reluctant helpers and they eventually became trusted allies and loud supporters. Some skeptics moved on to other jobs and their replacements were more on board from the beginning; after all we were making progress. Innu skepticism, distrust and self-doubt evolved into trust, confidence, leadership and ownership.

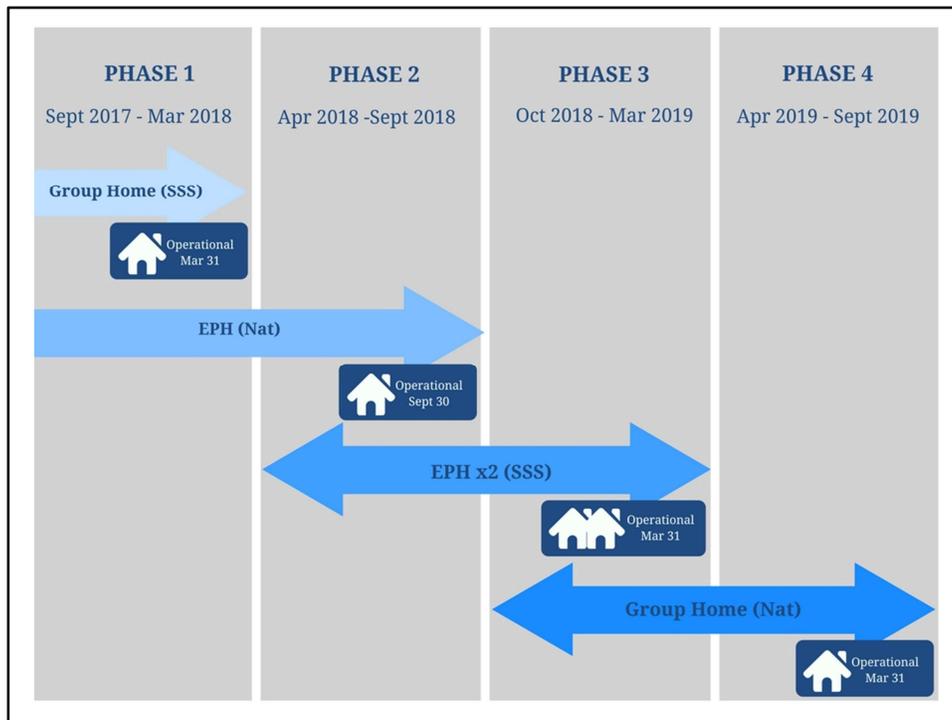
Initially, ISC staff had to accept their own lack of operational understanding of front line child placement home work, CSSD had to learn their CPC clearance system/process was a barrier not a security gate, Innu trainees had to learn the 24/7 EPH work was not white-man's rocket science, and our trainers had to learn flexibility in how to deliver complicated and sensitive training subjects. We all learned together.

In addition to the expertise of our training partner, right from the start we were lucky to have a keen ally and believer at NL/CSSD ADM Rick Healy. He is here with us today. He pointed us in the right direction and seemed to do so with the trust, confidence and belief that we could actually do this. Rick was actually the one to light the spark of interest in us to explore the idea of Innu community-based placements. His Director, Jennifer Barnes, was an instrumental navigator through the CSSD systems. They both supported us along the way.



For inspiration, we used the wisdom of Dr Marlene Brant Castellano, a Mohawk social worker and educator. She asked: “How do we reach across an apparent cultural divide? How do we learn to trust those who would be our allies? When Indigenous people sense threat, there’s that instinctive fight or flight response. But in reality, what’s required is strategic engagement.”

