

Elmira District Community Living



Management Report
2016

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*Envisioning Tomorrow: Navigating Opportunities
in Challenging Times*

Strategic Plan



➤ 2012 - 2017



Strategic Plan

PREPARED WITH THE ASSISTANCE OF **CMCS CONSULTING SERVICES**
REVISION # 3 – NOVEMBER 29, 2012

Positioning Statements

1. Vision

Elmira District Community Living (EDCL) vision is that the individuals we support live with dignity and respect:

- Choice
- Opportunity
- Citizenship
- Unique to each person

2. Mission

EDCL's mission is to:

- Create partnerships that provide relevant, individualized, and innovative services for persons supported by EDCL.
- Advocate, Educate and Facilitate the participation of the Community in achieving the individual's life vision

3. Guiding Principles

3.1 Lifelong Supports

Utilizing the principles of person directed planning, EDCL works collaboratively with individuals, families, advocates and support networks, ensuring that people are supported on a lifelong basis.

3.2 Respect and Dignity

EDCL:

- Respects the people we support, their homes and property
- Honours dignity and right to privacy
- Advocates with others to do the same



Strategic Plan

3.3 Community Development

EDCL facilitates the choices of individuals, and promotes inclusion by:

- Educating and engaging the community
- Using available community resources
- Fostering partnerships

3.4 Importance of Families/Support Networks

EDCL encourages all involved to assume an ongoing role in the planning and provision of supports in collaboration with the supported individual and our staff.

3.5 Staff and Volunteers

EDCL:

- Recognizes staff members, volunteers, contributors and families for support of EDCL
- Supports professional growth through agency-sponsored, as well as third party training and development

3.6 Innovation

EDCL is committed to innovation in response to the needs of individuals and families, service demands and external pressures. EDCL will:

- Seek creative approaches and partnerships
- Be flexible and promote positive change



Strategic Plan

3.7 Accountability

EDCL aspires to excellence through accountability to all stakeholders by:

- Routinely evaluating our supports for quality, effectiveness, efficiency and satisfaction
- Implementing change where warranted
- Obtaining verification through third party standards and accreditation

3.8 Communication

In all endeavours, it is essential that concerned parties are well informed and heard. To this end, EDCL engages in active listening and ongoing communication with:

- Supported Individuals
- Families and support networks
- Staff
- Community members
- Other stakeholders

Strategic Directions

1. Service Quality
2. Finance
3. More Inclusive Community
4. Facilities
5. Services

The 2012–17 Strategic Plan includes the five strategic directions noted above. To ensure implementation each is accompanied by one or more sets of goals.



Strategic Plan

1. Service Quality

EDCL will continue to pursue the highest level of quality support and services for the people we serve by ensuring that:

- Staff share our philosophy, are well-trained and effectively utilized
- Efforts to meet compliance and accreditation requirements are routinely planned and evaluated
- All person-directed plans are monitored for progress on a regular basis

Service Quality – Related Goals

1.1 Orientation & Training

Devise a strategy and implement a formalized process to provide standardized orientation and training to new staff that is:

- Scheduled and completed within a pre-determined timeframe following the hire date
- Adaptable for delivery to existing staff for the purposes of reinforcement and consistency in messaging and understanding
- Delivered by identified, dedicated staff who can effectively and consistently communicate the necessary information and expectations to individuals or groups on an as-needed basis

1.2 Enhancing Staff Recruitment, Deployment & Performance

Identify and utilize existing resources and/or methodologies for recruiting and effectively deploying staff who are well-suited to meet the current and future demands of working in the Developmental Services Sector, including:

- Pursue involvement in the provincial core competencies initiative to enhance EDCL's capacity
- Review existing package provided to job candidates to ensure detailed department/location-specific job information is included and that any specialized skills where required, and / or training is provided by EDCL
- Conduct visit of the home and/or program the candidate is being considered as part of the hiring process where determined



Strategic Plan

1.3 Quality Standards and Compliance

Develop the ongoing capacity for identifying, planning and meeting quality standards including accreditation (e.g. a position, or dedicated committee), rather than on an ad-hoc basis

2. Finance

With the goal of positively supporting people that we serve, EDCL will reduce its dependence on the public purse through:

- Innovative cost reduction strategies
- A commitment to entrepreneurial service approaches
- Preparedness for change in the Developmental Services Sector

Finance – Related Goals

2.1 Entrepreneurial Service Options & Revenue Generation

- Investigate an entrepreneurial approach to supports and services
- Investigate feasibility of a planning entity/arm of EDCL to assist individuals and families in navigating the developmental service system and accessing supports
- Determine the feasibility that people supported can participate in revenue-generating activities
- Develop an increased capacity for fund development
- Explore the use of traditional fundraised dollars for services/staffing as opposed to strictly capital purchases

2.2 Preparation for Sector Change

Identify changes, and subsequent impact on EDCL infrastructure relating to the Developmental Services Sector



Strategic Plan

3. Create a more inclusive community

EDCL will endeavour to enhance socialization of the people supported by the association through:

- Improved recruitment and utilization of volunteers
- Innovative strategies that increase EDCL's capacity to manage volunteers
- Partnership with other community groups

Create a More Inclusive Community – Related Goals

3.1 Volunteer Recruitment

Improve recruitment and effective utilization of volunteers/student placements by:

- Identifying under-utilized sources of volunteers
- Investigating new ways of appealing to students and volunteers
- Considering best practices that increase volunteer retention
- Consideration of a Volunteer Coordinator position

3.2 Community Partnerships

Approach other service organizations and groups with the goal of establishing relationships that enhance the role of supported individuals in the community.

4. Facilities

EDCL will maximize the effective and efficient utilization of facilities by:

- Conducting a review of current usage
- Analyzing future service demands
- Devising appropriate plans for expansion or reorganization as required

Facilities – Related Goals

4.1 Residential

- In the event that government funding is not approved, explore funding options for an addition at Reid Woods to provide more common space creating a safe area adjacent to the building for evacuation purposes in case of emergency.



Strategic Plan

4.2 Day Options/Employment

- Re-examine expansion/facility usage related to Life Skills and ARC buildings
- Determine feasibility of housing all community-based supports in one physical location
- Explore the creation of a business plan to address the outcomes of above if deemed feasible

5. Services

EDCL will continue to meet the demand for innovative and individualized services through:

- Expansion of some current initiatives and the adaptation of others
- While pursuing this direction, EDCL will preserve our ability to offer traditional services

Services – Related Goals

5.1 Residential Services

Endeavour to meet the growing demand for residential services by pursuing creative housing options including partnerships with families and other community groups

- Explore how Independent Living Supports could be expanded and/or used in new and different ways to overcome the limited availability of supports in “rent-geared-to-income housing” in the Region
- Explore options for expanding the Trying It on For Size program

5.2 Employment Services

- Expand ODSP Employment Supports
- Explore all available options facilitating the acquisition of additional staff resources required
- Evaluate and define EDCL’s future role in the development and support of client-owned businesses.

5.3 Day Options

- Define and articulate the services offered under the current ARC program
- Examine and articulate a revised direction for the Life Skills program
- Expand the current Education Program



Risk Management Plan

➤ 2015 - 2016



Risk Management Plan

| 1.0 Governance/Organizational | Identify Concerns & Strategy |
|--|---|
| <p><i>Risk that the agency's structure, Board functioning, accountabilities, or responsibilities are not designed, communicated or implemented to meet the organization's objectives.</i></p> | |
| <p>1A) In your meetings with the Board, are issues with Board composition and operations dealt with effectively?</p> <p>1B) Is the ED responsive to Ministry requests?</p> <p>1C) Have the Ministry's experience in dealing with this TPA been positive?</p> | <p>1A) Operational issues are addressed at Board meetings through management and committee reports and relevant correspondence. Board composition is addressed annually by Nominations committee for elections at AGM.</p> <p>1B) The Executive Director and Management team are highly responsive to Ministry Communications. The Board receives a copy of all correspondence from Ministry directly.</p> <p>1C) Ministry risk assessment in this area identified directly, board was satisfied.</p> |
| <p>1.1 Does the Board meet on a regular basis according to agency bylaws, and evaluate the effectiveness of the meetings?</p> | <p>The Board meets five times per year according to By-Laws.</p> |



Risk Management Plan

| 1.0 Governance/Organizational | Identify Concerns & Strategy |
|---|--|
| 1.2 Does the Board document meeting minutes, including key discussions and decisions for reference purposes, transparency and accountability? | All meeting minutes are recorded and kept on site, in addition each Board Member receives a personal copy. |
| 1.3 Are new Board members orientated, either through training or a manual, to the organization's bylaws, policies and programs, as well as their roles and responsibilities? | Each new board member receives on-line training and a board orientation manual. We need to improve the individual Board Member understanding of good governance. |
| 1.4 Are new members of the senior management team orientated, either through training or a manual, to the organization's bylaws, policies and programs, as well as their roles and responsibilities? | Through tours of support/manuals/hiring from within. |
| 1.5 Are roles and responsibilities clearly defined and documented for the Board of Directors in the following key areas: <ul style="list-style-type: none">- establishing and communicating financial and program expectations- monitoring whether expectations have been met- developing and approving policy- ensuring compliance with legal and contract requirements- establishing controls to manage risks that threaten financial viability or delivery of services, and- establishing expectations for the Executive Director's performance | Through Policies and Procedures Manuals and Committees of the Board. |



