



**clements centre**  
*for* **FAMILIES**

Outcomes Management Report  
April 1 2021 – March 31 2022

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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 1, 2021 to March 31, 2022.

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

- ❖ COVID 19 continues to have a significant impact on all aspects of service delivery and outcomes targets. While not originally a stated goal, efforts to protect the overall wellness of all employees and persons served continued throughout 2021 and into early 2022.

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 posted on the agency web site and is made available to others upon request.

Findings from the Outcomes Management Report are available to employees, to persons served and other stakeholders.

## Quality Improvement Plan – Summary of 2021-2022

### Community Living/Adult Services

#### Community Inclusion

- Construction of the South End building was completed and COVID numbers at the time permitted an open house celebration.
- Community Inclusion programming began the fiscal with relatively smaller numbers but steadily increased hours and days of support offered as the year progressed. The agency COVID health and safety plan guided this gradual increase and protected both employees and participants of these group programs from the virus. While we did experience positive cases of COVID, Clements did not appear to have had any transmission on site.

#### Staffed Residential

- The incredible teams at each of the three locations supported all resident's physical health and social/emotional wellness throughout the pandemic.
- The team at Marchmont experienced the death of one resident. While expected, this had a significant impact on the team and other housemates.
- The heat dome had significant impact on the Campbell Residence, which was without air conditioning.

#### Outreach

- To address the effect of continuous intake on outcome measures, program goals were adjusted this fiscal, and then impacted significantly by COVID.

#### Home Share

- With many individuals staying home during the pandemic, home share providers experienced an increase in responsibilities and Clements home share coordinators were available for support throughout.

## **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, and 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.

## 2020-2021 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%	77.2% *of those who attended during the pandemic
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%	85% *while spaces were allocated, some remained home at various times during the
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%	88% of respondents indicated service was Excellent 12% indicated service was OK

### Interpretation of Results

Effectiveness: The COVID-19 pandemic had a devastating effect on overall effectiveness this year. The low number is reflective of the higher rate of individuals who chose not to set CI goals, and the interference of the pandemic regulations and restrictions with the ability to meet CI goals. The relatively high number of individuals who either did not set CI goals or did not set any goals reflects a combination of aging individuals, individuals who want to concentrate on employment, and individuals who didn't want to set goals that would not be achievable during a pandemic.

Efficiency: Our ability to maximize the number of persons served is dependent upon referrals from CLBC and again was impacted by the pandemic. Many people opted to stay home some or all of the time during the pandemic.

Access: When surveyed, no respondents identified any barriers to accessibility. During COVID-19 pandemic restrictions, we provided a few hours of community and home based day programming 1:1 for a few individuals whose caregivers preferred them not to be attending onsite, and made use of additional spaces to provide in person group service for individuals (as our regular space was subject to physical limitations on numbers of people).

Satisfaction: The pandemic impacted the number of people who chose to submit their survey. We did provide both electronic and hard copy options but to fewer individuals than previous years. Those who do attend and who took the time to complete the survey are satisfied with service. The pandemic may have impacted satisfaction, people seems entirely grateful to return following any absences and were appreciative of efforts during the past year to accommodate various comfort levels and attendance rates.

### **Action Plan**

In 2022 we hope to return to pre-COVID service delivery capacity, with a communicable disease prevention plan in place we will provide safe environments from which our services can be delivered.

Our aim is to continue to support individuals with the achievement of their CI goals, while respecting the wishes of aging individuals who may be less inclined to set CI goals.

Due to a critical staffing shortage Clements opted not to introduce new services in 2021. In 2022 we intend to improve our ability to respond to CLBC requests for service.

We hope to increase our ability to collect information from folks served regarding their satisfaction with services. Surveys do not capture the voices of many. Of course we meet with each person for service planning and can respond to any concerns at that time, but the information is not collected nor captured here.

## 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	Campbell – 0 Marchmont – 1 Ryall - 1
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%	Campbell – 96% Marchmont – 104% Ryall – 101%
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%	Outstanding items at Campbell residence
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:** One resident passed away this year. While this was not unexpected, it has been a very difficult time for the team and for roommates.

**Efficiency:** In spite of a critical staffing shortage over the past year Clements managed to meet our efficiency targets.



Access: The heat wave last summer identified a concern related to air conditioning at the Campbell St. residence. This is a priority for the year ahead. We also identified that one bedroom at the Campbell residence will not meet the needs of a resident who is aging. The driveway at Campbell was impacted by the weather and requires a complete repair.

Satisfaction: Outside of the annual survey, residents are invited to share their wishes at annual planning and anecdotally throughout the year. During the pandemic residents spent much more time in their homes, often without the usual amount of family contact. Residents have been happy and healthy throughout.

