

OUTCOMES MANAGEMENT REPORT 2021



Inspiring Possibilities

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Executive Director's Report



Where do I even begin to report on the last year!? So many thoughts jumbled in my mind, trying to make sense of it all. A pandemic of this magnitude is something that none of us had experienced before. It was a year of firsts, frustrations, and, fun! (and those weren't the only "f" words!) We've deemed this year's Annual Management Report, the "Covid-19 Edition"!

In the early days of the pandemic, we had no idea what was about to transpire. The two week March Break that turned into 15 months, and counting!? The world as we knew it had turned up-side down.

The Ministries of Health, Long-Term Care and our Ministry of Children, Community and Social Services, were continually updating and issuing information related to Covid-19. Juggling that information, and then keeping employees, people we support, and their families updated on ever-changing guidelines and restrictions was mind-boggling.

For the entire year, two emergency orders were in place, and remain in effect for the DS sector. One gave us the authority to redeploy staff as necessary, and the other was a limit to staff working for one employer. The limit to one employer order added to the difficulties within scheduling, as we began to lose a number of staff for various reasons.

The Joint Health and Safety Committee took a lead on the Infection Prevention and Control (IPaC) measures to ensure safety for all, while our own Clinical Supervisor and Registered Nurse was an invaluable resource. Enhanced cleaning, and the constant supply of Personal Protective Equipment (PPE) became a daily routine.

The conservative government rolled out emergency pay, or pandemic pay, to health care and essential workers. Our employees received Pandemic Pay at \$4 per hour worked, from April to August. Then, as we began the second wave, a Temporary Wage Enhancement was implemented at \$3 per hour worked from October, and still currently in effect. This was a welcome recognition to employees in our sector.

During the Stay at Home Order(s), the Administration Office operated on a skeleton staff with the Management team working from home. This made the day-to-day collaboration and communication challenging.

Not 1, not 2, but 3 lockdowns later, all of us were feeling the pressure, disappointment, and stress of it all.

While thankfully we remain Covid-free at this time, there were many cases, near-misses, and the overall threat that at any given time, any one of those situations could've turned up with a positive case.

Despite the limitations and restrictions, we had an opportunity to be creative, switch our focus, and alter the way we were providing supports. We took every opportunity to have fun with our new norm, in hopes it would relieve some tension. Community Living Month was full of fun games. One of our community supports staff was instrumental in developing "zoom" events that were necessary to keep connected with people we support. It was so good to hear the laughter from some of those events.

One of the key phrases that stuck with me early on is "if our only expectation is to return to the way it was, then we have lost any opportunity to move forward". As a sector, we have embraced this, having sparked a few initiatives that are reviewing the way services were traditionally delivered. Because workshops and day programs were naturally closed, this was our opportunity to look within our own service delivery to identify any changes moving forward.

Covid-19 was definitely the focus of the year, and everything we did was done through the lens of this deadly virus.

Of course, the pandemic put our own initiatives on hold. Pre-Covid, the Boards of CLNG and Impact Residential Services were reviewing the potential for a merger/amalgamation. As well, the strategic planning exercise, originally scheduled for Fall 2020, was delayed to the Spring, and is now planned for the Fall of 2021.

All of us at CLNG have endured a very different year, and many thanks to all of you for your commitment and perseverance to get us through.

We look forward to the next year and getting back on track with renewed energy, and all that we gleaned from this past year!

Looking forward to the time when we can all be together again! Still in this together!

Respectfully submitted,

Sandra McNamara

Executive Director

Our Management Report

Community Living North Grenville continues to serve the individuals and families who require our services. These services are designed to meet the support needs of adults with Developmental Disabilities and their families.

Due to the pandemic and the restrictions this report will definitely look a little different than in past years. We have had to be creative and develop new ways to support the people that use our services.

This is our 13th Annual Management report. We develop this report each year to provide the people we support, families, staff, and our community partners with an overview of what has happened within our organization over the past year. It also helps us to look to the future for what is needed in our community and where we plan to go.

This document is like a report card. It says what we do and how we do it. Based on feedback from our stakeholders, it tells you what we think we are doing well and what we want to do better.

If this report is hard to understand;

- Call Community Living North Grenville and ask for the information in a different way.
- Ask a support worker, friend, or a family member for help to understand.

**This report refers to several plans, if you are interested in looking at the full version of Community Living North Grenville's Risk Management Plan, Technology and System Plan, and/or Accessibility Plan, please visit our website at www.communitylivingnorthgrenville.ca under the "Resources" tab or contact our office.



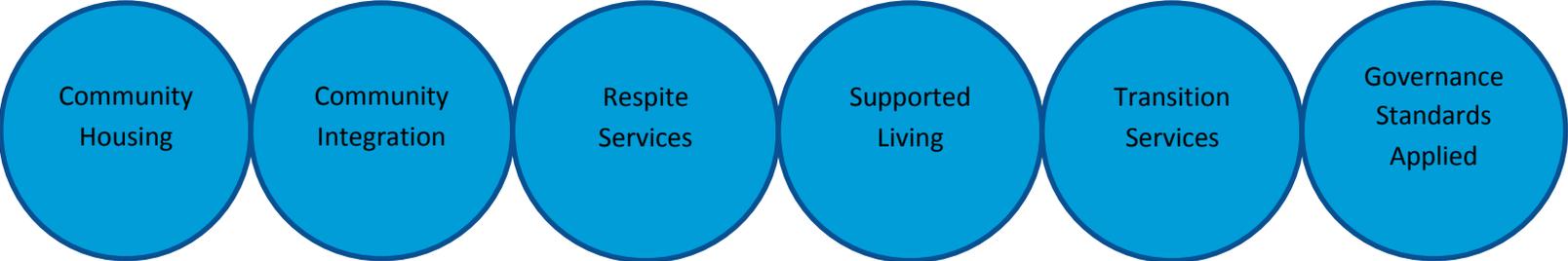


Partnership with CARF

Community Living North Grenville has proudly partnered with the Commission for the Accreditation of Rehabilitation Facilities (CARF) since 2008. CARF is an independent, non-profit accreditor of health and human services. The standards that we meet each year through CARF are acknowledged internationally.