Risk Management Plan

| 1.0 Governance/Organizational | Identify Concerns & Strategy |
|---|--|
| 1.6 Are roles and responsibilities and authorities for managing the organization clearly defined and documented (i.e. in a job description) for the Executive Director, such that Board expectations will be met? | Yes. Through job descriptions and our Agency Strategic Plan. |
| 1.7 Does the Board ensure that suitable insurance coverage is in place by periodically reviewing the level and types of insurance coverage? | This is reviewed internally annually and the Board is notified of any changes to the coverage. |
| 1.8 Does the Board ensure that succession plans are in place for the Board for continuity purposes? | Through ongoing recruitment of Board Members and work of nominations committee. |
| 1.9 Does the Board regularly assess the Executive Director? | This is done every two years on a four year cycle. In one year there is a comprehensive review completed with input from stakeholders, and in the other year the Board conducts a performance evaluation. The Executive Committee reviews Executive Director Performance in off years. |
| 1.10 Does the Board have a quality assurance program or committee? | Client services committee, finance committee and accreditation committee each evaluate and ensure the quality of the organization. Accreditation was successful with a three year certification being awarded. |



Risk Management Plan

| 1.0 Governance/Organizational | Identify Concerns & Strategy |
|---|---|
| 1.11 Does the Board have a specific Board Member with the financial expertise necessary to lead the organization in a financial capacity? | Board and Committee Composition includes; Local Business People, Auditor, and Bank Manager. |
| 1.12 Does the organization have a process to identify and communicate actual or potential conflict of interest situations? | This is included in the By-Laws and Policy and Procedures Manual. |
| 1.13 Does the Board have a process for recruitment of new Board Members? | Yes. The Board has a nominations committee for recruitment and the various committees of EDCL serve as a feeder to the Board. |
| 1.14 Does the Board regularly review its bylaws and recommend changes to the membership? | The Board should review its bylaws annually for relevance; the Executive Committee could serve in this capacity and make recommendations to the Board to bring forward to the membership. This should be an agenda item for every Annual General Meeting. |
| 1.15 Does the Board establish the parameters for the review and updating of the Strategic Plan? | The Board needs to establish a mechanism for review and renewal of the Strategic Plan. |



Risk Management Plan

| 2.0 Service Delivery | Identify Concerns & Strategy |
|---|--|
| <p><i>The risk that funded services will not get completed or delivered in a timely manner, as expected.</i></p> | |
| <p>2.1 No staff health and safety concerns have been reported in the last two years.</p> | <p>No. Health and Safety Committee, Outbreak policies, sick time, flu shots, and Pandemic Plan.</p> |
| <p>2.2 No client health and safety concerns have been reported in the last two years.</p> | <p>Outbreak policies, Pandemic Plan, Quality Assurance Measures Training for all employees, volunteers and Board Members, abuse training and policies</p> |
| <p>2.3 Does the organization have an internal complaints process that allows it to respond to complaints in a timely and effective manner?</p> | <p>This is detailed in the Collective Agreement Grievance Procedure, Policy and Procedures Manual, Complaint Form, Support Services Manual and the website</p> |
| <p>2.4 Are plans in place to ensure operational continuity in the event of an emergency (environmental, labour relations, etc.)?</p> | <p>Policies: outbreak, generators, bomb threat, severe weather, and town siren for emergencies. Contingency Planning for labour disputes</p> |
| <p>2.5 Does the organization plan for its service delivery requirements (i.e. staffing needs) and establish its service delivery standards?</p> | <p>Tracking staff turnover, GoldCare, identifies staff needs.</p> |
| <p>2.6 Do program managers regularly communicate (i.e. monthly) service delivery results and program performance to the Executive Director?</p> | <p>Weekly – Senior Management meetings, Services Director reports to the Executive Director.</p> |



Risk Management Plan

| 2.0 Service Delivery | Identify Concerns & Strategy |
|---|--|
| 2.7 Does the Executive Director monitor and communicate service delivery results and program performance (i.e. performance measures) to the Board? | This is part of the Strategic Planning process which is regularly reviewed, Board Meetings, AGM, Annual Report, Client Services Committee. |
| 2.8 Are proposed changes to service delivery and/or any significant service interruptions communicated to or approved by the Board prior to implementation? | These are discussed at committee meetings and board meetings. |
| 2.9 Does the Board require updates on Labour issues related to the Union? | The Agenda of the Board Meeting has an item for Union Updates and information on Union Correspondence etc. is included in the Board Information Package. |
| 2.10 Does the Board require a plan for management of operations in light of a deficit in operating funding? | A Board developed policy is in place regarding operational actions and use of Association funds to offset operating funding deficits. |



Risk Management Plan

| 3.0 Stakeholder Satisfaction | Identify Concerns & Strategy |
|--|--|
| <p><i>The risk of failure to meet the expectations of the public, other clients, ministries or other stakeholders.</i></p> | |
| <p>3.1 Does the organization participate in community initiatives/planning tables?</p> | <p>The organization participates in Community Living Ontario, OASIS, DSPAC and participates in the community through the Elmira Maple Syrup Festival and Kiwanis Transit, OADD, SCHRG, Community Development, Newsletter.</p> |
| <p>3.2 Does the organization hold regular consultations with stakeholders?</p> | <p>Members of the Association are involved in the Annual General Meeting, and Membership meetings. Case conferences with families are conducted annually and more often when necessary. Surveys, Website, House Meetings, and Newsletters.</p> |
| <p>3.3 The public/stakeholders are content with the services provided by the agency.</p> | <p>YES. As confirmed by MCSS Representative in their risk assessment review and by positive results from annual surveys</p> |
| <p>3.4 The agency has not received any negative media coverage in the past two years.</p> | <p>NO. Executive Director is spokesperson for media relations.</p> |



Risk Management Plan

| 4.0 Finance | Identify Concerns & Strategy |
|---|--|
| <i>The risk of financial losses, overspending or the inability to meet budgets and plans.</i> | |
| 4.1 Does the organization's documented policy on cheque authorization and expenditure approval clearly outline independent approvals, prior to payment, where: <ul style="list-style-type: none">- The Board authorizes expenditures of the Executive Director,- The Executive Director authorizes the expenditures of management, and- Management authorizes the expenditure of staff? | As outlined in Financial Policy and Procedures Manual. |



Risk Management Plan

| 4.0 Finance | Identify Concerns & Strategy |
|---|---|
| <p>4.2 Are key duties and responsibilities in authorizing, processing, recording and reviewing expenditure transactions divided among individuals such that no one employee is in a position where an error or irregularity is likely to remain undetected in the normal course of their duties? For example:</p> <ul style="list-style-type: none">- Are bank statements and cancelled cheques received and reconciled by a person independent of the authorization and cheque signing function, and subsequently reviewed and approved by the Executive Director in a timely manner each month?- Are two cheque signers, other than the payee, required for each cheque? | <p>As outlined in Financial Policy and Procedures Manual.</p> |



Risk Management Plan

| 4.0 Finance | Identify Concerns & Strategy |
|---|---|
| 4.3 Does the Board approve: <ul style="list-style-type: none"> - all significant and extraordinary expenditures beyond approved budgets, and - Executive Director reimbursements? | The Board approves all significant and extraordinary expenditures beyond approved budgets, and sees the final list of expenditures beyond the budget. The Board approves and signs Executive Director reimbursements. |
| 4.4 Are the cheque signers required to review supporting documentation (i.e. receipts, invoices, and or explanations, authorization, timesheets) prior to signing? | YES. Purchase Orders etc. |
| 4.5 Does the Board have reasonable access to the bookkeeper and financial records on a regular basis? | Finance Committee and signing of quarterly reports. |
| 4.6 Are the organization's assets secure and not prone to theft? | As per Policy and Procedures & verified by annual audit, overview by finance committee. |
| 4.7 Does the organization have documented policies and procedures for financial processes to safeguard against fraud or theft? | YES. As designed by Staff and Auditor. |
| 4.8 Has the organization taken corrective action to address findings or recommendations of audits/reviews? | Policies reviewed and amended at advice of Auditor. |



Risk Management Plan

| 4.0 Finance | Identify Concerns & Strategy |
|--|--|
| 4.9 Does the organization have a line of credit or potential income from other sources (i.e. GIC's, term deposits, etc.) to assist in balancing cash flows? | YES. Line of Credit and Investments. |
| 4.10 Are monthly budget to actual expenditure reports prepared and presented to the Board for discussion at meetings? | Board and Finance Committee. |
| 4.11 In cases of significant budget variances or when financial pressures may exist, does the Board become involved to ensure that management takes corrective action? | Finance Committee recommends to Board. |



Risk Management Plan

| 5.0 Legal | Identify Concerns & Strategy |
|--|---|
| 5.1 Does the organization have mechanisms to track compliance with existing MCSS legislation and regulations or any other legislation, e.g. federal? | All correspondence from Ministry is mailed to Executive Director and Board President. MCSS compliance audits are reviewed with Board. |
| 5.2 Does the organization have mechanisms to track compliance with new MCSS legislation and regulations, or any other legislation, e.g. federal? | All correspondence from Ministry is mailed to Executive Director and Board President. MCSS compliance audits are reviewed with Board. |
| 5.3 Has the organization avoided involvement in litigation over the past five years? | YES. |
| 5.4 The organization is not anticipating legal action in the near future. | NO we are not. |
| 5.5 Does the Board identify its various professional representatives re: legal or financial obligations? | The Board should identify annually at its AGM its various legal representatives and financial advisers. |



