



clements centre
for **FAMILIES**

Outcomes Management Report
April 1 2019 – March 31 2020

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Introduction

This Outcomes Management Report - Results Summary is based on data collected by Clements Centre Society and covers the period April 1st, 2019 to March 31st, 2020.

Programming changes and extenuating circumstances of note during the report period were as follows:

- ❖ COVID 19 was only beginning to affect service delivery in March before the end of the fiscal.

A copy of the Outcomes Report is provided in its entirety to members of the Board of Directors, the CEO, Program Directors and Managers and to key funding and community stakeholders. It is also posted on the agency web site and is made available to others upon request.

Findings from the Outcomes Management Report are distributed to employees and available to clients and other stakeholders.

Quality Improvement Plan – Summary Goals for 2019-2020

Community Living/Adult Services

Community Inclusion

- The focus for the next while is on the physical environment at South End. We are working towards the construction of a new building to address the numerous concerns with the current space. A general contractor has been enlisted, building permit obtained and we hope to begin construction fall of 2020.

Staffed Residential

- Thanks in large part to community and grantor support, a number of capital projects were completed at the residences this fiscal. The goals moving forward are to continue to ensure the health and safety of employees and residents during the pandemic. One residence is planning the transition of a young adult, which may be affected by the pandemic.

Outreach

- To address the effect of continuous intake on outcome measures, we plan to adjust program goals for the upcoming fiscal.

HomeShare

- The 2020-2021 fiscal will see a review of current outcome targets and strategies to ensure sufficient coverage during employee absences.

Sundrops Centre For Child Development

Early Intervention Therapy

- Development of, and move to, the new facility remains a priority.
- Manage the pivot to a continuum of services that includes virtual care.

Child Care Resource and Referral

- Manage the pivot to a continuum of services that includes virtual care.
- Develop and build relationships with families by attending programs at in Duncan.

- Maintain and further invest in community partnerships with Hiiye 'yu Lelum, Cowichan Early Years Table, Aboriginal Success by 6, Coast Salish Employment & Training Society (CSETS), Ya Ya Tul Early Learning Table, Island Health, Vancouver Island University, CCFLB Licensing, School District # 79, Global Vocational Services, Cowichan Green Society, and Cowichan Child Care Council.

Children and Family Support

- Manage the pivot to a continuum of services that includes 'destination' camps, virtual care, delivery of activity kits.
- A long-term goal is to provide service to families living in the south Cowichan area, this would require contractual support from Ministry for Children and Family development.

Behavioural Support

- Direct contact with parents/families has indicated a general level of satisfaction with both the plans and the service however, we would prefer to have survey results to include. We will discuss with families the best way to collect that information in an objective manner. With continual intake, perhaps the annual survey does not work for families. Instead, we could leave the survey open year-round and offer families the link as they exit the service.

2019-2020 Outcomes

Community Inclusion Services

Domain	Objective	Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome
Effectiveness	Individuals will achieve or meet one community based goal.	% of people who achieve a goal	Everyone in the program	Annually	Individual service plans. Data tracking.	Manager	100%	80.2%
Efficiency	Maximize number of persons served	Number of globally funded positions filled	Everyone in the program	Annually	CLBC contracted capacity and periodic reports	Manager	100%	93%
Access	Meet the changing needs of the persons served. (related to aging, mental health etc.)	% of accessibility requests successfully accommodated	All individual requesting a health or mobility accommodation	Annually	Accessibility report	Manager	90%	See notes below.
Satisfaction	Individuals are satisfied with service	% of individuals who indicate overall satisfaction	All individuals completing the survey	Annually	Satisfaction Survey	Program Director	90%	100% of respondents indicated service was Acceptable or Excellent

Interpretation of Results

Effectiveness: AL/LOC: Of the 54 individuals served in this reporting period, there were 4 who completed first goal plans, 6 who had no community based goals, 3 who exited or were deceased, 2 still to do their first goal plan, 2 who are overdue due to rescheduling requests by family, and 3 who did not meet their CI goals. The low numbers in both programs are a reflection of the aforementioned. Of the individuals who

had set CI goals in the previous reporting period, and who did not exit, the percentages are AL – 87% met LOC 85% met. Where an individual is served in both programs, their results have been included in the numbers for both programs, regardless of where the bulk of their time is spent.