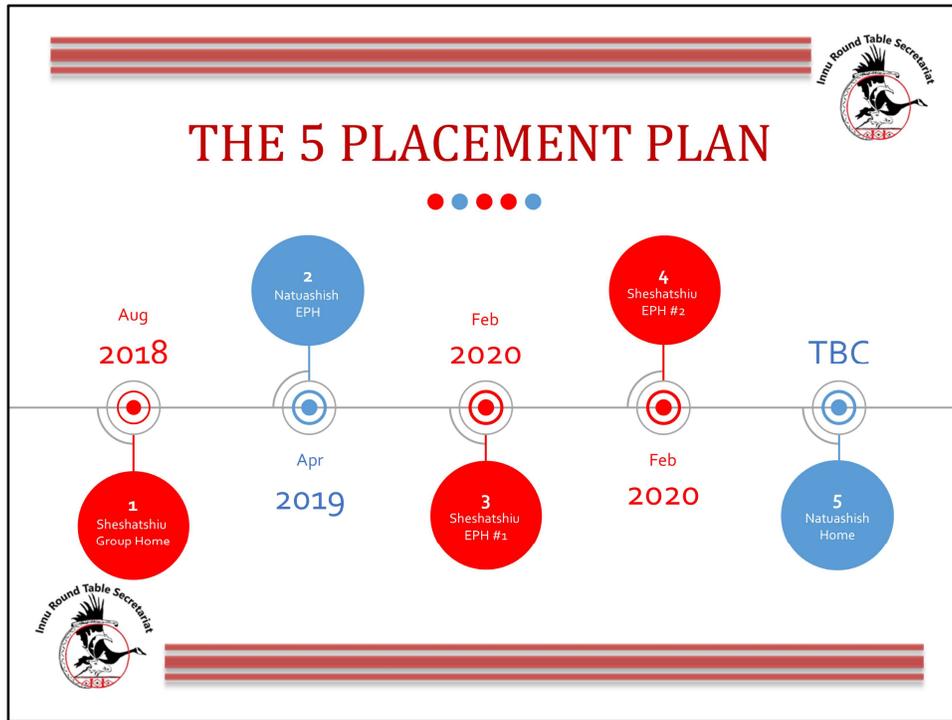
Dr Marlene profoundly stated that: “In order to move forward, Indigenous people must suspend distrust and non-Indigenous people must suspend disbelief.”



Our initial plan to create the 5 homes in a short time frame was too much of a leap of faith. We were not able to secure the funding to establish all 5 facilities at once.

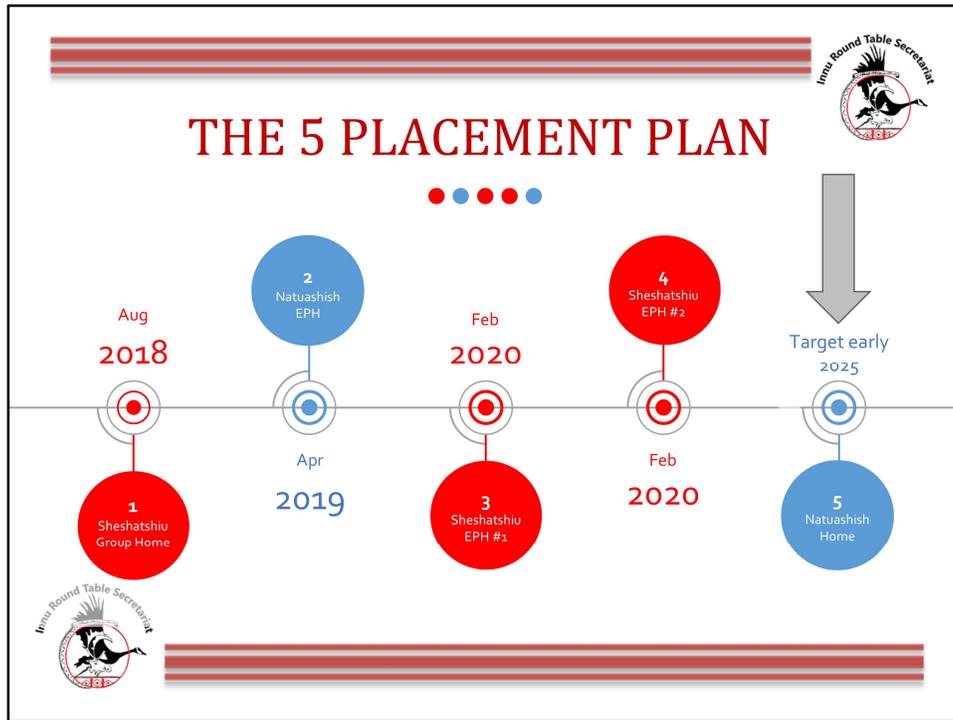
We knew the capacity development funding for the 5 homes was a challenge for the INAC/ISC officials. We met with National office and Regional office officials before we eventually secured agreement. We realized we were proposing a unique plan that was going to require a unique decision, a government risk you might say. Even the skeptics could see the potential value & benefit in working with us on this. I expect there were many discussions and debates internally, but eventually the RDG delivered the commitment to get started. The agreement for \$ support, was subject to "proof of concept" - progress and delivering on the 1st major project - transition of the Group Home in Sheshatshiu to a staffed residential care facility capable to operate within the provincial level 4 standards as of April 1st, 2018. We accepted the conditions and moved forward, realizing one of the factors in our favor here was "timing." At ISC, and not in the audience today, but part of the initial work, was Nathalie Levesque and Lisa Legault – Terry/Geoff, please convey our recognition to them if you can and let them know their risk in us paid off!

