



"HELPING PEOPLE HELP THEMSELVES"

Performance Outcomes and Improvement Plan

April 2023 – March 2024

Table of Contents

- Overview 3
- 2022 – 2023 Improvement Plan Results 4
- Children’s Services 7
 - Community Access Services (CAS)** 10
 - Fetal Alcohol Spectrum Disorder (FASD)** 14
 - Infant Development Program (IDP)** 17
 - Supported Child Development Program (SCDP)** 23
- Adult Services..... 28
 - Passages**..... 31
 - Recreation and Leisure**..... 34
 - Confidence in Community (CIC)**..... 38
 - Independent Living**..... 41
 - HYPE – Inclusion** 44
 - HYPE – Employment**..... 47
 - Supported Employment**..... 50
 - Customized Employment** 53
 - Creative Employment**..... 56
 - Staffed Living** 59
- Business Functions 63
- 2023 - 2024 Improvement Plan 67
- Summary 72

Overview

Annually, a Performance Measurement and Management Plan is established for each program, to create meaningful objectives and goals in the domains of:

- ✚ Results achieved for the persons served (effectiveness)
 - *Measuring change for results achieved for the persons served over time*
- ✚ Resources used to achieve results for the persons served (efficiency)
 - *Addresses the relationship between resources used and results achieved*
- ✚ Service Access
 - *Addresses the Society's capacity to provide services to those who desire or are in need of receiving services*
- ✚ Experience of Services and other feedback – persons served and stakeholders
 - *The perception of persons served/stakeholders experience with the program*

These objectives guide and aid the programs in obtaining outcomes in our endeavor for continuous improvement in service delivery for our clients. The data and outcomes are then analyzed for the year and reported in this Performance Outcomes and Improvement Plan, which is built from the Performance Measurement and Management Plan.

Rivercity Inclusion has a multitude of programs that are offered in both Children's Services and Adult Services. This Performance Outcomes and Improvement Plan focuses on:

Children's Services:

- Community Access Services
- Fetal Alcohol Spectrum Disorder
- Infant Development Program
- Supported Child Development Program

Adult Services Programs:

- Passages
- Recreation and Leisure
- Confidence in Community
- Independent Living
- HYPE – Inclusion and Employment
- Employment Services
- Staffed Living

In addition to objectives for the programs that focus on service delivery, the Management Team of Rivercity Inclusion also sets goals for the Society, called: Business Function objectives. For this year's Performance Measurement and Management Plan, the Business Function objectives were created in the categories of:

- ✚ Environmental Sustainability
- ✚ Fundraising
- ✚ Strategic Plan
- ✚ Health and Safety
- ✚ Human Resources

At the beginning of this report, the 2022-2023 Performance Measurement and Management Plan objectives that did not meet their goals for that year are addressed as to whether the action plans identified, accomplished the intended results or not.

2022 – 2023 Improvement Plan Results

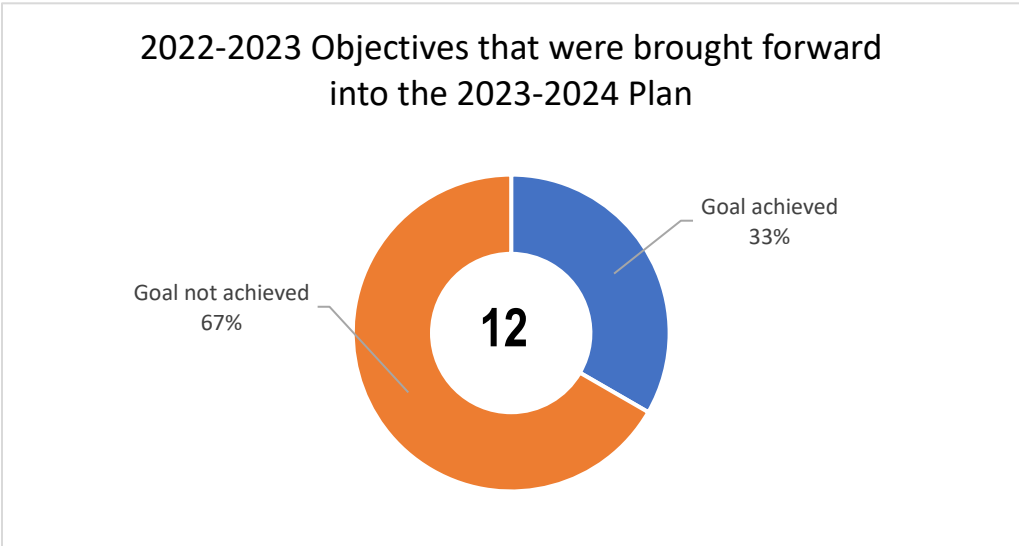
At the end of the 2022-2023 Performance Outcomes and Improvement Plan, action plans were created for the objectives that did not meet their goals. Below are the results, identifying whether the intended action plan accomplished that result or not.

| Objective Domain | Program | Objective | Action Plan | Goal Achieved/Not |
|--|-------------------------------------|--|--|-------------------|
| Results achieved for the persons served (Effectiveness) | Supported Child Development Program | Children and/or families and caregivers will gain skills, identified in their child's Individual Family Service Plan, that will result in the child becoming more independent within their child-care setting. | This will be an on-going goal in the new year. This varies year to year based on the child's needs and development. Consultants will continue to provide support to aim for more independence. | Goal not achieved |
| | Supported Child Development Program | Child-care staff will increase competency in supporting children with extra support needs. | This will be an on-going goal in the new year. This varies year to year based on the child's needs and development. Consultants will continue to provide support to aim for more independence. | Goal not achieved |
| Resources used to achieve results for the persons served (Efficiency) | Community Access Services | The youth will attend one community-based leisure and/or recreational activity once a week. | This objective will remain on next years Performance Management Plan but will be changed into a different domain for more accurate goal settings. | Goal achieved |
| | Infant Development Program | Will continue to utilize waitlist and caseload management procedures. | This objective will be re-done for the next Performance Management Plan to make into a measurable goal. | Goal achieved |
| | Supported Child Development Program | Intake percentage of group intervention situations will be maintained. | On-going goal. Will continue to examine current shared groups bi-annually. Will look at possible shared groupings as new funding is allocated. | Goal not achieved |
| | Residential Services | Reduction in medication errors. | For next year's Performance Management Plan we should have an | Goal achieved |

| | | | | |
|-------------------------------|-------------------------------------|---|--|-------------------|
| | | | accurate benchmark as the programs all record medication errors in the same way now. This goal will remain. | |
| Experience of Services | Community Access Services | Increase family survey responses. | This goal will remain on next year's Performance Management Plan, as feedback from stakeholders is important for the program, so we want as many responses as possible. | Goal not achieved |
| | Supported Child Development Program | Families will indicate satisfaction with SCDP services. | This is an on-going goal. Will continue to provide supportive services and will communicate with families that aims at higher satisfaction. We will ask additional questions on next years survey to help guide the SCDP services. | Goal not achieved |
| | Supported Child Development Program | Stakeholders will indicate satisfaction with SCDP services. | This is an on-going goal. Will continue to be supportive and develop relationships with centers that aims at higher satisfaction. We will ask additional questions on next years survey to help guide the SCDP services. | Goal achieved |
| Business Functions | Administration | Reduce the amount of paper being used across all programs. | This goal had not previously been tracked, so a baseline needed to be established first. | Goal not achieved |
| | Administration | Reduce the amount of toner being used. | This goal had not previously been tracked, so a baseline needs to be established first. Will begin this objective for the next Performance Measurement & Management Plan. | Goal not achieved |

| | | | | |
|--|----------------|------------------------------------|---|-------------------|
| | Administration | Increase our financial donor base. | This goal had not previously been tracked, so a baseline needs to be established first. Will begin this objective for the next Performance Measurement & Management Plan. | Goal not achieved |
|--|----------------|------------------------------------|---|-------------------|

Out of the 12 objectives from the 2022 – 2023 Performance Measurement and Management Plan that remained in this year’s 2023 – 2024 Performance Measurement and Management Plan, only 33% achieved their goal from the action plan that was created. 67% of objectives did not achieve their goal, and the reasons why are further identified in each program’s specific analysis, which can be found within this report.



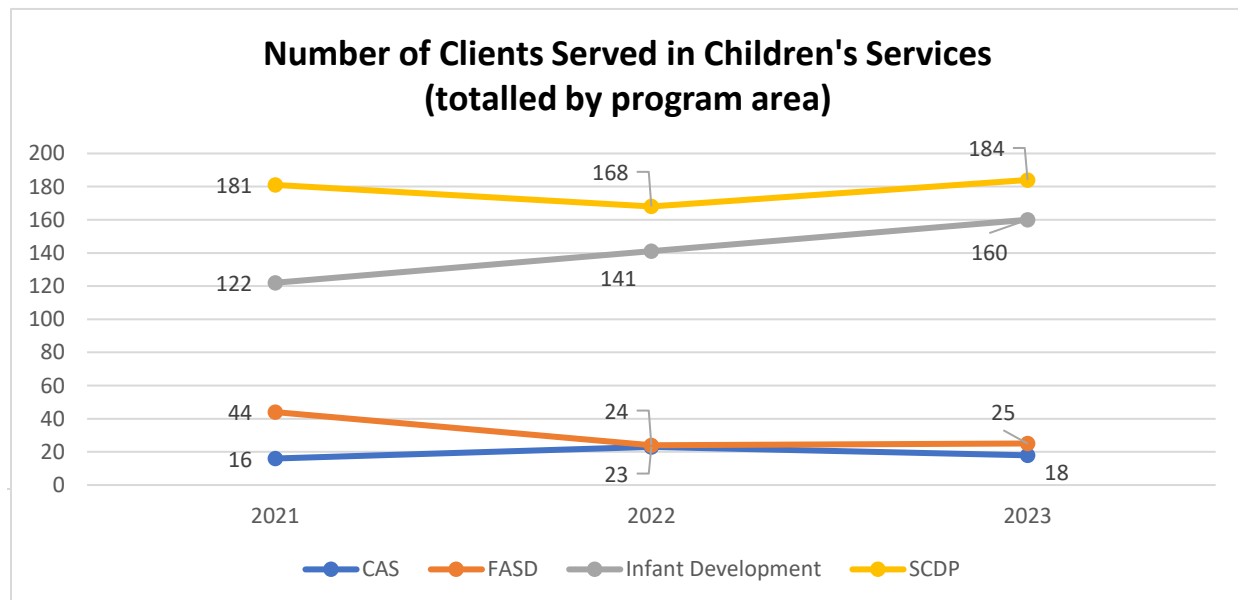
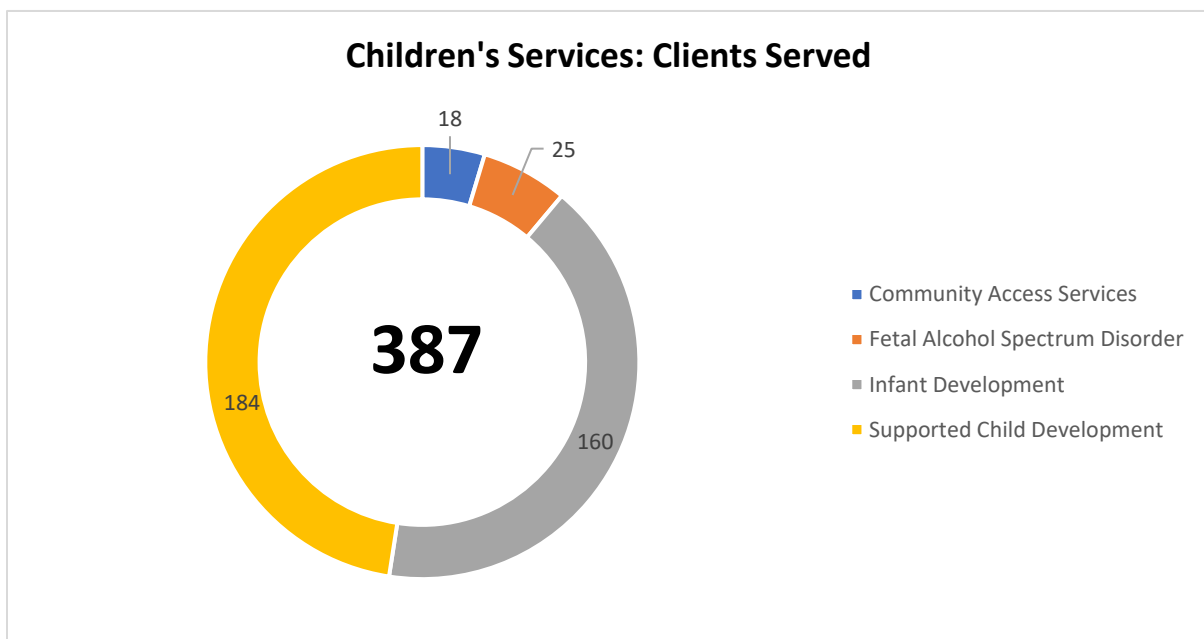
Children's Services

Specific characteristics of the individuals served in all the programs is below:

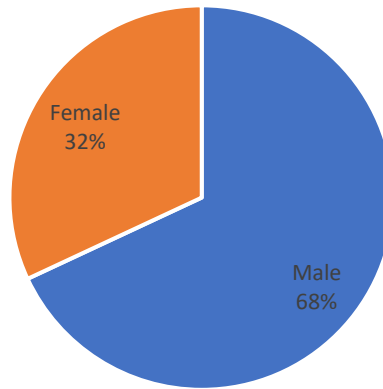
It's important to note that clients in some of these programs may not only attend just one of the programs, but possibly several of them. This is reflected in the "Clients Served Charts" below, which could indicate one individual in multiple programs, therefore being counted multiple times.

Furthermore, each program has characteristics for the individuals served directly in their programs, which can be found in their specific program report. Percentages are not displayed for the 'medical diagnosis' chart in order to maintain confidentiality for the individuals in that program.

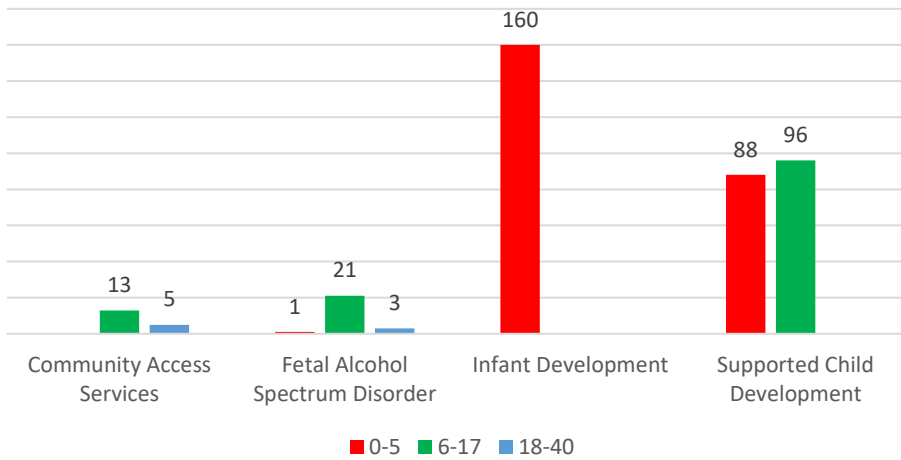
Client Characteristics:



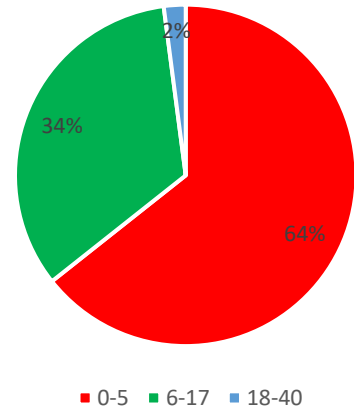
Gender



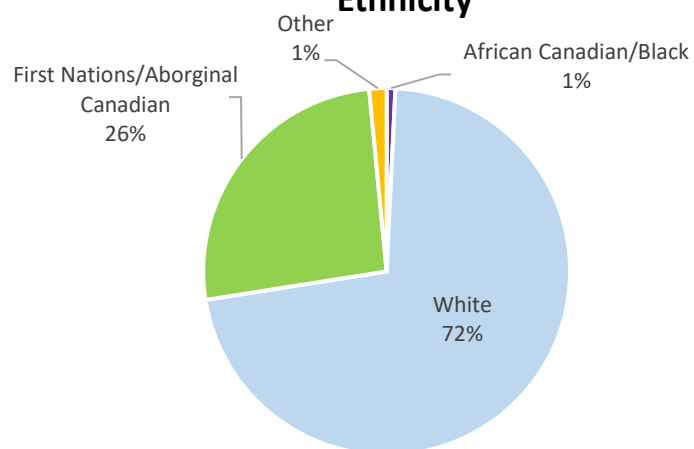
Age per program

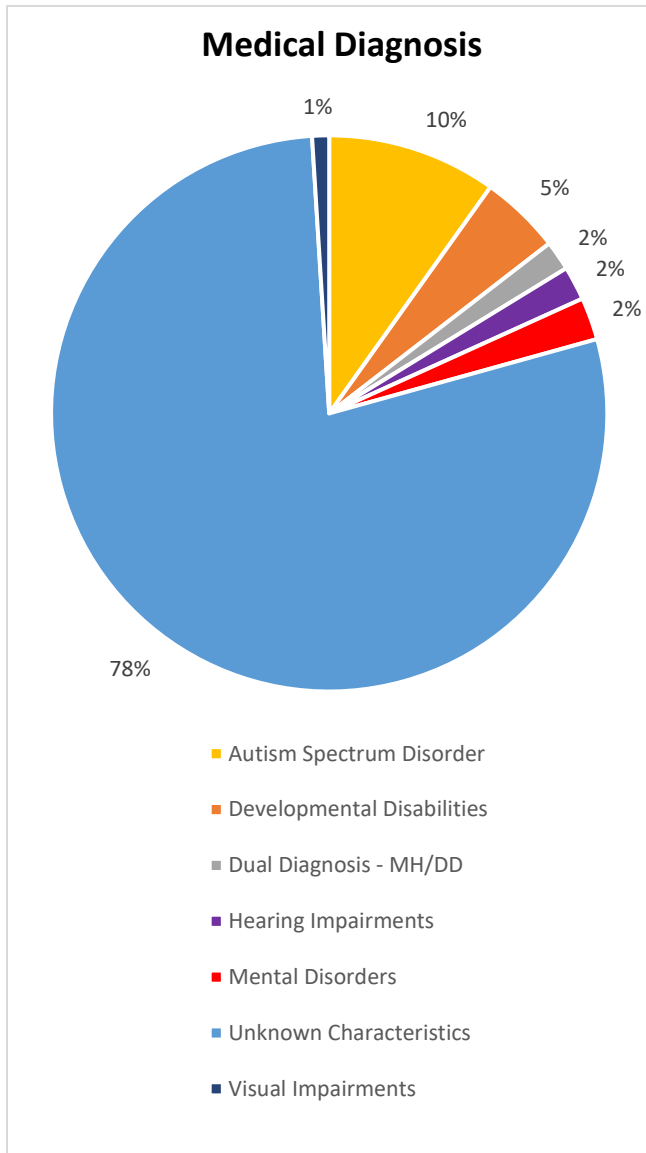


Age for all Children's Services Programs



Ethnicity



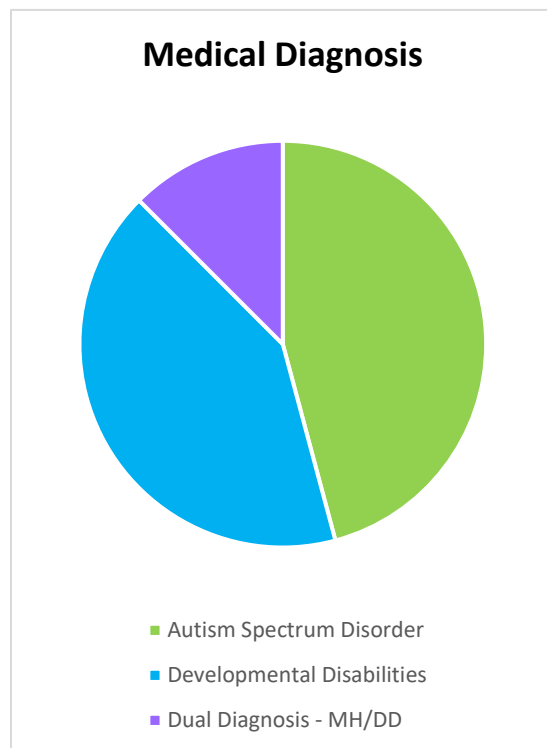
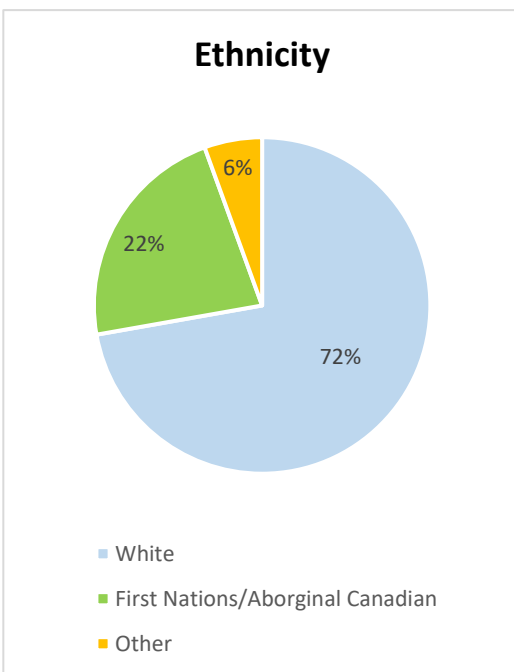
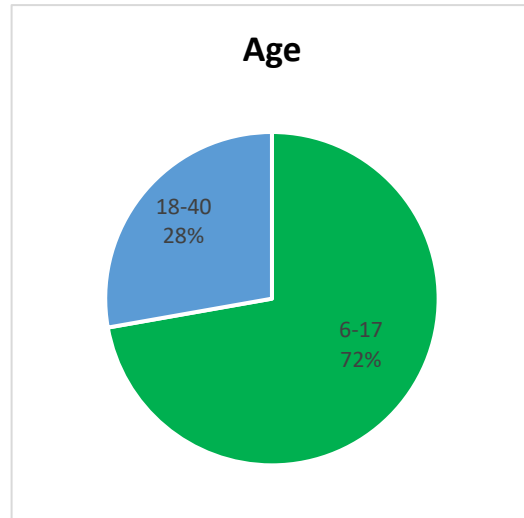
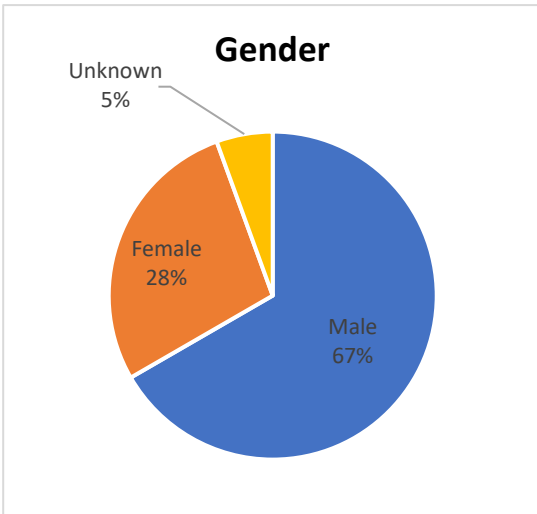


“Unknown characteristics” shows the largest percentage. The reason for this is the Children’s Services program do not fully track medical diagnoses, as services are offered to any child/youth who’s in need of support, regardless of their diagnosis.

Community Access Services (CAS)

Community Access Services (CAS) is a program for youth with diverse abilities between the ages of twelve to eighteen, providing support with facilitating peer relationships, community integration, and accessing local community resources.

Characteristics of clients in the program:



Clients who enter the Community Access Services program are referred directly from the Ministry of Children and Family Development.

Results achieved for the persons served (effectiveness):

Objective: Each group participates in one new activity in the community.

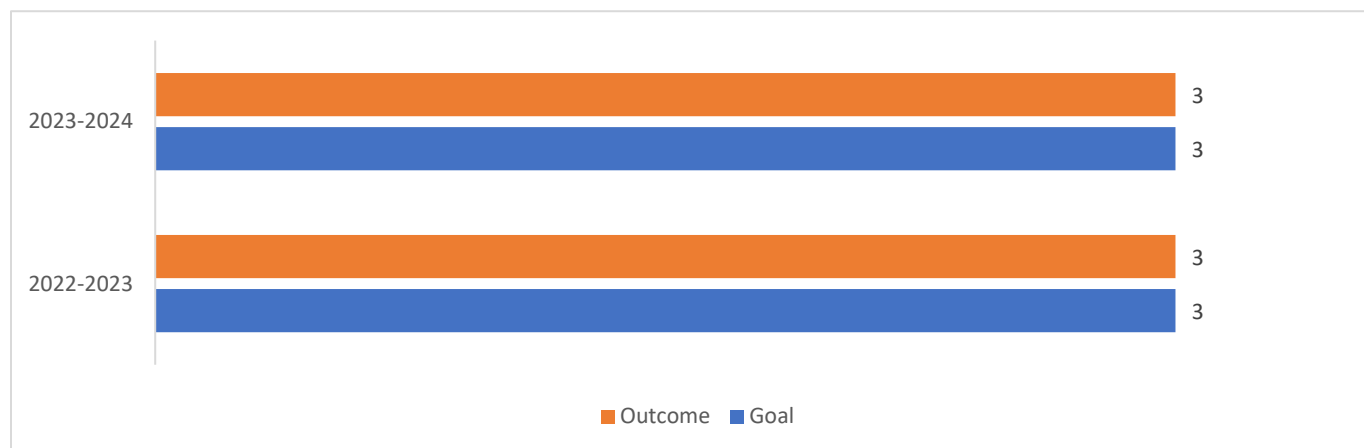
Indicator: # of community improvement activities completed for the Tuesday, Wednesday, and Friday groups

Goal: 3

Outcome: 3

Analysis: **GOAL MET**

The Tuesday and Wednesday groups both participated in the Campbell River shoebox project. They connected with Discovery Community Church and put together 2 shoeboxes for children in developing countries, which involved shopping and picking out items for each box. Additionally, the Wednesday group also participated in the Indigenous Day, where they participated in celebrating indigenous history, traditions, and culture by witnessing cultural dancing and drumming. Three new community activities were fulfilled this year, resulting in the program completing their goal. The objective remained the same for the 2024-2025 year, however it was rewritten to more clearly define the idea of participating in activities that give back to the community.