Of the 16 individuals served in this reporting period, a number are overdue for ISP reviews due to rescheduling requests by family and others due to the Covid closure, and 1 did not meet any of their CI goals (goals were set just before Dementia became obvious), and 3 others met all but 1 goal; the percentage of goals achieved are: SE - 85% met, PIC - 98% met.

Efficiency: LOC is near capacity, A/L has slightly more room. There are no current referrals for either program. The South End program has a referral that is on hold until the individual moves to the area. The Yellow House, Next Step and CI programs are all at capacity.

Access: When surveyed, no respondents identified any barriers to accessibility. Program managers and employees however, often report items they would like to see addressed to improve accessibility and collaborate with community professionals to develop related plans. Those professionals commonly include Health Services for Community Living (OT, PT, SLP), Behavioural Consultant, Developmental Disabilities Mental Health Team among others.

Action Plan

The focus for the next while is on the physical environment. At the South End this involves the construction of a new building, for other programs the goal is to address capital requests to ensure health and safety as well as the best use of space for the growing number of referrals.

Our aim is to continue to support individuals with the achievement of their CI goals, while we recognize that individuals facing barriers related to aging are often less likely to set goals related to increased community inclusion. The effects of the COVID pandemic will certainly affect our efforts to offer group based programming in the future. Program managers will work with the Program Director and Clements Health and Safety committee to develop strategies that ensure the health and safety of everyone moving forward.

Staffed Residential

Domain	Objective	Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome
Effectiveness	Individuals will experience stability on their living arrangements	# of moves between or out of placements	Everyone experiencing a move.	Annually	Individual file review	Manager	0	Ryall – 0 Marchmont – 1 Campbell - 0
Efficiency	Maintain required number of service hours provided to persons served.	Number of service hours per residence	All residents	Annually	CLBC Service Level Hour reports	Program Director	90%	100%+
Access	Accessibility needs related to health and mobility will be accommodated.	% of accessibility requests successfully accommodated	All individuals requesting a health or mobility accommodation	Annually	Individual file review	Manager	90%	1 outstanding @ Marchmont home
Satisfaction	Individuals are satisfied with service	% of individuals who indicate overall satisfaction with service	All individuals completing the survey	Annually	Satisfaction Survey	Program Director	80%	100% of respondents indicated the service was Acceptable or Excellent

Interpretation of Results

Effectiveness: No changes in living arrangements at Campbell. One resident was hospitalized for longer period and admitted to PAC at the end of the year. A longtime resident who lived at Marchmont passed away in the fall, a very sad time for everyone. No changes to living arrangements at Ryall.

Efficiency: All three homes over delivered service hours this fiscal. Over delivery can result from resident vacations and hospitalizations. We attempt to recover costs for hospitalizations from the Health Authority and report over delivery of service hours to the funder.

Access: Significant investment in our residences this past year to ensure Clements provide the types of support necessary for the comfort and safety of each resident – no significant upgrades identified for the upcoming year.

Action Plan

Campbell – ensure health and safety of all involved as the resident returns from PAC.

Marchmont anticipates a new resident who is transitioning into adulthood and CLBC services. The plan is to ensure a smooth transition while maintaining the health and safety of all involved.

With the current and ongoing COVID 19 pandemic, the focus has been on ensuring the health and safety of those living and working in the residences. The program managers will work with the program director and the health and safety committee to strategize on best next steps moving forward and to ensure effective communication with individuals served and their families.

Interpretation of Results

Current service delivery and administration ensured outcome measures were met, health and safety of residents was maintained.