Risk Management Plan

| 6.0 Technology | Identify Concerns & Strategy |
|--|---|
| <p><i>Risk that IT infrastructure does not align with business requirements and does not support availability, access, integrity, relevance and security of data. Includes business continuity risk.</i></p> | |
| <p>6.1 The services delivered by the organization are not reliant on computer resources being available, e.g. a system outage would not gravely affect the organization's ability to deliver services.</p> | <p>NO it would not affect.</p> |
| <p>6.2 Does the organization have all of the necessary information technology expertise and equipment for the effective management of services?</p> | <p>The IT is outsourced to Spectrum Global Communications.</p> |
| <p>6.3 Does the organization protect and back-up electronic records/files?</p> | <p>Electronic files are backed up daily and placed off-site in case of emergency.</p> |
| <p>6.4 Does the organization have the capability to manage, use and maintain complex computer technology, including customized programs and software?</p> | <p>The IT is outsourced to Spectrum Global Communications.</p> |
| <p>6.5 Does the organization rely on mostly internal staff to maintain software and/or hardware?</p> | <p>The risk is acceptable because the organization's IT is handled by an internal employee as part of her regular position. Spectrum Global handles any issues that we are unable solve internally and allows for timely corrective measures when needed.</p> |



Risk Management Plan

| 6.0 Technology | Identify Concerns & Strategy |
|---|---|
| 6.6 Does the organization have a Disaster Recovery & Business Continuity Plan, which is both current and which has been tested? | This is an acceptable risk because there are plans in place for specific disasters, and recovery time is predicted to be short with easily retrievable backups of data. |
| 6.7 Does the Board understand the scope and reliance of its business operations and its reliance on technology to implement? | A brief summary regarding technology should be included in the Board Orientation Manual. |

| 7.0 Information | Identify Concerns & Strategy |
|--|--|
| <i>The risk that agency information produced or used is incomplete, out of date, inaccurate, irrelevant or inappropriately disclosed.</i> | |
| 7.1 Has the organization created processes to ensure that knowledge is retained within the organization when staff retires or leaves? | Yes. Archive Room is locked. |
| 7.2 Does the organization have policies and procedures to protect sensitive information and limit access/ disclosures to appropriate situations? | YES. Governed by internal policy and PIPEDA. |



Risk Management Plan

| 8.0 Human Resources | Identify Concerns & Strategy |
|---|---|
| <p><i>The risk that capable and motivated staff will not be available to get the job done. This could be caused by resignations, turnover, inability to hire, lack of skills, strike, injury, etc.</i></p> | |
| <p>8.1 Is the agency able to fill positions with skilled, competent and knowledgeable individuals?</p> | <p>YES. Qualifications/requirements for interviews on postings – DSW Apprenticeship is offered – Policy is to hire from within when possible.</p> |
| <p>8.2 Does the organization have documented HR policies and procedures for personnel such as:</p> <ul style="list-style-type: none"> – health and safety: – delegation of authority: – recruitment: – performance management: – learning and development: – pay, pension and benefits? | <p>Policies and Procedures are documented in the Human Resources Policy and Procedures Manual, Health and Safety Manual and the Collective Agreement.</p> |
| <p>8.3 Has the employee turnover rate been below 6% in the past two years?</p> | <p>Full time turnover in the 2015/2016 fiscal year was 1%. Total turnover rate is 20% which is made up of part time employees and is an acceptable risk. Moving to a different system of ‘lines’ caused some staffing changes</p> |
| <p>8.4 Is there a succession plan for key management positions?</p> | <p>Management Hierarchy Structure.</p> |



Risk Management Plan

| 9.0 What Keeps the E.D. Awake at Night? (Mike Mamot Rule #1) | Identify Concerns & Strategy |
|---|---|
| <p><i>Issues of a broader nature that are long term threats to Association continuity of operation. Legislative changes or labour related issues that cannot control or change but will be expected to manage or comply</i></p> | |
| <p>9.1 Will funding issues affect organization’s ability to continue quality service and maintain a balanced budget?</p> | <p>We are heading into our 5th year with no new operating funding, layoffs have begun and service quality will be affected– and the deeper the cuts, the deeper the effect.</p> |
| <p>9.2 Will EDCL be expected to cover the cost of implementing the Fire Marshall of Ontario’s edict to install sprinkler systems in all of our residential homes?</p> | <p>It is estimated that the cost to sprinkler the remaining homes will be in the neighbourhood of 250K. To date the Government has been silent on who will be responsible for covering the cost. If it is our responsibility, we will have to fund this through fundraised dollars.</p> |
| <p>9.3 Staff responsibility to report abuse, neglect or mistreatment of people supported. Although clearly defined in Policy and Orientation, we still find people not coming forward. Why?</p> | <p>We will continue to rigorously review policies with all employees, and new hires will review at the time of hire, at Orientation. Everyone will read and sign-off at annual Performance Reviews. Stronger discipline will be applied for not reporting, up to and including dismissal.</p> |
| <p>9.4 Statutory obligation to meet Pay Equity responsibilities without Government funding</p> | <p>Annual increases added onto salaries to meet pay equity expectations. The money comes from our own budgets.</p> |



Risk Management Plan

| 9.0 What Keeps the E.D. Awake at Night? (Mike Mamot Rule #1) | Identify Concerns & Strategy |
|---|--|
| 9.5 Heading into bargaining early 2016 with no ability to meet monetary demands | Government funding allowed for salary increases in 2015. Very little possibility of further money coming into the sector again in 2016 |
| 9.6 Implication of new scheduling procedure with full-time employees working fewer weekends | Full-time employees will now work 1 weekend in 4. More part-time presence in the homes on weekends |

Accessibility Plan

A teal graphic element consisting of several parallel lines of varying lengths that form a right-pointing arrow shape, positioned to the right of the main title.

2016



Accessibility Plan

Overview

EDCL is committed to conform to all aspects of the Accessibility for Ontarians with Disabilities Act (AODA) and the Human Rights Code and strives to ensure that all locations owned or operated by EDCL provide barrier free services, supports and employment. EDCL recognizes that key principals of accessibility are independence, dignity, integration and equality.

Please refer to the Accessibility Policy (# 7.04) for more information.

The purpose of the Accessibility Plan is to identify and address accessibility issues at locations owned/leased/operated by Elmira District Community Living, as well as in the community. EDCL is dedicated to identifying and removing barriers that limit and restrict the ability of the individuals that we support, from fully accessing any of EDCL locations and the communities in our catchment area. This plan identifies the following:

- Barriers that were addressed or removed by EDCL over the past year
- Barriers that have been identified and EDCL intends to address as well as any new ones brought to the agency's attention. Completion deadlines may or may not be in place
- Barriers that have been identified but EDCL is unable to address at this time

Types of Barriers

- **Architectural** – any physical factor that makes accessibility difficult for an individual. Examples include; narrow doorways and hallways, stairways, bathrooms that are not physically accessible for all, arrangement of furniture which may restrict easy movement, poor lighting for visually impaired individuals, alarms which hearing impaired individuals may not hear.
- **Environmental** – an item which affects the area an individual spends time in. Examples include; excessive noise, flickering lighting, fragrances which may cause an allergic reaction.



Accessibility Plan

Attitudinal– a negative attitude towards the individuals we support.

Examples include; negative attitudes of neighbors or other members of the community, a lack of acceptance or inclusion, negative language or “labels.”

Financial – anything that may mean, at an organizational level, that a service is restricted or eliminated because of a lack of sufficient finances.

Employment – a workplace that does not provide sufficient flexibility, training or equipment to ensure a productive and satisfying workplace for employees

Transportation – individuals are unable to reach or participate fully in services, activities etc. due to the lack of available and suitable transportation.

Community Integration – limits an individual’s ability to access their community

Technology – limits the ability to navigate websites that are not clear or user friendly

Identification of Barriers

In order to identify any accessibility barriers in the agency, the following methods are implemented:

- A Barrier Identification form is distributed annually to all Board members, employees and any other community members to complete, and which included input from the individuals we support, in order to identify any potential barriers

Ongoing –

- Staff and residents identify any potential barriers and report them to the Managers who then report them to Maintenance. If Maintenance is unable to address or remove the barrier, an outside company is employed to resolve the issue.
- Training is offered in a flexible manner so that as many people are able to participate around their own schedules.



Accessibility Plan

- Accommodations are available to employees who require altered working conditions
- Accessibility Policy is reviewed annually by all employees and Board members. New employees/volunteers/student placements are given a copy upon hire.
- Elmira has been connected to Waterloo by the Grand River Transportation System allowing individuals to be able to access the bus into the city. Training on how to safely ride the bus is provided to individuals who have expressed an interest in riding independently.
- The Joint Health and Safety Committee conduct regular inspections of all agency locations to identify any other ongoing or potential concerns. Maintenance is consulted again to address any concerns.
- The EDCL website meets or exceeds the Level A compliance standard as deemed necessary under the Accessibility for Ontarians with Disabilities Act (AODA) and is reviewed and monitored by the website creator.
- The EDCL website has a link to our Accessibility Feedback Form (see following page)
- Review annually

Communicating the Accessibility Plan

A copy of the plan is located in all agency locations and is available on the website: Elmiradcl.com

Please inform your Manager if you have specific needs and require this Plan in a different format.

See section for Barriers Identified.



Accessibility Plan



Elmira District Community Living ACCESSIBILITY FEEDBACK FORM

We encourage and appreciate your Feedback on Elmira District Community Living’s ability to meet your accessibility needs, in order to better serve the people we support, their families, employees and visitors. Feedback can be provided in the following ways:-

- through email by contacting Laurie Thomson lthomson@elmiraal.com
- verbally to an Employee, Supervisor, Manager or the Executive Director
- completion of this form, and delivery to our Admin Office, 118 Barnswallow Dr. Elmira
attn.: Laurie Thomson Human, Resources Manager

A response to feedback given will be provided within five (5) days of receipt and will be provided in the format requested by the person submitting.