Resources used to achieve results for the persons served (efficiency):

Objective: Increase community outing activities, looking at lower cost choices.

Indicator: % of reduced program supplies to open funding for community outings

Goal: 5% per quarter

Outcome: Q1 – 5.6% over budget; Q2 – 44.3% under budget; Q3 – 7.58% over budget; Q4 – 10.4% under budget

Analysis: **GOAL PARTIALLY MET**

This goal was partially met for the year however it was measured on a quarterly basis. As the objective set was to reduce program supply spending per quarter by 5%, quarters 1 and 3 went over budget. However, for each quarter the amount that went over was very small; quarter 1 was over by 0.6%, and quarter 3 by 2.58%. As this was such a small percentage, the program didn't experience any difficulty in participating in community outing activities. Quarter 2 was significantly under budget as July and August had lower attendance. During the month of July, activities were based closely to 301 Dogwood and there was a program break for the month of August. Quarter 4 was also under budget by 5.4%, which could have been a result of the Winter temperature and program participation was kept to indoor activities, which can have a positive impact on the amount of spending.

This objective will remain in the 2024-2025 year, however, has been rewritten to more clearly define the intent behind the objective.

Service Access:

Objective: Youth/staff ratios are maximized for each group.

Indicator: % of vacant staff positions filled

Goal: 75%

Outcome: 50%

Analysis: **GOAL NOT MET**

For this year, two new positions needed to be filled to maximize client to staff ratios, however only one new employee was hired into the program. Recruiting employees into this program can be quite challenging, due to the number of hours that the program runs for, as well as the time of day it is offered. As this is an after-school program, the time the program begins overlaps with some other Adult Service programs in Rivercity Inclusion, which makes posting into multiple positions for employees difficult, unfortunately resulting in CAS being understaffed. This objective has been removed for the 2024-2025 year, as recruitment belongs with Human Resources, and is more suitable for the Business Function objectives.

Experience of Services and other feedback:

Persons Served

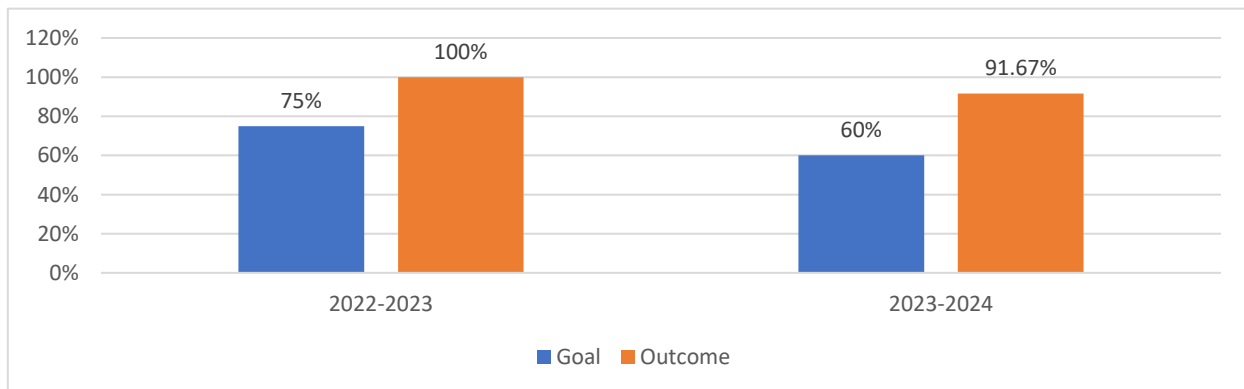
Objective: Youth will be happy with the services provided.

Indicator: % of youth that indicate they like being at the program, on the Client Experience of Services Survey

Goal: 60%

Outcome: 91.67%

Analysis: **GOAL MET**



Both the Tuesday and Friday groups indicated they 100% liked being at the program. 75% of the Wednesday group indicated they liked being at the program, which resulted in an average of 91.67% for all three groups. This exceeded the goal of 60%, however did have a slight decrease from 100% from last year. This could be a result in change of clients entering and exiting the program, which can take some time for adjustment in enjoyment of the program.

Stakeholders

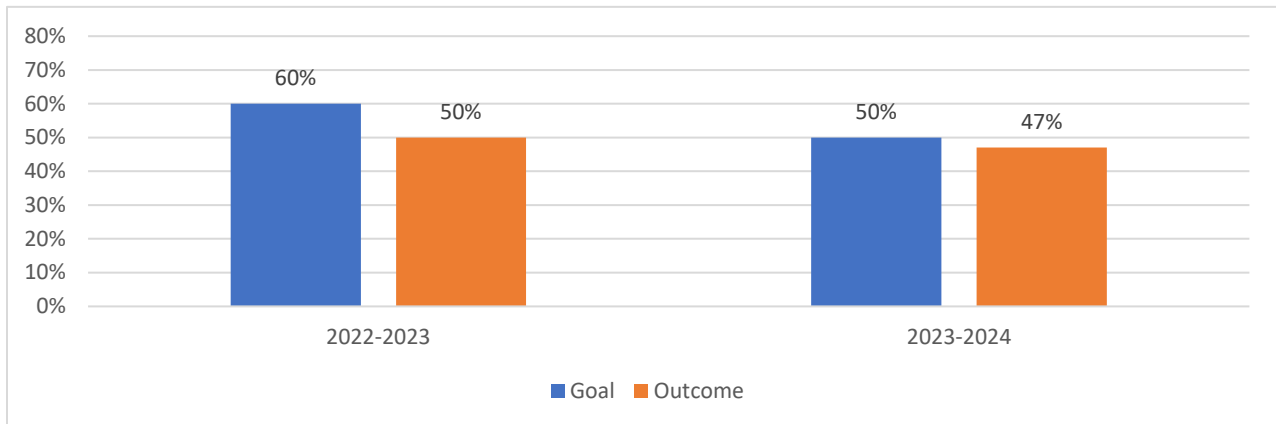
Objective: Increase the survey return responses from parents and caregivers.

Indicator: % of parents and caregivers that complete and return the Experience of Services Survey

Goal: 50%

Outcome: 47%

Analysis: **GOAL NOT MET**

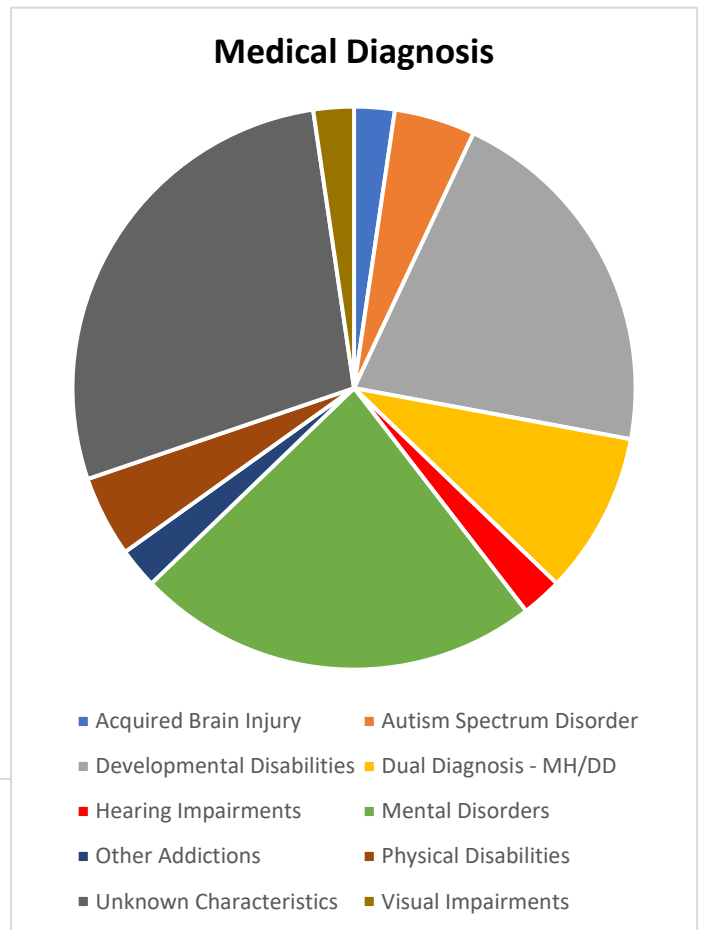
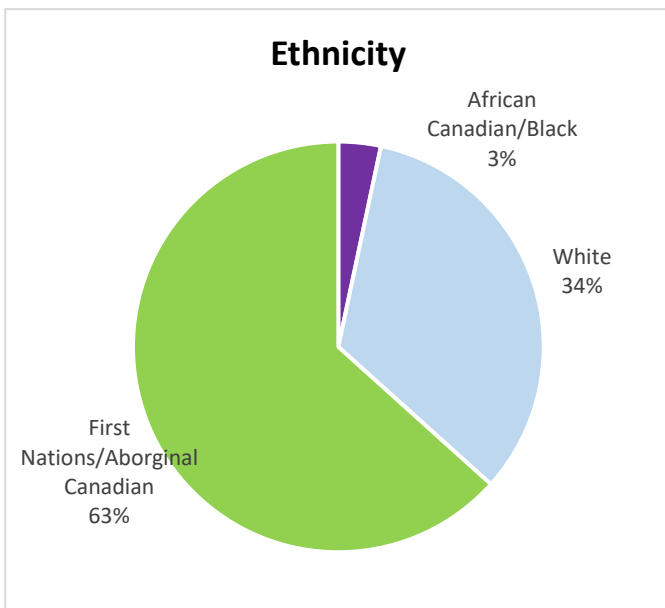
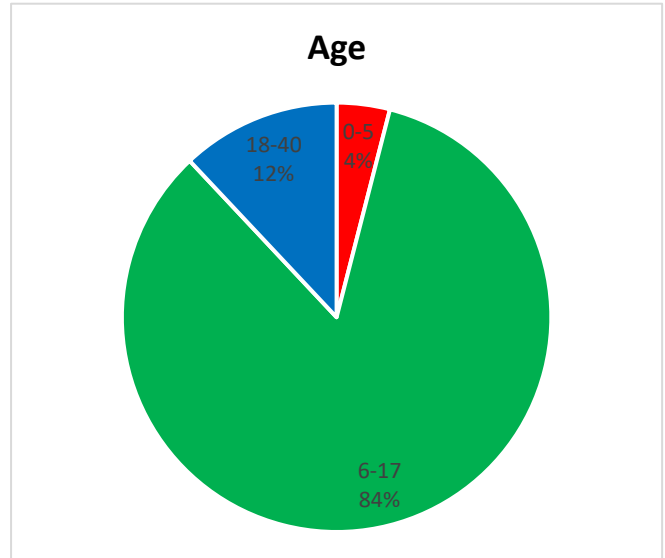
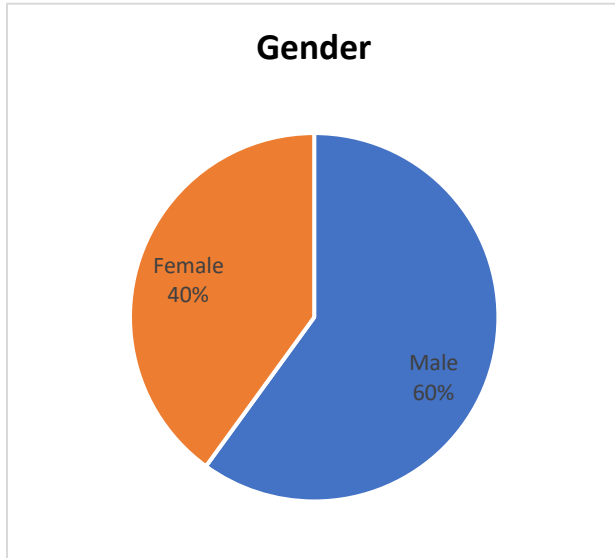


Out of the 15 Experience of Services Survey's that were sent out, 7 were completed and returned. Unfortunately, resulting in the program not achieving their goal of a 50% return rate, and the previous year also not achieving their goal that was set. When discussing the 2024-2025 objectives, it was determined that this objective would be removed, as this is the work that goes behind the actual objective. The question asked was, what do you want to know from parents and caregivers, in their experience with the program. From that perspective, a more meaningful objective was put in place for the upcoming year.

Fetal Alcohol Spectrum Disorder (FASD)

The Keyworker recognizes that each family is unique and understands their role as one that builds on a family's strengths. In response to the child's needs, the Keyworker work with parents, caregivers, family members and service providers to identify ways to adapt the child to their environment, while striving to empower the family to become their own best advocates for the child.

Characteristics of clients in the program:



Results achieved for the persons served (effectiveness):

Objective: Number of people that attend the scheduled family support group.

Indicator: # of people who show up at each support group

Goal: 5

Outcome: 2

Analysis: **GOAL NOT MET**

A survey was sent out to all families on the caseload, to evaluate the need for a family support networking group. There was a low response rate, with only two families replied to the survey. Unfortunately, due to the low response rate, the support group was not scheduled. The Keyworker is working with another community agency to create a support group together, in order to create a higher interest with families.

Resources used to achieve results for the persons served (efficiency):

Objective: Attend networking meetings with other Keyworkers on a quarterly basis.

Indicator: # of meetings that take place

Goal: 4

Outcome: Q1 – 0 Q2 – 1 Q3 – 1 Q4 – 0

Analysis: **GOAL NOT MET**

The FASD Keyworker program has one employee. The intent behind establishing this objective was to create a sense of networking so Keyworkers from all over British Columbia could support each other. When analyzing these results, it was noted that setting a goal of 4 meetings per quarter, was unrealistic, and a goal of 1 meeting per quarter, would have been more achievable. While this objective is an important resource, it has been removed from the 2024-2025 Performance Measurement and Management Plan, as it doesn't quite fit in the "Resources used to achieve results for the persons served" domain.

Service Access:

Objective: Promote the Keyworker Program by the number of awareness campaigns.

Indicator: # of awareness campaigns

Goal: 2

Outcome: 1

Analysis: **GOAL NOT MET**

One awareness campaign took place on September 8, 2023 for FASD Awareness Day. Another name that this event might be known as is "Red Shoes Rock". This is an international awareness campaign giving voice and support to those who have been prenatally exposed to alcohol. The FASD Keyworker Program has been supporting this event for a number of years, and will continue to bring awareness to this important topic.

Experience of Services and other feedback:

Persons Served

Objective: Keyworker Program was an effective service for clients who attended.

Indicator: % of clients who find the program effective, as indicated on the Experience of Services Survey

Goal: 50%

Outcome: NIL

Analysis: **GOAL NOT MET**

Unfortunately, the Experience of Services Survey only had one response returned. Additionally, this question was overlooked when planning the survey questions and was not directly asked on the survey, yielding no results to review. This will be reviewed in detail before the survey goes out next year, with the Quality Assurance Coordinator.

Stakeholders

Objective: Educational workshops were informative and effective.

Indicator: % of attendees who felt the workshop was effective, as indicated on the individual surveys that were handed out

Goal: 50%

Outcome: NIL

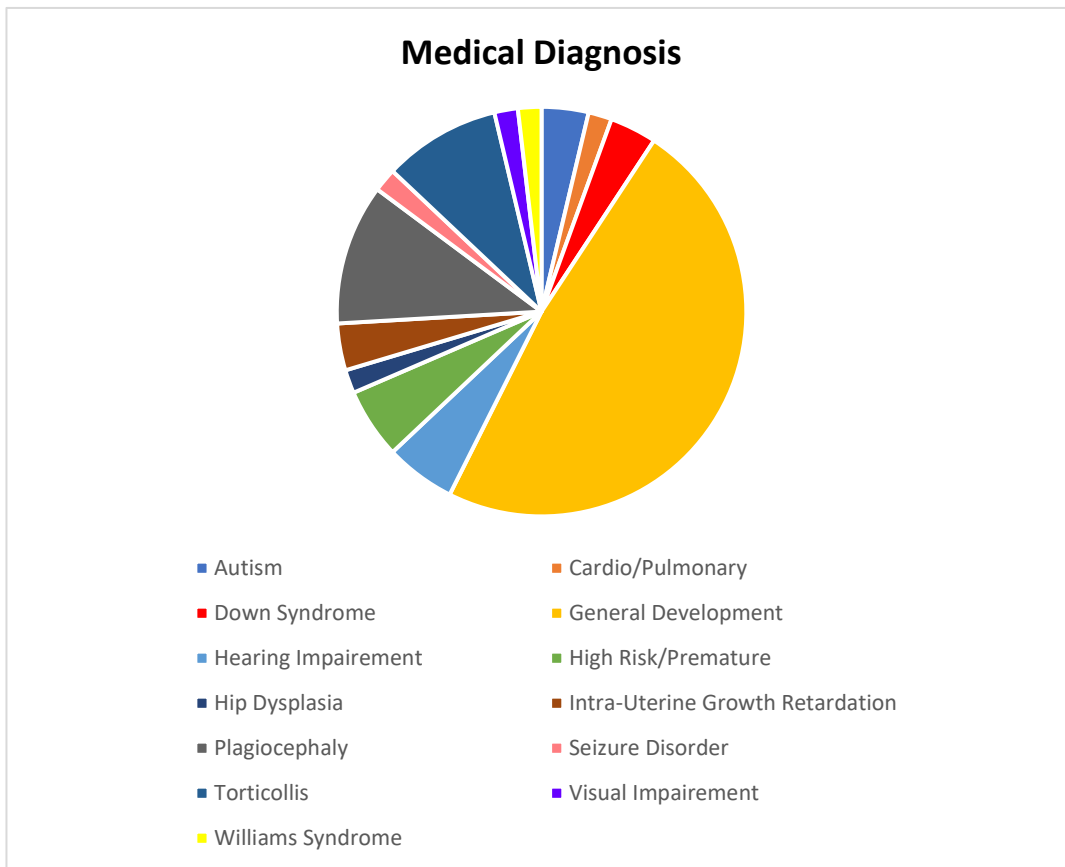
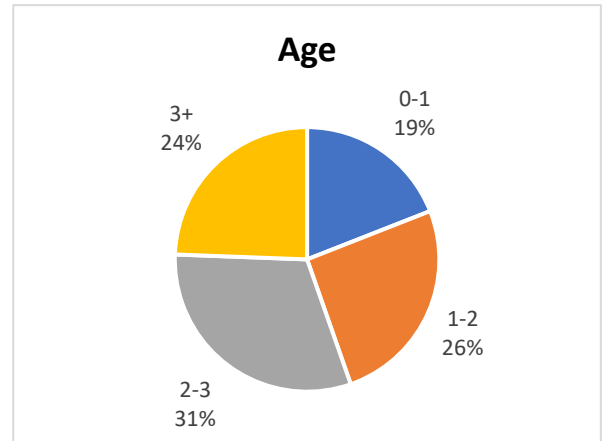
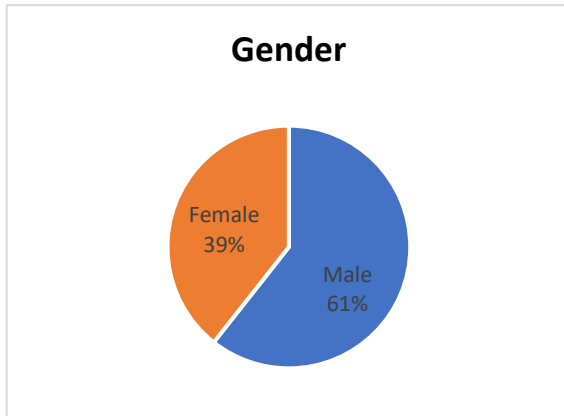
Analysis: **GOAL NOT MET**

Providing an Experience of Services Survey after workshops were completed, was unfortunately overlooked. When creating this objective, measuring this on a quarterly basis is realized to be unrealistic, as then there is an assumption that educational workshops took place every quarter. Measuring this on an annual basis would be more effective in this aspect.

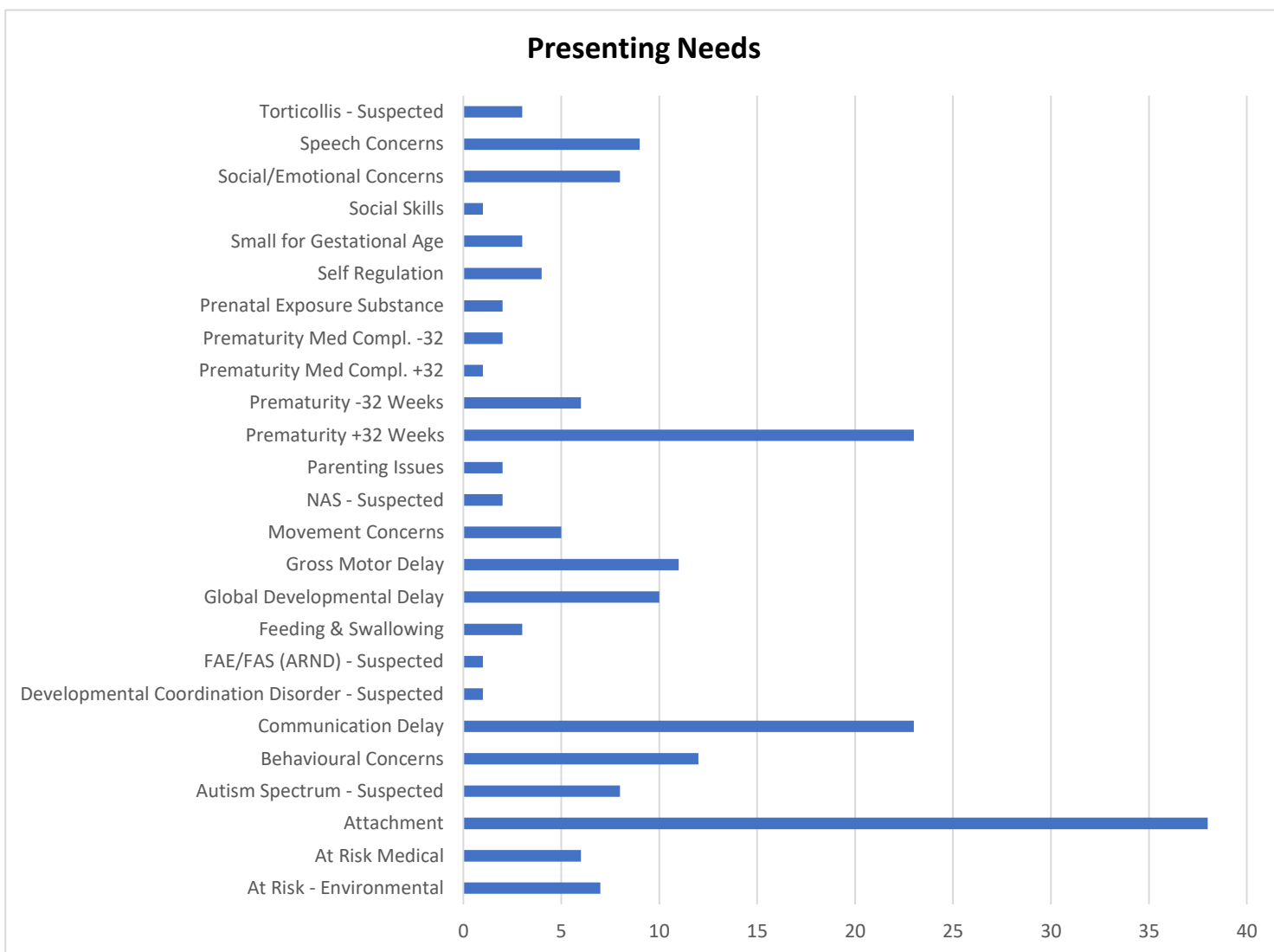
Infant Development Program (IDP)

This program provides early intervention support to families with a child up to three years of age. Sometimes children are slow to reach development milestones, such as sitting unsupported, playing with toys, walking and talking. During the first three years of a child's life, important learning takes place during play and everyday experiences. The role of parents/caregivers is that of the child's first teacher. The infant development consultants work with parents to develop a program of activities to encourage the development of physical, social, emotional, language and cognitive skills.

Characteristics of clients in the program:



30% of the children in the program have a formal diagnosis.



Presenting Needs identify the need for services and the delay the child is presenting with. These characteristics are very important for the consultants, as children 0-3 are often waiting for a diagnosis. By identifying these presenting needs, consultants can provide the best support to the family in regard to where the child's development is.

The Infant Development Program does not collect characteristics on ethnicity directly, however some families do share that information. Medical diagnosis characteristics are tracked, as well as 'presenting needs.' If the children who are referred to the program meet the criteria for receiving support, then characteristics of those individuals is not important, as they would receive service regardless of their ethnicity, medical diagnosis, and presenting needs.

Referrals for the program can be self-referred, or received from community partners, such as doctors, midwives, and public health nurses. The children that get referred into this program are experiencing a delay in development or are at risk of a delay in development.

Results achieved for the persons served (effectiveness):

Objective #1: Services will be effective for families accessing service.

Indicator: % of families that indicate they find services effective on the Experience of Services Survey

Goal: 90%

Outcome: 95.45% - services helpful for their child; 100% - positive relationship with their consultant

Analysis: **GOAL MET**

The Experience of Services Survey that families completed had two questions on it that directly related to this objective. "Infant Development Program has been helpful for my child" and "I feel I have a positive relationship with my IDP consultant". 95.45% of families indicated that the program has been helpful for their child, and 100% agreed that they had a positive relationship with their consultant.

Objective #2: Families are supported in obtaining identified goals.