Funds flowed on a project- by-project basis and required detailed proposals for each; the 5th home required multiple versions. The rest is now history.

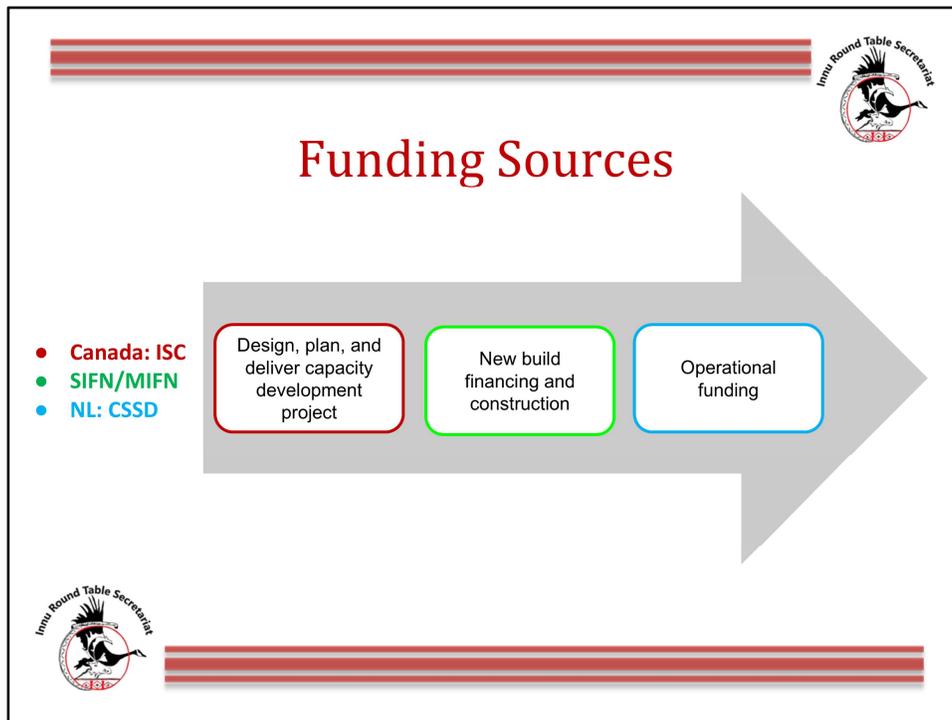


The plan for the 2nd home in Natuashish, the 5th and final placement, was initially proposed as an Enhanced Group Home for Mushuau youth with wraparound community supports. It was originally planned to be a new build in Natuashish. That proved to be too expensive and as we were looking at options, the COVID-19 Pandemic upended everything. The Pandemic almost destroyed us. Janet and Pauline and their operations weathered the storm, and grew stronger. We re-commenced planning for the 5th home in 2022/23.

While alternate sources of capital funding for a new building was under consideration, it was decided to move ahead and establish the Home in Goose Bay, on an interim basis, until the construction could take place in Natuashish. We found a building and MEGH signed a lease.