I have difficulty accessing the following goods and services provided by Elmira District Community Living

My accessibility needs would be better met by Elmira District Community Living by providing the following:-

I would like response to my feedback to be provided as follows:-

- mail (please provide mailing address)
- email (please provide email address)
- phone (please provide phone number)
- other (please indicate)

Name (please print)

Date

Signature



Accessibility Plan

Identification of Barriers

In order that we may address any accessibility issues in our locations so that we may remove or repair them, please identify any barriers which may impair any individual (including employees) from being able to fully access our programs or locations. Please include input from any of the individuals we support. Below is a list of some types of barriers, but you are not limited to these examples. Please list any issues on the provided sheet below and return to your Manager by March 31.

Types of Barriers

Architectural – any physical factor that makes accessibility difficult for an individual. Examples include; narrow doorways and hallways, stairways, bathrooms that are not physically accessible for all, arrangement of furniture which may restrict easy movement, poor lighting for visually impaired individuals, alarms which hearing impaired individuals may not hear.

Environmental – an item which affects the area an individual spends time in. Examples include; excessive noise, flickering lighting, fragrances which may cause an allergic reaction.

Attitudinal – a negative attitude towards the individuals we support. Examples include; negative attitudes of neighbors or other members of the community, a lack of acceptance or inclusion, negative language or “labels.”

Financial – anything that may mean, at an organizational level, that a service is restricted or eliminated because of a lack of sufficient finances.

Employment – a workplace that does not provide sufficient flexibility, training or equipment to ensure a productive and satisfying workplace for employees

Transportation – individuals are unable to reach or participate fully in services, activities etc. due to the lack of available and suitable transportation.

Community Integration – limits an individual’s ability to access their community

Technology – limits the ability to navigate websites that are not clear or user friendly. Limited or no access to a computer/tablet or other devices



Accessibility Plan

Identified Barriers

| Location | Barrier Identified | Action Taken | Completion Date |
|-------------------|---|--|--|
| All Locations | Transportation- Grand River bus has very limited hours and a small route through Elmira | EDCL will continue to advocate on behalf of those we support, expand the bus route in Elmira and increase the hours of service | On-going |
| All Locations | Financial - not enough money to provide extra staffing for individuals to stay home for vacation days as desired. | Subsidies for vacations are available for those who wish to go to camp or rent a cottage | On-going |
| ALC | Downstairs training room is not accessible | Training for anyone requiring an accessible room will be offered in the admin building which is accessible | N/A |
| Avenues | Environmental- Loud due to the large number of people attending the program | The participants are grouped into smaller rooms to minimize the loud volume in one area, as much possible. | On-going - Financially impossible to add space to the building |
| TIFS | Entrance, bathroom and downstairs laundry are not Wheelchair accessible | Not for wheelchair participants at this time | Unknown - undecided future of that location plus lack of funding |
| Raising Mill Gate | Transportation for 6 ladies at once is not possible in their van | None - buying a larger van is not in the budget. Staff may use their own vehicle | N/A |
| Admin Office | Employee has extreme sensitivities to scent | Scent-free location | March 1, 2017 |

Technology Plan

➤ 2016



Technology Plan

Responsibility

Responsibility for the Technology plan lies with the Finance Officer with support from the Assistant Financial Officer. Budget allocations are approved by the Executive Director.

- **Technical Skills**

The Assistant Financial Officer will continue to provide computer technical service and support for EDCL's computers/users this will include but not limited to being proactive initiating the technical requirements of EDCL staff so that they are able to improve the services to the people supported by the organization.

- **Contractor Relations**

BlackCreek Technologies/Spectrum Global Communication will be retained to provide technical support of the LAN/WAN infrastructure that includes but not limited to, system administration, monitoring workstations and peripherals and take preventative measures to eliminate downtime and/or malfunctions.

Business Technical Solutions (BTS) will continue to support EDCL's Financial ERP software with ongoing training, upgrades and patches when required.

Campana Systems will continue to support GoldCare, EDCL's scheduling system by upgrading software periodically and maintaining the security of the file server.

Sentrik continues to support EDCL's website with mandatory upgrades, preventing downtime of real-time data being used for the GoldCare scheduling system.

Execulink will continue to supply EDCL with DSL communications for Internet access

Rogers Communication will continue to supply Cable communications for additional reliable Internet access, programed to respond to critical bottlenecks within the existing DSL service provided.



Technology Plan

Backup Plan

The backup plan is focused on backing up the file server and remote locations as follows:

- BlackCreek Technologies ensures remote daily backup are created for all EDCL data and stored safely on their systems.
- A remote backup performs a daily mirror image of the entire server is created and stored on a dedicated computer residing at Avenues. Offsite restores are tested quarterly.
- All remote site computers have an automatic weekly procedure to backup to external backup device attached to the computers.
- A Network Attached Storage (NAS) is installed as a contingency to restore the entire file server and priority workstations. The NAS replaces configuring a duplicate file server as part of the disaster recovery plan.

Hardware and Software

Managed Workplace Cloud platform software is installed on every computer, enabling the software to keep track of EDCL's network inventory and its specifications. The system can generate early warning signals of any upcoming malfunctions of any computers, gateway, etc., allowing the support team to be proactive in their approach to support alerts.

There are approximately 70 devices supported within the organization all standardized in Windows 7 Plus and Microsoft office 2010 and above.

Approximately 15% of computers are older than 8 years and these computers will be upgraded when a frequent user requires upgraded technology to do their job, then the frequent user's computer will be passed down to replace older computers.



Technology Plan

Security and Confidentiality

Meraki Access points have been installed at every remote location, providing a high performance mesh routing that extends coverage to hard wire areas and creates a self-healing network resilient to cable and switch failures. In conjunction with McAfee SaaS (MX Logic) service provider and Symantec.Cloud antivirus (installed on all computers) it can provide secure encrypted emails, preventing spam, viruses, worms and malicious content and attachments.

Goals

1. The payroll preparation takes place over a period of three days from the collection of timesheets to the EFT bank confirmation. It is proposed to research a cost effective method of capturing and approving data generated from employee timekeeping and interfacing with the payroll system. If implemented, it is estimated that the personnel time associated with completing payroll preparation can be reduced by at least 624 working hours or \$14,566 per annum.
2. Some remote sites demand broadband exceeding the capacity that currently exists, namely 215 First Street, Reid Woods and Avenues. IT will research a method to solve these issues and propose an action plan.
3. One of many issues identified is that business information is duplicated and stored on the personal hard drives or on third-party cloud based sites making it difficult for all users to manage, share and search the latest versions of data. The organization will investigate an efficient and cost effective method of creating, communicating and collaborating computerized business information. Further information is documented in the Business Function Measure of this report.



Technology Plan

Outcomes

- Goal:** A number of staff has communicated concerns about their limited knowledge of Microsoft Office. Training sessions will be set up based on the limitations enabling the computer user to be more productive in an efficient manner.

Outcome: some users took advantage of 1:1 training
- Goal:** The MW Cloud platform has identified about 14% of hardware may need to be replaced based on their age, capacity and processors. A budget will be established to replace older computers and peripherals and a plan to update and replenish older tools

Outcome: Approximately 19 computers were configured as either new or filtered down in to the organization replenishing older tools.
- Goal:** Modems were purchased for remote locations more than seven years ago and some locations deliver a download speed that keeps the user from working on their computers when software updates are taking place. Modems need to be replaced to improve the speed and help keep up to date with the technology offered by the service providers.

Outcome: Completed. Replacing modems at the remote sites have kept the sites up to date with the transfer rate of communications from the ISP.
- Goal:** There are numerous IT/computer related projects that the Management team has identified for their future goals in this report. Establishing a detailed needs analysis and a plan of action timeline will prepare the internal support team and make sure that the Managers goals/outcome are completed in a timely manner.

Outcome: Completed
- Goal:** The Ministry have revised and changed their structure of their data collection of financial reporting. The capturing of the data is a manual process and therefore needs to be reanalyzed into what EDCL's existing applications can produce to reduce the time spent delivering the required new reporting structure.

Outcome: Not of value



Technology Plan

6. **Goal:** It has been identified that EDCL can reduce the number of man hours spent on duplicating input when payroll is captured and budgets are prepared. The new upcoming GoldCare schedule will be analyzed to see if the output is compatible with Excel in a way that can be utilized for Budgeting and Payroll purposes. In addition, the benefits will be investigated if the analysis provides positive results.

Outcome: Not enough time

Cultural Competency and Diversity Plan



➤ 2016



Cultural Competency and Diversity Plan

EDCL recognizes that our community is culturally diverse. We strive to be respectful of and responsive to the beliefs, practices and cultural and linguistic needs of diverse individuals with whom we interact, including but not limited to; persons served, personnel, families/caregivers, volunteers. This is reflected in our Policies such as Accessibility and No Discrimination, our Practices, and Mission and Vision statements.

In developing Cultural Competency, it is important that all employees, volunteers and Board Members are aware of the major components involved: Awareness, Attitude, Knowledge and Skills.

- Awareness is the consciousness of one's personal reactions to people who are different from us.
- Attitude is being aware of cultural bias and beliefs in general and carefully examining our own beliefs about cultural differences
- Knowledge in respect to the importance of having our behaviors, consistent with our values and beliefs. ex. using outdated/inappropriate labels for people, without being aware of it.
- Skills involve practicing Cultural Competency every day. Communication is the key way people interact and includes gestures and other non-verbal communication which tends to vary between cultures.

EDCL is committed to community integration and strives to create a welcoming environment reflecting the diverse communities we serve and ensuring that our services, supports and employment opportunities are open and available to all. We are all respectful of the needs of a diverse community which can help to bring about positive supports and working relationships.