Indicator: % of families that feel supported in obtaining goals

Goal: 90%

Outcome: 95.45%

Analysis: **GOAL MET**

Families were asked on the Experience of Services Survey if they felt their IDP consultant supported them in their child obtaining their goal(s). 59.09% indicated they 'strongly agreed', and 36.36% indicated they 'agreed', resulting in 95.45% overall.

Objective #3: Families attending groups find them effective.

Indicator: % of families that find group attendance effective, as indicated on the Playgroup Feedback Form

Goal: 90%

Outcome: 100%

Analysis: **GOAL MET**

On the Infant Development Program Playgroup Feedback Forms provided to families attending groups on June 20th, 2023; December 19th, 2023; and January 16, 2024, 100% of families shared something they liked about IDP group and how attending the group had benefited their family.

Objective #4: Families will find progress notes and their service plan meaningful and friendly.

Indicator: % of families that indicate services are meaningful, on the Experience of Services Survey

Goal: 90%

Outcome: 72.73% - progress notes and service plan helpful; 86.37% - resources and information useful

Analysis: **GOAL NOT MET**

72.73% of families found the progress notes and service plan helpful, while 27.27% neither agreed or disagreed that the progress notes and service plan helpful.

86.37% of families found the resources and information provided to them was useful, while 13.64% neither agreed or disagreed that the resources and information was useful.

Resources used to achieve results for the persons served (efficiency):

Objective #1: Group will be offered to both waitlisted families, and families currently receiving services, on a monthly basis.

Indicator: % of families accessing groups that are on the waitlist

Goal: 50%

Outcome: 100%

Analysis: **GOAL MET**

All the families on the waitlist were invited to attend the Tuesday groups, whether it was the baby group or the toddler group. Families were offered this at their initial consult meeting as part of their service plan, unless the consultant and family member determined it was not applicable.

Objective #2: Maximize the amount of families that are seen monthly.

Indicator: # of decreased families seen individually, be seeing families at the Tuesday group, per month

Goal: 8

Outcome: April 2023 – 17; May 2023 – 50; June 2023 – 36; July 2023 – 8; August 2023 – 0; September 2023 – 17; October 2023 – 39; November 2023 – 30; December 2023 – 17; January 2024 – 22; February 2024 – 13; March 2024 - 10

Analysis: **GOAL MET**

The Infant Development Program ran 74 playgroups from April 2023 to March 2024. There was a total of 259 families that were seen at groups, averaging 23.5 family visits, per month. Seeing these families at groups, provides the consultants with additional time to see those families waiting for service, as the families seen at group therefore did not need one-to-one visits.

Objective #3: Families will have access to the IDP lending library.

Indicator: % of all families that are aware of the lending library, as indicated on the Experience of Services Survey

Goal: 100%

Outcome: 45.45%

Analysis: **GOAL NOT MET**

The question was asked on the Experience of Services Survey, “Are you aware of our lending library?”, in which 45.45% indicated that they were aware. Additionally, the question “Did you receive a developmental kit?” was also asked, in which 47.62% of families indicated they received a kit. The developmental kit provides families with the tools needed to work on their child’s development. The lending library provides families with the option to borrow toys and books for their children to use at home. Both the developmental kit and the lending library are wonderful resources and tools for families in helping achieve milestones in their child’s development.

Service Access:

Objective: Children who are referred to program are seen within 3 months from date of referral.

Indicator: % of families that are seen within 3-months from date of referral

Goal: 100%

Outcome: 100%

Analysis: **GOAL MET**

All families referred into the Infant Development Program were seen within 3-months from date of referral. This is an excellent objective to continue to measure over time and will remain in the 2024-2025 Performance Measurement and Management Plan.

Experience of Services and other feedback:

Persons Served

Objective #1: Families will find services flexible to meet their needs.

Indicator: % of families that find services flexible, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 100%

Analysis: **GOAL MET**

All families who completed the Experience of Services Survey indicated that they found the Infant Development Program flexible for their needs. 31.82% answered that they 'agreed', while 68.18% answered that they 'strongly agreed', on the survey.

Objective #2: Families will be satisfied with the services provided.

Indicator: % of families that are satisfied with the services provided, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 90.91%

Analysis: **GOAL MET**

The program met their goal by 90.91% of families being satisfied with the services provided by the Infant Development Program. 27.27% indicated that they 'agreed' to being satisfied with the services provided, and 63.64% indicated that they 'strongly agreed' to being satisfied with the services provided.

Stakeholders

Objective: Continue to collaborate with community stakeholders.

Indicator: # of connections with community stakeholders

Goal: 7

Outcome: 10

Analysis: **GOAL MET**

For the past two years, the Infant Development Program has overachieved this goal. Professional relationships are with Campbell River midwives, Early Years Council, Gold River Hub, Campbell River Family Services, North Island IDP, Public Health nurses, PacifiCare, Campbell River Family Navigator, Laichwiltach Family Services, and the Metis Nation.

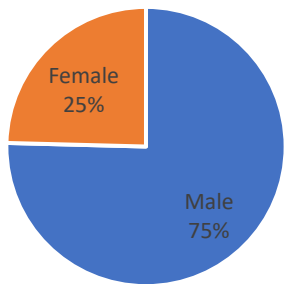
This objective will change for the 2024-2025 year, by providing a brief survey to these stakeholders asking about their experience with the Infant Development Program.

Supported Child Development Program (SCDP)

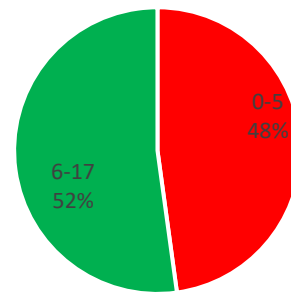
Together with families, daycares, preschools, and other community professionals, Supported Child Development ensures that children, birth to 19 years of age, can be included fully in childcare settings of the families' choice. Consultation services, and in some cases extra staffing assistance, are provided to ensure inclusive practices for children who have a demonstrated need for extra support.

Characteristics of clients in the program:

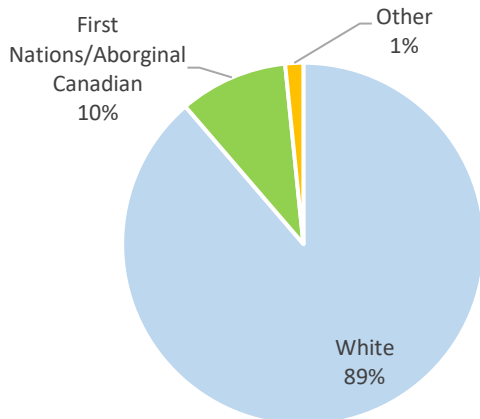
Gender



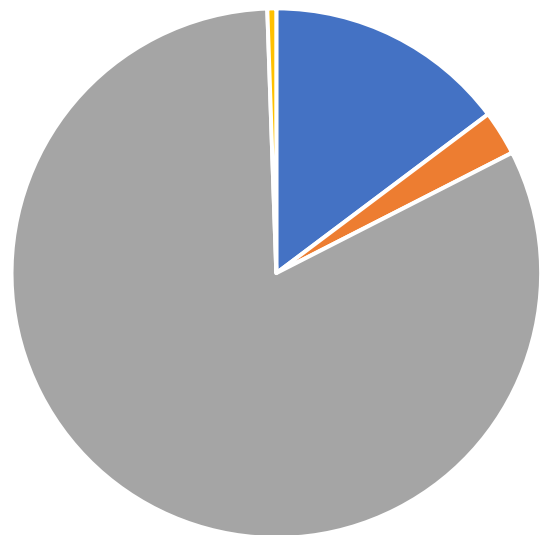
Age



Ethnicity



Medical Diagnosis



- Autism Spectrum Disorder
- Hearing Impairments
- Unknown Characteristics
- Visual Impairments

The Supported Child Development Program does not fully collect characteristics on ethnicity and medical diagnosis, for the individuals that receive service. As long as the children who are referred to the program meet the criteria for receiving support, then characteristics of those individuals is not important, as they would receive service regardless of their ethnicity and medical diagnosis. Referrals for the program can be self-referred or received from child-care centres, The children that get referred into this program are in need of additional support in their child-care centre.

Results achieved for the persons served (effectiveness):

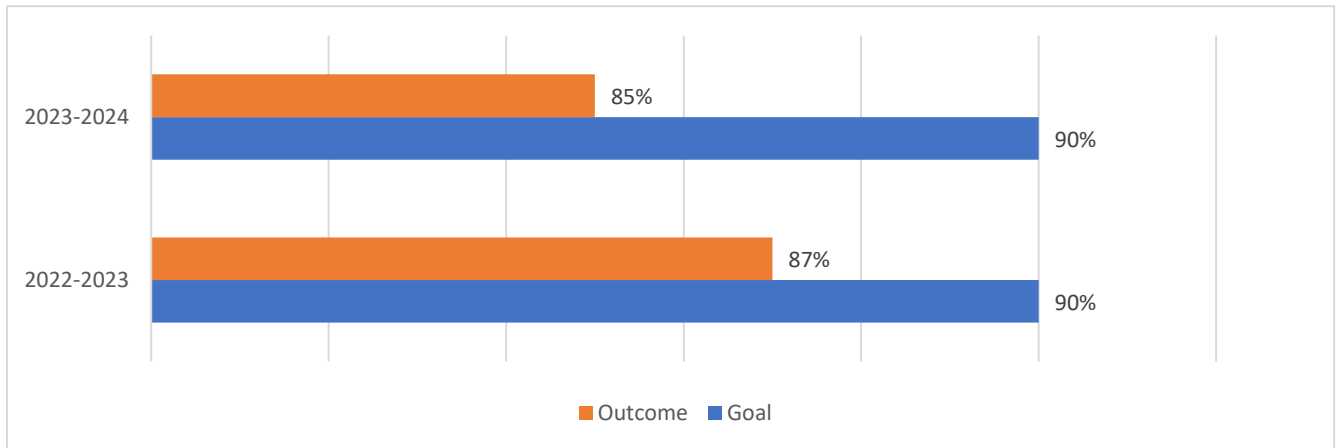
Objective #1: Children and/or families/caregivers will gain skills identified in their child's Individual Family Services Plan (IFSP), that will result in the child becoming more independent within their child-care settings.

Indicator: % of children increasing their independence within their child-care setting

Goal: 90%

Outcome: 85%

Analysis: **GOAL NOT MET**



The objective has not been met the last few years; however, it is still a very important goal to continue to work towards. This can vary year to year depending on the individual child.

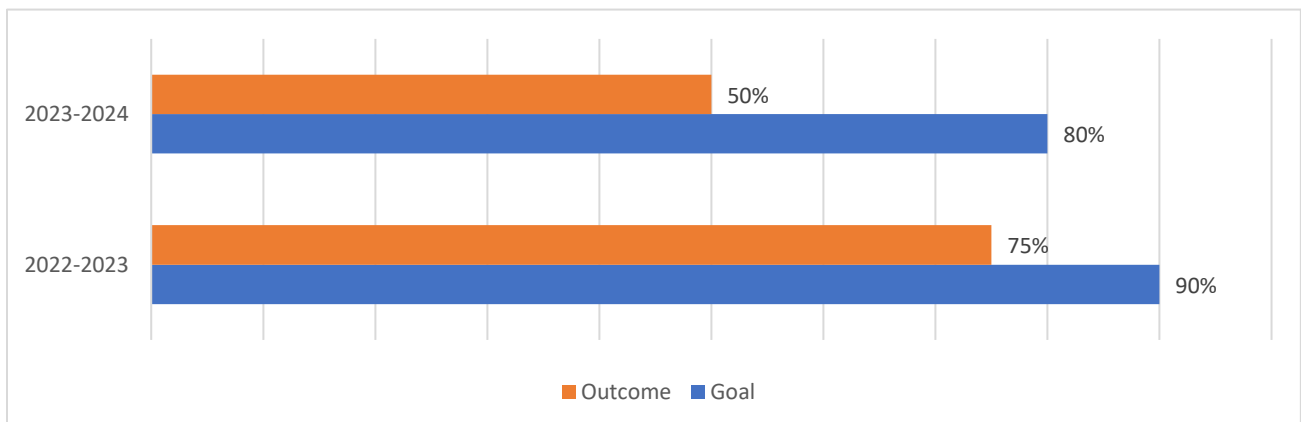
Objective #2: Child-care staff will increase competency in supporting children with extra support needs.

Indicator: % of respondents that indicate 'most of the time', 'all the time', 'I have gained knowledge from the strategies and suggestions provided by the SCDP consultant', on the Stakeholder Experience of Services Survey

Goal: 80%

Outcome: 50%

Analysis: **GOAL NOT MET**



Two child-care center's responded to the survey, resulting in unfortunately an inaccurate performance representation.

Resources used to achieve results for the persons served (efficiency):

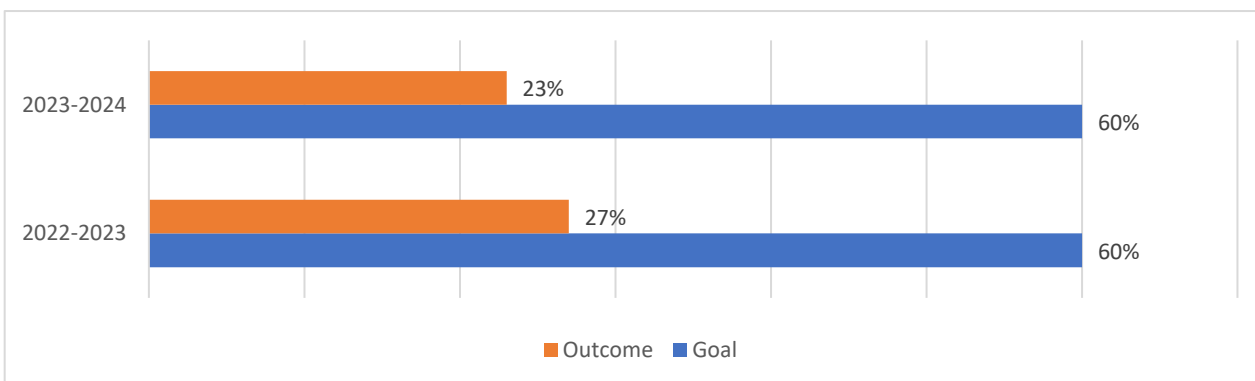
Objective #1: Intake percentage of group intervention situations will be maintained.

Indicator: % of children receiving group intervention

Goal: 60%

Outcome: 23%

Analysis: **GOAL NOT MET**



In the past, group intervention (instead of individual intervention) has made it possible to address some of the needs (behavioural and developmental) of children waiting for service, enhance funding to groups of children, and makes the program efficient financially. For this year, only 23% of the caseload was shared interventions. More requests from child-care centres' were focused on one-to-one support situations. Through funding from the Ministry of Children and Family Development (MCFD), the Supported Child Development Program was able to provide the child-care centres with funding to provide more one-to-one support hours, when necessary. As more families and child-care centre's request one-to-one funding, the amount available for one-to-one situations will decrease. With continued need, the program will strive for meeting the goal of group intervention situations, to ensure utilization of funding efficiently.

Objective #2: Program will provide direct client related service hours.

Indicator: # of direct service hours (percentage based on consultant hours worked)

Goal: 50%

Outcome: 68%

Analysis: **GOAL MET**

This is a new objective that was created for the 2023-2024 Performance Measurement and Management Plan, and will continue to be a meaningful and measurable objective.

Service Access:

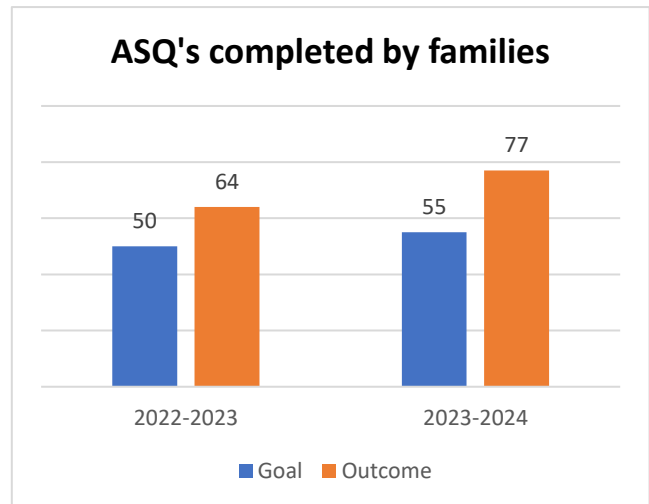
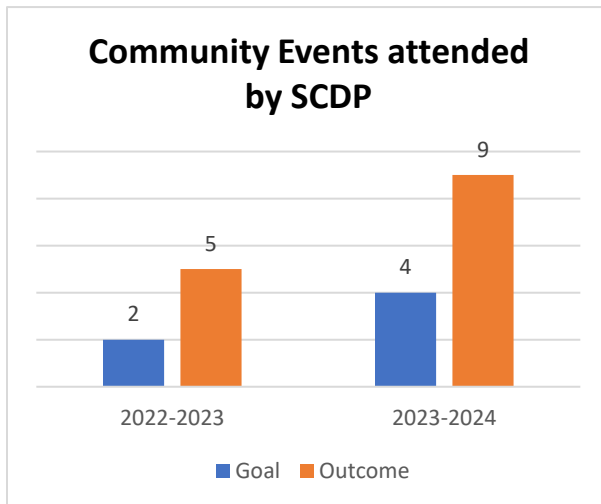
Objective #1: Will attend community events and liaison with community programs to communicate and share SCDP and ASQ (Ages and Stages Questionnaire) information to families.

Indicator: # of events and families that SCDP connects with

Goal: 4 community events and 55 families complete ASQ's

Outcome: 9 community events and 77 families completed ASQ's

Analysis: **GOAL MET**



Supported Child Development attended 9 community events in this 2023-2024 year, exceeding it's goal. Additionally, the program also attended at "Ready, Set, Learn" with the School District and Family Place drop-in.

The consultants completed 77 "Ages and Stages Questionnaires" (ASQ's) with families, which was an increase of 13 from the previous year.

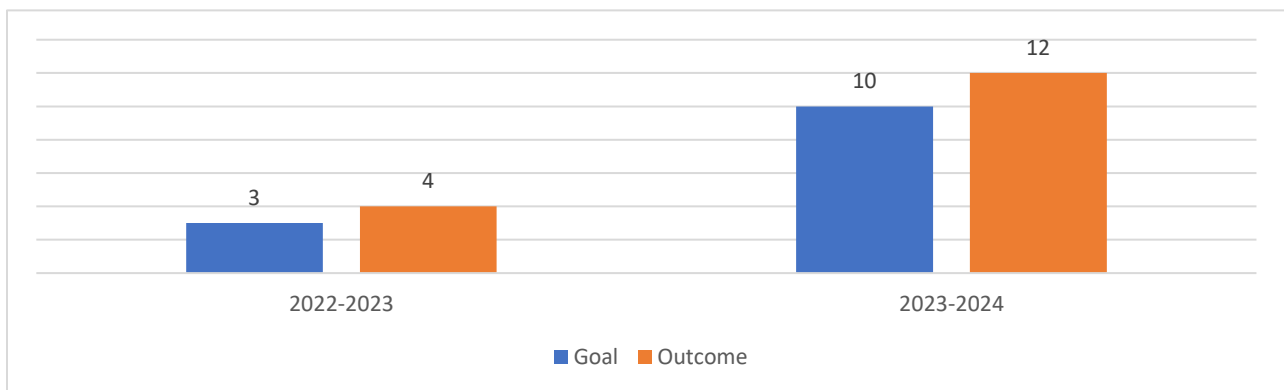
Objective #2: Child-care providers will have access to training and resources in promoting capacity building within centre's

Indicator: # of centre's who receive resources or trainings to build capacity for inclusion of all children

Goal: 10

Outcome: 12

Analysis: **GOAL MET**



Staff from 12 child-care centre's were provided training and resources to build capacity within their centre's. For the 2024-2025 year, the goal will be increased to strive for a higher level of achievement.

Experience of Services and other feedback:

Persons Served

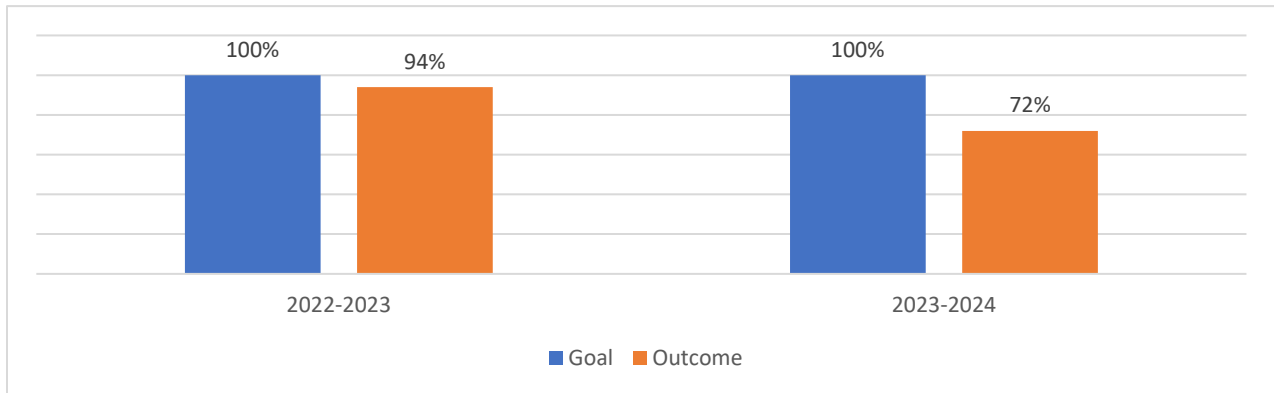
Objective: Families will indicate satisfaction with SCDP services.

Indicator: % of families that indicated satisfaction with SCDP services, on the Experience of Services Survey

Goal: 100%

Outcome: 72%

Analysis: **GOAL NOT MET**



In March 2024, a survey was conducted with families via Survey Monkey, in which one of the questions asked was “Are you satisfied with SCDP services?”. Out of the 25 responses, 72% indicated they were satisfied. As this survey was also provided to families in the SCD 13+ Program, who did not receive the same type of service and support, this could have skewed total results.

Stakeholders

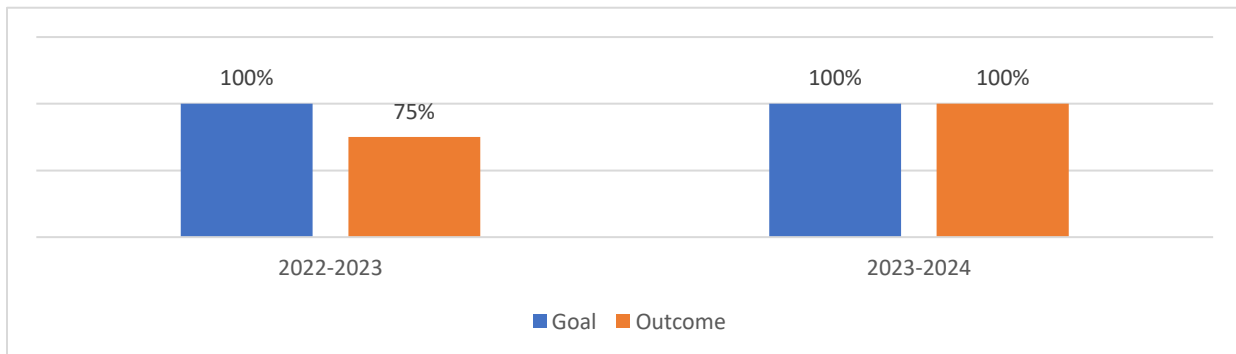
Objective: Child-care centers will indicate satisfaction with SCDP services.

Indicator: % of stakeholders that indicate satisfaction with SCDP services

Goal: 100%

Outcome: 100%

Analysis: **GOAL MET**



Unfortunately, only two child-care centres responded to the survey, which does not reflect a true and accurate result for the outcome of this objective.

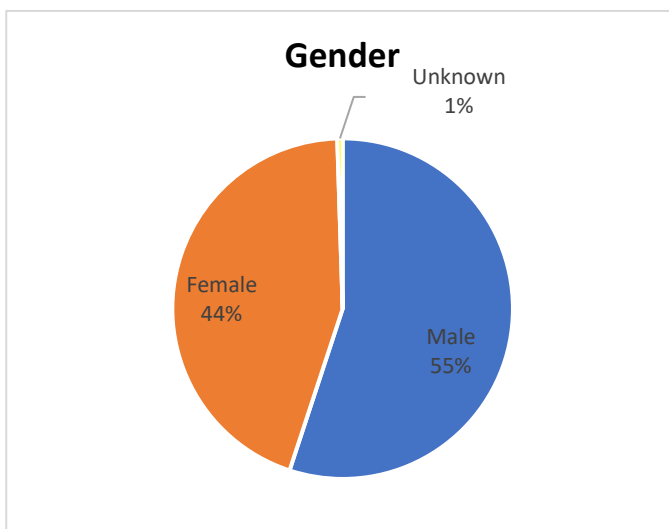
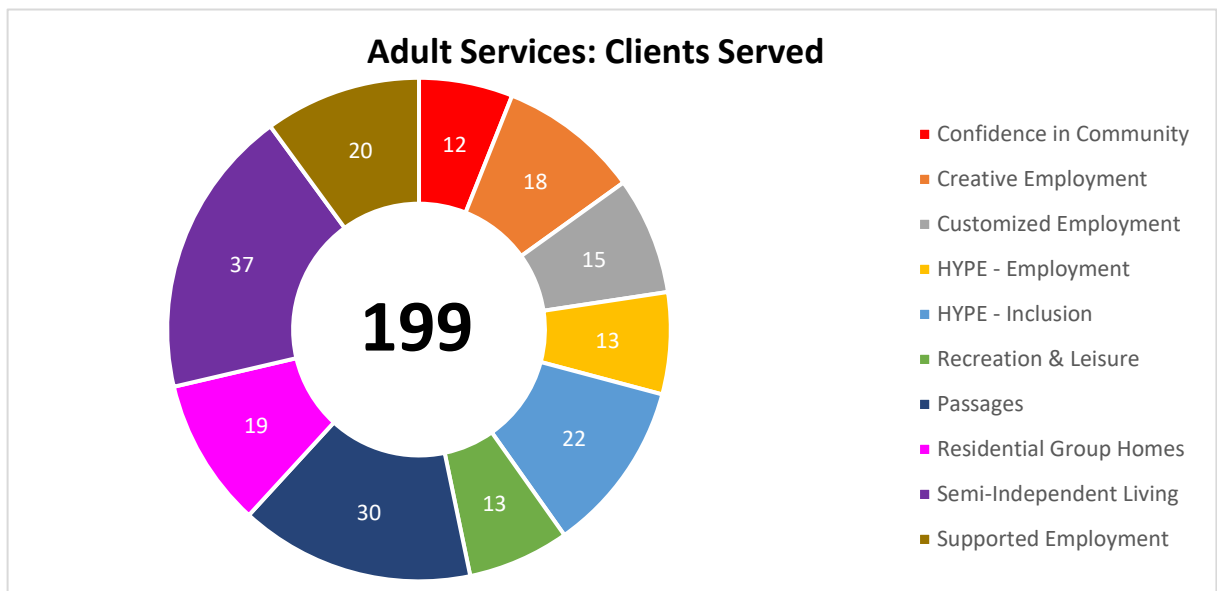
Adult Services

Specific characteristics of the individuals served in all the programs is below:

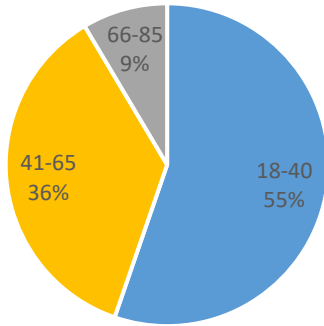
It's important to note that clients in some of these programs may not only attend just one of the programs, but possibly several of them. This is reflected in the "Clients Served Charts" below, which could indicate one individual in multiple programs, therefore being counted multiple times.