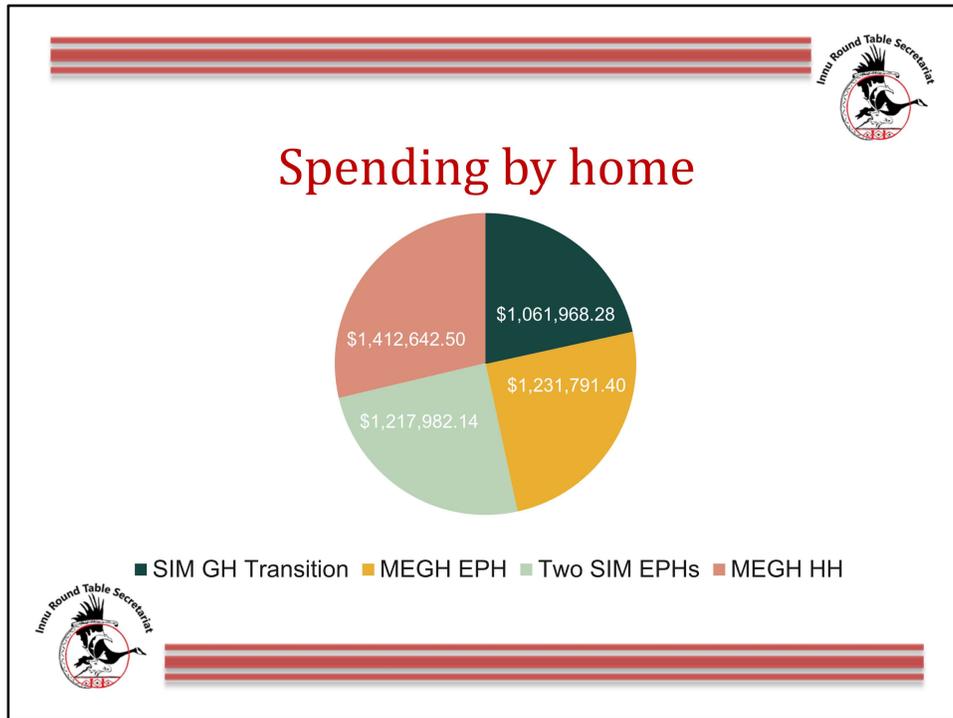


After several false starts in the post-pandemic period, we conducted a re-evaluation of the need in 2023/24, and the results indicated the home needed for Mushuau Innu was one that could accommodate some youth, but also younger children – in other words a combined EPH/GH – a Hybrid Home.



As a reminder to everyone, funding for the plan and each home came from multiple sources. Each phase and part, had to link in to the next.

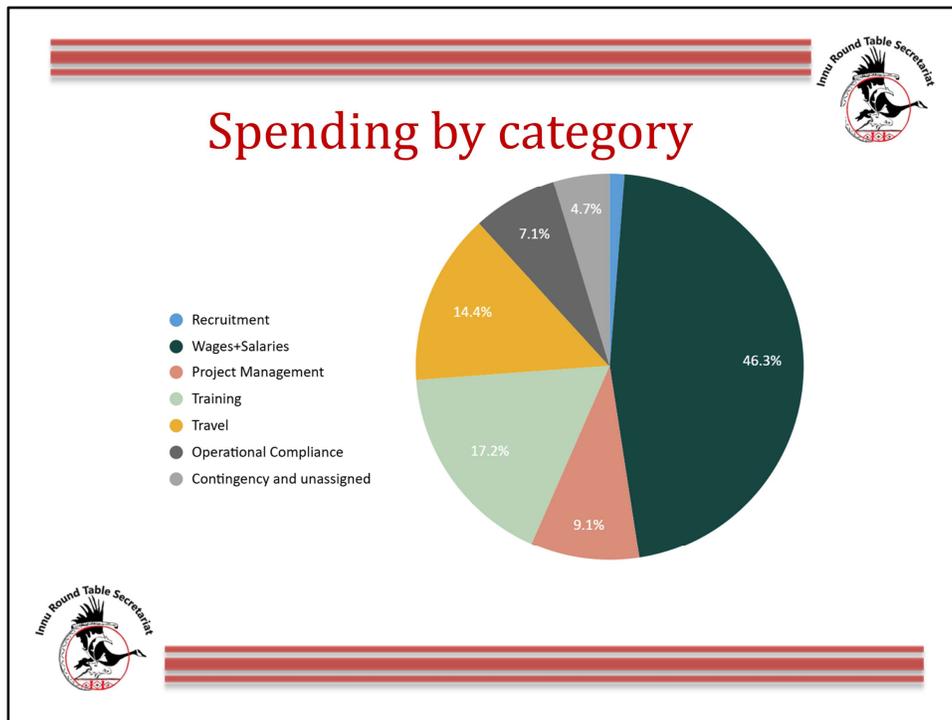
Capacity development funds from ISC were utilized for design, planning and training. If a new build was contemplated, financing and construction by the Band would be necessary (SIFN – EPH Duplex). Same thing for the renovations of an existing building (MIFN – EPH). That would lead directly into the training of staff and capacity development. Capacity Building would end when the Board entered into a funding agreement (Contract) with CSSD and operations commenced with children being placed in the home under care of newly trained staff and managers.