Cultural Competency and Diversity Plan

The Plan

Upon entry into our services, individuals served will participate where able, in the creation of a “thumbprint” which gives an overview of the person supported. This will enable the support workers to be aware of any unique experiences and histories that may result in differences in behaviours, values and needs. Also at the time of admission the needs of the person served is reviewed to determine how best their needs can be met. It is imperative that personnel understand, appreciate and respect differences and similarities in beliefs, values and practices within and between cultures. Cultural Competency and Diversity is included in the ‘Welcome to the Association’ handbook.

With the creation of the Individual Support Plan, and at the time of six month review, we are able to review any cultural needs with supported individuals as well as family, friends or anyone else in their support circle. Rights are reviewed annually.

Similarly, employees will offer the employer an awareness of any special considerations, so that we can discuss how best to accommodate requests as needed, and where able so as not to be disruptive to the continuity of services or have a negative impact on the needs of those we support. The Cultural Diversity Plan is reviewed at the time of hire and annually thereafter at the time of the Performance Review. It is also discussed in the ‘Employee Handbook.’

Our goal is to develop a relationship of trust with those supported as well as with employees and all stakeholders by interacting with openness, understanding and a willingness to hear different perceptions.

Satisfaction Surveys



➤ 2016

- ▶ People Supported
- ▶ Family and Friends
- ▶ Employees



Individuals Supported Satisfaction Surveys – Overview

Residential: 0 people responded

- No responses in 2016

Day Supports: 5 people responded

- Overall satisfaction is good with most answers positively to questions.
- The highest rated question was ‘The staff are nice to me and respect me’
- The 2 lowest rated questions were, ‘The staff respect my opinions’ and ‘I can talk to the staff if I am worried, have a complaint or concern’
- 80% said that staff help them to reach their goals.
- 80% said they are happy with what they do at ARC or Life Skills



Individuals Living Residentially

All individuals were offered the opportunity to respond to the survey, with a total of zero people choosing to participate or were able to respond.

| Residential | Yes | Some-times | No | Don't Know | No Response |
|---|-----|------------|----|------------|-------------|
| The staff take time to listen to what I say | | | | | |
| I make my own choices | | | | | |
| The staff are nice to me and respect me | | | | | |
| The staff respect my privacy | | | | | |
| I like where I live and feel safe | | | | | |
| I choose what I like to do in my spare time at home | | | | | |
| I choose my activity on outings in the community | | | | | |
| The staff help me to be more independent | | | | | |
| The staff help me with my goals | | | | | |
| I can talk to staff if I am worried or have a concern and they will help me | | | | | |
| I am happy at EDCL | | | | | |

Comments:

- ▶ no surveys returned in 2016



Individuals Attending Day Supports

| Day Supports | Yes | Some-times | No | Don't Know | No Response |
|---|------|------------|-----|------------|-------------|
| The staff take time to talk with me and listen to what I say | 60% | 20% | | | 20% |
| The staff are nice to me and respect me | 100% | | | | |
| The staff respect my opinions | 40% | | 20% | 20% | 20% |
| The staff help me to be more independent | 80% | | 20% | | |
| I like going to ARC or Life Skills and feel safe going there | 80% | 20% | | | |
| I make decisions about what my goals are | 40% | 20% | 20% | | 20% |
| The staff help me to reach my goals | 80% | | 20% | | |
| I can talk to staff if I am worried or have a concern and they will help me | 40% | | 20% | 20% | 20% |
| I am happy with what I do during my days at ARC or Life Skills | 80% | | 20% | | |

Comments:

- I like my job, bins, garbage, office, windows. On Friday I am busy with bowling day. I like to joke with staff.
- Was told only people who did contracts were paid but feels this is not totally true. I think they should be treated respectfully and show the contracts and who is paid. Fairness should be expected. The staff should be aware of what is happening instead of talking to each other for so long. Bullying occurs and they are not aware of it.



Survey - Family and Friends

Method: Families/Guardians and Friends were provided with a copy of the survey when attending the Case Conferences. Copies were sent to families who were unable to attend. The option was given to sign their names, request a follow up or remain anonymous.

Response: A total of 6 responses were received out of 98 individuals supported. Some of the individuals have PGT's and therefore did not respond.

Target: An overall satisfaction rating of 85% was the target.

Results: The average overall satisfaction rating is 80%. Overall, people are extremely satisfied. One family scored very low on most questions which pulled the averages down overall.

Comments offered:

- Respite family member commented that without support for her son she would miss social occasions that she wishes to attend.
- One family survey said they would like to see more lessons for their son/daughter. Ex. cooking & baking lessons, photography, yoga and fitness classes. They said the yearly IPP has no new ideas, plans or suggestions and staff not open to new ideas proposed by family. They would like an open meeting with the parents where ideas could be discussed. This family is told there are no employers in area that will hire people with disabilities. They believe there are jobs available or that we could create them at ARC. They feel EDCL needs to be open to ideas. The same family said Respite was not run or set up properly and staff didn't respond to issues that parents brought to their attention.



Survey - Family and Friends

Survey Results: Section A: EDCL is Making Sure We Understand the Choices and Needs of Individuals and Families who are in Service today or Who May Want to Access Service from us in the Future

Results: Most of the surveys were missing data for questions 5 to 9.
76% average satisfaction rating for first 4 questions only

| | | 2016 Average Response |
|-----------|---|-----------------------------|
| A. | | |
| 1. | I feel that the Staff of EDCL have a good knowledge and understanding of my family member. | 75% |
| 2. | I believe that my family member is given enough opportunity to make choices in their life and activities. | 70% |
| 3. | I think that the services and supports of EDCL are able to meet the needs of my family member. | 79.5% |
| 4. | I trust that EDCL is able to change the care it provides when the needs of my family member change. | 80% |
| 5. | I think that EDCL would be a good service provider for people who may be waiting for service in the community. | N/A |
| 6. | I wish I had more choice in the kind of staff that are hired by EDCL to work with my family member. | N/A |
| 7. | I would be willing to participate more actively in choosing the staff that work with my family member. | N/A |
| 8. | I believe that the EDCL staff demonstrates the kind of values and attitudes that I want to have shared with my family member. | N/A |
| 9. | I like the personalized decorating that makes my family member's bedroom their own place. (Residential only) | N/A |



Survey - Family and Friends

Survey Results: Section B: Enhancing Relationships through Community Participation

Results: Most of the surveys were missing data and questions 1–4 didn't have results to calculate. One person responded to question 6 and felt that their family member benefited from the TIFS program. 88% average for question #5 only.

| | | 2014 Average Response |
|-----------|--|-----------------------------|
| B. | Enhancing Relationships through Community Participation <i>EDCL is trying to increase the interactions between individuals supported and the community.</i> | |
| 1. | I feel welcomed when I phone or visit at the residence or day supports. | N/A |
| 2. | I am glad about the opportunities that my family member has to participate in the community. | N/A |
| 3. | I believe that it is important for my family member to be able to participate in community activity. | N/A |
| 4. | I like the goals that have been set for my family member to participate in the community. | N/A |
| 5. | I think that good progress is being made to support my family member's achievement of their community goals. | 88% |
| 6. | (T.I.F.S. users only) I feel that my family member has benefited using from the TIFS program and that it will assist in future planning. | 70% |
| 7. | (T.I.F.S. only) I would recommend the TIFS program to other families. | N/A |



Survey - Family and Friends

Survey Results: Section C: Serving with Excellence

Results: Overall score was 83%. One survey was rated extremely low overall. Pulled averages down from a high of 100% the previous year.

| | 2016 Average Response |
|---|-----------------------------|
| C. Serving With Excellence <i>EDCL delivers services in keeping with best practices in developmental service, and achieving standards of excellence.</i> | |
| 1. My family member receives excellent personal care (i.e., personal hygiene, clean clothing, appropriate nutritious meals, etc) (Residential only) | N/A |
| 2. My family member receives appropriate health care (i.e. regular monitoring, response to issues, engagement of doctor, consultation with specialists, etc) (Residential only) | N/A |
| 3. My family member receives suitable support for their behaviour challenges (i.e. actions that might compromise safety or cause harm for themselves or others) | 88% |
| 4. I believe I am kept well informed about the care, activities and circumstances of my family member. | 88% |
| 5. I like the Individual Support Plan process that gives me an opportunity to participate in the planning for my family members care and support. | 83% |
| 6. I think that EDCL does an excellent job in developing and delivering programs and services to support my family member. | 78% |
| 7. I believe that EDCL staff are well trained and well informed in respect of developmental service delivery. | 78% |



Survey - Family and Friends

Survey Results: Section D: Stewardship of Resources to Ensure Sustainability

Results: 72% average satisfaction rating. One survey was rated extremely low overall, pulling averages down.

| | 2016 Average Response |
|---|-----------------------|
| D. Stewardship of Resources to Ensure Sustainability. <i>EDCL manages human, financial and property resources well to ensure they support the ongoing efforts of the organization. The Board of Directors provides ethical and sound governance to the agency.</i> | |
| 1. I believe that EDCL delivers services that are in compliance with all relevant legislation, regulation and policy. | 88% |
| 2. I think that EDCL is a leader in the developmental service sector of services and supports. | 66% |
| 3. I think that EDCL's residences are well furnished and maintained. | 70% |
| 4. I believe that I receive enough communication about EDCL and its work to give me confidence in the agency and its work. | 70% |
| 5. I am aware that EDCL is open to suggestions and comments if I have concerns. | 65% |



Part-time Employees

A total of 120 part-time employees were offered the opportunity to participate in the Employee Satisfaction Survey.