CARF respects our individuality as a grass roots organization founded by families for the long term wellness and inclusion of their family members in our community. We believe partnering with and reviewing our supports and services against CARF standards allows us the chance to constantly improve our services, and allows us to show our commitment to clear and accountable practices we provide to all of our stakeholders.

Our next accreditation will take place in 2022. During our last visit from CARF, in 2019, Community Living North Grenville successfully completed our fourth 3 year accreditation for the following services:



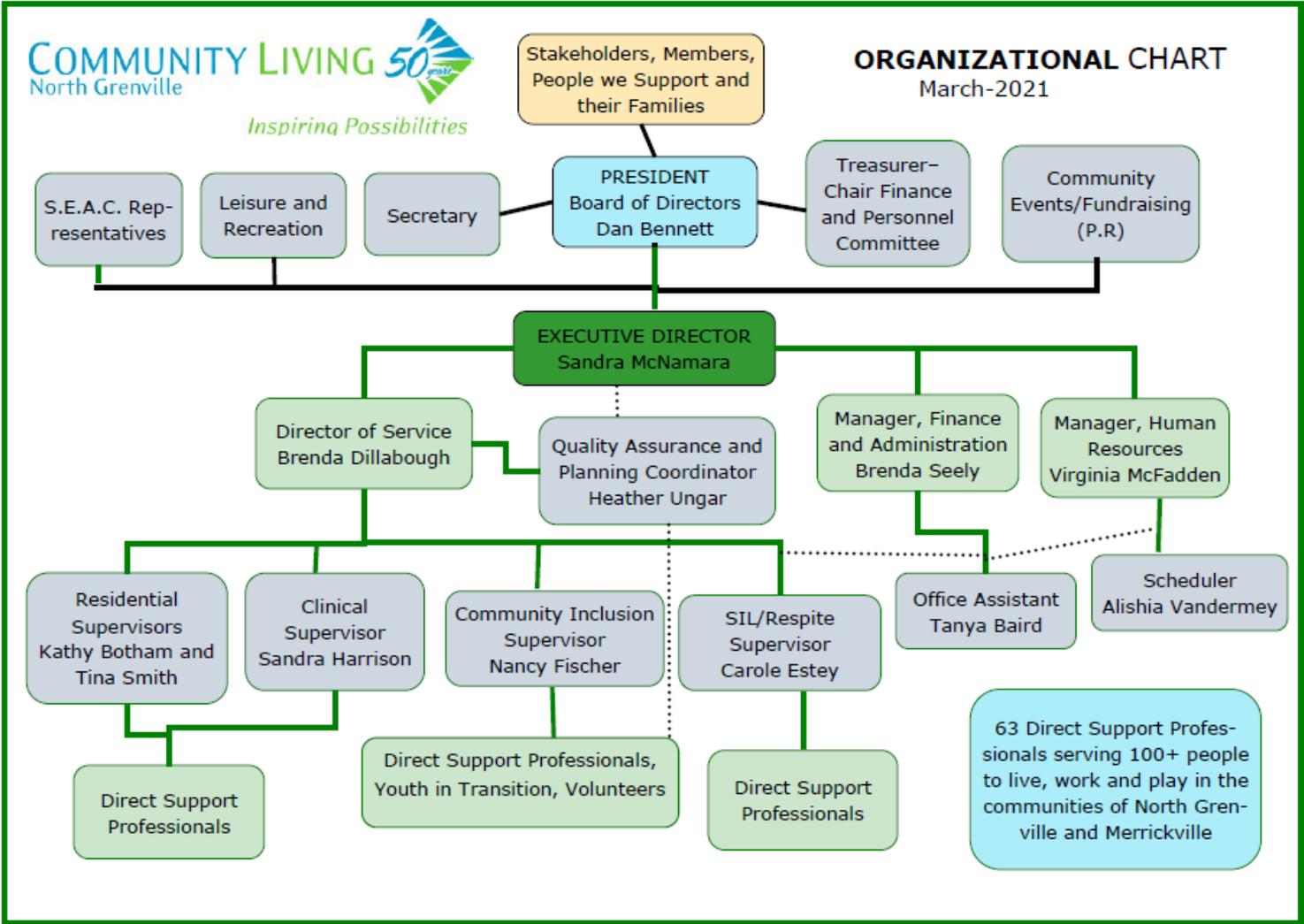
CLNG Board of Directors 2020-21

Board Member/Year Started Term	Independence/Relationships			Program Oriented Knowledge			Administration Oriented Knowledge		
	Familial relationship to consumer	Business relationship with agency	Independent and unrelated	Education Teacher	Organizational Affiliation	Profession	Business Practices	Government Practices	Human Resources
Dan Bennett 2017	Parent					Aircraft Maintenance Inspector		X	
Kim Holland-Perrier 2018		Person supported Volunteer				Retired Nurse	X	X	
Jane Holski 2017			X	X Retired				X	
Paul Jansen 1988		Attorney				Attorney	X	X	X
Steven Kohls 2007			X			Clergy	X		X
Wayne Richer 2014	Self-Advocate				People First				
Debbie Sabourin 2006	Sibling					Medical Secretary		X	
Gord Sowten 1987			X			Insurance Agent	X		
Vacant Position									
Vacant Position									



Organizational Chart

Board Governance Manual Section 1.2.5—Organizational Structure



Approved— May 2021

Strategic Planning 2020 – 2023

Unfortunately, the strategic planning session originally planned for the Fall of 2020 was delayed due to the Covid-19 pandemic.