Furthermore, each program has characteristics for the individuals served directly in their programs, which can be found in their specific program report. Percentages are not displayed for the 'medical diagnosis' chart in order to maintain confidentiality for the individuals in that program.

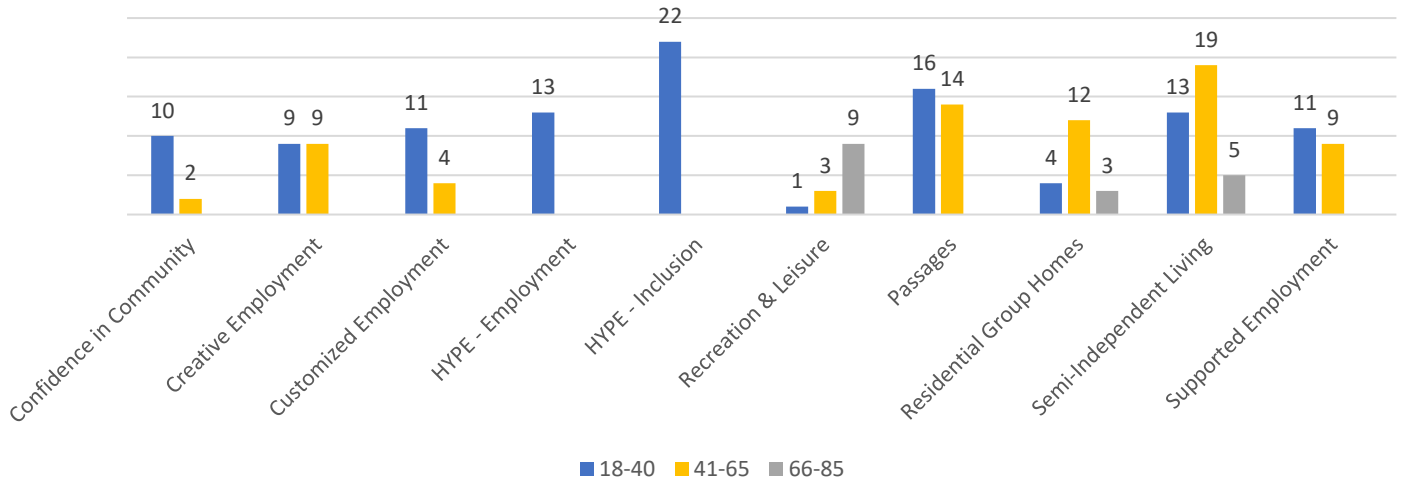
Client Characteristics:



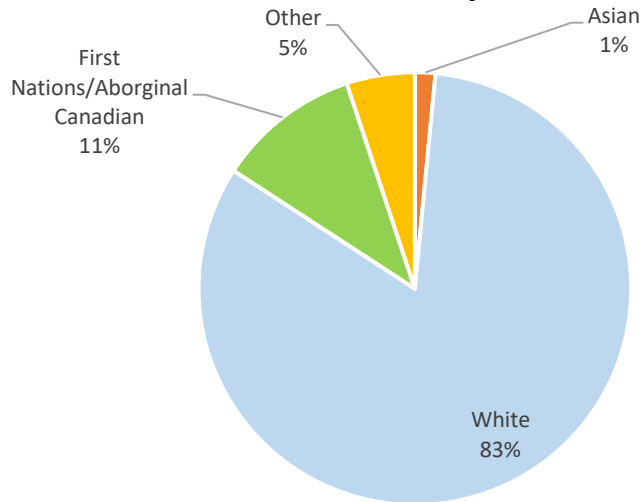
Age for all Adult Services Programs

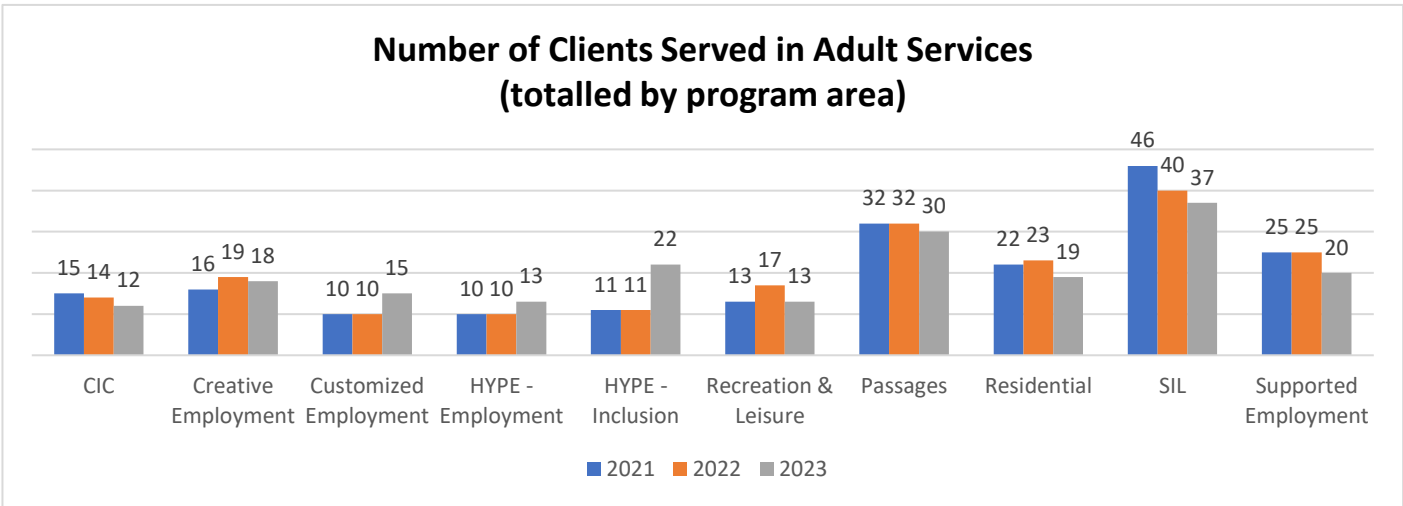
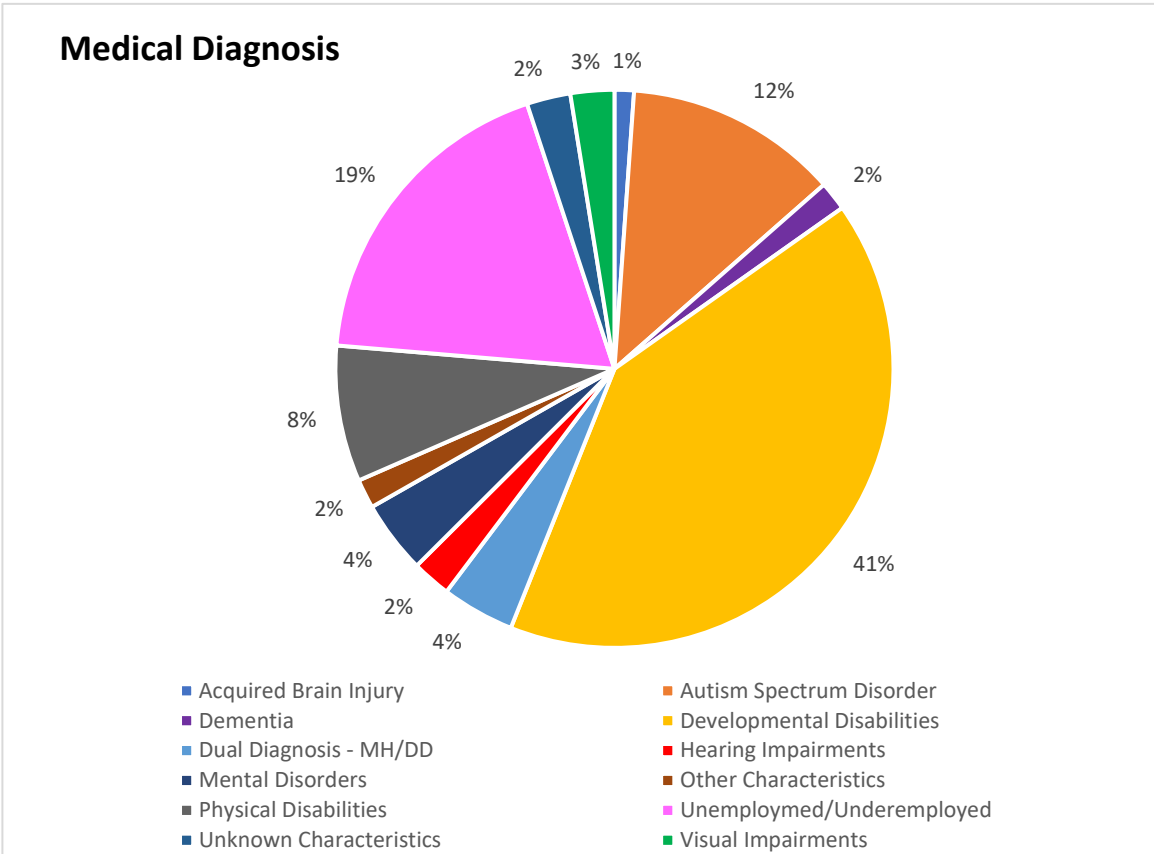


Age per Program



Ethnicity



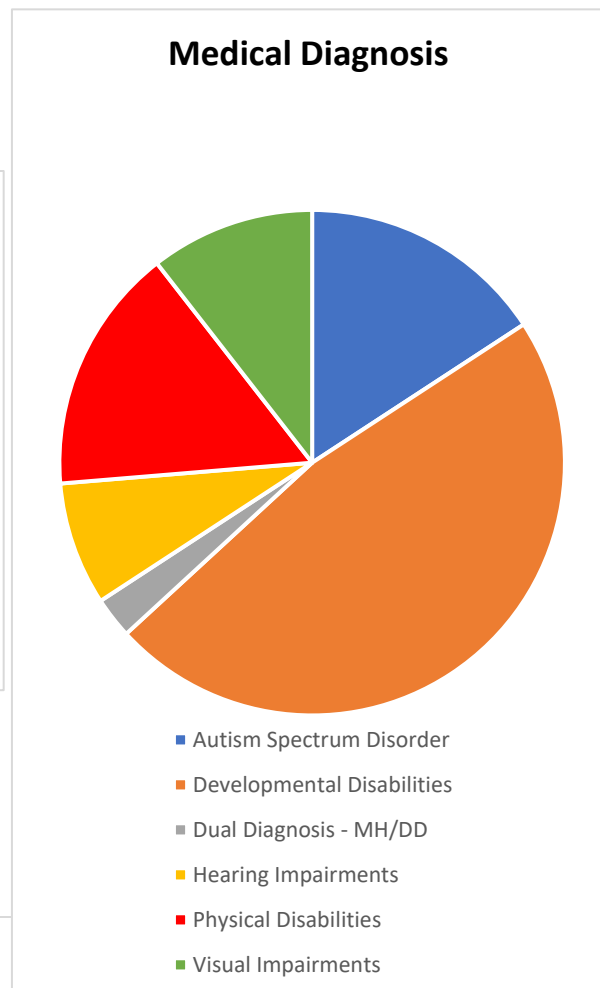
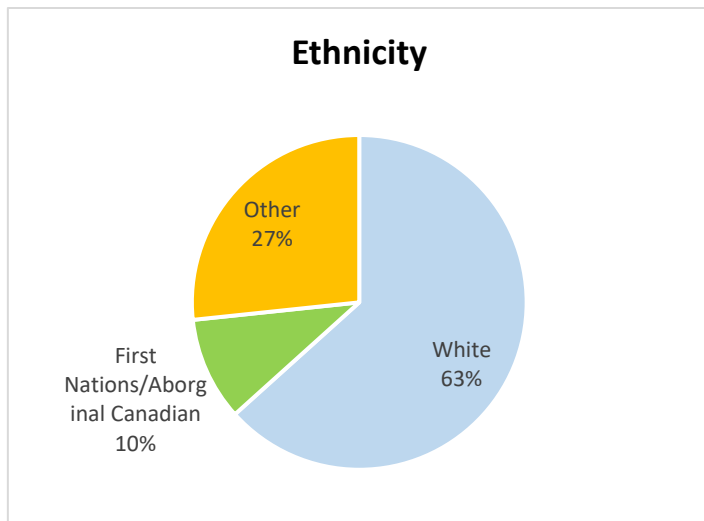
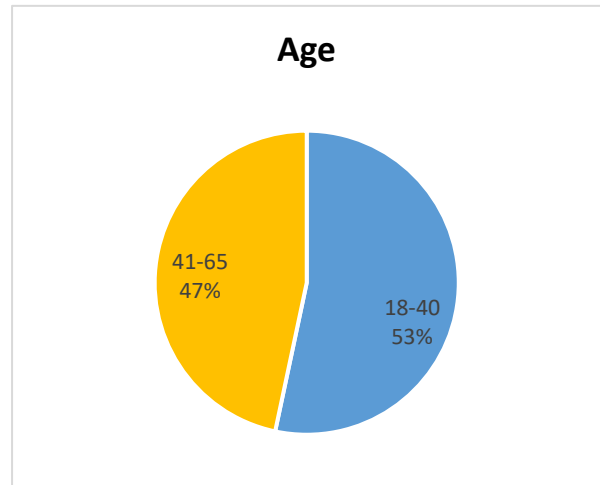
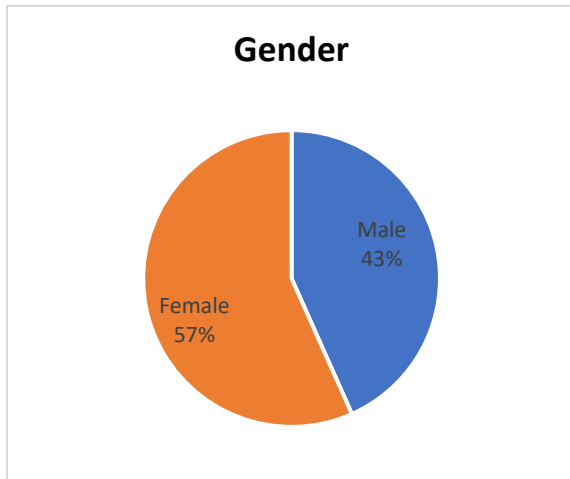


The number of clients served in the programs over the last few years, has not had experienced a significant change. For the programs that have experienced some minor client increases or decreases, this could have been impacted from staffing issues. When Rivercity Inclusion was going through the impacts of COVID-19, there was a significant challenge in recruitment and retention of employees. Due to staff shortages, this impacted programs directly by being unable to bring new clients into those various programs.

Passages

A fun and casual setting for building life skills and creating community. This program focuses on enhancing skills like - daily living, social, communication and pre-vocational. It has a large component of recreation and leisure activities as well as provides opportunities to access our community.

Characteristics of clients in the program:



Referrals into the Passages Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Each client has one new activity.

Indicator: # of new activities for each client

Goal: 1 per client

Outcome: 1 new activity for 17 out of 29 clients

Analysis: **GOAL NOT MET**

For the Passages Global clients, 9 out of the 21 individuals tried a new activity for the year. That is a 43% completion rate, in which they tried a new drumming activity.

Out of the Passages one-to-one clients, all 8 individuals tried a new activity, resulting in a 100% completion rate. 6 clients also tried the drumming activity, while the other 2 clients tried a new exploration activity (checking out a new store and a new place to go for a walk).

This objective will remain in the 2024-2025 Performance Measurement and Management Plan, but will focus on the new activity being attended on a regular basis, as opposed to a one-time try.

Resources used to achieve results for the persons served (efficiency):

Objective: Optimal utilization of staff resources, by reassessing client needs.

Indicator: % of reassessed client needs

Goal: 10%

Outcome: 33%

Analysis: **GOAL MET**

In Passages Global, 5 clients were reassessed being more suitable as one-to-one clients, removing them from the 1 staff to 4 client's ratio. Additionally, two clients left the program as they felt it did not suit their needs. While the intent of this objective is meaningful, it is not something to measure over the period of time, as it is a focus to complete at one period of time. Therefore, this objective will be removed from the 2024-2025 year, and a new one has been created.

Service Access:

Objective: Increase community awareness of events by indicating the number of events on the program's annual calendar.

Indicator: # of events on the annual calendar

Goal: 3

Outcome: 3

Analysis: **GOAL MET**

The program shared three upcoming events as they heard about them, and five clients reported that they attended a Halloween and Christmas event, saying they had heard about the event from the program calendar.

Experience of Services and other feedback:

Persons Served

Objective: Clients feel listened to.

Indicator: % of clients that feel listened to, as indicated on the Experience of Services Survey

Goal: 95%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey for this program was included in the Community Inclusion Survey, which also had responses from: Confidence in Community, Recreation & Leisure, and HYPE – Inclusion. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

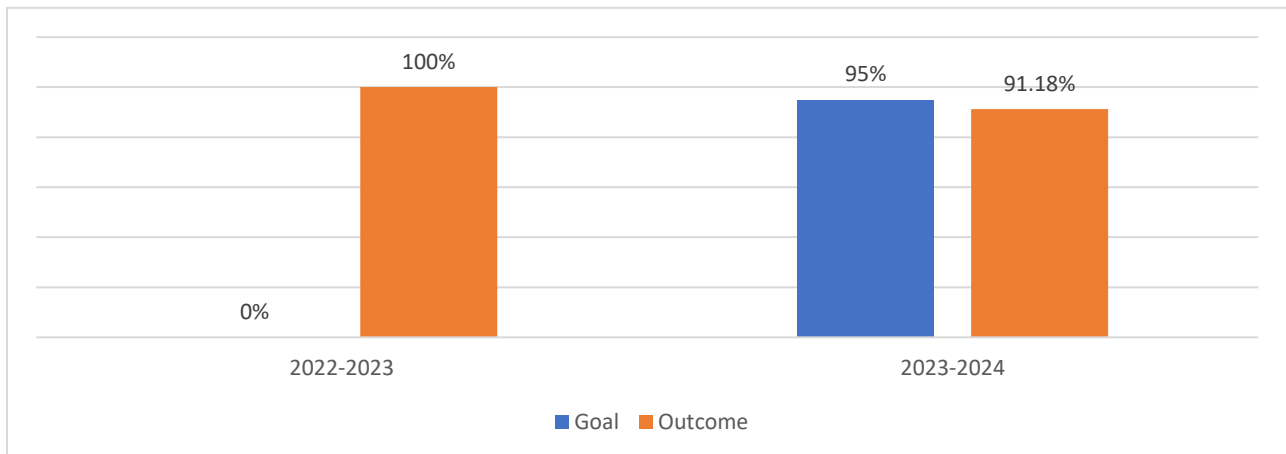
Objective: Stakeholders are satisfied with the services provided.

Indicator: % of families/caregivers that are satisfied with services provided, as indicated on the Experience of Services Survey

Goal: 95%

Outcome: 91.18%

Analysis: **GOAL NOT MET**



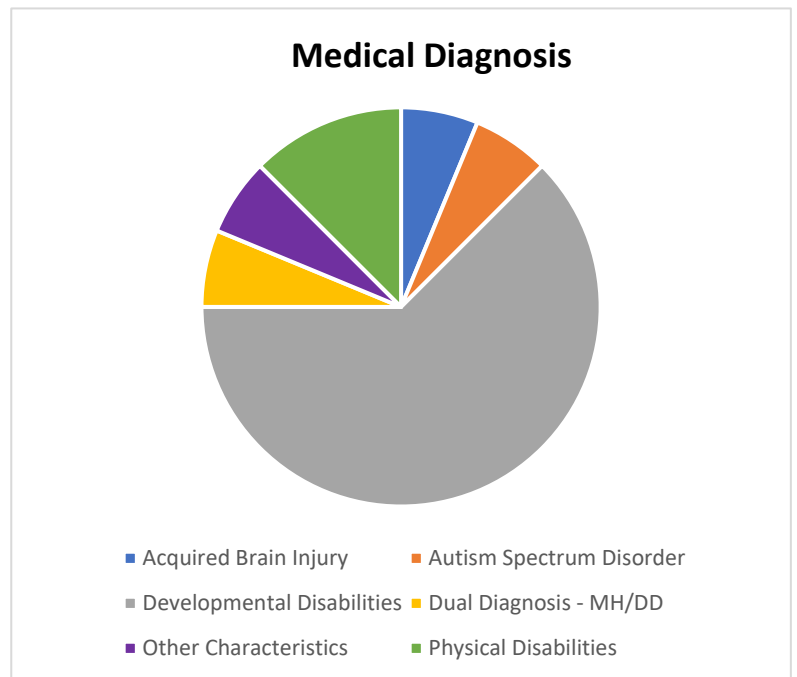
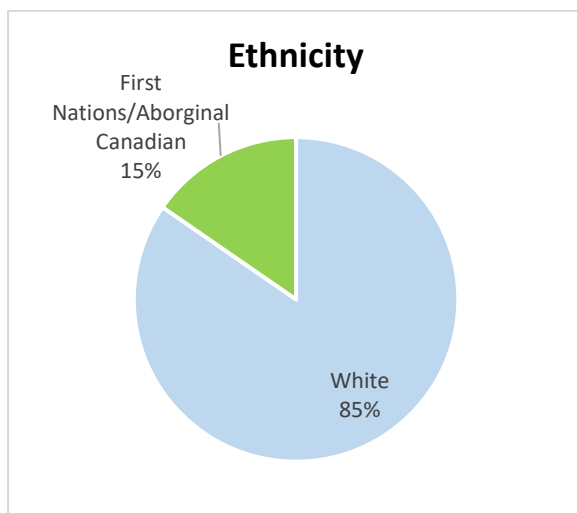
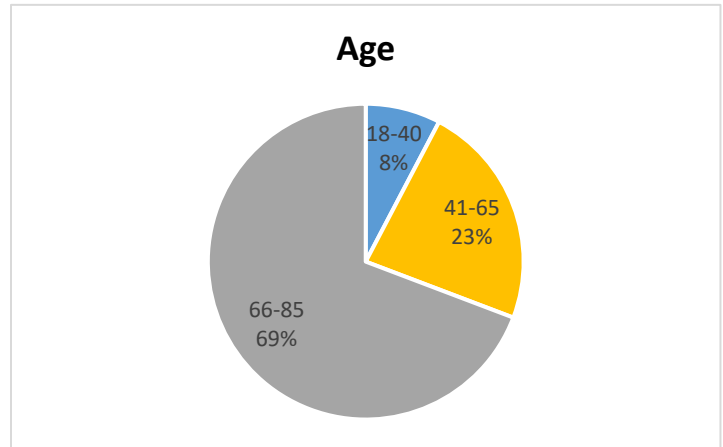
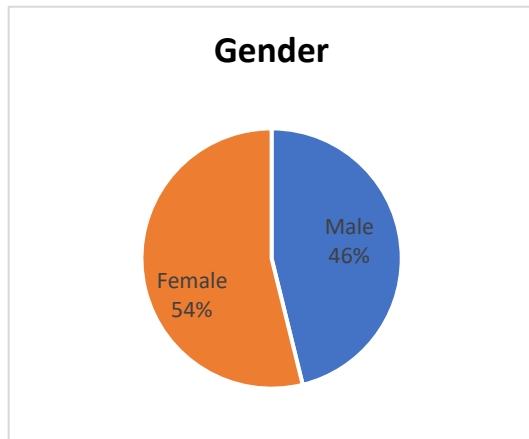
The Stakeholder Experience of Services Survey for this program was included with all the Adult Service programs. Unfortunately, it was discovered that this does not provide true and accurate results for each individual program, as there are several programs included in this one survey.

In the 2022-2023 Performance Measurement and Management Plan, there was no goal set for stakeholder satisfaction, however the question was still asked on the Experience of Services Survey; which is why the goal is 0% on the above chart. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Recreation and Leisure

A laid-back atmosphere where participants are typically older adults who are retired from work or are seeking support in a relaxed and age friendly environment. Services are offered in a smaller group setting. The program provides an opportunity to explore and access community resources and events.

Characteristics of clients in the program:



Referrals into the Recreation & Leisure Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Each client has one new activity.

Indicator: # of new activities for each client

Goal: 1

Outcome: 1 activity for 12 out of 13 clients

Analysis: **GOAL NOT MET**

Out of the 13 clients who attend the program, 12 individuals added a new activity to their schedule – drumming! That is a 92% success rate, however one client did not add a new activity as they only attend program periodically. The other three clients started participating in an -in-house music session that takes place.