A total of 31 responses were received.

| Part-time Employees | Yes | Mostly | Seldom | No | No Response |
|--|------|--------|--------|------|-------------|
| Do you feel that your job is stimulating and offers sufficient challenges to keep it interesting? | 48% | 52% | | | |
| Do you seek out further opportunities at EDCL? | 52% | 10% | 22% | 6% | 10% |
| Would you ever consider transferring to another home/support for a fresh perspective/ experience? | 35% | 10% | 19% | 32% | 3% |
| Do you actively search for employment elsewhere? | 19.5 | 3% | 13% | 61.5 | 3% |
| Do you hope to move into a management position? | 3% | 6.5% | 13% | 77.5 | |
| Aside from the schedules, do you go on the EDCL website to view updates, postings, articles, etc.? | 55% | 13% | 26% | 6% | |
| Do you feel comfortable approaching your Manager? | 65% | 23% | 3% | 3% | 6% |
| Do you feel your input is valued and respected | 32% | 35.5% | 13% | 13% | 6.5% |
| Do you have another job as well? In this field? Yes= 6 No=17 | 68% | | | 32% | |
| Do you plan to find full-time employment? At EDCL- Yes=6 No = 0 | 23% | 6% | 3% | 13% | 55% |



Full-time Employees

A total of full-time employees were offered the opportunity to participate in the Employee Satisfaction Survey.

A total of 21 responses were received.

| Full-time Employees | Yes | Mostly | Seldom | No | No Response |
|--|-------|--------|--------|-------|-------------|
| Do you feel that your job is stimulating and offers sufficient challenges to keep it interesting? | 62% | 24% | 9% | 5% | |
| Do you seek out further opportunities at EDCL? | 38% | 5% | 14% | 43% | |
| Would you ever consider transferring to another home/support for a fresh perspective/ experience? | 33% | | 43% | 14% | 10% |
| Do you actively search for employment elsewhere? | 14% | 5% | 28.5% | 47.5% | 5% |
| Do you hope to move into a management position? | 19% | | 19% | 62% | |
| Aside from the schedules, do you go on the EDCL website to view updates, postings, articles, etc.? | 28.5% | 19% | 43% | 9.5% | |
| Do you feel comfortable approaching your Manager? | 67% | 33% | | | |



Survey Results Summary

All Employees

The majority of both full-time (86%) and part-time (100%) employees answered 'Yes' or 'Mostly' when asked if they find their jobs to be stimulating and challenging enough to keep it interesting.

33% of Full-time would consider working in a new location to gain a fresh perspective or experience. 52% of Part-time employees would consider a move.

The number of full-time employees who answered 'yes' or 'mostly' as actively searching for employment elsewhere was at 19% compared to part-time employees at 22.5%.

The majority of employees are not interested in moving into a management position; Full-time employees who answered 'yes' or 'mostly' are at 19 % and 81% answered 'no' or 'seldom.' Part-time employees who answered 'yes' or 'mostly' are at 6.5% and 90.5% answered 'no' or 'seldom'



Results Summary

All Employees

68% part time and 47.5% of full time utilize the website for more than schedules (answered yes or mostly)

100% of Full-time and 88% of Part-time are comfortable approaching their Managers.

Part-time Only

The vast majority of part-time employees feel that their suggestions and input are valued with 67.5% answering 'yes' or 'mostly' to this question.

68% of part-time employees have employment outside of EDCL Most held 1-2 extra jobs besides EDCL. A majority of these other jobs were outside the field.

23% of part-time responses indicated that they are planning on finding full-time employment, and 100% of those hoped to find it at EDCL.

Final Thoughts

Overall, part time and full time staff, continue to be satisfied in their positions with EDCL. It also continues to be very clear that the majority of the employees are not interested in moving into a management position.

Outcomes Management Report



➤ 2016

Association Wide Measures



- **2015 Outcome Results**
- **2016 Measures**



2015 Efficiency Measures Scheduling

Performance Goals: To reduce the administrative staffing hours that are devoted to scheduling and call in by 8 hours per week.

Applied To: Staff who create the schedule and do ‘call ins’ for vacant shifts. (not applicable to on-call managers)

Rationale: It is anticipated that the work load for staff who create the schedule will reduce because of the new scheduling system. Staff’s time to perform the ‘call-in’s for shifts will be reduced as a result of the organization’s investment in technology, i.e. StaffStat. This will free up time for staff to perform other administrative duties in the Human Resources department.

Limitations: The new call-in program, StaffStat is an added expense to our already tight budgets. The program will be tested for six months. Savings in staff time must be achieved in order to justify the cost of the program moving forward.

There are no limitations related to data collection and analysis for this performance target.

Desired Outcomes/Results:

- More efficient use of the Scheduler’s and On-call Manager’s time. No need to make numerous calls through the seniority list. The most senior employee responding to the open shift notification will receive the shift.
- To reduce the amount of the time required to develop the schedule.
- To use this time saved to perform other human resources administrative duties.



2015 Efficiency Measures Scheduling

Action Plan:

- A new scheduling system will be implemented in November 2015. This system is part of the Collective Agreement and will be reviewed on an on-going basis through EERC meetings.
- A new ‘call-in” program, StaffStat, will be implemented in October 2015. A review of this program will be completed in March 2016.
- The HR Manager will monitor the amount of time the HR Assistant spends on creating the schedule and filling shifts under the new systems.

2015 Efficiency Measures Scheduling – Results for 2016

In September 2015 Staffstat was introduced which has greatly reduced the time Schedulers and on-call Managers spend in calling employees to cover open shifts.

The Scheduler has been able to assume the responsibilities of the Administrative Assistant when she resigned in the summer of 2015.

Organizational Employment Services



2015 Outcome Results
2016 Effectiveness Measure
2016 Efficiency Measure



2015 Effectiveness Measure Outcome Results

Performance Goal: To increase the current number of volunteers in Day Supports from 5 to 7 people.

Outcome: We increased the number of volunteers by one at both locations to do some one on one activities, reading to a few individuals at a time, playing cards, shredding etc...

Limitations: It is very challenging to find volunteers that can commit to volunteering through day time hours as they have other commitments ie: work or school

Key Findings and Trends:

Future Monitoring: To keep the Manager that is looking after volunteers informed of what the day programs are looking for to hopefully get an interest from a community member that may be able to help out or provide an activity for an hour a week



2016 Effectiveness Measure for Community Participation Supports

Performance Goal:

To increase the number of volunteers in Day Supports from 6 to 7

Applied To:

This goal applies to EDCL participants at Day Supports

Rationale:

Current staff resources are unable to meet the demand of current and future community participation. It is hoped through finding more volunteers that the ISP goals can be achieved

Limitations:

The challenges inherent in seeking out new volunteers

The time of day – Volunteers are required on weekdays when most people are unavailable due to work or school commitments

Desired Outcomes:

To have more/ retain the individuals participating in the community

To provide more in-house activities using volunteers

Action Plan:

Submit requests to EDCL Volunteer Coordinator

To submit an article for the newsletter with specific ideas

To submit an article for churches within the community to be in the local bulletins



2016 Efficiency Measure

Performance Goal:

To actively transition 3 individuals who have identified as an ISP goal their desire to participate in their community, reducing the amount of time spent in the programs.

Applied To:

This goal applies to 1 individual at Life Skills and 2 individuals at Avenues.

Rationale:

MCSS announced the closure of Sheltered Workshops in December 2015. Eventually, work on contracts will not be allowed. It is important that participants have other options when this becomes reality.

Limitations:

Staff time and resources

The availability of volunteer opportunities activities appropriate for individuals

Individuals who cannot be in the community alone which limits their options.

Desired Outcomes:

To have 3 individuals participating in one activity in their community.

Action Plan:

Staff to review all ISP goals

Staff to discuss with individuals (families where applicable) what they would like to do in the community.

Residential Supports

A teal graphic element consisting of several parallel lines of varying lengths that form a right-pointing arrow shape, positioned to the right of the text 'Residential Supports'.

2015 Outcome Results
2016 Efficiency Measure
2016 Effectiveness Measure



2015 Effectiveness Measure Outcome Results

Performance Goal from 2015 (year before):

To reduce the medication errors at Reid Woods and Assisted Living Centre by 10%.

Goal Met?: yes _____ no _____

Describe:

We changed how new staff did their training and did not include any medication training until after their first 4 shifts. In their next 8 shifts of actually working they were to observe the full time staff giving meds then be observed by the full time staff on shift 3x. We did not meet this goal for approx. 50% of the new staff that were trained

Limitations: yes _____ no _____

Describe:

1. Full time staff did not all get observed by Management over the past year due to time constraints and the Supervisor needs to be trained as well so that she may observe the full time
2. When a new staff was hired for an overnight line, once they were done their first 4 shifts of training they would start into their overnight line (usually on with another part time staff) and were not able to be observed doing meds
3. Some shifts do not have medication administration duties (overnights and some of the shorter shifts) so if that was in their first 8 shifts, they did not have opportunities to be observed doing meds
4. By having them be observed on shift as opposed to in a training shift it was more difficult for the full time staff to leave their duties to assist with observing



2015 Effectiveness Measure Outcome Results

Key findings and Trends: yes_____ no_____

Describe:

Future Monitoring: yes __x__ no_____

Describe:

We will be changing how we do the training for new staff and adding 2 training days for full time staff to be observed together rather than trying to catch them on shift (and when the Manager has time)



2015 Effectiveness Measure Outcome Results

Performance Goal from 2015: We intend to evaluate what would be effective at each site and structure staff meetings that better meet the informational needs of each program.