However, a fair bit of the year was spent on planning for the session, being rescheduled to Spring of 2021, and then delayed again with a definite expectation to begin September 2021.

Many of the following contributors identified in last year's report are still valid. These initiatives will formulate CLNG's strategic plan going forward, which include;

- Our current shared leadership arrangement with Brockville and Area Community Living Association (BACLA)
- The announcement of the proposed merger/amalgamation with Impact Residential Services.
- Our desire to move away from County Rd 43, and reduce the amount of our environmental footprint.

With what we've experienced through Covid, it is evident that the government and our Ministry will be looking for efficiencies more so than before, after spending billions to manage the covid-19 pandemic.

As reported last year, the current landscape of the DS sector and the changes facing it, will be of much consideration, as we work through the Strategic Planning Process in 2021.

Jack Street Housing Project

Despite the setback of Covid-19 to most construction projects, we were fortunate to be able to continue work on our housing project at 224 Jack St. Community Living North Grenville took possession of the new development on July 31, 2020, which included 9 new town homes.

On September 25, 2020, dignitaries from all levels of government attended a "grand-opening" event to commemorate and congratulate CLNG on this accomplishment. Michael Barrett, Conservative MP, Steve Clark, Conservative MPP, and Mayor Nancy Peckford of North Grenville all took part in expressing their support, and made the announcement of the government's

contribution. \$1,485 Million in Federal and Provincial Funding was provided to CLNG to fund the project, which equated to 75% of the total costs.

Tenants began moving in September 2020. To date, all of the units are now rented, with a diverse group of people with intellectual/physical disabilities, seniors, singles, and families, all very pleased to have a place they call home.

The units rent for 80% of average market rent, with a waitlist of approximately 10 applications.

Housing is a critical issue within the North Grenville Municipality. We, at CLNG, are very proud to see this project through to fruition.



Reflections in Residential Services

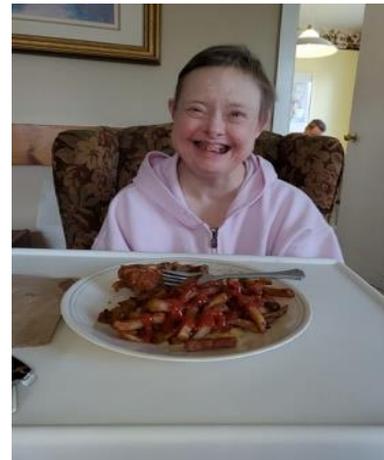
Community Living North Grenville provides support to 29 people in a number of shared living environments, and to 19 people in Supported Independent Living.

The impact of the restrictions, stay at home orders, and guidelines from public health and our ministry were felt most in our residential services when coping with COVID 19. A number of people were suddenly required to be housebound, grocery shopping looked different, many safety protocols came into place, and family visits were minimized and needed much planning and preparing for an alternate location other than an individual's home for the safety of everyone. Staff and essential visitors were wearing masks and face shields, doing temperature checks, enhanced cleaning, self-assessments, and even trying to keep their distance from others as much as possible. Staff looked different, family contact was changed to phone calls or face time, and community participation was diminished to drives, drive thru, or walks around the neighbourhood. For most this was challenging, for others it was exhausting, some were fearful and had difficulty understanding why their life had changed so much. Our primary focus became one of keeping COVID out of our homes and out of our lives. We greatly appreciate everyone for working so hard to keep us safe, engaged, entertained, and connected.

.....But thankfully we were reminded that living still needed to occur along the way.



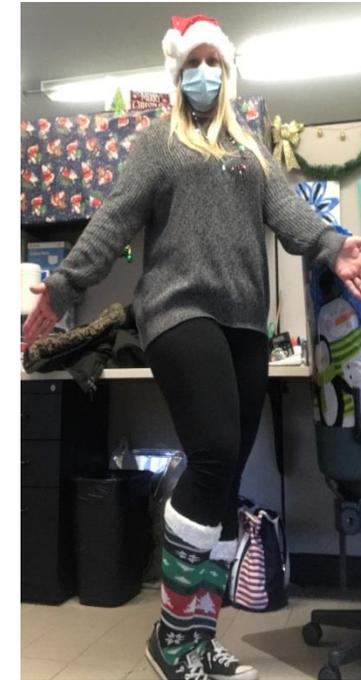
Brian D and Sue P
had milestone
celebrations with their
60th birthdays, &
Colleen K turned 40.



Janette turned 65
and enjoyed her
day by ordering her
favourite food!



We had to bid a sad farewell to our friends Jen D and Dan L. It is a challenging time when we lose a significant person in our lives, but in the midst of COVID it certainly added to the stress for family and friends.