Outreach Services

Domain	Objective	Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome
Effectiveness	Individuals will achieve one goal identified in their ISP	% of people who achieve one goal	Everyone in the program	Annually	Service Plan	Manager	90%	SILP/PSI 81% SEP 76%
Efficiency	Maintain minimum number of service level hours to deliver program	Number of service hours provided to each individual	Everyone in the program	Annually	Service level hour tracking	Manager	100%	Under-delivered.
Access	Individuals receive support to access services they need and for worksite accessibility	Percentage of accessibility requests accommodated	All individuals requesting support to access a community service	Annually	Satisfaction survey Client File	Program Director and Program Manager	80%	Achieved -There were no requests noted in the satisfaction survey.
Satisfaction	Individuals are satisfied with service	% of individuals who indicate always or most of the time in the satisfaction survey question	All individuals completing the survey	Annually	Satisfaction Survey	Program Director	90%	100% of respondents indicated SILP was Acceptable or Excellent. 86% for SEP.

Interpretation of Results

Effectiveness: 33 individuals in SILP measured for effectiveness. 27 achieved at least one goal. 6 new/recent referrals were not included in the tally. Some individuals supported had difficulty setting goals or maintaining contact with support staff to work on those goals. Some goals set seem to be more about what others want for them, so commitment to working on those goals is minimal, at best. Staff hope to assist the individual to explore their own realistic goals more for future ISPs.

28 of 37 job seekers have found employment; many are long-term employees and clients. One new referral not included in tally. *COVID layoffs not included in this information*

Ten new referrals since April 2019. Three of those files are now closed; two found employment. The remaining seven are under-employed (in terms of their goals) or still seeking employment.

Efficiency: As is common, Clements under delivered service hours this year. Persons supported by SILP and PSI programs have extremely changing needs for support. They often choose not to receive service for periods of time and then, during crisis, require support and often at increased levels. CLBC is aware of the situation and each individual circumstance is reviewed as appropriate with the CLBC analyst.

Access:

Accommodations by staff: extended office hours to meet the needs of persons served and/or their employment situation, meetings held where individual is comfortable (e.g. Home, coffee shop), service plans created through most comfortable means (e.g. Informal conversations made into formal plans, through texting), service plan goals re-written by request of the client, not only at 6 month or annual intervals, requests for specific workers are honoured, if possible.

Common accessibility concerns for those supported are housing and transportation.

Action Plan – Support for housing has been included in our strategic plan and is a focus of much support for specific individuals. Program staff and management are working with community groups to ensure the voices of those we support are part of the ongoing conversation related to housing and transportation.

Home Share

Domain	Objective	Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome
Effectiveness	Home share contractors will feel supported by CCS	% of home share contractors that feel support offered by CCS meets their needs.	Home share contractors who have provided services for three months or more	Annually	Survey	Program Director	85%	85% indicated Excellent or Acceptable 15% indicated services needed improvement.
Efficiency	Maintain appropriate caseloads	Average caseload/FTE	All home share coordinators	Annually	Caseload lists	Home share coordinators	No more than 25 clients per FTE	Unmet
Access	New referrals placed within 60 days	Percentage of individuals placed within 60 days of referral	All referrals	Annually	Files of persons served – intake forms	Home Share coordinators	75%	60%
Satisfaction	Individuals are satisfied with their living arrangement	% of individuals who indicate overall satisfaction	All individuals completing the survey	Annually	Satisfaction Survey	Program Director	85%	100% of respondents indicated Excellent or Acceptable

Interpretation of Results

Effectiveness: 13 providers completed the survey this fiscal, an increase over last.

Efficiency: There were significant changes to the program employee complement this fiscal. Coordinators accepting temporary positions elsewhere in the agency, replacement employees vacating the position earlier than expected and employee illness. Clements has one other coordinator trained who was able to help on occasion and the program director supported the program when necessary.

Access: There were several referrals received several months early with the intention of people being placed at a later date because they were turning 19. Others because CLBC knew placement dates were coming up longer than 60 days in the future. If we take this into consideration the goal would have been met by 100%

Satisfaction: 19 persons served completed the survey this fiscal, an increase over last

Action Plan:

- Ensure adequate backup coverage for the program coordinators as needed.
- Review outcomes measures in response to CLBC feedback related to the program.