Goal Met?: yes_____ no ___

Describe: We did not get 80% attendance at staff meetings. Staff meetings have been scheduled for times that are the least disruptive to the individuals we support. This has the corollary benefit of decreased distraction for the staff participating in the meeting. We have added a meeting and run four per year. The average staff attendance for the 2015–16 fiscal year was as follows:

| Program | Average for 2015–16 meeting attendance |
|---------|--|
| Eagle | 76% |
| Crane | 76% |
| RMG | 70% |
| Centre | 54% |
| First | 42% |

Limitations: yes ___ no _____

Describe:

1. Part time staff have other full time employment or part time work that make it challenging to attend meetings outside of their regularly scheduled shifts.
2. Day care access has also been cited as a barrier

Key findings and Trends: yes ___ no_____

Describe: In four of the programs it was noted that attendance has increased as the year progressed.

Future Monitoring: yes ___ no_____

Describe: We will continue to evaluate and adjust staff meetings to make them a responsive venue to impart information and build team.



2016 Efficiency Measure Medication Training

Performance Goal:

To enhance our medication training for new staff at RW and ALC as well as developing a “train the trainer” class for the full time staff at these 2 locations.

To observe the full time staff administering medications on a yearly basis as stated in the medication guidelines

To ensure that full time staff who will be training new staff are teaching how to administer medications properly following the medication administration guidelines

To reduce the number of medication errors

Applied To:

New staff hired for RW and ALC

Full time staff that train new staff on medication administration at these 2 programs

Rationale:

By changing how new staff’s training shifts are set up – by having the last shift as a medication observation/training shift only, will help to have the new staff’s focus solely on the medication administration.

By doing a “train the trainer” style class for the full time staff, this will allow us to ensure that they are aware of any medication changes in the guidelines, do samples of how to change things on the MAR sheets and give them a quiz to keep them educated and current.



2016 Efficiency Measure

Medication Training

With having the training more focused for new staff and observing the full time as trainers, our hope is to decrease the number of med errors that occur.

Limitations:

- Staff switching their training shifts so we have to adjust the days ensuring the last shift is always the medication observation shift.

Desired Outcomes:

By changing the training focus for new staff and doing a trainer class for the full time to be observed teaching new staff how to administer meds, we are ensuring that all staff are well trained before they start giving meds outside their training shifts. With more training this will help decrease the number of med errors.

Action Plan:

- Supervisor that sets up new staff training to follow a set schedule with having the last shift as the medication shift (they will be observed 2x, do their med test and review the med guidelines).
- Manager/Supervisor to set up 2 classes for full time staff (train the trainer), to review med guidelines, hands on observations of them teaching a new staff how to properly give meds following the administration guidelines and write up samples of how to change information on the MAR sheets.

Respite Services



2015 Outcome Results



2015 Effectiveness Measure Outcome Results

Describe: To implement and evaluate four communication strategies.

Goal Met?: yes_X_____ no _____

These strategies are:

1. One location for new information
2. Making respite staff meetings mandatory
3. Track groceries at the program
4. Provide day programs access to the electronic respite calendar

Limitations: yes _____ no _____

Describe:

Key findings and Trends: yes__X__ no_____

Describe:

1. The communication binder has worked extremely well to disseminate changes in information to all respite staff. There is a sign off sheet with the changes and it is consistently signed off by staff each month.
2. When we made respite staff meetings mandatory for 2015–16 it increased attendance to double what it was in the previous year. The high level of engagement from staff has really assisted in improving communication.
3. The grocery tracking form at the program site allows all staff to see what has been purchased. This has made it easier to stay on target with the budget. Staff know what has already been spent based on



2015 Effectiveness Measure Outcome Results

- the spreadsheet and can tailor their spending to stay within the framework of the weekly allotment.
4. The day programs access the respite calendar and it keeps them informed about who in their services will be going to respite. This assists with a smooth transition from one program to the next.

Future Monitoring: yes no

Describe: To maintain open, effective communication at Respite it is vital to regularly review the mechanisms we have in place to facilitate this. We will continue to seek feedback from staff at meetings and track that documents are read.

Trying it on for Size



2015 Outcome Results



2015 Effectiveness Measure Outcome Results

Performance Goal from 2015: To increase participant and their supports participation in skills building in between stays at Trying it on for Size. We would like to see at least three hours of practice in between stays.

Goal Met?: yes__X___ no ____

Describe: This exercise was rolled out to 9 participants in 2015-16. The idea was unanimously embraced by all participants. The follow through was the more challenging aspect.

| Percentage of the total participants | Level of participation in the skills building home challenges |
|--------------------------------------|---|
| 89% | Attempted |
| 56% | Completed |
| 44% | Improvement recognized |

In terms of skill development, four out of five participants who completed their skills building home challenges saw an improvement in their skills development from one TIFS stay to the next. Practice in between stays makes a difference.

Limitations: yes __X__ no ____

Describe: The motivation of families and participants to work on skill development between TIFS stays.

Key findings and Trends: yes_X___ no____

Describe: Skills building is most successful when it is translated from a program to the home environment for continued practice. In many cases to practice new skills means shifting family roles to provide more space for independence for the participant in the family unit.

Future Monitoring: yes ____ no__X__

Describe: When the skills building challenges are followed through and completed they improve skills. We will continue to offer them to all participants.

Supported Independent Living

A teal-colored graphic consisting of several triangular segments radiating from a central point, forming a fan or arrow shape pointing to the right.

2015 Outcome Results



2015 Efficiency Measure Outcome Results

Performance Goal from 2015: To monitor the efficiency of the electronic tool used for mandatory statistical data collection of direct staff hours spent with individuals in ILS. The goal is to maintain or decrease the time spent in record keeping by continuing to use the electronic tool to collect data with.

Goal Met?: yes no

Describe: The electronic tool has consistently provided a way to collect data in a more expeditious manner than paper copy. It reduces time in creating, entering, filing and storing the information. It also puts it in a format that can easily be manipulated to glean specific data.

Limitations: yes no

Describe: The information cannot be entered if there are technological impediments such as internet failure.

Key findings and Trends: yes no

Describe: The quantity and accuracy of information collected has improved from inception. The staff working at ILS have become versant in using the data collection tools.

Future Monitoring: yes no

Describe:

Business Function Measure



- **2015 Outcome Results**
- **2016 Performance Measure**



2016 Efficiency Measure

Performance Goal: To establish a more efficient and cost effective method of training for mandatory training requirements.

Applied To: All Direct Support employees and administrative employees where applicable and pertains to: NVCI, First Aid, CPR, Violence in the Workplace, WHMIS. Currently use 'abc etc...' for on-line WHMIS and Violence in the Workplace training but it has limited training components and is expensive.

Rationale:

More on-line training will help to eliminate the amount of time and money spent on in-class training and reduce or eliminate employee replacement costs. It will be a flexible option for all employees, enabling training to be completed as time allows, with everyone being aware that deadlines required to complete it will be in place.

Limitations:

Some employees are not comfortable using a computer

Desired Outcomes/Results:

- Replacement staff cost savings
- More efficient use of Manager's time i.e. 2 Management NVCI trainers
- Future use of other modules available through on-line training when subscribing to a company offering annual subscriber fees, which allow you to access their entire training library
- Electronic tracking of employee training completion dates

Action Plan:

- Explore affordable on-line training options

2016 Outcome Results

Performance Goal: To decrease the amount of paper used association wide, beginning with the HR Department of the Administrative Office, by introducing the use of electronic signatures.

Results:

- The Human Resources Policy and Procedure Manual is now in an electronic format and available to employees on the EDCL website. A hard copy is kept in the Administrative Office

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2016 Efficiency Measure

Performance Goals:

- To establish a more efficient and cost effective method of training for mandatory training requirements
- Move all other Policy and Procedure Manuals to electronic versions
- Managers will begin using electronic Signatures for Annual Document Review forms

Applied To:

- All Direct Support employees and administrative employees where applicable and pertains to: NVCI, First Aid, CPR, Violence in the Workplace, WHMIS. Currently use 'abc etc...' for on-line WHMIS and Violence in the Workplace training but it has limited training components and is expensive
- Managers/Services Director will use electronic signatures as applicable

Results:

Exploring affordable on-line training options.

Managers and Services Director trained in the use of electronic signatures



2016 Business Function Measure

Performance Goal: The agency will investigate an efficient and cost effective method of creating, communicating and collaborating computerized business information.

Applied to: All programs.

Rationale: One of many issues identified is that business information is duplicated and stored on the personal hard drives or on third-party cloud based sites making it difficult for all users to manage, share and search the latest versions of data.

SharePoint is a platform used for creating, communicating and collaborating information. It's built from individual components that can be mixed and matched to make your own custom solution. It will allow the agency to connect employees using applications that they are already familiar with, like Microsoft Office, which integrates in to SharePoint. It simplifies how people find and share information across boundaries, enabling better informed decisions. It unifies the employees because the information resides in the cloud allowing people to communicate, collaborate through the Internet from anywhere, thus being more efficient and cost effective.

This was a performance goal for 2014 and was not completed.

Limitations: Cost

Desired Outcomes: Increase an efficient, cost effective and secure method of creating, communicating, collaborating and sharing data across the agency and beyond.

Action Plan: **Year one:** research and develop a cost/benefit analysis
Year two and ongoing: Implementation if plan is accepted.

Outcome Results for 2016: Not enough time

Service Access

- **Service Access Performance Goals**
2015 Measure Results
2016 Performance Measures



2015 Measure Results for Community Participation Support and Respite

Performance Goals from 2015

- ▶ **Goal #1:** To increase revenue in Passports by 5% for the fiscal year 2015–2016

- ▶ **Goal #2:** To connect with and educate Individuals and Families who hold Passport Funding about the supports and services EDCL has to offer in Day Supports and Respite.

Goal Met?: yes x no ____

Describe:

- **Goal #1:**
 - This goal was met. The Passports revenue increased by 36% over from 2014–2015 to 2015–2016

- **Goal #2:**
 - This goal was met.