Tina made sure COVID was not going to interfere with her Christmas spirit and even challenged everyone to decorate their own working space and get some jingle on!



There was much to celebrate at Christmas for those moving into their units at Jack Street. Anny, Adelle and family adorned the gazebo for everyone's enjoyment.



Zoom sessions became an important part of our daily routines.

Stephen is connected with Wayne and Kaitlyn as he gets ready to participate in the cookie decorating.

Reflections in Supported Independent Living & Respite Services

SIL supports 19 adults who live in their own or shared apartments. The hours of support that is received is individual and based on needs; it ranges from 5 or 6 hours/day to 1 hour/week.

During 2020 3 people were discharged from SIL services; Betty moved home with her mother, Kathryn Durant moved in to long term care, and Stephen Carson received SIL services while in his family home but moved in to a basement apartment at one of CLNG's residential homes. Subsequently, 3 adults began receiving SIL services in 2020; Stephen received SIL supports briefly, until he moved in to the basement apartment, and Anny Bourguignon and Jason Turmaine who moved in to the new housing units at Jack St.

In September 2020 Alixe Hysert and Bianca Carini moved from their townhouse rental on Barnes St to one of the new affordable housing units at Jack St.

Respite by the Numbers

Due to Covid19 restrictions the number of adults supported in respite was significantly down. There are **13 adults** normally supported in respite, but during 2020 the number decreased to **3**.

CLNG's target hours for providing respite in a year is **7,500 hours** and we provided **2856 hours** of respite to these adults in 2020.

Respite Services

Community Living North Grenville is the host agency in this area for RespiteServices.com. This is a provincial website co-ordinating a network of agencies & organizations providing respite for people. Respite workers are matched through a data bank to families looking for support.

Families can register by going to www.respiteservices.com, or contacting Carole Estey at cestey@clnorthgrenville.ca

Reflections in Community Supports



What a Difference a Year Makes!

We started 2020 with the usual focus on community participation, meaningful activities, getting together with friends and social connections, expressions of interests etc. etc.

This certainly is not the new normal now, and we are still coming to terms with what our 'new normal' will look like. Persons using these services underwent an incredible change. Staff were reassigned and suddenly people were spending a great deal of time at home. We had a few moments when we thought it was safe to re-open services, and twice that was accomplished with many new safeguards in place, but it was short lived.



Other ways of supporting people would be to stay connected through phone calls or email. Doing wellness checks and encouraging people to stay active while staying at home and encouraging them to reach out to friends and family to talk and share stories.

Some of our new way of supporting people included wearing masks, social distancing and staying in a social bubble.



Offering zoom sessions on a daily basis became a much needed life line for so many people. It has become a popular opportunity to talk to, and see friends, enjoy leisure activities and crafts, and even win some prizes. Kaitlyn Utman has done an incredible job organizing and hosting this venue and we are grateful for her and also our Executive Director for updating our technology to make it happen.

So many people had to make adjustments and accept changes in their lives. We are truly in awe of each of you, for staying at home and being safe; for families for creating a new plan of support for sons, daughters or siblings suddenly at home more; for staff accepting new hours of work, duties, and work locations; for supervisors trying to stay connected with families, people using these services, their staff, and reminding the community to keep jobs, volunteer opportunities, recreational and leisure events, because in Arnold Schwarzenegger's words – We'll Be Back! Stay Safe. Stay Well.

Employment Report

The Covid-19 pandemic has brought a lot of changes to employment for the people who use our services. Going in and out of lockdowns and stay-at-home orders, has been a challenge as the guidelines change, revenue and funding changes for businesses, along with the change in demand for certain services. Some jobs have been put on hold, some jobs have ended, hours have been both increased and decreased, and some have entered into early retirement. Volunteer placements have been put on hold with our focus being on paid employment.



James is happy to still be employed with the township.

Bianca returning to work at the Kemptville Animal Hospital after lockdown. They left the stockings up so she could find the one with her name on it.

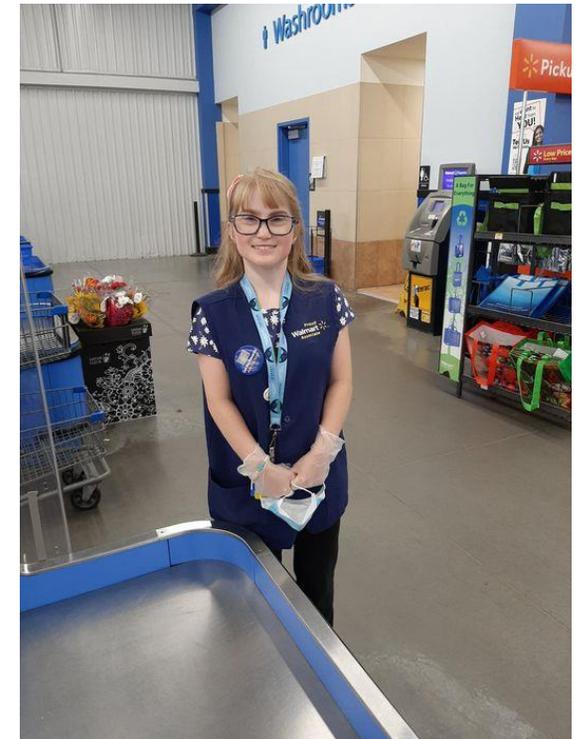


Jamie using the new sanitizing machine at the KYC to keep things germ free.



Barry keeping busy filling Oxivir bottles to keep our locations sanitized.