This objective will remain in the 2024-2025 Performance Measurement and Management Plan, with a focus more on clients being offered new community activities.

Resources used to achieve results for the persons served (efficiency):

Objective: Optimal utilization of staff resources, by reassessing client needs.

Indicator: % of reassessed client needs

Goal: 10%

Outcome: NIL

Analysis: **GOAL NOT MET**

Unfortunately, this objective was not set up to be tracked properly, therefore no results were available. As this is also a difficult thing to measure, this objective will be removed from the 2024-2025 Performance Measurement and Management Plan.

Service Access:

Objective: Increase community awareness of events by indicating the number of events on the program's annual calendar.

Indicator: # of events on the annual calendar

Goal: 3

Outcome: 5

Analysis: **GOAL MET**

Events are continuously posted on calendars in the client areas. Throughout the year, five clients reported that they attended a new event that they saw posted on the calendar.

Experience of Services and other feedback:

Persons Served

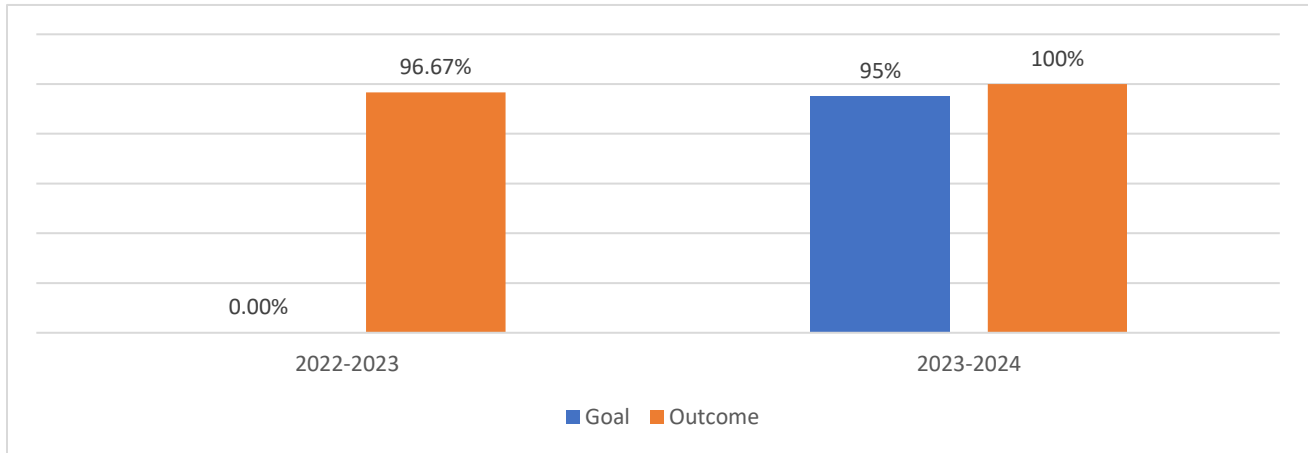
Objective: Clients feel listened to.

Indicator: % of clients that feel listened to, as indicated on the Experience of Services Survey

Goal: 95%

Outcome: 100%

Analysis: **GOAL MET**



The program exceeded its goal achieving 100% in clients indicating that they feel listened to. In the 2022-2023 Performance Measurement and Management Plan, there was no goal set for “clients feeling listened to”, however the question was still asked on the Experience of Services Survey; which is why the goal is 0% on the above chart.

The Client Experience of Services Survey for this program was included in the Community Inclusion Survey, which also had responses from: Passages, Confidence in Community, and HYPE – Inclusion. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

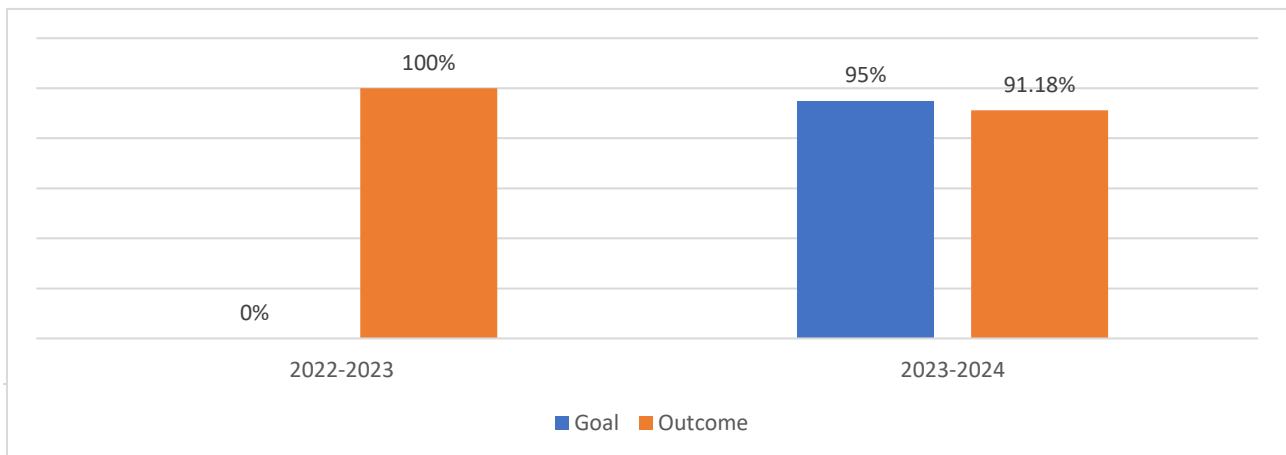
Objective: Stakeholders are satisfied with the services provided.

Indicator: % of families/caregivers that are satisfied with services provided, as indicated on the Experience of Services Survey

Goal: 95%

Outcome: 91.18%

Analysis: **GOAL NOT MET**



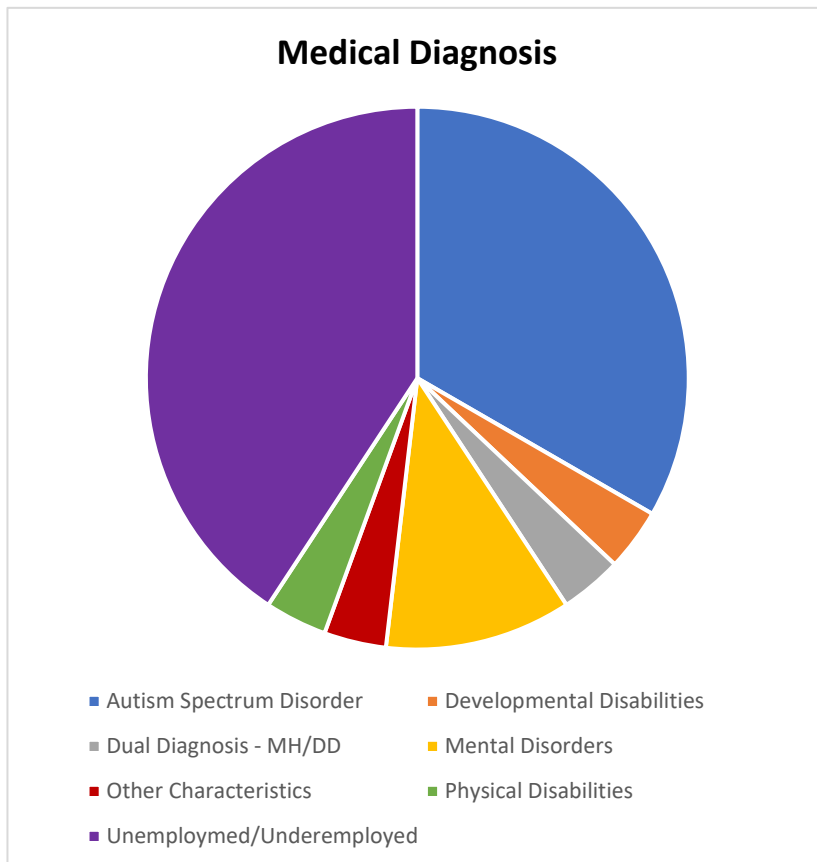
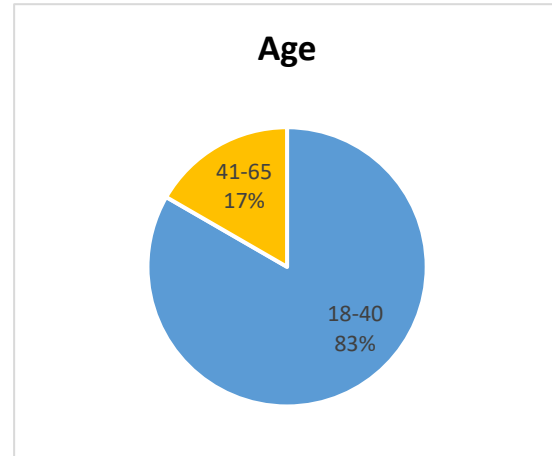
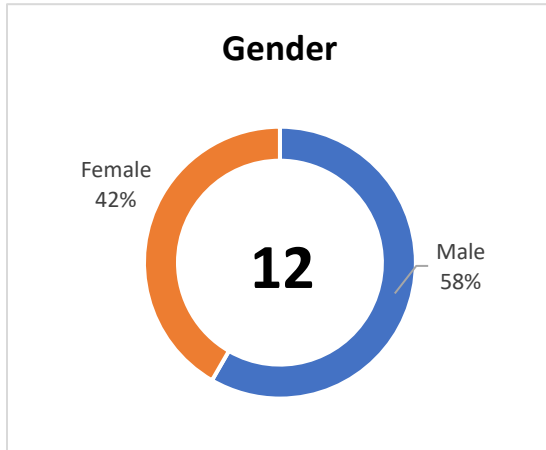
The Stakeholder Experience of Services Survey for this program was included with all the Adult Service programs. Unfortunately, it was discovered that this does not provide true and accurate results for each individual program, as there are several programs included in this one survey.

In the 2022-2023 Performance Measurement and Management Plan, there was no goal set for stakeholder satisfaction, however the question was still asked on the Experience of Services Survey; which is why the goal is 0% on the above chart. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Confidence in Community (CIC)

Individual services are developed in response to the unique needs of the participant, helping to increase independence and connection to their community. Service supports focus community recreation, developing life and money management skills, accessing personal development activities, establishing healthy relationships and support to access generic resources. Services are provided during hours that are agreeable to the person being supported.

Characteristics of clients in the program:



There are 12 clients who participated in this program. All 12 clients identified their ethnicity as white.

Referrals into the CIC Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Each client has one new activity.

Indicator: % of new activities attempted for all clients

Goal: 75%

Outcome: 65%

Analysis: **GOAL NOT MET**

7 of the clients participating in this program tried a new activity in the year.

Resources used to achieve results for the persons served (efficiency):

Objective: Staff will incorporate the SIL van into their scheduled after-hours, by reducing monthly expenses in mileage.

Indicator: % of reduced monthly expenses in mileage sheets and van log

Goal: 10%

Outcome: 0%

Analysis: **GOAL NOT MET**

The intent behind creating this objective was to save on mileage costs in the budget, as the CIC program officially runs out of the Semi-Independent Living program space. Unfortunately, this idea did not work as the start and finish times of shifts were directly out of the SIL office, which ended up taking away hours from the participants in that program.

Service Access:

Objective: Each client will obtain a LIFE pass.

Indicator: % of clients who will have their own LIFE pass

Goal: 80%

Outcome: 70%

Analysis: **GOAL NOT MET**

Of the clients that participate in this program, 70% obtained a LIFE pass. The 30% who did not obtain a LIFE pass, specifically mentioned they had no interest in obtaining one. For the 2024-2025 year, the focus of this objective will be for the clients who have a LIFE pass and that they are utilizing it as much as possible.

Experience of Services and other feedback:

Persons Served

Objective: Clients are happy with the services provided.

Indicator: % of clients who indicate they are happy with services, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey for this program was included in the Community Inclusion Survey, which also had responses from: Passages, Recreation & Leisure, and HYPE – Inclusion. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

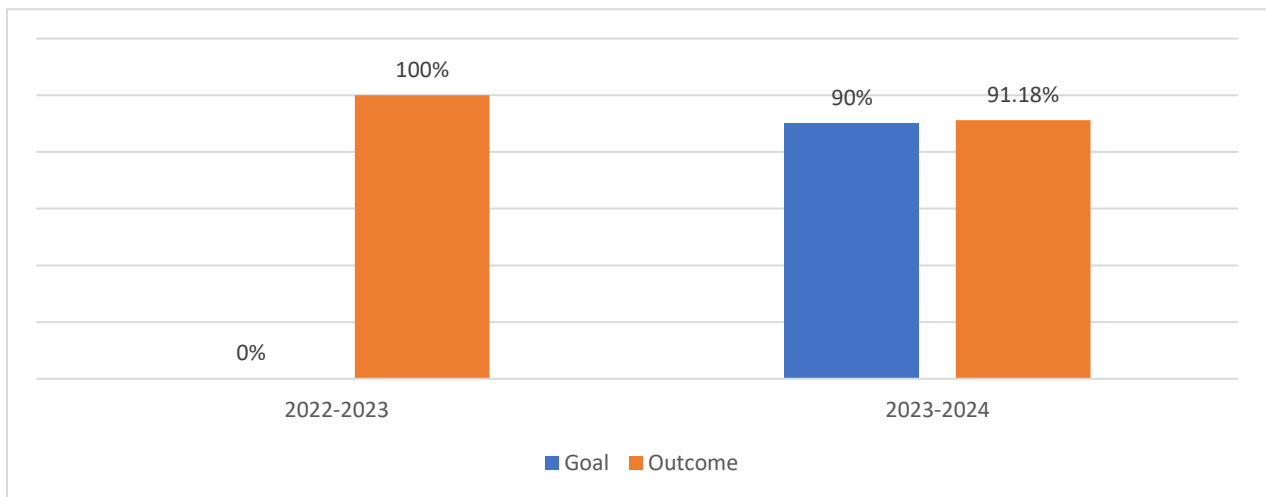
Objective: Families are satisfied with the services provided.

Indicator: % of families who indicate they are satisfied with services provided, on the Experience of Services Survey

Goal: 90%

Outcome: 91.18%

Analysis: **GOAL MET**



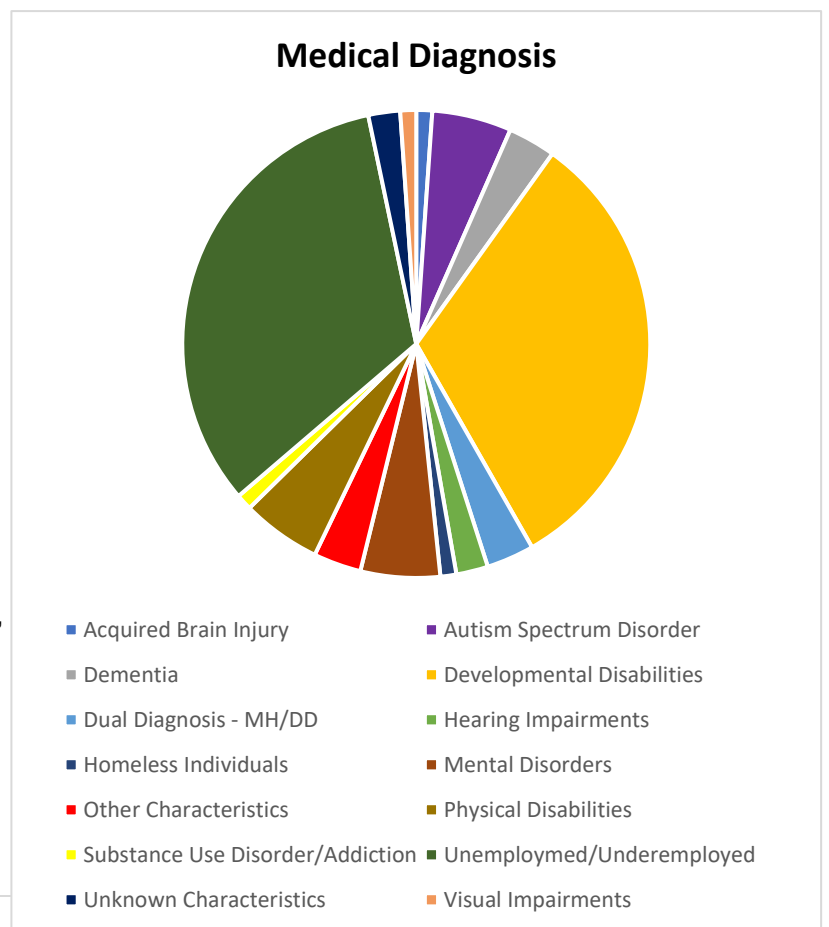
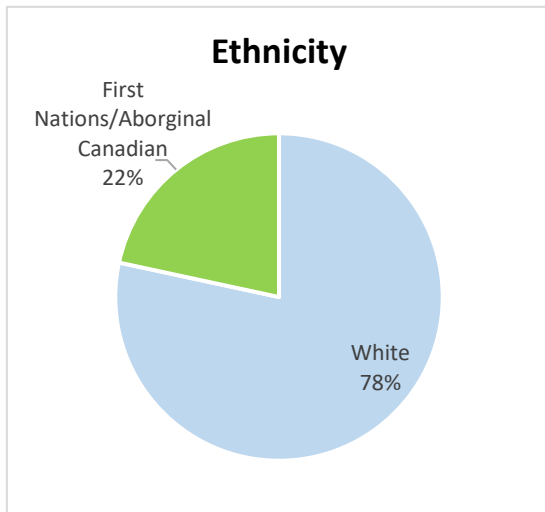
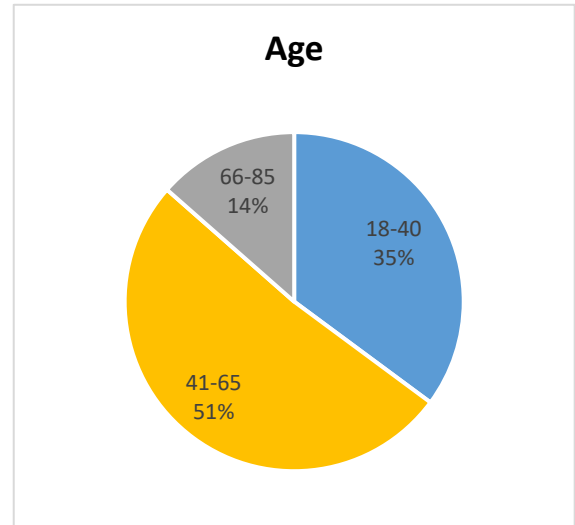
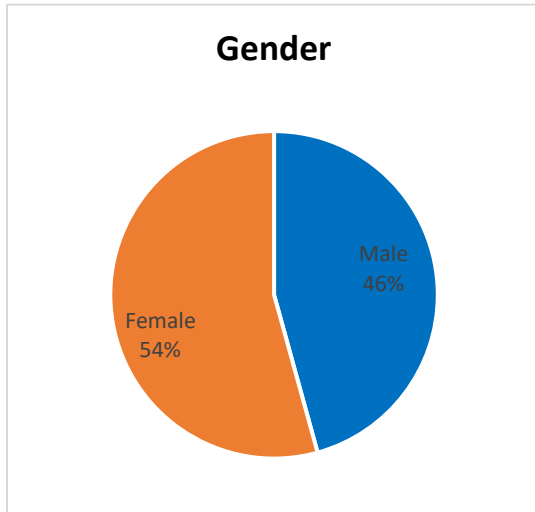
The Stakeholder Experience of Services Survey for this program was included with all the Adult Service programs. Unfortunately, it was discovered that this does not provide true and accurate results for each individual program, as there are several programs included in this one survey.

With that being said, there was a decrease in stakeholder satisfaction by 8.82% with a lower response rate in the 2022-2023 survey year as well. This data appears that it could be skewed, as there were lower responses last year with a higher satisfaction rate, than this year. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Independent Living

Independent Living Services provide support to adults who live independently in their own home. A wide range of supports are available to promote skill development and assistance to manage health and mental health well-being. Supports often include things like cooking, budgeting, household tasks, and connecting to other supports in your community.

Characteristics of clients in the program:



Referrals into the Independent Living Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Incorporate a learning activity into existing program gatherings.

Indicator: # of gatherings that have an additional educational component

Goal: 6

Outcome: 6

Analysis: **GOAL MET**

Of the 8 consistent clients who participate in the lunch program every week, 6 of them participated in a new learning activity into their service. The new activity consists of several opportunities, such as: art therapy, kitchen safety, social media safety, healthy relationships, Foodsafe, telephone scam preparation, and oral care.

Resources used to achieve results for the persons served (efficiency):

Objective: Promoting client transportation independence by reducing mileage.

Indicator: % of reduced mileage and noted in log book, showing client transportation to achieve services

Goal: 10%

Outcome: 45%

Analysis: **GOAL MET**

The program exceeded the targeted goal of 10%, coming way under budget in mileage spending for the timeframe. Campbell River experienced a bus strike from mid-December 2023 to February 2024. The bus strike unfortunately affected the program's mileage spending, due to clients being unable to take public transportation during program service time.

Service Access:

Objective: Identify medical support needed for each client.

Indicator: % of progress notes in chart located in client binder

Goal: 100%

Outcome: 100%

Analysis: **GOAL MET**

The intent behind this objective was to use it as baseline, identifying which clients have medical services and which clients are seeking medical services independently. This was to ensure there were no clients who had not received the medical care that is needed. Some clients choose to share this information, while others choose to keep that information private.

Experience of Services and other feedback:

Persons Served

Objective #1: Clients feel satisfied with the program.

Indicator: % of clients that indicate that they are satisfied with the program, on the Experience of Services Survey

Goal: 85%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey titled Outreach, was specific to the Independent Living Program, which resulted in program specific results. There was a 96.17% response rate, with all respondents indicating they were “happy with the support they received”.

Objective #2: Clients feel satisfied with weekly hours allotted to them.

Indicator: % of clients who answered: “Are your weekly hours meeting your needs?”, on the Experience of Services Survey

Goal: 85%

Outcome: NIL

Analysis: **GOAL NOT MET**

Unfortunately, this question was forgotten about when reviewing the 2024 Experience of Services Survey before sending out to the clients in the program, resulting in no answers.

Stakeholders

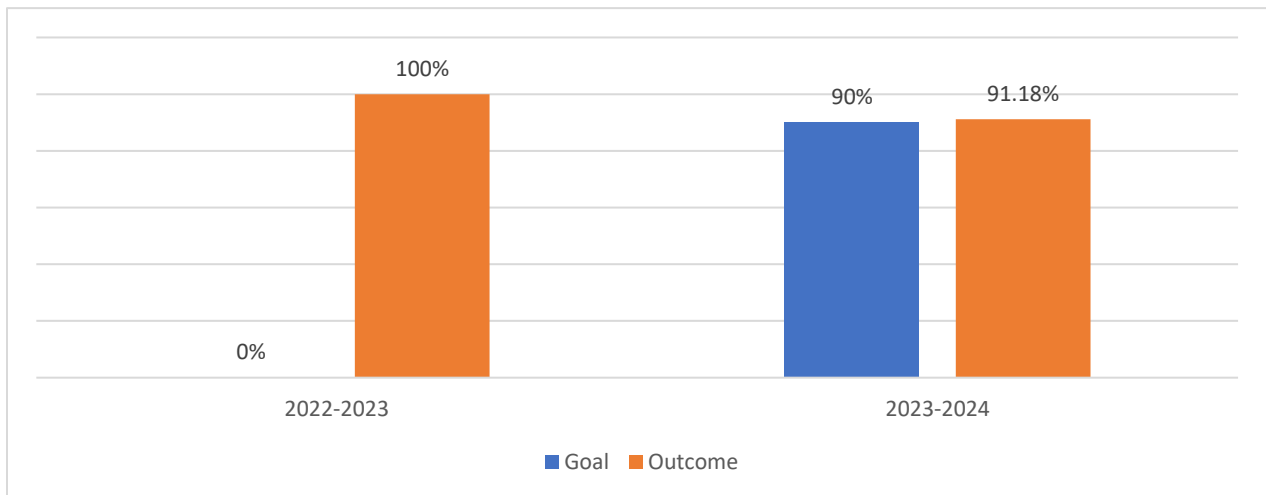
Objective: Stakeholders are satisfied with the services provided by program staff.