Limitations: yes x no ____

Describe: For both goals

- The amount of Passports funding is not adequate for the supports and services the individuals and families want/ require.
- Individuals who cancel a pre-planned activity with a staff and the staff still gets paid which erodes the limited funding.
- The attendance at the Passport Fair in the winter was low and not many were from within the Elmira catchment area.



2015 Measure Results

for Community Participation Support and Respite

Key findings and Trends: yes__x__ no_____

Describe:

Goal #1:

- As part of the Ministry's transformation of services announcement in 2015, funding for Passports increased significantly across the province to eliminate the waitlist. For EDCL the number of individuals with Passports funding seeking our supports increased from 10-15 and the dollar amount increased by 36%.
- In April 2015, to meet the needs of this influx, new administrative forms and a system of recording expenses and hours was created; policies were updated; a contract with families was created; an administration fee was charged on each contract and a Passports Facilitator was hired for 6 months.
- Tracking of hours and expenses by Primary Support Staff prove to be time consuming. The new system put into place will hopefully streamline this process.
- Two staff have been hired to provide one to one support to 3 individuals. Individuals living residentially who have Passports have had the opportunity to explore their community.



2015 Measure Results

for Community Participation Support and Respite

Goal #2

- Services Director and CPS Manager joined POWR group which is made up of agencies in Waterloo Region. A one page flyer was created and is included in all new Passports packages to families. Also, CPS Manager has obtained ideas to offer in Elmira.
- Passports Community Developer did presentation at April 2015 General Meeting educating families about passports
- CPS Manager has attended Passports Fairs
- For individuals who live locally, CPS Manager sends out information about events, classes, etc.
- All individuals and families who attend CPS supports have been encouraged to apply for Passports if they haven't done so already.
- Some families do not know about Passports or don't think their family member needs it.

Future Monitoring: yes no

Describe:

- Goal #1 – Will set a new goal to increase Passports revenue by 10%
- Goal #2 – Continue to educate families through emails, newsletter, etc.; keep in contact with POWR group and reach out to the high schools to educate families and individuals about EDCL services.



2015 Measure Results

for Residential, SIL, TIFS, Respite

For the following programs: Residential Services, Supported Independent Living, Respite and Trying it on For Size

- ▶ **Goal #1:**
 - That EDCL will respond to individuals and families referred to any of the above listed programs within three working days 100% of the time.
- ▶ **Goal #2:**
 - In the event that the referral is determined to proceed to service provision, that an transitional individual plan will be developed and that service will commence within 60 days of the date of referral 100% of the time.

OUTCOMES

Residential:

Both goals were met in this area.

Thirteen referrals were received for Reid Woods vacancy from April 2015. Vacancy filled in February 2016.

Reid Woods vacancy declared in January 2016. Filled April 2016

Vacancy at RMG declared in March 2015; filled April 23 2015

Supported Independent Living:

No vacancies were declared.

Respite:

No vacancies were declared.

Trying it on for Size (TIFS):

Eleven referrals received. Ten were contacted within the 3 days.



2015 Measure Results

for Residential, SIL, TIFS, Respite

Key Findings and Trends:

Residential:

- Typically a vacancy at Reid Woods does remain open longer. This was the longest a vacancy has been open. Both vacancies were filled with women from out of the Waterloo Region. Many families, while want the placement, are reluctant to have their family member move into a home with 11 other individuals. The Day Program, Avenues, suited the needs of all applicants.
- Two Transitional Aged Youth referrals were received. The management team at this time decided on to create a residential home for the two gentlemen.

Respite:

The demand for Respite exceeds what is available. There were no vacancies this year, but families did use the respite program for emergency situations or planned vacations. The cost for this Respite is not subsidized and is a hardship to many families who want to use it.

Trying it on for Size:

One of the individuals was not contacted within the 3 days as someone else was charged with the responsibility to make contact, but was not told of the parameters.

Future Monitoring:

Residential:

- An addition was put on Reid Woods to give the residents and staff more living space. Vacancies in this home continue to take longer to fill. This year, discussion will happen with the Ministry to decide



2015 Measure Results for Residential, SIL, TIFS, Respite

whether or not to reduce the numbers in this home and transfer funding to other more desirable homes to meet the needs of individuals on the waitlist.

Supported Independent Living:

- In the SIL program, the Direct Support Staff position has been changed to a Primary Support Staff position which allows for a split of case management responsibilities. This has proven to be beneficial to the individuals in the program. Building number two in the Field of Dreams will be built by the fall of 2016, but there will be no expectation for SIL staff to take on more responsibilities.
- A proposal to the Ministry for an enhancement of hours to the SIL budget will be done in the fall 2016.

Trying It on for Size:

- Possible partnership with the school board and operating a program out of an apartment in the KW region has not moved forward. No commitment from school board at this point.
- A proposal to expand TIFS into KW region will be revisited in 2016.
- The blog will continue and the TIFS website will be used as an avenue for information sharing and connecting participants and families.
- Staff will continue to follow up with participants and families up to five years and track their successes and living situations.

Respite:

- We will continue to offer Respite during the week at Centre and on weekends at TIFS on a fee for service basis.

The practice of contacting families and setting a transition plan consistently happens within timelines set out for six years. While this practice will continue, it will not be reported on yearly.



2016 Measure

for Community Participation Support, Respite, and Trying It On For Size

Performance Goal:

To get information about EDCL’s CPS, Respite and TIFS programs to students in the Special Education class at Elmira District Secondary School (EDSS) and their families.

Applied To:

All students who attend the Special Education class at EDSS

Rationale:

EDCL wants to provide information about services available to students and their families before graduating to prepare them for the transition from school to community.

EDCL wants to build relationships with students early and to educate them and their families about services available in their community. EDCL wants to help make the transition from school to community as easy as possible for students and families.

Limitations:

The willingness of the faculty in the Special Education class at EDSS to be open to providing us with opportunities to engage with students and families.

If presentations can be done, the number of individuals and families who would be interested.

Desired Outcomes:

To have something established in the community for students when they are finished school.



2016 Measure

for Community Participation Support, Respite, and Trying It On For Size

Action Plan:

Services Director will make contact with the Special Education faculty in late September.

To set up a time to meet with CPS and Residential Manager and faculty.
To set up presentations to students and families.



2016 Measure

for Community Participation Support, Passports

- ▶ **Goal #1:** To increase revenue in Passports by 10% for the fiscal year 2016–2017
 - **To Whom the Goal Applies:**
 - All individuals who hold Passports Funding in Waterloo, Wellington and Huron Perth regions.
 - **Data Collection:**
 - Data collected will be based on referrals from DSO and from individuals and families themselves seeking service from EDCL.
 - Monthly reconciliation of funds being used for the individuals is done by the Financial Officer and submitted to the Passports office.
 - Passport Funding Agreements are completed annually by the individuals and families and submitted to the Passports Office.
 - **Rationale:**
 - Individualized funding is the future in Developmental Services. Passports is a form of this. To remain viable, EDCL must adapt their supports and services to meet the needs of individuals' with Passports funding.
 - Passport funding creates more employment for EDCL employees.
 - New revenue generation and opportunities is part of the Strategic Plan. Passports is a way to generate revenue as an administration fee is charge on each agreement.
 - Affordable housing is being offered in Elmira and more individuals are moving out on their own with no supports. These individuals would benefit from applying for Passports Funding.



2016 Measure for Community Participation Support, Passports

- **Limitations:**
 - It is unknown from year to year the number of people who will receive Passports in our catchment area. The process for funding is arbitrary and at the discretion of the MCSS in conjunction with the regional Passports Offices.
 - Supports and services that EDCL offers may not be what Individuals are seeking.
 - Education events sponsored by DSRC may be limited or not occur each year which will limit our ability to connect with families.

- **Action Plan:**
 - Day Supports Manager and Respite Manager will attend education events sponsored by DSRC.
 - Passports Coordinator will speak at a General Meeting
 - Marketing will be done in local newspapers
 - Initial meetings with individuals and families with Passports funding will be held with the Services Director and appropriate Manager. Then the manager and the individual/family will create a plan to utilize their funds based on the guidelines of Passport Funding.
 - The Day Supports Manager will connect with individuals who currently receive support through EDCL and encourage them to apply for Passports.
 - The Residential Manager will encourage individuals living in affordable housing in Elmira to apply.
 - The Day Supports Manager/Respite Manager and staff will help individuals create a plan using their Passport Funding.

Data Integrity



Data Integrity

In order to ensure the integrity of this Management Report, the data collection process was taken very seriously.

Data was collected with the goal of being accurate, reliable, valid and complete.

Accuracy is ensured by the use of data from sources that have been reviewed externally where possible. Internal data is reviewed to ensure accuracy.

Reliability means that data collection is performed consistently, so results could be reproduced if needed. Results were measured directly from collected data, which comes from reliable internal sources. By including data relating to all individuals supported in each program there are no assumptions due to sampling.

Validity means the data measures what it is supposed to measure. For each management outcome, the appropriate data to collect was determined in advance of collection to ensure that the appropriate measures would be collected. Once collected, all data was assessed for validity.

Completeness ensures that results do not become biased due to the selective collection of data. To avoid this, data was collected for every individual or outcome, and statistical sampling methods were not used.

Data for Characteristics of Persons Served:

Data was collected by the Manager of each program from records maintained about individuals supported by EDCL. Data is gathered about individuals when they first enter EDCL's services, and is updated annually as a part of the Person Directed Planning process.

Data for Effectiveness and Efficiency Measures:

Data was collected from a variety of sources, including audited financial statements, reports to funding bodies, Person Directed Plans, ACCPAC accounting software, GoldCare scheduling software, the EDCL Strategic Plan, and management records.

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