Alixé seems to always have a smile on her face while she does her township job keeping Burrits Rapids clean.



Faith has continued working at Walmart throughout the entire pandemic and celebrated her 1st year anniversary this year



Cultural Competency & Diversity Plan

Community Living North Grenville supports a culturally responsive community that recognizes persons served, staff members and volunteers come from a myriad of cultural backgrounds and that these cultures are integral to how we view and experience the world. All persons served must receive services in a manner that is respectful of individual preferences, needs and values. Community Living North Grenville is committed to promoting diversity in the workplace and strengthening cultural sensitivity and competence among our workforce as it relates to one another, our stakeholders and the persons we serve.

Cultural competency and diversity is based on the consideration of the following areas:

- Culture
- Age
- Gender
- Sexual orientation and identification
- Spiritual beliefs
- Socioeconomic status
- Language
- Ability

Summary for 2020

CLNG's Cultural Competency and Diversity Plan has gradually been developed most recently over the last couple of years. During the CARF review, one of our consultations was that we *"might enhance its cultural competency and diversity plan by adding, for each action to be taken, a timeline, priority, resources needed or available, and position/person(s) responsible for implementation. The organization is also encouraged to develop a committee of staff members and persons served to guide the development/updating of the cultural competency and diversity plan and to monitor and evaluate its implementation."*

This consultation will be taken into consideration as we further develop this plan.

Note: *to review the complete Cultural Competency and Diversity Plan, please visit our website, or request a copy from our administration office.*

Supporting People to Exercise Their Rights

The purpose of our Rights Committee is to provide a forum for individuals we support, to challenge and review any restrictions they feel have been placed upon them unfairly, and without justification. It also provides a tool for CLNG staff to review current restrictions and act upon them accordingly.

It is often difficult to distinguish responsibility for supervision and support of people from the restriction of individual rights.

The primary difference is: *Supervision provides assistance to the individual in making choices. Restriction offers the individual no choice.* The only time a restriction may be approved by the Rights Advisory would be if a person's choice of actions would harm others or themselves, or would be breaking the law or social culture of our community.

During the past year (2020) the Rights Advisory Committee met in January and February, but, due to Covid19 restrictions, did not meet for the remainder of the year.

Restrictions continued to be reviewed, and extended for one year based on staff and supervisor input. In 2020 we;

- Reviewed 25 total restrictions, 22 restrictions that were upheld, 1 restriction was revised, and 2 were resolved. There were 4 new restrictions brought to the Rights Committee.
- Provided annual rights training to all Community Living support staff and Board members.

Rights Committee Members

Jackie Ritskes– Chair

Carole Estey– Secretary (CLNG SIL/Respite Supervisor)

Jason Turmaine– (Self-Advocate)

Kelly Pinhey – (Parent)

Leanne de Ville—(retired from working with young offenders)

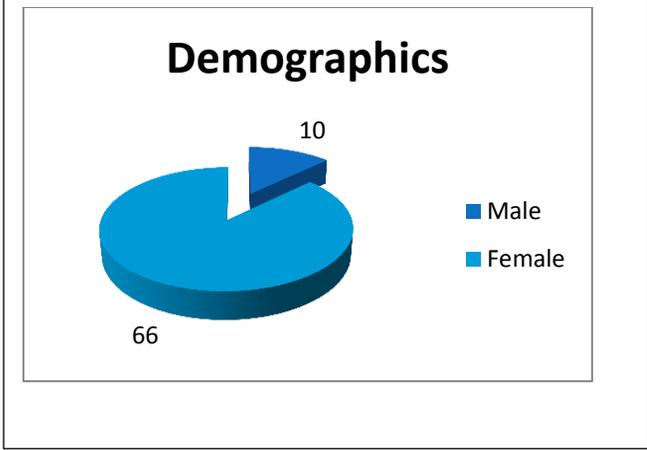
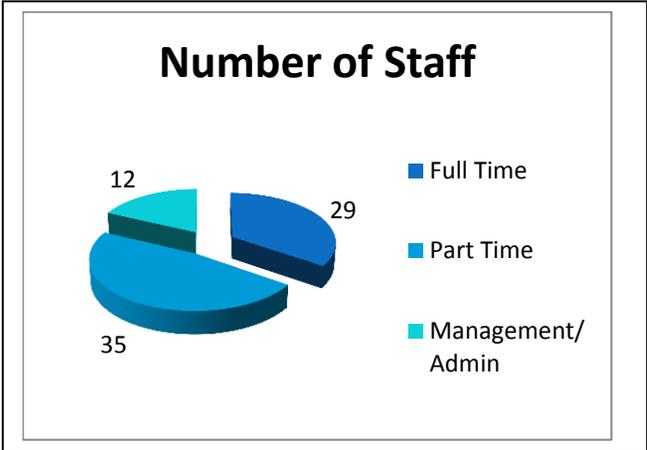
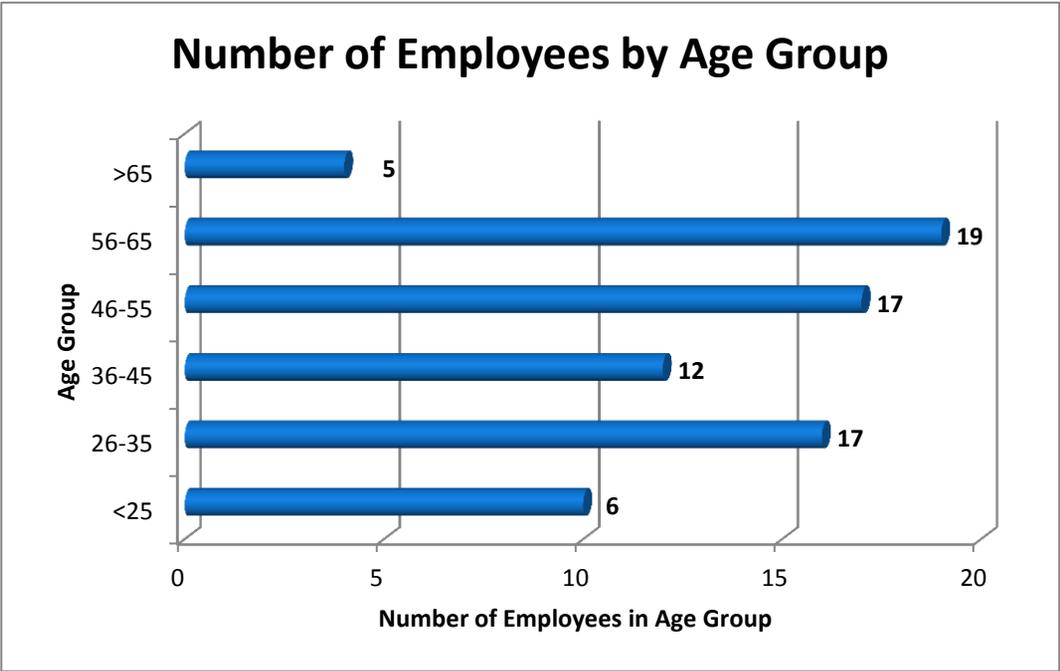
Lynn Turnbull – (community member)