Indicator: % of families/caregivers that indicate they are satisfied with the services provided, on the Experience of Services Survey

Goal: 85%

Outcome: 91.18%

Analysis: **GOAL MET**

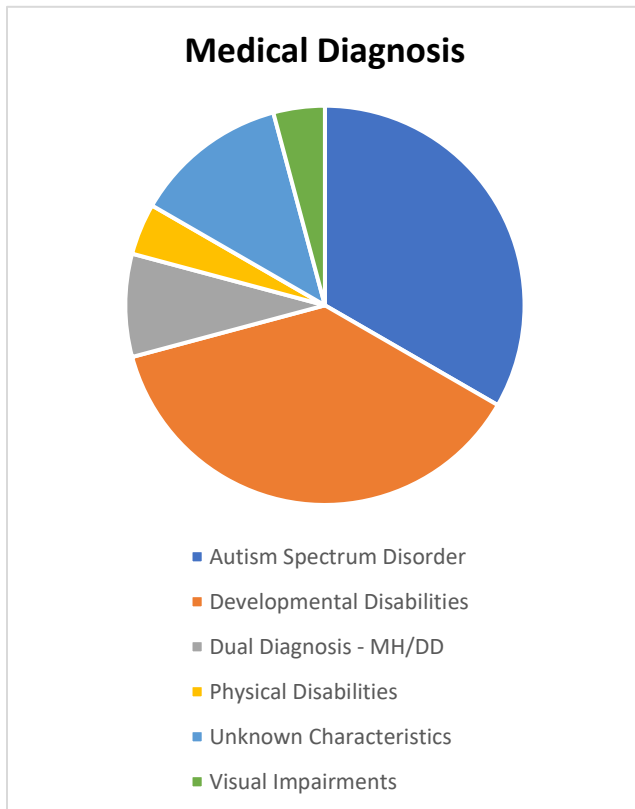
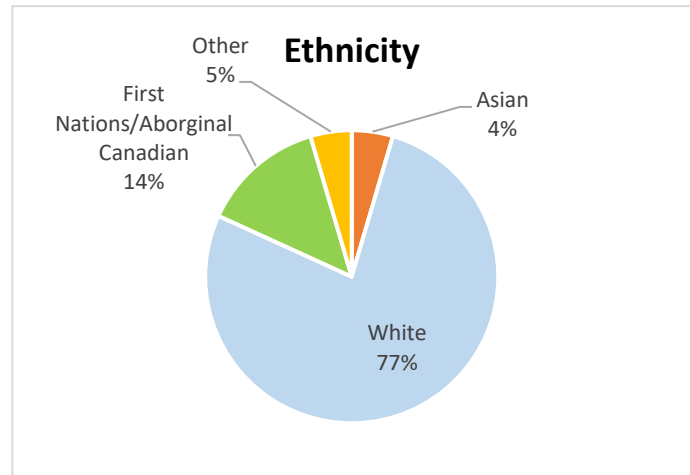
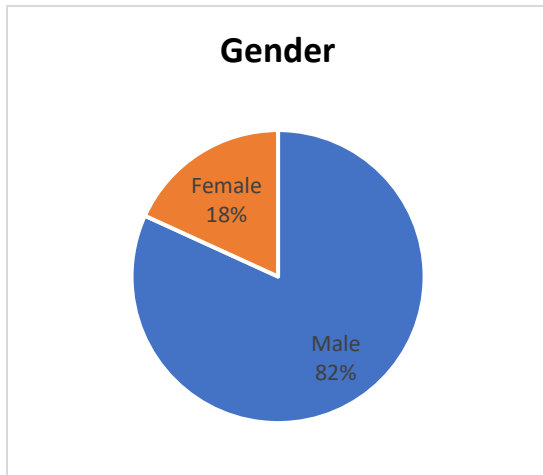


There was a decrease in stakeholder satisfaction by 8.82% with a lower response rate in the 2022-2023 survey year as well. This data appears that it could be skewed, as there were lower responses last year with a higher satisfaction rate, than this year. For the 2025 survey, there will be no Stakeholder Experience of Services Survey provided to the clients families/caregivers, as the individuals in this program are independent.

HYPE – Inclusion

A program for young adults that has a mix of community inclusion with an element of preparation for future employment. The program offers community inclusion activity and personal development, while assisting with gaining new life skills needed for exploring employment within the community.

Characteristics of clients in the program:



All clients that participate in this program, are in the 18-40 age group.

Referrals into the HYPE – Inclusion Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Introduce new life skills.

Indicator: # of clients that participated in life skills training

Goal: 4

Outcome: NIL

Analysis: **GOAL NOT MET**

Shortly after creating these new objectives for this Performance Measurement and Management Plan, there was a long vacancy in the program supervisor position. Unfortunately, this resulted in no data being tracked for this objective. The idea behind this objective is very meaningful, and will continue in the 2024-2025 plan, however will be measured on an annual basis instead of quarterly.

Resources used to achieve results for the persons served (efficiency):

Objective: Increase community recreational opportunities.

Indicator: % of clients that have a LIFE pass

Goal: 100%

Outcome: 100%

Analysis: **GOAL MET**

All clients in the HYPE – Inclusion Program have a LIFE pass, which helped in their ability to increase opportunities in the community. This objective will be removed from the 2024-2025 Performance Measurement and Management Plan, as it is fully implemented.

Service Access:

Objective: Increase community access via public transit.

Indicator: # of public transit outings used as a group

Goal: 10

Outcome: 10

Analysis: **GOAL MET**

This objective was led by a client in the HYPE – Inclusion Program which had a regular occurrence of bus outings taking place. Even though the goal was met, in September 2023, this individual was no longer able to lead this, as other opportunities had presented themselves. If this had continued, the program could have easily had a higher outcome result. However, then in mid-December 2023, BC Transit went on strike until February 2024, making bus outings no longer possible.

Experience of Services and other feedback:

Persons Served

Objective: Clients are happy with the program.

Indicator: % of clients that are happy with the program, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey for this program was included in the Community Inclusion Survey, which also had responses from: Passages, Recreation & Leisure, and Confidence in Community. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

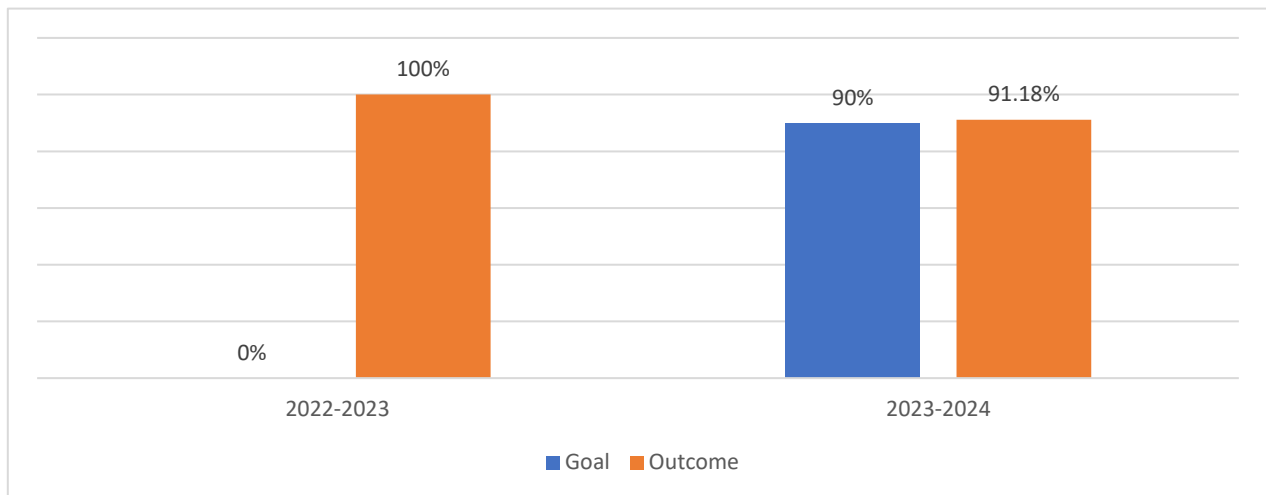
Objective: Stakeholders are satisfied with the service in the program.

Indicator: % of families/caregivers that are satisfied with the program, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 91.18%

Analysis: **GOAL MET**



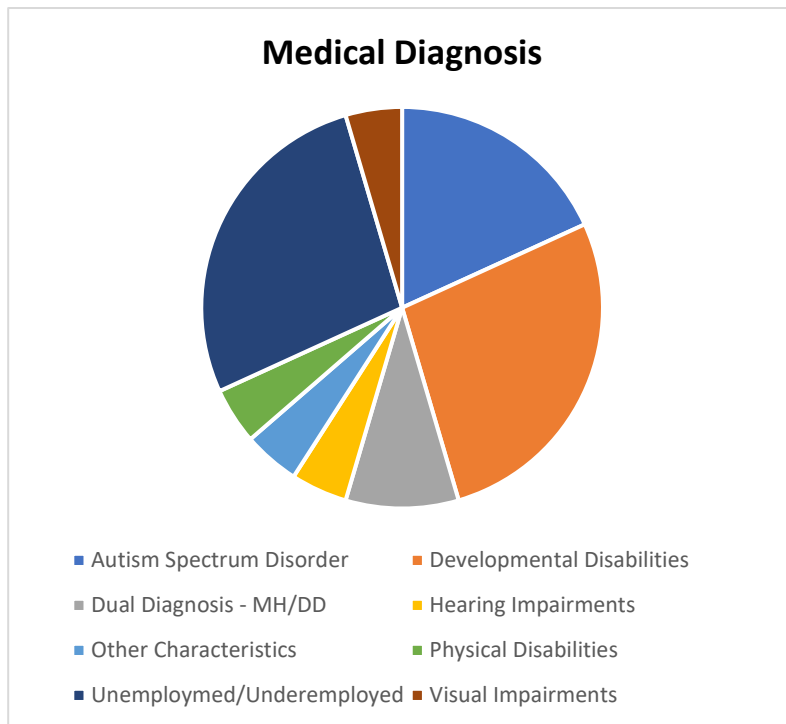
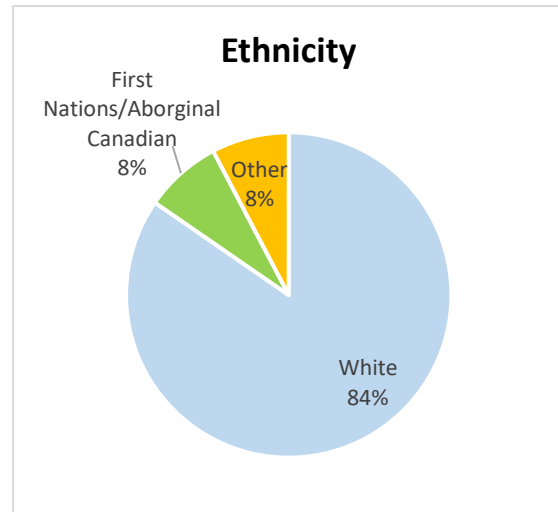
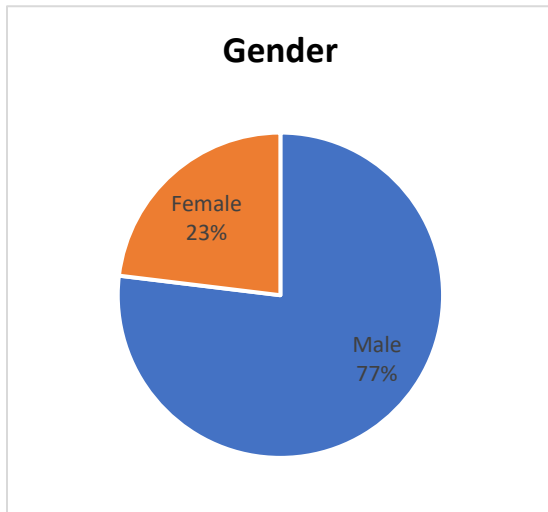
The Stakeholder Experience of Services Survey for this program was included with all the Adult Service programs. Unfortunately, it was discovered that this does not provide true and accurate results for each individual program, as there are several programs included in this one survey.

With that being said, there was a decrease in stakeholder satisfaction by 8.82% with a lower response rate in the 2022-2023 survey year as well. This data appears that it could be skewed, as there were lower responses last year with a higher satisfaction rate, than this year. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

HYPE – Employment

A program for young adults that has a mix of community inclusion with an element of preparation for future employment. The program offers community inclusion activity and personal development, while assisting with gaining new life skills needed for exploring employment within the community.

Characteristics of clients in the program:



All clients that participate in this program, are in the 18-40 age group.

Referrals into the HYPE – Employment Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Introduce new life skills for employment readiness.

Indicator: % of clients that participated in life skills training

Goal: 50%

Outcome: NIL

Analysis: **GOAL NOT MET**

Shortly after creating these new objectives for this Performance Measurement and Management Plan, there was a long vacancy in the program supervisor position. Unfortunately, this resulted in no data being tracked for this objective. The idea behind this objective is very meaningful, and will continue in the 2024-2025 plan, however with a shift in re-wording to more focus on employment readiness for the clients.

Resources used to achieve results for the persons served (efficiency):

Objective: Clients are independent in their jobs.

Indicator: % of less staff support required

Goal: 50%

Outcome: 60%

Analysis: **GOAL MET**

The 60% reduction in less staff support required for client in their jobs was measured on an annual basis, and not quarterly, as the objective was set. In reviewing this data, an annual time of measure would be more appropriate for tracking this goal, as 50% reduction per quarter is a high target to meet.

Service Access:

Objective: Clients are employment ready.

Indicator: % of clients that will have WHMIS and Foodsafe

Goal: 70%

Outcome: 75% - WHMIS and 16.67% - Foodsafe

Analysis: **GOAL PARTIALLY MET**

The program met their goal for clients obtaining WHMIS, in preparing them for employment. Unfortunately, the goal for Foodsafe was not met, as only 2 out of the 12 participants participated in obtaining Foodsafe. This objective will be removed for the 2024-2025 year but will be incorporated into the "Results achieved for persons served" objective.

Experience of Services and other feedback:

Persons Served

Objective: Clients are happy with the program.

Indicator: % of clients that indicate they are happy with the program, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey for this program was included in the Employment Survey, which also had responses from: Supported/Customized Employment, and Skyline Productions.. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

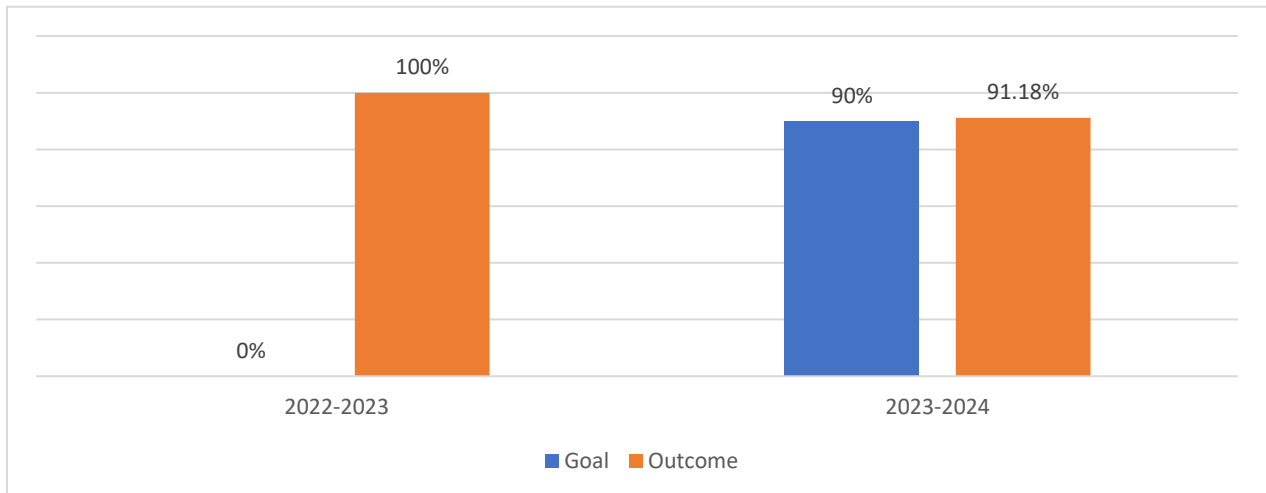
Objective: Stakeholders are satisfied with the service in the program.

Indicator: % of families/caregivers that are satisfied with the program, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 91.18%

Analysis: **GOAL MET**



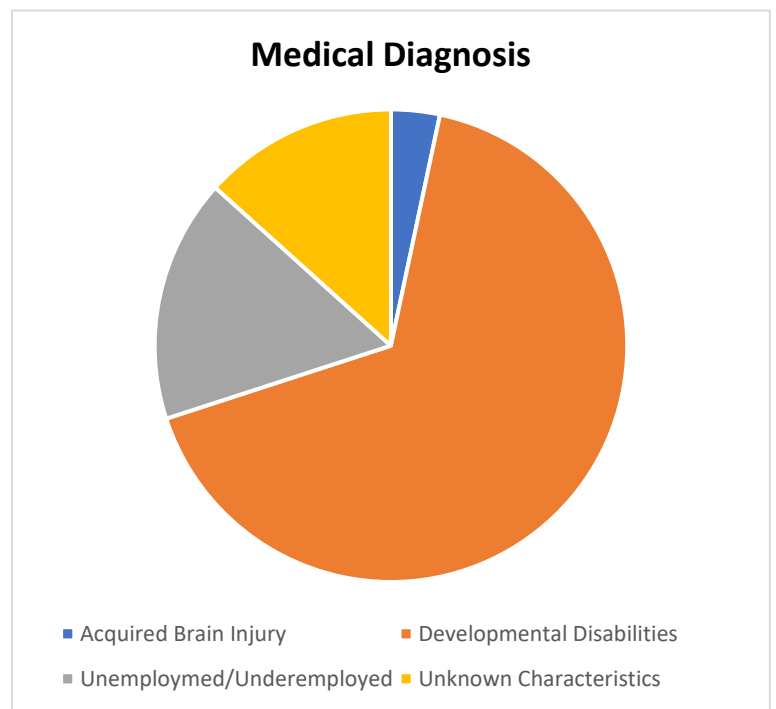
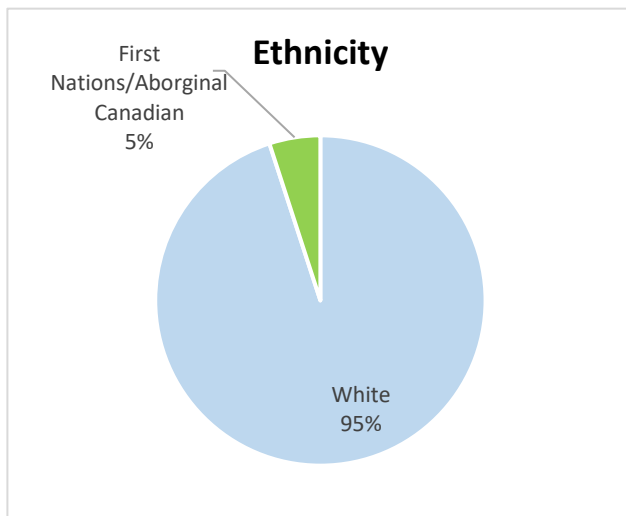
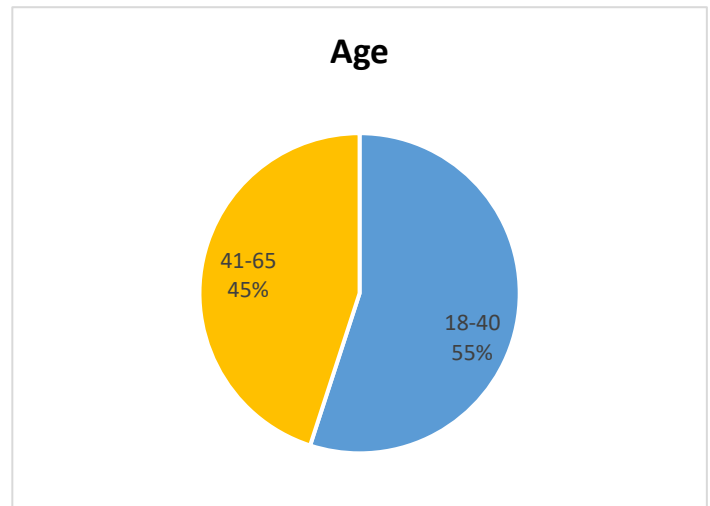
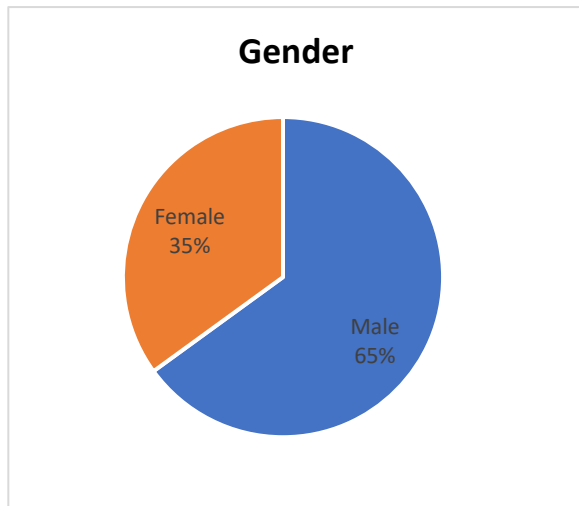
The Stakeholder Experience of Services Survey for this program was included with all the Adult Service programs. Unfortunately, it was discovered that this does not provide true and accurate results for each individual program, as there are several programs included in this one survey.

With that being said, there was a decrease in stakeholder satisfaction by 8.82% with a lower response rate in the 2022-2023 survey year as well. This data appears that it could be skewed, as there were lower responses last year with a higher satisfaction rate, than this year. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Supported Employment

Rivercity Inclusion partners with job seekers, families, personal networks, and the business community to ensure quality supports and services for both the employee and employer. Some of the services offered are but not limited to, employment planning, business planning, resume preparation, interview skills, employment counseling, marketing/job searching, job orientating, job coaching, and follow-up for both the employer and employee. Job seekers may utilize all services or choose the service they need to pursue and attain their career goals.

Characteristics of clients in the program:



Referrals into the Supported Employment Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Obtain new employers for clients to work with.

Indicator: # of new employers for the clients seeking employment

Goal: 2

Outcome: 1

Analysis: **GOAL NOT MET**

One new employer has joined the Supported Employment Program, offering jobs for clients seeking employment. There has been one other employer in Campbell River who has approached the program, but nothing official has been determined quite yet. This objective will remain in the 2024-2025 Plan, with a change in the time of measurement to annual, instead of semi-annual, in hopes of making this more achievable.

Resources used to achieve results for the persons served (efficiency):

Objective: Coordinate access to community training opportunities.

Indicator: # of individuals completing certificates not offered by job developers

Goal: 5

Outcome: 1

Analysis: **GOAL NOT MET**

The program was able to support one individual in September 2023, to access the Culinary Training Program at Vancouver Island University in Nanaimo; in which this individual is currently completing. This objective will be removed from the 2024-2025 Plan, to focus on an objective that is more relevant to this domain.

Service Access:

Objective: Timely identification of employment interests.

Indicator: # of months taken to complete client interests

Goal: 3

Outcome: Client 1 – 1 month; Client 2 – 3 months

Analysis: **GOAL MET**

There were 2 clients this year that began the process of identifying employment interests. One client was able to determine their interest in regard to employment within one month; and obtained employment from initial intake after 12 months. This individual took part in training courses in the area of their interest, before securing their employment.

The second client was able to determine their employment interest within 3 months of intake into the program. Work experience in that area of their interest began 8 months after determining their employment interest, and obtained permanent employment one month after their work experience began.

Experience of Services and other feedback:

Persons Served

Objective: Job seekers are satisfied with services received.

Indicator: % of clients who are happy with services received, as indicated on the Experience of Services Survey

Goal: 80%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey for this program was included in the Employment Survey, which also had responses from: Supported Employment, Customized Employment, and HYPE - Employment. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

Objective: Employers are satisfied with the support received.

Indicator: % of employers who are happy with the support received, as indicated on the Experience of Services Survey

Goal: 80%

Outcome: 100%

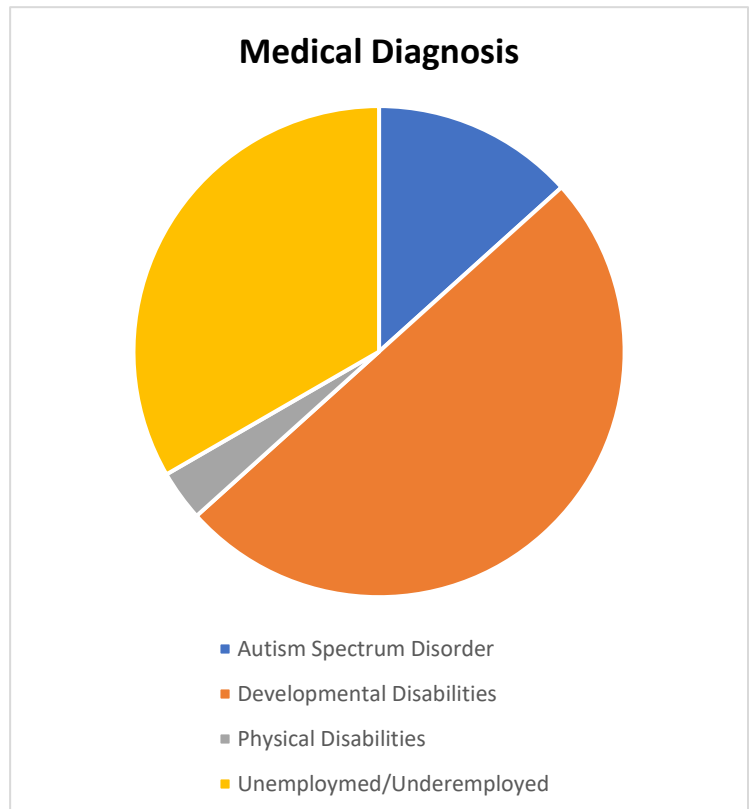
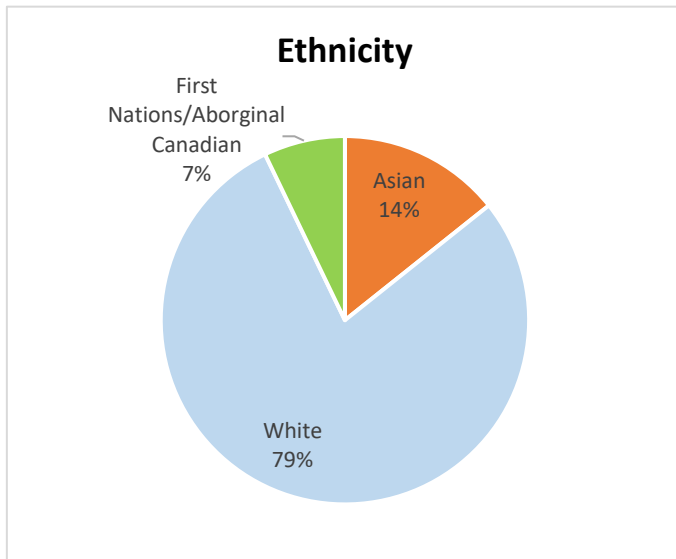
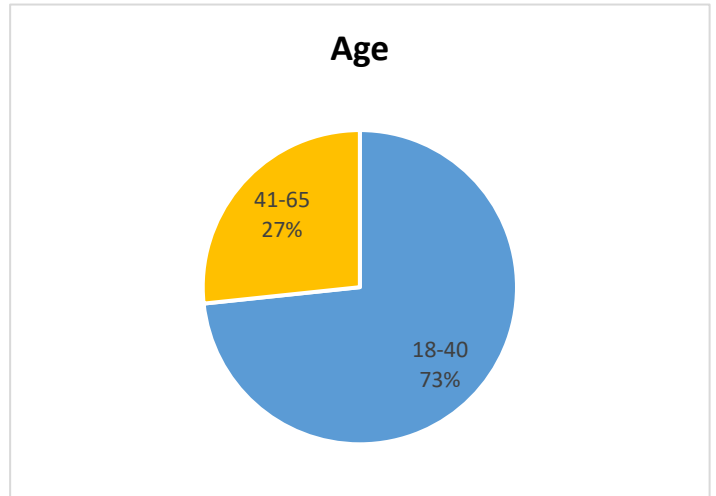
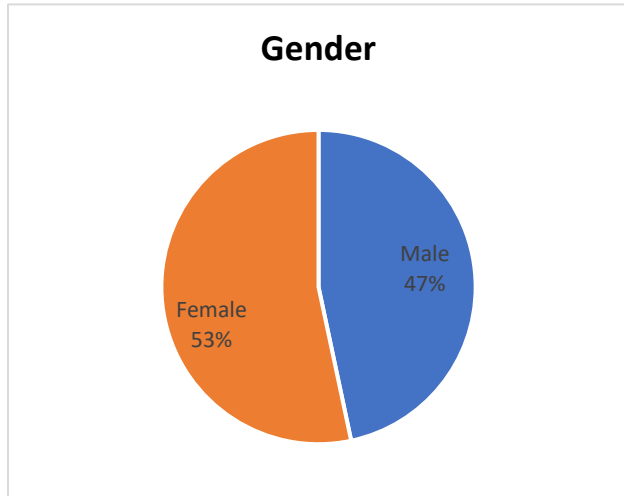
Analysis: **GOAL MET**

An Experience of Services Survey was emailed to the inclusive employers that support the clients in the program, in which there were 11 responses. There were eight questions on the survey, however the direct question "are you happy with the support received" was not asked. Out of the eight questions asked, each one received 100% yes'.