### **Action Plan**

- Campbell St residence: Priority is installation of a heat pump given the extreme heat of last year. We also aim is to renovate one bedroom – enlarge it for better accessibility and mobility accommodation. Repairs to the driveway will increase safety and accessibility to the home.
- Marchmont Residence: The priority this year is to ensure that the residence is able to meet the needs of a new referral and that the best possible match is found for the housemates.
- Ryall Residence: Ryall has shared a manager with Marchmont for several years. We will examine funding available once a new resident is welcomed to Marchmont and determine the option of a full time Manager devoted to Ryall exclusively. The home is also in need of new windows and exterior paint.

## 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 92% SEP 82%
Efficiency	Maximize number of persons served	Number of persons served	Everyone in the program	Annually	Periodic Reports	Manager	40	SILP – 87% of service levels met  SEP – 40 persons served
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 and SEP were Excellent.

## Interpretation of Results

### SILP:

**2021- 2022 9 new referrals, 7 exits**

**Effectiveness:** 36 of the 42 individuals served achieved at least one goal.

**Efficiency:** The pandemic had a significant impact on our ability to meet service level hours over the past fiscal. In some instances individuals declined services at various points during the year. In others, the agency was not able to replace employees away for vacation or illness due to a critical staffing shortage. These reductions in service have been reported to the funder and Clements expects to repay the unearned revenue.

**Access:** The pandemic continued to significantly impact accessibility of services. Some individuals chose not to receive service at various times over the past year. Clements offered virtual services when possible and maintained contact via texting when most appropriate. Accessibility to services was at times impacted by a critical staffing shortage. While we made certain everyone who wanted to, received service, some received

fewer hours than might be typical.

**Accommodations by staff:** Staff were responsive to clients by providing extended office hours and meeting on weekends on an as needed basis. Interim modified service plans allowed for flexibility in the goal planning process for some clients. Navigating another year of COVID meant problem solving around where and how to meet with clients based on their comfort level.

**Action Plan:** Continue to support individuals with flexible schedules and approach the goal planning process as a living document that changes as the client accomplishes goals and/or their needs change. Use interim modified service plans for clients if they wish to temporarily prioritize other goals over their service plan and frequently review these plans (monthly if possible). Implement the use of crisis action plans for individuals so that we can identify priorities for the person served, be more responsive by ensuring consistency of support and establish realistic timelines to achieve goals.

Clements is actively recruiting for new employees and aims to invest for the first time in a HR designated position to support the growing HR needs of the agency.

### **Supported Employment:**

- Average of number of goals per client set on VAPS 120. 89 of them met.
- 89 goals met out of 120=74%
- SEP had 6 people exit in the year and 4 intakes done. 2 participants chose to leave the program one to obtain post-secondary and one moved to Ontario. 4 participants left as their employment goals were met and they no longer required SEP.
- SEP successfully gained 33 new jobs and currently have and currently have 27 people working. That leaves 13 people seeking employment.
- SEP team has worked a variety of shifts on a variety of days.

**\*\*Accommodations made by employers included:** Reduced hours (as little as 2 hrs. per shift, if requested)

### **Accommodations made by Clements:**

*CCS paid for Customized Employment Certification for one full time staff*

*One staff currently enrolled and taking Solution focused career practitioner course through CASE*

*2 staff currently taking 8 week training for certification- Job development certificate program, through CASE*

*CCS is allowing the two staff members to use 4 hours a week of their learning to place during working hours. The rest of the course material is to be done on their own time. Committed to by them.*

*Access: although not measured in our outcomes, transportation is the most significant barrier in the Cowichan Valley due to inadequate public transportation Sep team did provide more transposition through the pandemic. As we gained jobs and didn't have means to get people to and from.*

### **Action Plan:**

- Gain 13 meaningful employment jobs for our remaining job seekers in the next 12 months
- Have all SEP staff certified as Employment Specialists

- Host employer appreciation event in the fall-pending on COVID
- Increase information regarding satisfaction – survey does not gather sufficient information

Employment Wages	# of Jobs	%
Less than \$13.85		
\$13.85 - \$83.59		
\$83.60 - \$15.19	4	11%
\$15.20 - \$18.00	26	72%
\$18.01 - \$20.00	6	17%
More than \$20.00		
Totals	36	100%

## 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%	67% Yes 35% Sometimes
Efficiency	Individuals will be supported to achieve their goals	% of individuals who achieve at least one goal	All individuals supported by homeshare	Annually	Quality of Life Reports	Home share coordinators	85%	46%
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%	30%
Satisfaction	Individuals are satisfied with their living arrangement	% of individuals who indicate overall satisfaction	All individuals completing the survey	Annually	Satisfaction Survey	Program Director	90%	100% of respondents indicated Excellent or Acceptable

### Interpretation of Results

**Effectiveness:** The program did not meet targets this year and will follow up with providers on an individual basis to determine their wishes/needs in terms of support for the work they do.