Wayne Ritcher – (president of People First North Grenville and board member)

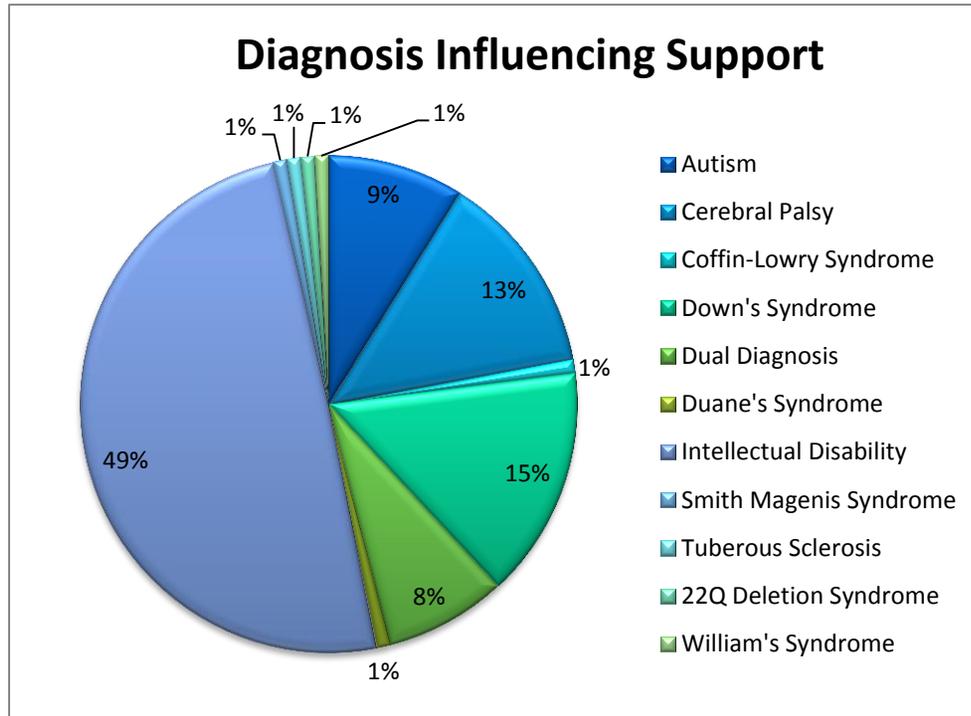
Heather Ungar – Quality Assurance and Planning Coordinator

Human Resource Management

- As of December 31, 2020 Community Living North Grenville had 76 staff members.
- We hired 9 new employees in 2020, 1 in administration to cover a Maternity Leave.
- Due to COVID, we did not hire any summer students to work in SIL or Residential roles. We did hire 1 summer student for lawn care.
- 1 part time Direct Support staff moved into a full time permanent position.
- 12 part time staff left CLNG in 2020.
- Our turnover rate is 15.5%.
- The average age of all employees is 46 years old.