Customized Employment

Rivercity Inclusion partners with job seekers, families, personal networks, and the business community to ensure quality supports and services for both the employee and employer. Some of the services offered are but not limited to, employment planning, business planning, resume preparation, interview skills, employment counseling, marketing/job searching, job orientating, job coaching, and follow-up for both the employer and employee. Job seekers may utilize all services or choose the service they need to pursue and attain their career goals.

Characteristics of clients in the program:



Referrals into the Customized Employment Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Obtain new employers for clients to work with.

Indicator: # of employment with new employers

Goal: 1

Outcome: 2

Analysis: **GOAL MET**

Two employers in Campbell River joined the Customized Employment Program

Resources used to achieve results for the persons served (efficiency):

Objective: Coordinate access to community training opportunities.

Indicator: # of individuals completing certificates not offered by job developers

Goal: 2

Outcome: 1

Analysis: **GOAL NOT MET**

One client in the Customized Employment Program expressed interest in community employment. The program was successful in obtaining paid work-experience with an inclusive employer in the community. However, this objective will be removed from the 2024-2025 Plan, to focus on an objective that is more relevant to this domain.

Service Access:

Objective: Timely identification of employment interests.

Indicator: # of months taken to complete employment interests

Goal: 4

Outcome: 8

Analysis: **GOAL NOT MET**

There was one client in this program that was identifying their employment interests. It took 8 months to identify was area of work they would like to participate in. This individual took place in a work experience program with the employer that lined up with their interests, and they were successfully employed shortly after their work experience began.

Experience of Services and other feedback:

Persons Served

Objective: Job seekers are satisfied with services received.

Indicator: % of clients who are happy with services received, as indicated on the Experience of Services Survey

Goal: 80%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey for this program was included in the Employment Survey, which also had responses from: Supported Employment, Customized Employment, and HYPE - Employment. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

Objective: Employers are satisfied with the support received.

Indicator: % of employers who are happy with support received, as indicated on the Experience of Services Survey

Goal: 80%

Outcome: 100%

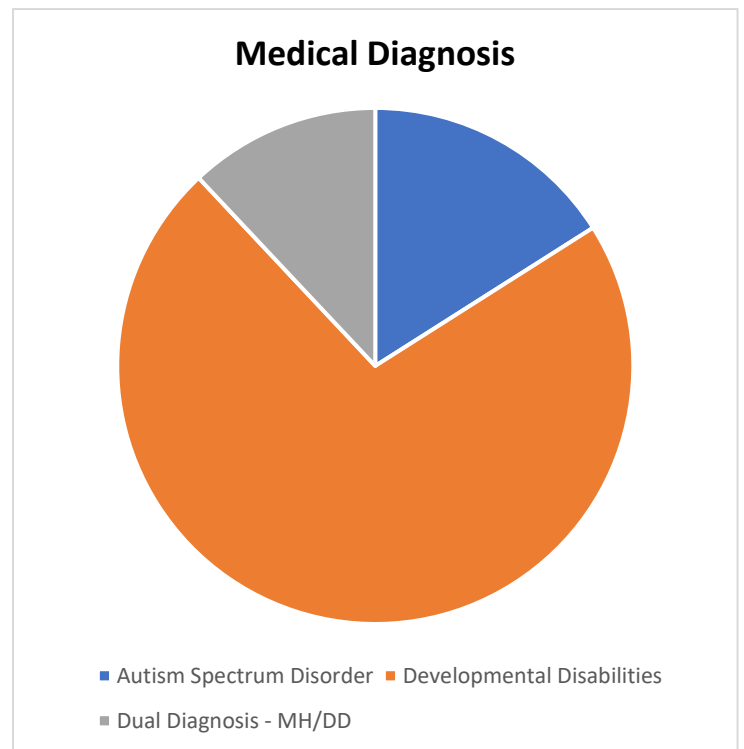
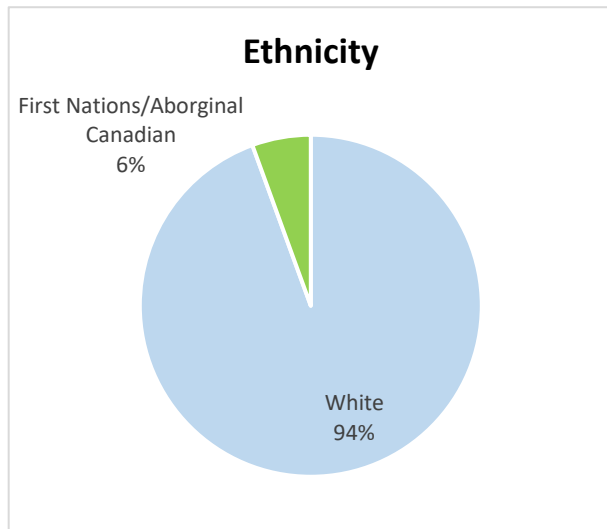
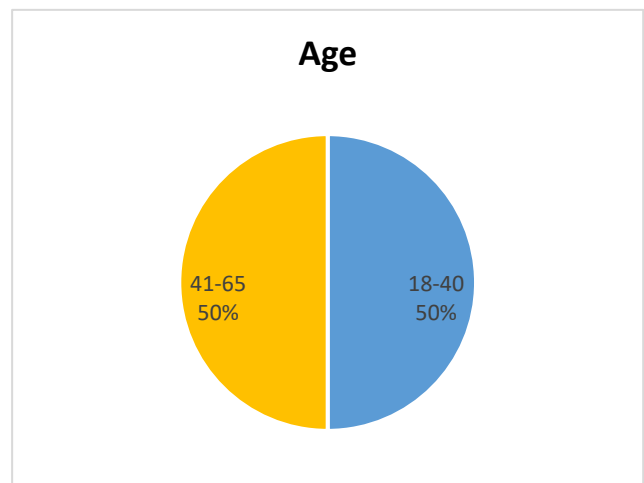
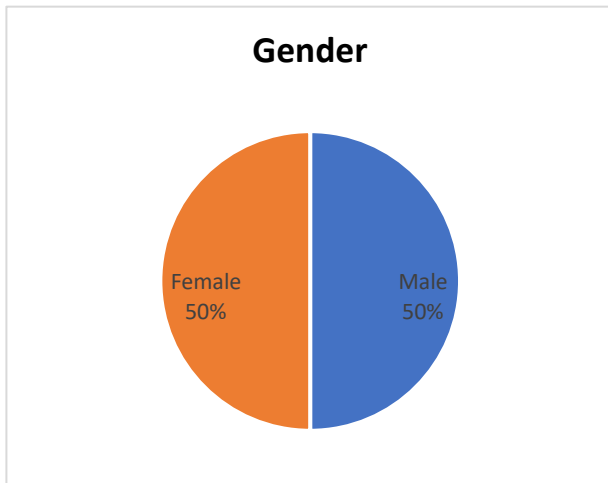
Analysis: **GOAL MET**

An Experience of Services Survey was emailed to the inclusive employers that support the clients in the program, in which there were 11 responses. There were eight questions on the survey, however the direct question “are you happy with the support received” was not asked. Out of the eight questions asked, each one received 100% yes’.

Creative Employment

At Rivercity Inclusion we have 3 social enterprises that form Skyline Productions: Confidential Paper Shredding, Boom Board Production, and lawn mowing. Each of these employment opportunities offers real employment to many individuals in our community.

Characteristics of clients in the program:



Referrals into the Creative Employment Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Increase sales through the purchase of a new shredder.

Indicator: % of increase in sales by the purchase of a new shredder

Goal: 10%

Outcome: -18%

Analysis: **GOAL NOT MET**

Unfortunately, there are a few variables that affected why this objective was not achieved. The purchase of a new shredder was not fulfilled until December 2023, so this indicator of a purchase of a new shredder did not provide an increase in sales. Lawn mowing, shredding and boomboard purchases all experienced a decrease in sales from March 31, 2023.

Lawn mowing was affected due to the long drought in Spring and Summer, which resulted in water restrictions put on by the City of Campbell River. Therefore, lawns were not growing, and the program made the decision to cut back lawn services from 3 days to 2 days. In addition, due to the drought, this also extended the fire season until October also affecting lawn mowing customers.

Shredding purchases experienced a drop in sales from the previous fiscal year, as the 2022-2023 fiscal year had two very large short-term contracts, which actually provided a large increase in sales. The revenue from sales for this fiscal year was more realistic than prior, due to those short-term contracts.

Boomboard purchases, which also had a drop in sales, had three new vendors join Skyline Productions in March 2023. As that month was in the prior fiscal year, the revenue we received from those new vendors provided an unusual increase for that year. The revenue we received for this fiscal year is more realistic.

Resources used to achieve results for the persons served (efficiency):

Objective: Develop a job expectation board in relation to shredding.

Indicator: # of clients actively using the board

Goal: 2

Outcome: NIL

Analysis: **GOAL NOT MET**

The development of a job expectation board was completed and is being used, however knowing how many clients are actively using this board is a difficult thing to measure. This objective has been removed from the 2024-2025 Performance Measurement and Management Plan and a new efficiency goal has been created.

Service Access:

Objective: Employment opportunities through Skyline are increased, through the increase in staff hours.

Indicator: # of increase in staff hours, per week

Goal: 8

Outcome: 8

Analysis: **GOAL MET**

Through revenue from Skyline Productions, an employee was able to be provided with an additional full day of hours, on top of their contracted hours with CLBC. Through these additional hours the employee received, the program was able to provide more services from boomboard sales, therefore providing more hours for clients to be able to work through the program.

Experience of Services and other feedback:

Persons Served

Objective: Job seekers are satisfied with services received.

Indicator: % of clients who are satisfied with services received, as indicated on the Experience of Services Survey

Goal: 80%

Outcome: 100%

Analysis: **GOAL MET**

The Client Experience of Services Survey for this program was included in the Employment Survey, which also had responses from: Supported Employment, Customized Employment, and HYPE - Employment. Unfortunately, it was discovered that this does not provide true and accurate results, as there are several programs included in this one survey. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Stakeholders

Objective: Employers are satisfied with the support received.

Indicator: % of employers who are satisfied with the support received, as indicated on the Experience of Services Survey

Goal: 80%

Outcome: 100%

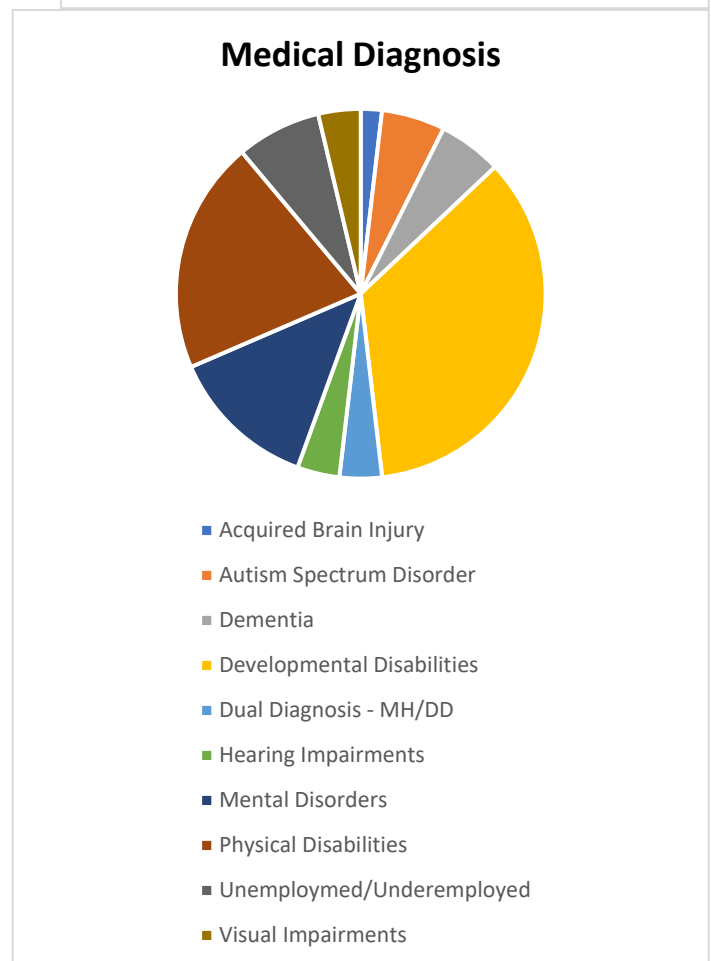
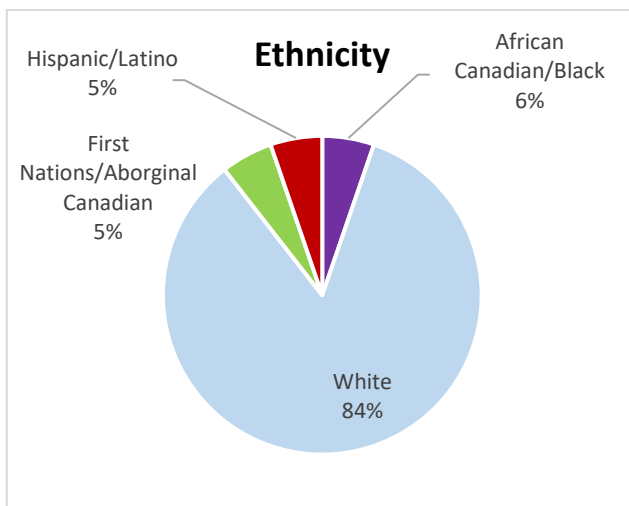
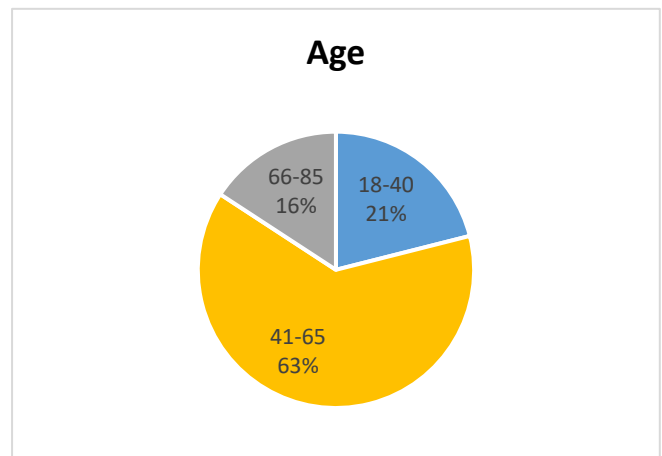
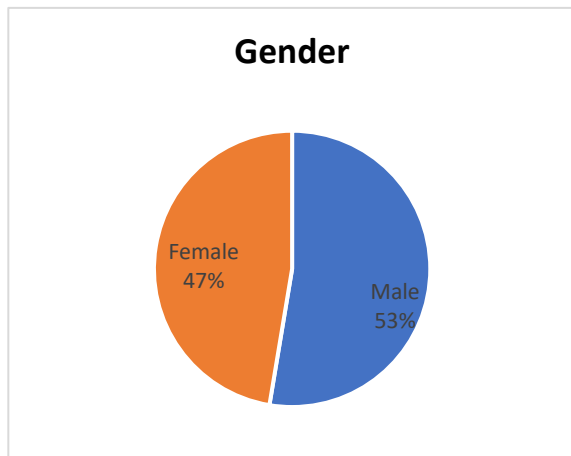
Analysis: **GOAL MET**

An Experience of Services Survey was created for inclusive employers in the community, who provide employment opportunities for clients in the program. There were 11 inclusive employers who responded to the survey, all indicating they were satisfied with the support they received from employment staff.

Staffed Living

Rivercity Inclusion offers a variety of Staffed Living homes which provide personal care and daily living support from one to five individuals per home. The homes are personalized and reflect the tastes, interests and wishes of those who live there. Family and friends are welcome, and staff offer opportunities to get involved in activities within the home, learn new things, and take part in things that are happening in our community.

Characteristics of clients in the program:



Referrals into the Residential Program come in from Community Living BC (CLBC), the funder for all Adult Services Programs.

Results achieved for the persons served (effectiveness):

Objective: Primary individual goal is achieved.

Indicator: % of resident's primary individual goal is achieved

Goal: 80%

Outcome: Simms – 90%; Shellbourne – 80%; Nikola – 70%; Jesmar – 74%; Hoover – 78.75%; M&M's – 100%

Analysis: **GOAL PARTIALLY MET**

The average completion rate for all 6 residential homes is an 82% success rate, which does meet the goal that was set. However, reviewing this objective further, out of the 6 residential homes, 3 of the homes had the residents complete 80% or more of their primary goal. The majority of the homes have four or more residents living there, so the outcome percentage is an average of all the residents in that house in completion of this objective.

Resources used to achieve results for the persons served (efficiency):

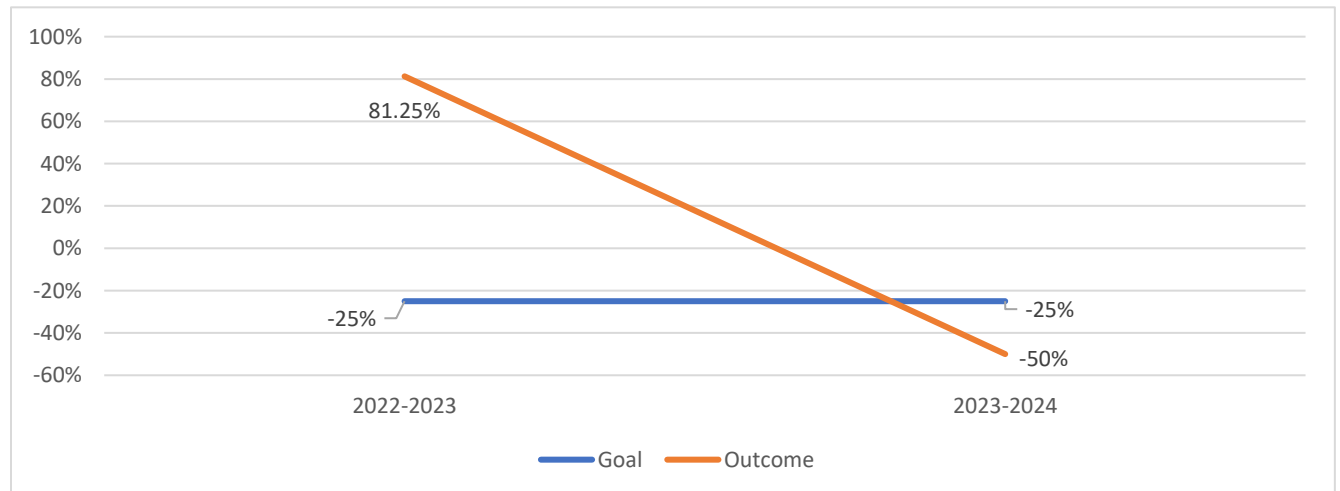
Objective: More precise service delivery to individuals in our care, through the reduction in medication errors.

Indicator: % of medication errors reduced

Goal: 25%

Outcome: 50%

Analysis: **GOAL MET**



The past two years, reducing medication errors by 25% has been an objective for the residential homes to focus on. In the 2022-2023 Performance Measurement and Management Plan, there was a significant increase, instead of a decrease. During the review, it was discovered that there was some confusion around non-reportable vs. reportable medication errors. Through this realization, the process became more efficient through the clarification on the Monthly Tracking Form. As you can see, in this 2023-2024 reporting period, the results exceeded its goal of more than a 25% reduction!

For the 2024-2025 Performance Measurement and Management Plan, this objective will remain, however will be moved into a Business Function goal, rather than an Efficiency measure.

Service Access:

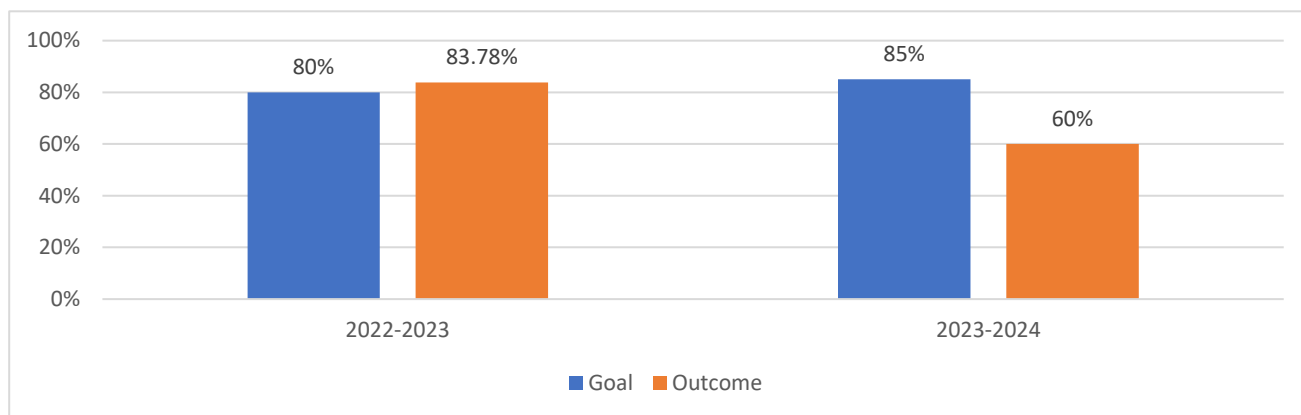
Objective: Each resident is participating in activities outside of their home, through the increase in employees having their class 4 driver's license.

Indicator: % of increase in residential employees having their class 4 driver's license

Goal: 85%

Outcome: 60%

Analysis: **GOAL NOT MET**



The focus on this objective is for staff that work in residential homes and not the entire composition of employees. Unfortunately, for the 2023-2024 reporting period the goal was not met. There are a few variables that impact why the Society was unable to obtain its targeted goal. There has been a significant number of new employees hired, which is great for all the programs, however they are given 6-months to obtain their class 4 driver's license. As this objective was measured annually, this doesn't provide much time to achieve this goal. Perhaps, setting this objective to be measured semi-annually may need to be considered.

Additionally, in this past year there have also been many new employees hired that are international. The majority of these new employees are unable to obtain a driver's license, unless they surrender their driver's license from the country they are from. This applies to the international students that are working for the Society, which also affects the results.

As the Society has been very successful in recruitment in this past year, a large number of new employees are international, which has an impact on this specific objective.

Experience of Services and other feedback:

Persons Served

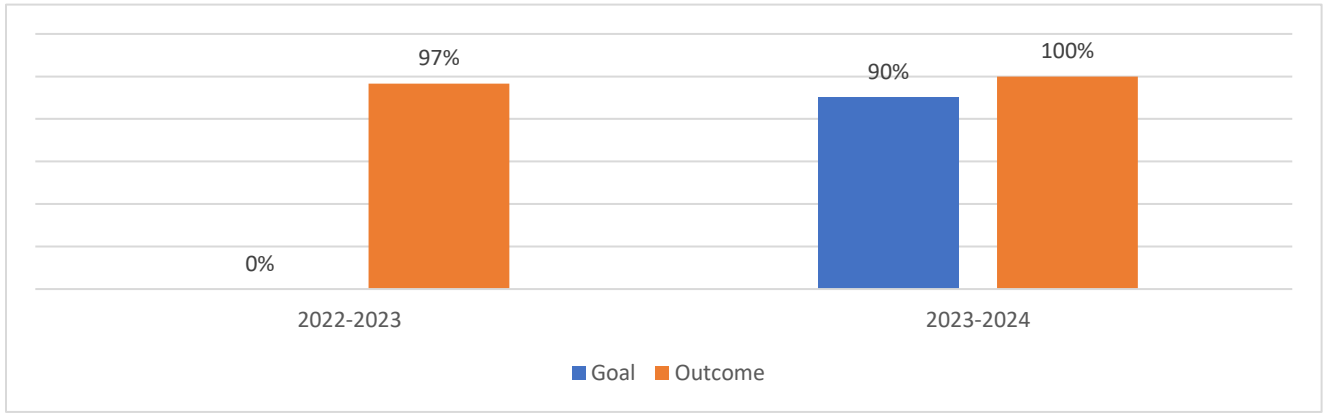
Objective: Residents feel heard.

Indicator: % of clients who answered: "The staff listen to me", as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 100%

Analysis: **GOAL MET**



The Client Experience of Services Survey titled Residential, was specific to all six residential homes, which resulted in program specific results. For the residents that completed the survey, 100% of them indicated that the staff listen to them - this is a wonderful response!