**Efficiency:** The pandemic significantly impacted the ability of providers to ensure community based goals were met.

**Access:** The outcome in this area is very low because we have started receiving referrals from direct CLBC contracts that are moving to CCS. The providers were given until December 31<sup>st</sup> 2022 for the transition. We received a referral for an Individual whose provider we started to screen but decided not to pursue the relationship or approve the provider. We had one referral for whom we were unable to find a placement. The ability to attract home share providers to the work has been incredibly challenging.

**Satisfaction:** In spite of the challenges faced by everyone over the past year, the individuals supported by Home Share report satisfaction with the service.

**Action Plan:**

During monitoring visits ask each provider how they might be better supported by the program, work together to identify themes and implement those suggestions.

Explore alternative recruitment efforts to attract new home share providers. Work with CLBC to advocate for increases to home share rates.

## 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%	94%  87%
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%	86% 98%
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% 90%	94% 98%

## **Interpretation of results:**

The data included in this report was collected by Nucleuslabs data management reports, annual surveys and discharge surveys. There is a total 11% return rate for the annual survey and 9% discharge surveys. This is a significant drop in survey returns from the years pre-Covid. All surveys were circulated primarily electronically and a small number by postal service. All families leaving Sundrops are sent discharge surveys. There were 214 discharges within the report timeframe and 19 surveys returned.

Sundrops offers the family choice in how they receive service: in centre, their homes, community or virtually. Virtual visits were chosen most frequently, with in centre and in own home increasing as COVID restrictions were lifted. There are still families who choose to have virtual visits only. Virtual visits are also an option to avoid cancellation of an appointment when a family member is ill.

(Effectiveness) The score for effectiveness exceeds the target goal for the first measure and there is a slight drop in the second measurement. This drop may be the result of the limitations of virtual visits, as well as by email and text messaging as a means of communication between consultants and families.

(Efficiency) the measure for this outcome was adjusted to read between two to four weeks for initial contact by the Intake Coordinator. The adjustment to the timeframe was necessary as the Intake coordinator position was vacant for several months and other staff were doing referral and service coordination 'off the side of their desk'. This is resolved with the hiring of a new coordinator and increasing the hours of work for the position. Initial contact following referral is now happening well within the two-week period.

(Access) the objective for the first accessibility measure is slightly down. This may be due to comments made by parents referring to not being able to access 'in person' appointments due to health restrictions. These comments spoke to virtual visits not working for their family. Sundrops respects family choice and as health restrictions have lifted returned to providing direct service both in family homes, the community and at Sundrops centre. The second accessibility measure exceeds the target indicating that families are appreciative of appointments scheduled with consideration of their family schedule.

In response to the concern of providing service to Penelakut Island and the challenge for families to travel on the ferry, Sundrops therapists creatively responded by renting a cube van and outfitting it for 'in van' therapy for monthly visits to Penelakut. Finding space is a challenge at Penelakut Health and not always available. This commitment increased families accessing services and eventually led to the community finding space for the clinic and allowing time to connect with the pediatrician visits to the island.



(Satisfaction) The number of families who are satisfied with the current level of service and with the services that they receive far exceeds the target. This success reflects the commitment of therapists and consultants to be flexible and creative in adapting the service delivery model to meet public health guidelines while remaining committed to the family centred model of service delivery.

Wait times for early intervention therapy services (OT, PT, and SLP) continue to be a concern. Most of these families are receiving other service from Sundrops Infant Development and Supported Child Development.

This reporting is submitted with the acknowledgement that our survey returns may have been negatively affected by COVID-19 and the impact on families.

#### Family Comments:

- Excellent. Couldn't be better.
- Thank you very much. We greatly appreciate your love and compassion.
- Staff are friendly, patient, and open to help in any way that they can. I feel that my family's wellbeing is the top priority.
- You guys are always amazing!
- I miss the in-person visits (dang COVID) Zoom isn't the same.
- The ferry can be a problem for us.
- I love that everyone works within the barriers we have. They always reach out and make sure that we have the support we need.
- My SLP was unreal!! My son still talks about her. I couldn't believe that we were doing 'work'. She had to deliver some hard truths to me and was kind and gentle.
- I love baby massage!
- They are considerate of me and my son's boundaries. They listen to me and check in by phone.
- Our IDP person is amazing. She is knowledgeable and kind.
- I didn't know what to ask to be prepared for kindergarten. Having things spelled out helped my immensely.