What did the plan cost ?

The capacity building/training plan was costed for each home. The two Sheshatshiu EPHs were done together. The total \$4.925M (rounded to \$5M plan for 5 homes.). The capacity development funding all came from ISC. All projects were delivered within budget.

Keep the \$5M investment in mind as we look at the outcomes/achievements.



How was the money spent? While the actual plan for each home was unique to the circumstance at the time, with varying costs in most areas, the basic planning functions were consistent in all projects. This is where the \$5M investment went:

- Bulk (almost 50%) of the expenditures went to the salary and wages for trainees as they completed the training phases.
- The actual cost of trainers/training was nearly 20%
- Travel costs varied slightly for each project but represented 15% of total costs
- Under project Management (less than 10%) – we captured all the costs for countless proposals, briefings/PPT, meetings, options, policies, reports, costing/budgets, research and planning
- Smaller amounts to other areas (Operational compliance, Recruitment, and Contingency)

Compliance Standards: over 100 ?



Tracking Project Status – Provincial standards

Standards	Current completion
Finance	30%
Physical home and vehicles	80%
Youth admissions processes	50%
Training and qualifications	70%
Hiring and on-boarding	70%
Program development	40%
Documentation and reporting	70%
Sharevision	90%
Policy and procedures	40%
Program framework	40%
Staffing model	60%

Key element of Project Management was tracking progress towards completion and reaching key milestones. Also a way to keep nervous government officials supplied with information. This was a specific status report on the initial project – GH Transition – Tracking progress towards meeting the CSSD standards for level 4 home.



Training

The plan

- 408 hours of comprehensive training
- 60% mentored, on-the-job training
- 40% coursework/required



FIRST AID



SUICIDE

ASIST









A word about the training – it was intensive and comprehensive. It began in Sheshatshiu in 2017/18 with 6 management Trainees and 42 applicants for 12 CYCW positions. 16 new hires were made at various management and staff levels to staff the new and improved GH operation. It has been operating ever since.

Fast forward to 2025 and the cap dev plan for the MEGH HH: The team had 99 applicants for CYCW trainee positions. Training started with 17 and lead to 11 job offers.

Required Training:

- TCI – Therapeutic Crisis Intervention
- ASIST – Applied Suicide Intervention Skills Training
- Trauma Training
- First Aid/CPR
- Innu Care Approach to Child and Youth Care

Customized training created for the communities:

- Management and leadership skills and competencies
- Operational foundations (applying policy, managing a placement home, completing key documentation, reporting requirements, budget management, CSSD compliance - to name a few!)

Additional training including customized modules on:

- ADHD, Autism and FASD
- Respectful workplace



Central to the Initiative was the Innu work to describe the elements of Innu life in practices and procedures that would be applied where Innu children are in care. The Innu Care Approach was developed based on the descriptions provided by SIFN Social Health Director, Jack Penashue. The ICA was later endorsed by the Child Welfare League of Canada (CWLC) and highlighted at national child welfare meetings and conferences.

While we could not present this as an officially sanctioned “model” of care in the SW/Child Care field, we asked our training partners at Aurelia, to develop a child & youth care training program based on the ICA. This groundbreaking work was used for all 5 homes and is now being updated by the Innu teams themselves at SIM, MEGH and IRT.



Current Operations Shusheshipan Ishpitentamun Mitshuap

- Licensed and funded as a service provider by CSSD
- 3 placement homes with space for 18 children
- Service to date: 78 Children & youth
- Employees (93)
 - 47 full-time
 - 46 part-time



SIM is now a licensed service provider with NL/CSSD. 18 placement beds and 93 employees (FT/PT), 95% Innu.

They have provided service and care to almost 80 children so far.