Characteristics of Persons Served



Mobility Assisted:	
Limited Mobility	8
Unlimited Mobility	94
Wheelchair Usage	10

***There are two more people with unlimited mobility since last report.**

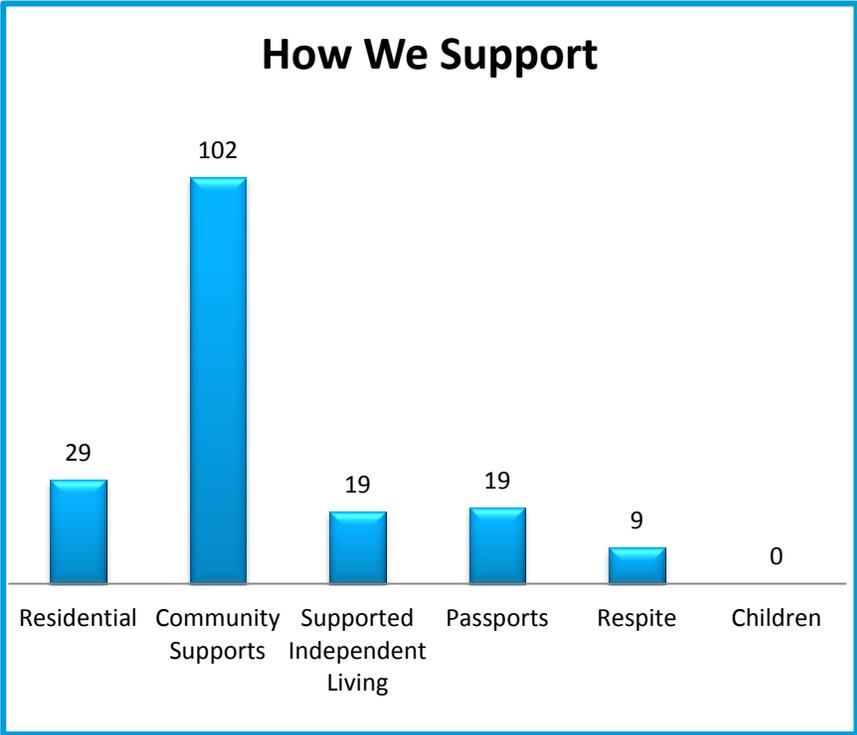


We support 68 men and 44 women

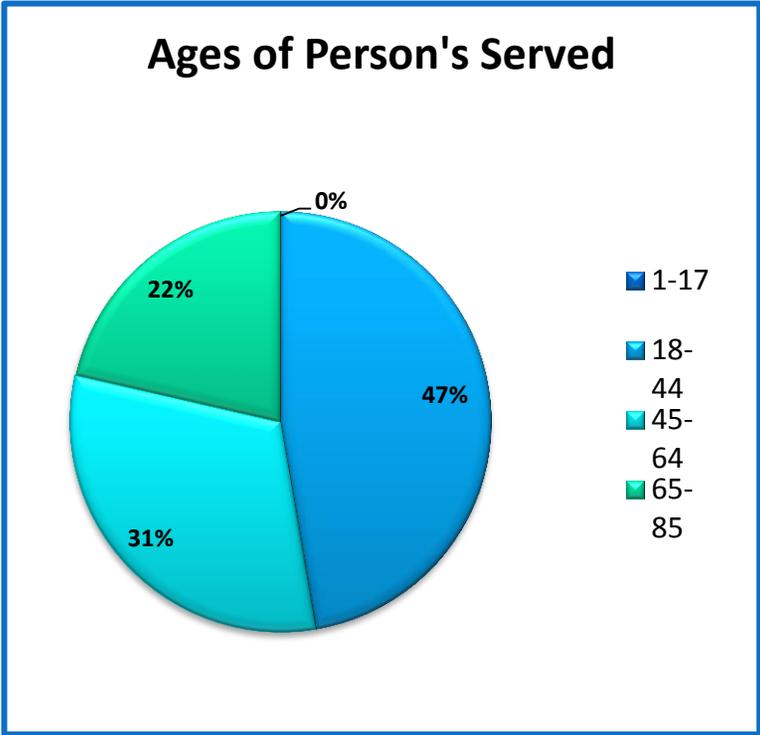
***Last report we supported 71 men and 39 women.**



In 2020 the Respite home supported many people for a total of 2,856 hours.



Please note that some of the who use our supports may use more than one service.



*There are 4% more people in the 65-85 age range since last report.



We operate 8 residential homes and 1 respite apartment.

Input from Stakeholders

The following outlines Community Living North Grenville’s plan to get input from its three groups of stakeholders: People who use our services, Support Staff, and Other Stakeholders (Community Partners, Family Members, Funders, etc.)

Year	People who use our services	Support Staff	Other Stakeholders
2020	<p>Community Living North Grenville will ensure that every year each person who receives services from us will have an updated annual SDSP completed that includes their input along with input from family, friends and their support staff.</p> <p>Community Living North Grenville supports a Rights Advisory Committee which obtains information from people who receive services and their support staff when rights may be restricted.</p> <p>A person centered interview (Outcomes Interview) will be completed annually with a sample of people who use our services. Due to covid19 restrictions no interviews were conducted this year.</p> <p>Community Living North Grenville makes it a practice to “ask” people on an ongoing basis whether they are satisfied with the supports that they are getting.</p> <p>People who use our services have a committee called the “Personal Empowerment Group” that meets regularly to identify educational topics and workshops that they would like Community Living North Grenville to present and host. Due to covid19 restrictions there were no PEG workshops held this year.</p>	<p>Monthly staff meetings.</p> <p>Professional Development Plans where Direct Support Professionals are encouraged to provide input and respond.</p> <p>Employer/Employee Committee. They meet quarterly.</p> <p>There are two suggestion boxes in the main building.</p> <p>Open door policy with all members of the management team.</p> <p>Core Competency Assessments are made available that help support staff with their professional and self-development.</p> <p>Staff survey sent out to all staff biannually.</p> <p>New employee hired survey completed by all newly hired employees within the first 2 months of hiring. Completed annually with all new hires each year.</p>	<p>Community Living North Grenville is connected with local colleges and continuing education programs to mentor possible future support staff.</p> <p>Community Living North Grenville’s Membership are invited to the Annual General Meeting where they vote on important issues such as Budget Approval and New Board Membership elections.</p> <p>In 2019/2020, Community Living North Grenville partnered with the Ministry of Housing, the Municipality and local builders to build affordable housing. Occupants were able to move in Sept 2020</p> <p>People are encouraged to provide feedback on the Community Living North Grenville’s company website.</p> <p>A survey is sent out to all community partners (CLNG volunteers and families of people receiving services every 3 years and where people who use our job coaching services are employed or volunteer biannually).</p>