Sundrops Centre for Child Development

Domain	Objective	Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome
Effectiveness	Families are better able to care for their child with a disability.	% that report they are better able to follow through with the recommended activities in the Family Service Plan % feel that staff explain their child's development in a way that they can understand	All clients	annually	Survey	Program Director	90%	91%
							90%	95%
Efficiency	All families will be contacted within two weeks of referral.	% of families contacted within two weeks by the intake coordinator.	All clients	annually	Nucleus Data Survey	Intake coordinator	90%	100%
Access	Families feel that the service is accessible.	% of families indicate that there are no accessibility issues % of families report that appointments are scheduled with consideration of their family's schedule	All clients	annually	Survey	Program Director	90%	90%
							90%	97%
Satisfaction	Families are satisfied with the current level of service	% of families who are satisfied with the current level of service % of families are satisfied overall with the services they receive	All clients	annually	Survey	Program Director	90%	96%
							90%	91%

Interpretation of results:

The data included in this report is collected by Nucleuslabs data management reports, annual surveys and discharge surveys. There is a total 20% return rate for the annual and discharge surveys. Annual surveys are circulated primarily electronically. Thirty annual surveys were sent by postal service with no surveys returned. All families leaving Sundrops are sent discharge surveys. The response rate for discharge surveys is 14%. There were 241 discharges within the report timeframe and 35 surveys returned. This report is submitted with the acknowledgement that survey returns may have been negatively affected by the onset of COVID-19 in March and the subsequent impact on families.

(Effectiveness) The score for effectiveness exceeds the target goal for both measures. Families report that they are better able to follow through with recommended activities and that staff explain their child’s development in a way that they can understand.

(Efficiency) the score for this outcome has increased significantly. All families are contacted within two weeks of referral by the Intake Coordinator. The annual questionnaire was edited to clarify that initial contact is with the Intake worker following referral and not with a clinician. It continues to be 3 to 4 weeks for an initial consult with a consultant or clinician because of the increase in referrals and the high caseload numbers for clinicians. Consultation and parent coaching are strategies being used to address high caseload and waitlist demands.

(Access) The score for access meets the target. However, there continues to be comments regarding the waitlist for direct service. This is especially true for children waiting for speech and language service. The numbers of families, who are receiving service and report that appointments are scheduled with consideration of their family needs, exceeds the target goal significantly. This supports the commitment of clinicians and consultants to respect family routines by practicing within a family centered model of service delivery.

(Satisfaction) The number of families who are satisfied with the current level of service exceeds the target, however, there are comments recognizing that there is a need for increased funding. 91% of families are satisfied overall with the service they receive.

Wait times for early intervention therapy services (OT, PT, and SLP) continue to be a concern. This is especially true for families waiting for speech and language services. Comments made on the annual survey indicate that although families are frustrated, they understand that staff are doing their best with limited resources. Many of these families are receiving other service from Sundrops while they are waiting: Infant Development, Playgroup, Supported Child Development and Family Resource Navigator.

Action plan:

- To advocate for increased investment in early intervention for children from our funders with support from BCACDI and other provincial resources.
- To provide family centred service for families that respect their choice of service delivery: home, community, Sundrops centre and virtual visits.
- To be creative and flexible in meeting the needs of children, families and staff as we navigate through this new world

Family Comments:

“We are very happy with our team and all of the support they have provided our family. Everyone we have worked with has made us feel heard, understood and valued. Our daughter loves coming to the Centre and is always so excited to see a member of our team.”

“Sundrops is an incredible program! Every specialist I encountered was respectful, warm and knowledgeable. There was always so much thought and care put into each visit. I know their caseloads are heavy and I wish the Sundrops could receive more funding to grow the program. There are so many children in need.”

“We have appreciated all the work of everyone with our daughter. We were feeling rather lost and they were very supportive.”

“My son just loves everyone at Sundrops. They are like family to him. I am just so glad that we have people helping us with our son. I couldn’t thank each and every one of you guys that has helped us through with our son’s disability.”

“We are not forgotten and it makes me feel great that we always have a home there.”