Current Operations

Mushuau EPH & Group Home



- Licensed and to be funded as service provider by CSSD
- 2 placement homes with space for 10 children
- Service to date: 51 Children & youth
- Employees (40)
 - 19 full-time
 - 21 part-time



MUSHUAU EPH & GROUP HOME INC.



As of today, MEGH is a licensed Service Provider and will be funded as such by CSSD.

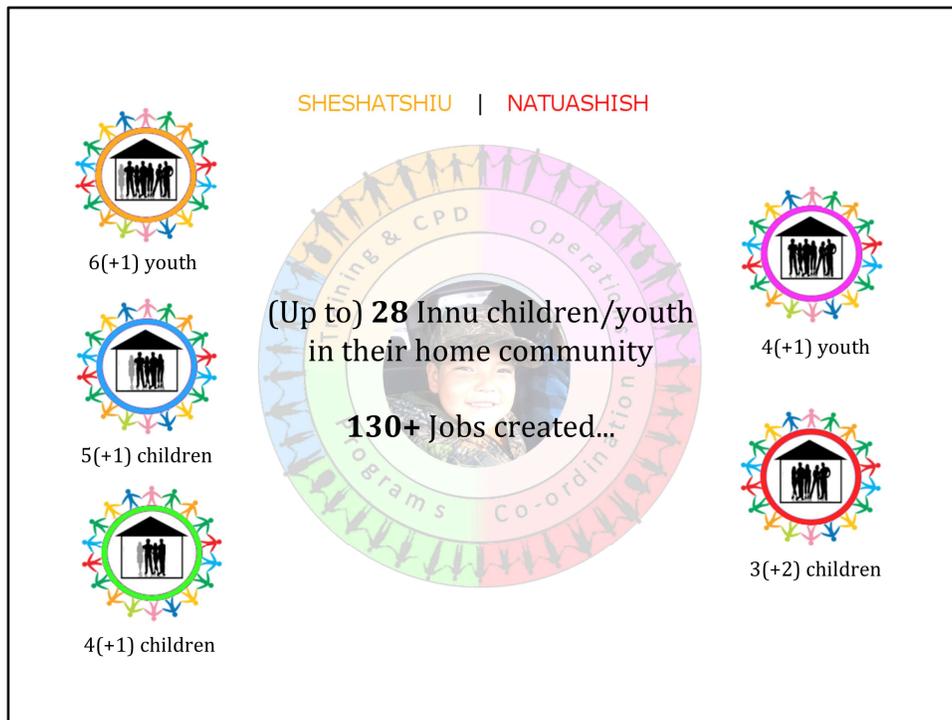
With the EPH in Natuashish and Hybrid Home in GB, they have 10 beds. And 40 employees (FT/PT). They have provided service and care to over 50 children so far.



While this is the “Final” chapter of the 5 Placement Plan story, this is not the end. Not only does the work at the 5 homes continue, but the network of homes is expanding (two ILAs coming online in Sheshatshiu later this year, probably by Sep). Both Boards and their operations will continue to be a major force, and require ongoing encouragement, understanding and support from all parties. They have become part of the “Essential Services” for both communities.

Not a forever solution – Hopefully the “need” for placement homes will eventually diminish. But needed for foreseeable future.

So with the 5 placement homes now in place, what can we report as the impacts and what did we learn through the process. ?



The plan was based on 26/27 Placement beds. The 5 homes now have capacity for 28 Placements for Innu children and youth

While the main objective was the child placement resources, we recognized that the plan would require more than 60 people to run the homes in various full time positions, plus staff at the two oversight Boards. The task of recruiting and training turned into “Employment” and a secondary benefit of the plan. MEGH/SIM now employ a total of 66 Full and 67 Part Time positions (95% Innu)

There are other secondary impacts of the plan, that were not “IN” the plan, but part of the outcomes.

Secondary Benefits

- Annual revenue to communities
- Training of community members (TCI, ASIST, FA, ICA, etc)
- Supports/Investments in Innu culture, language and traditions
- Management and Leadership
- “Ten to 1 model”
- Ripple Effect





Operating 5 placement homes under service contracts with NL/CSSD generates millions of \$ revenue to Innu Communities (almost 2/3 – 63%) goes to staff salaries, allowances and benefits). Yes, it’s “govt” revenue, but most \$ would be going elsewhere anyway. Also some \$ direct to SIFN/MIFN for placement home services (rent/lease, maintenance, supplies, and Fin services (MEGH only)

Some Secondary benefits/Impacts are difficult to quantify.....