In the 2022-2023 Performance Measurement and Management Plan, this was not an objective set to focus on, however the question was still asked on the client survey, which is why there is a 0% goal showing for that year. As you can see in the chart, there was a 3% increase in residents feeling that the staff listen to them.

Stakeholders

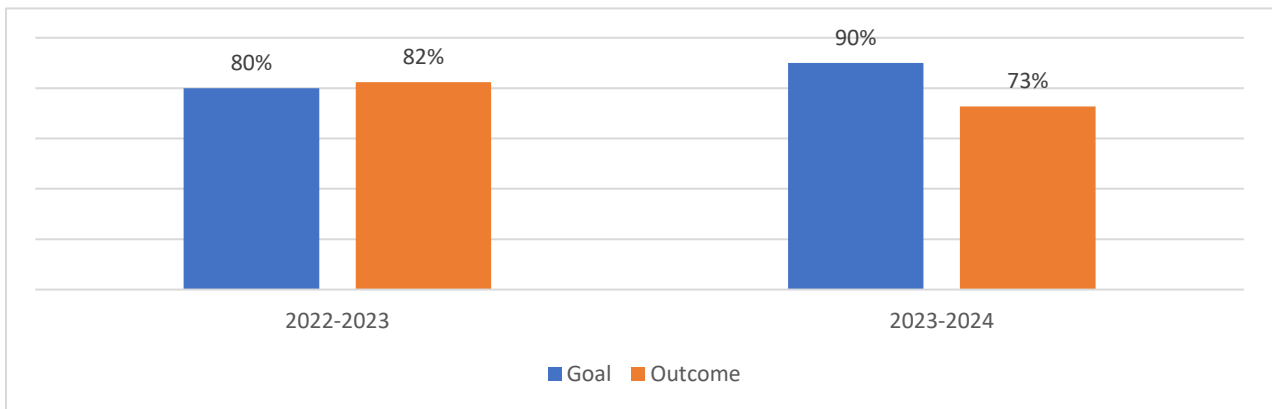
Objective: Families feel they are aware of what is happening at the home.

Indicator: % of family members who feel they are aware of what is happening, as indicated on the Experience of Services Survey

Goal: 90%

Outcome: 72.73%

Analysis: **GOAL NOT MET**



The Stakeholder Experience of Services Survey for this program was included with all the Adult Service programs. Unfortunately, it was discovered that this does not provide true and accurate results for each individual program, as there are several programs included in this one survey.

With that being said, there was a decrease in stakeholders feeling that they are informed of what is happening by 9%, with a lower response rate in the 2022-2023 survey year as well. This data appears that it could be skewed, as there were lower responses last year with a higher satisfaction rate, than this year. For the 2025 survey, a further separation of these programs will need to be considered to gather a more accurate representation of results.

Business Functions

Environmental Sustainability:

Objective: Change in our carbon footprint.

Indicator #1: Decrease in paper quantity purchased.

Goal: 10%

Outcome: NIL

Indicator #2: Decrease in toner purchased.

Goal: 10%

Outcome: NIL

Analysis: **GOAL NOT MET**

Since 2022, when this objective was put in place, it has been a difficult goal to track and measure for the Accounting Department. As invoices from Monk Office and Staples are received so frequently, that this added to much additional tracking. This goal has been removed for the 2024-2025 Performance Measurement and Management Plan.

Fundraising:

Objective 1: Increase our financial donor base.

Indicator: % of increase in donors for fundraising and donations

Goal: 10%

Outcome: NIL

Analysis: **GOAL NOT MET**

Tracking was not set up for this objective, and remains a difficult goal to track and measure, which resulted in no data to report. For the 2024-2025 Performance Measurement and Management Plan, the objective has been changed to focus on financial revenue through fundraising and donations, as opposed to the number of donors that are currently contributing to the Society. Tracking fundraising revenue over time will be a valuable tool for future success for the Fundraising Committee.

Objective 2: Purchase of program vehicles, through the increase in staff lottery participation.

Indicator: % of increase in staff lottery participation

Goal: 30%

Outcome: - 41%

Analysis: **GOAL NOT MET**

Rivercity Inclusion was able to purchase two vehicles for the Semi-Independent Living Program and Nikola Group Home, through fundraising dollars from the staff lottery. Even though the objective itself was met, the indicator of a 30% increase in participation in the staff lottery, unfortunately, was not met. For the 2023-2024 timeframe, the Society experienced a 41% decrease in participation. For the last two years, there has been a decrease in participation from the initial first year it

was implemented. Some of the reasons is staff either forget or don't realize that they must re-sign up every year, and a few staff have commented that because they have never won the staff lottery, they no longer wanted to participate.

The purchase of capital costs is a difficult objective to meet in a one-year timeline, and therefore this will be removed from the 2024-2025 Performance Measurement and Management Plan.

Strategic Plan:

Objective: Awareness of our organization in the community, through the number of followers on social media.

Indicator: # of new followers on social media

Goal: 2 per month

Outcome: April 2023 – 7; May 2023 – 80; June 2023 – 18; July 2023 – 3; August 2023 – 8; September 2023 – 8; October 2023 – 28; November 2023 – 11; December 2023 – 10; January 2024 – 13; February 2024 – 20; March 2024 – 10

Analysis: **GOAL MET**

Every month, the Society met its goal of two new followers on social media (Facebook and Instagram). In April 2023, a client in the Customized Employment Program, was hired to oversee and manage the social media accounts for the Society. In May 2023, there was an increase of 80 new followers, which was a huge number due to a more managed social media account. For the rest of the year, there was a steady increase per month in new followers. October 2023 also showed a high number of new followers, as this is Community Living Month, as there was more presence on our account.

This objective will remain in the 2024-2024 Performance Measurement and Management Plan, with an increased goal.

Health and Safety:

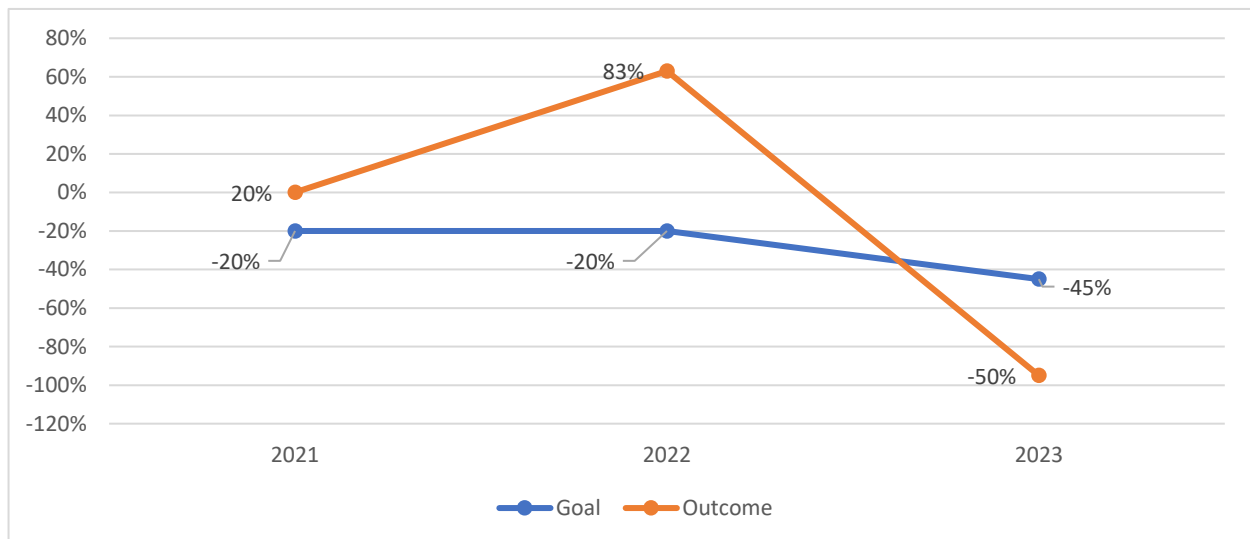
Objective 1: Reduction in musculoskeletal injuries in staff.

Indicator: % of decreases musculoskeletal injuries

Goal: 45%

Outcome: 50%

Analysis: **GOAL MET**



2023 was the first year that Rivercity Inclusion more than met its goal in reducing musculoskeletal injuries by 5%, from the previous year. This objective has remained on the Health and Safety Plan that is approved by the Occupational Health and Safety Committee for several years. Achieving this objective was a success, however still remains a concern from the Committee and will continue to measure this, and work on achieving the targeted goal.

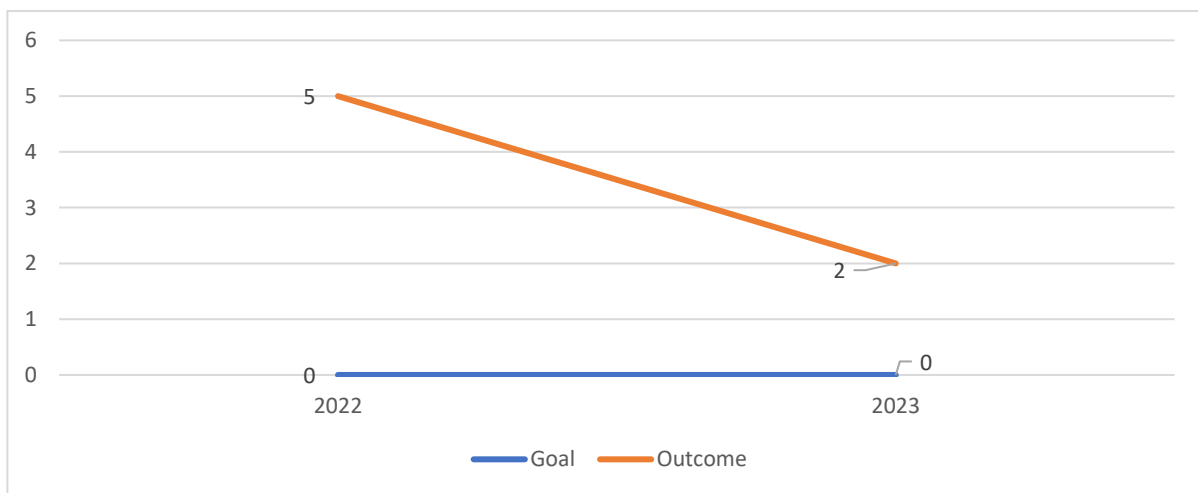
Objective 2: There are no injuries due to inattentiveness “not in the moment”.

Indicator: # of decreases in injuries due to inattentiveness

Goal: 0

Outcome: 2

Analysis: **GOAL NOT MET**



The intent behind having zero injuries due to staff being inattentive at work is set this way, as the Occupational Health and Safety Committee does not want to see any injuries for this reason. While on shift, all staff should be present and, in the moment, while working. Unfortunately, over the last two years we have been unsuccessful in reaching this goal, however the reduction in 3 injuries for this reason from 2022, was closer to our goal. This objective has remained in the 2024 Health and Safety Plan and will continue to be measured additionally in the Performance Measurement and Management Plan.

Human Resources:

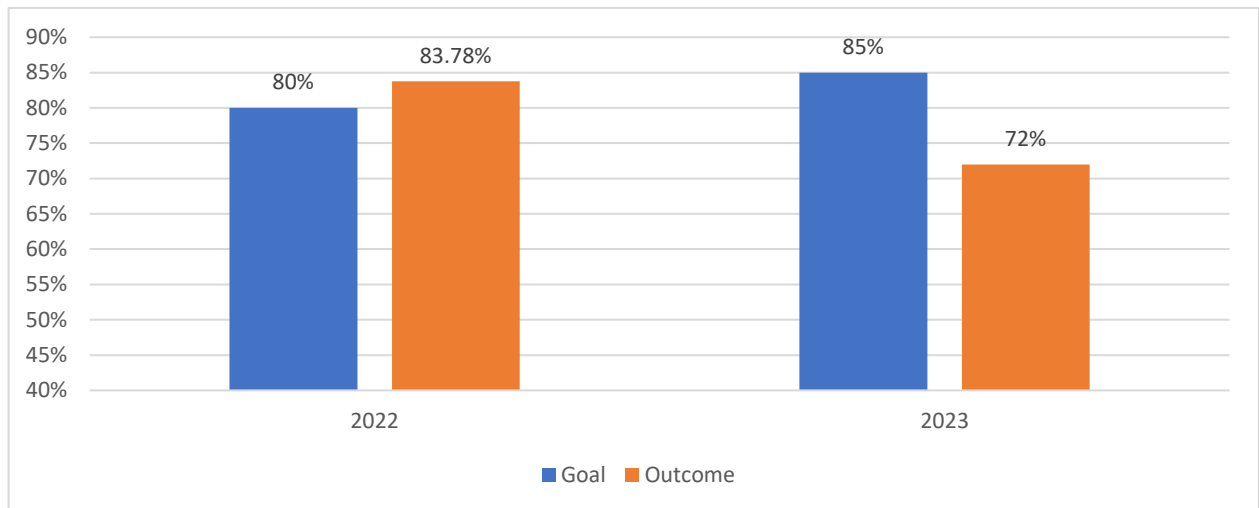
Objective: Staff have a current class 4 driver’s license.

Indicator: % of staff that have their class 4 driver's license

Goal: 85%

Outcome: 72%

Analysis: **GOAL NOT MET**



There are a few variables that impact why the Society was unable to obtain its targeted goal. There has been a significant number of new employees hired, which is great for all the programs, however they are given 6-months to obtain their class 4 driver's license. As this objective was measured annually, this doesn't provide much time to achieve this goal. Perhaps, setting this objective to be measured semi-annually may need to be considered.

Additionally, in this past year there have also been many new employees hired that are international. The majority of these new employees are unable to obtain a driver's license, unless they surrender their driver's license from the country they are from. This applies to the international students that are working for the Society, which also affects the results.

As the Society has been very successful in recruitment in this past year, a large number of new employees are international, which has an impact on this specific objective.

2023 - 2024 Improvement Plan

There were 38 objectives with goals set out in the Performance Measurement and Management Plan that were not met for the period April 2023 – March 2024. An action plan to remedy these goals for the following year are as follows:

| Objective Domain | Program | Objective | Action Plan |
|--|-------------------------------------|--|---|
| Results achieved for the persons served (Effectiveness) | Fetal Alcohol Spectrum Disorder | Number of people that attend the regularly scheduled family support group. | This objective has been removed for the 2024-2025 Plan, as there are too many external variables that impact this. To better focus on the families receiving service, a new objective has been created. |
| | Infant Development Program | Families attending groups find them effective. | The Quality Assurance Coordinator will meet with the program supervisor prior to when the survey would be sent out, to ensure questions are asked on the survey that are relative to the objective. |
| | Infant Development Program | Families will find progress notes and their service plan meaningful and friendly. | The Quality Assurance Coordinator will meet with the program supervisor prior to when the survey would be sent out, to ensure questions are asked on the survey that are relative to the objective. |
| | Supported Child Development Program | Children and/or families/caregivers will gain skills identified in their child's Individual Family Service Plan, that will result in the child becoming more independent within their child-care centre. | This objective will remain in the 2024-2025 Plan, as this is an important goal to continue to measure and work towards always achieving. |
| | Supported Child Development Program | Child-care staff will increase competency in supporting children with extra support needs. | Program Manager will work on yielding more responses back from child-care centers, to have more accurate results in this objective. |
| | Passages | Each client has one new activity. | For the 2024-2025 Plan, the objective will remain but more focused on that each client tries a new activity and attends that activity regularly. The goal has been changed to a percentage, rather than a number, for those individual clients that might not try a new activity, it will then not affect the difference as much in achieving the percentage total. |

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| | Recreation & Leisure | Each client has one new activity. | This objective has been changed for the 2024-2025 Plan, to focus on community involvement opportunities that are offered, rather than for each individual client. |
| | Confidence in Community | Each client has one new activity. | The objective has been changed for the 2024-2025 Plan, to focus on clients have opportunities to connect with the community. |
| | HYPE – Inclusion | Introduce new life skills. | A tracking spreadsheet has been created to properly record when clients are introduced to new life skills; as this was not tracked before. |
| | HYPE – Employment | Introduce new life skills for employment readiness. | This objective will remain in the 2024-2025 Plan but will focus more on clients being employment ready through their participation at job club, rather than individual new life skills being introduced to them separately. |
| | Supported Employment | Obtain new employers for clients to work with. | This objective will remain in the 2024-2025 Plan but will change the time of measure to annually, instead of semi-annually, in hopes to makes this more achievable. |
| | Creative Employment | Increase sales through the purchase of a new shredder. | A new objective has been created for the 2024-2025 Plan, to focus more on client's employment hours being increased, through new vendors. |
| Resources used to achieve results for the persons served (Efficiency) | Fetal Alcohol Spectrum Disorder | Attend networking meetings with other Keyworkers on a quarterly basis. | As this objective is an important resource and tool for the Keyworker, it doesn't directly impact the families receiving service. A new objective has been created for the 2024-2025 Plan. |
| | Infant Development Program | Families will have access to the IDP lending library. | This objective has been removed from the 2024-2025 Plan, as this is not a measurable goal, but rather something that should be provided at all times. |
| | Supported Child Development Program | Intake percentage of group intervention situations will be maintained. | The program will continue to strive to meet the goal of group intervention situations to ensure funding is utilized. |
| | Recreation & Leisure | Optimal utilization of staff resources, by reassessing client needs. | A new objective has been created for the 2024-2025 Plan, to focus on program funds are utilized so clients can access |

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| | | | community opportunities more readily. |
| | Confidence in Community | Staff will incorporate the SIL van into their scheduled after-hours, by reducing monthly expenses in mileage. | A new objective has been created for the 2024-2025 Plan, to focus on maintaining direct service hours, which fits better as an efficiency objective. |
| | Supported Employment | Coordinate access to community training opportunities. | A new objective has been created for the 2024-2024 Plan, that will focus on the average number of days for job seekers to obtain employment. |
| | Customized Employment | Coordinate access to community training opportunities. | A new objective has been created for the 2024-2024 Plan, that will focus on the average number of days for job seekers to obtain employment. |
| | Creative Employment | Develop a job expectation board in relation to shredding. | A new objective has been created for the 2024-2025 Plan, as this is not a measurable objective. |
| Service Access | Community Access Services | Youth/staff ratios are maximized for each group. | This objective has been removed, as this is a Business Function objective, under Human Resources. A new objective has been created for the 2024-2025 Plan. |
| | Fetal Alcohol Spectrum Disorder | Promote the Keyworker program by the number of awareness campaigns. | As this is an educational awareness element, which is part of the program, it is not a Service Access objective. This has been removed, and a new objective created for the 2024-2025 Plan. |
| | Confidence in Community | Each client will obtain a LIFE pass. | This objective has been changed for the 2024-2025 Plan, to now focus on those clients with a LIFE pass if they are utilizing it as much as possible. |
| | Customized Employment | Timely identification of employment interests. | This objective has been removed for the 2024-2025 Plan, to focus on clients getting into the program as quickly as possible. |
| | Staffed Living | Each resident is participating in activities outside of their home, through the increase in employees having their class 4 driver's license. | This objective has been moved to the Business Function objectives as this is more focused on Human Resources and not clients. A new objective has been created for the 2024-2024 Plan. |
| Experience of Services and other feedback – Persons Served | Fetal Alcohol Spectrum Disorder | Keyworker program was an effective service for clients who attended. | The Quality Assurance Coordinator will work directly with the program supervisor to create a survey on Survey Monkey, to help yield better responses. This objective has been changed to |

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| | | | more focus on what families learnt from the program, rather than knowing if it was an effective service or not. |
| | Supported Child Development Program | Families will indicate satisfaction with SCDP services. | The goal of 100% has been reduced in the 2024-2025 Plan, as one response can skew the results of the survey. |
| | Independent Living | Clients feel satisfied with weekly hours allotted to them. | This objective has been removed from the 2024-2025 Plan, as this can be a variable out of our control. |
| Experiences of Services - Stakeholders | Community Access Services | Increase the survey return responses from parents and caregivers. | This objective has been removed, as this is not a reflection of the families and caregivers experience from the program. A new objective has been created for the 2024-2025 Plan. |
| | Fetal Alcohol Spectrum Disorder | Educational workshops were information and effective. | The Quality Assurance Coordinator will work with the program supervisor to help create a survey to hand out after workshops are completed. |
| | Passages | Stakeholders are satisfied with the services provided. | The Experience of Services Stakeholder Survey will be considered for each individual program, rather than by a group of programs, to provide more accurate results for that individual program. |
| | Recreation & Leisure | Stakeholders are satisfied with the services provided. | The Experience of Services Stakeholder Survey will be considered for each individual program, rather than by a group of programs, to provide more accurate results for that individual program. |
| | Staffed Living | Families feel they are aware of what is happening at the home. | A new objective has been created for the 2024-2025 Plan, as each individual stakeholder's perception of 'awareness of what is happening' could be different, potentially skewing results. A new objective has been created to focus on stakeholder happiness around communication. |
| Business Functions | Category: Environmental Sustainability | Change in our carbon footprint, through the decrease in paper and toner purchases. | This objective has been removed, as tracking these numbers through invoices is very time-consuming. Rivercity Inclusion will continue to make this a priority goal but will not |

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| | | | track it through the Performance Measurement & Management Plan. |
| | Category: Fundraising | Increase our financial donor base. | For the 2024-2025 Plan, the focus for this objective will change to increase our fundraising revenue, rather than the increase of donors themselves. |
| | Category: Fundraising | Purchase of program vehicles, through the increase in staff lottery participation. | This objective has been removed from the 2024-2025 Plan, as the staff lottery fundraising dollars can be now used for any needs of Rivercity Inclusion and is no longer directly allocated to the purchase of vehicles. |
| | Category: Health and Safety | There are no injuries due to inattentiveness “not in the moment”. | This is an important health and safety objective that the OHS Committee will continue to measure, but the goal of zero has been changed to two injuries; as zero is unrealistic. |
| | Category: Human Resources | Staff have a current class 4 driver’s license. | We will continue to measure this and work toward staff obtaining their class 4 driver’s license, as this is necessary for our clients to access the community. |

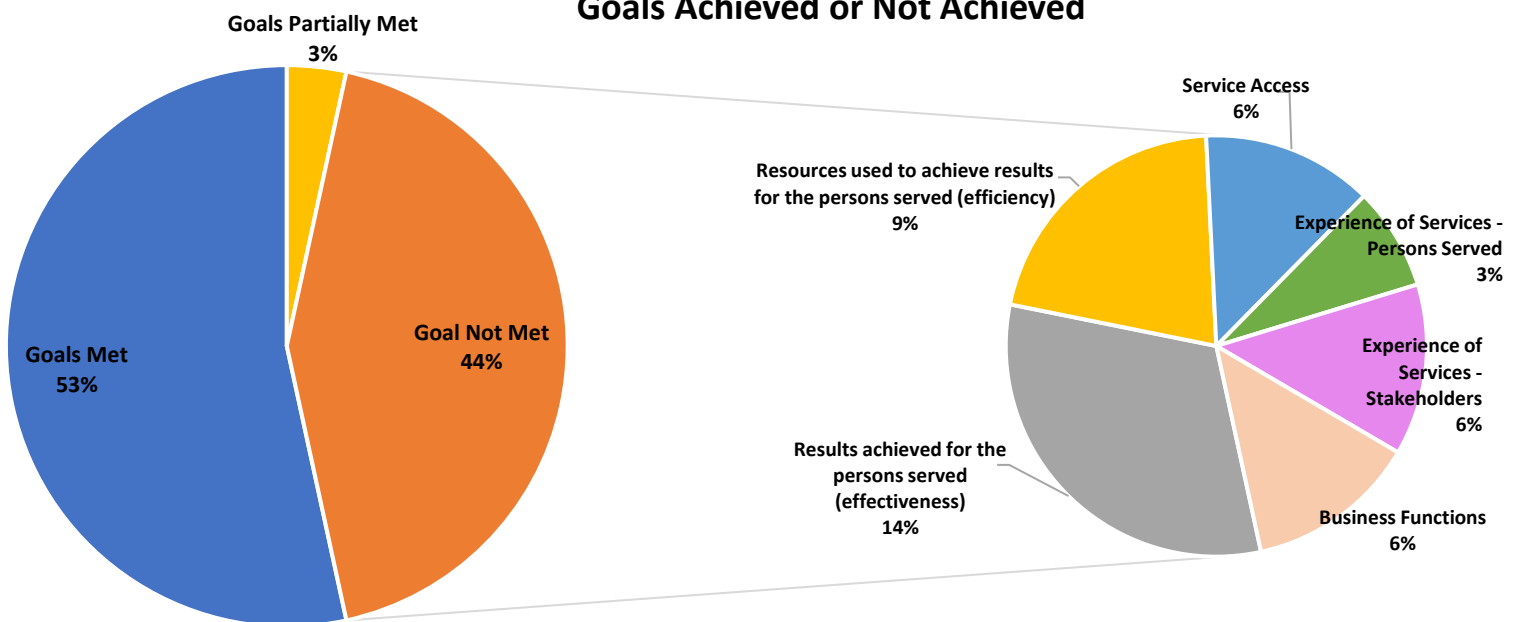
Summary

The Children's Services and Adult Services Programs had a variety of objectives that were established for this fiscal year, to work towards achieving the best possible service delivery outcomes for the clients in the programs.

A total of 88 objectives were identified for all the programs: 47 objectives achieved their performance targets, 3 partially met their performance targets, and 38 did not hit their mark. The 38 objectives that did not meet their goal, have an action plan on the previous pages "Improvement Plan". Some of those objectives have identified ways of working towards the objective for the following year, and some objectives have been removed for the 2024-2025 Performance Measurement and Management Plan.

Going forward, a new Performance Measurement and Management Plan has been developed for April 2024 – March 2025. Objectives have been categorized in their domains and will be worked on throughout the year. For those objectives that will remain from this current Performance Measurement and Management Plan, trends will begin to showcase from year to year and will be analyzed further in future reports.

Goals Achieved or Not Achieved



Report Completed: May 24, 2024

Completed by: Jennifer Harms, Quality Assurance Coordinator