Training to 200 + Community members (skills and knowledge to other jobs, home and family life, even for past employees)

Programming at the homes - Investments in Innu culture, language and traditions

Management and Leadership Experience Gained - Program management, HR Management, Financial management, etc. In fact, in Inter-governmental Relations, we have witnessed the development of a new positive kind of working relationship in CFS between Innu operators and Prov & Fed staff

(mutual respect and trust).

Aside from CFS/placement operation - As Economic Development Initiative: Sometimes in Govt funding there is Success/\$10-\$1 benefit. In this case, the 5 Placement Plan: \$1 - \$10 benefit. !!

Ripple effect of creating hope, trust, confidence, leadership and ownership by Innu controlling their own destiny. This has been observed on many levels and there are people in the room today who can give you a front line experience perspective. The 24/7, 365 day/yr operation of an essential service has also forced the communities, employers and employees to alter expectations of workplace culture - norms of vacation, work schedules, time off, and closures.



Unique Partnership

- Strategic Engagement & Collaboration
- Relationship Building/Roots in Relational Practice
- “I-We-You” Approach to Training
- Coaching Mentoring & Support
- Shared Purpose & Outcomes



One of the key features of the 5 Placement Plan has been the unique partnership that emerged between Innu and Aurelia (the people). I feel compelled to mention this specifically, so that it's not confused as just another contractual business relationship with a consultant. To look at it that way would be missing the whole point..... Like missing the main ingredient in a secret recipe.

From the very beginning, it was evident that this project was unique in its design. This was never about Innu hiring external placement providers to establish and run placement homes in Sheshatshiu & Natuashish. As Dr Marlene suggests, this was “strategic engagement”; collaboration, based on an exchange of knowledge and practices for the mutual development of shared capacity - a shared partnership - was not an approach being used elsewhere in the country.

This approach requires building a trusting relationship and shared personal investments. Indigenous people have learned thru centuries of natural

knowledge sharing from others, parents and elders (I do it, we do it together and then you do it). Mel and her team embraced this learning from the Innu and organically developed this approach to training, mentoring and coaching while simultaneously applying a relational, people first approach.

Embracing the shared purpose of “Keeping Innu Children Closer to Home” and the mission-oriented approach to key operational objectives was key to the success of reaching the goal of 5 placement homes.



THE 5 PLACEMENT PLAN – LESSONS ?

KEEPING INNU CHILDREN CLOSER TO HOME





CREATING HOPE & OPPORTUNITY



The Innu 5 Placement Plan – created hope for Innu children & youth.

Dr Marlene “We have to start sounding the trumpet (drum?) for things that are working.”

Many operational and training delivery lessons learned along the way and these were applied/adapted for each project.

The main lesson learned from the 5 Placement Plan:

- What can be accomplished by working together with a common objective, and building relationships. Working Relationships with personal element applied to the professional work, across intergov lines (Innu. Prov/CSSD and Fed/ISC-CFS).
- Taking that leap of faith: Suspend Distrust and Suspend Disbelief.
- Value in developing Unique Partnerships with allies
- Helped formulate an Innu vision for C&FS work into the future – prevention agency, Innu Law, SG.



As a footnote to the story, I owe a personal thank you to IRT ED/Germaine – allowing me to work on this amazing initiative. It started out as a part time file on the side as I toyed with dreams of retirement. Then became a full/part-time task, then my only task..... for past year. My time and costs were all covered by the IRTS, not part of any pie chart or financial report. Just supported quietly by Germaine & Kylie/IRTS as part of getting this important job done.

I would also like to acknowledge the late Mary Jane Nui and her role as one of the original SIM Board Members, and driving force behind our work. Her elder voice of wisdom and insight about raising Innu children will last forever.

Finally, I would like to give a voice to all the Innu children and youth (129 so far) and their families who have received service & help from the 5 placement homes since 2018. On their behalf..... to all the partners, allies, Fed/Prov govt officials, Board members, Home staff, Innu leaders and advisors **Thank You.**