Summary of Staff Survey

A staff survey was made available to all employees at Community Living North Grenville through Survey Monkey in the Fall of 2020. The questions within the survey were intended to measure Community Living North Grenville's strengths, areas of potential improvement and employee's attitudes and views towards Community Living North Grenville as an employer. The information received will be used to address areas of concern to ensure that CLNG remains a positive place to work.

Of 76 employees, 51 employees responded; representing a 67% response rate.

- Strongly disagree, accounted for 7.12% of the answers.
- Disagree, accounted for 16.88% of the answers.
- Agree, accounted for 48.33% of the answers.
- Strongly agree, accounted for 27.67% of the answers.

Top 3 Negative Results

1. I am provided with adequate opportunity for Professional Development such as attending webinars, conferences, workshops, etc. 39.2% of respondents answered disagree.
2. I feel valued as an employee of our organization. 37.26% of respondents answered disagree to this.
3. Our organization is open to change, and I work in an environment that is free from harassment. Both of these questions tied at 29.4% of respondents disagreeing with this statement.

Top 3 Positive Results

1. I feel I make a positive contribution to the lives of people supported by the organization. 98% of respondents answered agree to this statement.
2. My job is interesting and challenging. 94.1% of respondents answered agree to this statement.
3. I feel safe coming to work throughout the Covid-19 pandemic due to the health and safety measures my employer put into place. 86.27% of employees agreed with this statement.

If you are interested in looking at the full version of Community Living North Grenville's Fall 2020 Staff Survey results please contact our Administration Office at 613-258-7177.



Risk Management

Risk exists in our day-to-day operations of Community Living North Grenville. This year, risk was heightened in the way of health to people we support, and our employees due to the Covid-19 pandemic. Everything this past year was done to mitigate the risk associated with contracting the Covid-19 virus.

The areas of risk that Community Living North Grenville looks at are as follows:

- Persons served and their families i.e. injuries and accidents; abuse and neglect; missing persons
- Finances of person served i.e. fraud and theft
- Employees i.e. injuries, accidents, illness, communicable diseases, staff turnover, strike, employment practices, and violations
- Board of Directors i.e. fraud, theft, legal requirements and liability
- Property Assets i.e. damage, accidents, personal injury and theft
- Community Involvement i.e. complaints
- Technology i.e. security information; privacy and confidentiality, theft, damage and misuse
- Financial practice i.e. fraud, legal requirements to record and report investment losses; lack of funding
- Organizational profile i.e. negative media coverage, loss of credibility and loss of funding

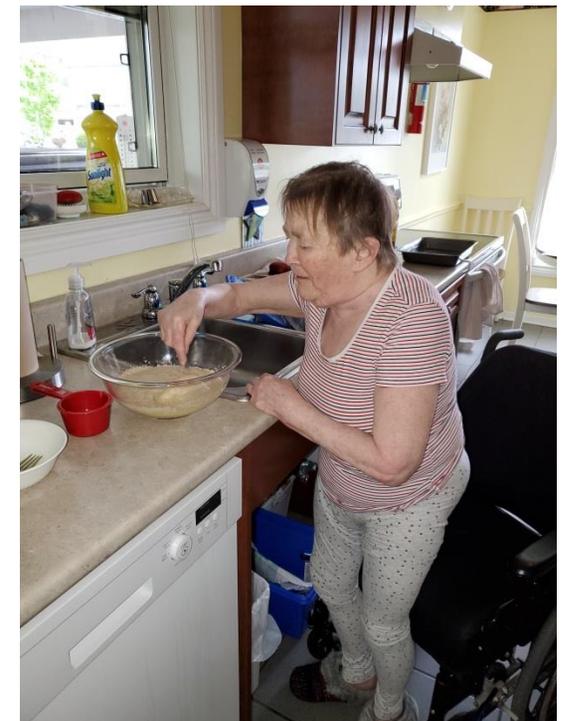
On an everyday basis, Community Living North Grenville minimizes risk by using training, policies and procedures, safe equipment and tools, and supervision. As we move forward, the requirement for staff to be vaccinated will need to be reviewed and considered.

Summary of Risk Management 2020-21

- The following measures were implemented to reduce the risk of infection of the Covid-19 virus.
 - IPaC measures that included the wearing of masks, eye protection, PPE equipment, and maintaining 6ft social distancing;
 - Many restrictions were imposed through the Public Health Unit, our Ministry, and the government in general (ie., business closures, lockdowns and stay-at-home orders)
 - As community activities were suspended, community supports staff were redeployed to residential homes.

- Limited the staffing across locations to reduce the possibility of cross-contamination
- The management team was working remotely during the stay at home orders, and lockdowns to minimize the number of people in the office.
- Increased daily cleaning and disinfecting at all offices and homes.
- The 2020 Risk Assessment Process with MCCSS for CLNG, remains at a “Low” risk rating. The Risk Assessment is required annually with a full risk review every 3 years. It measures the following areas: Governance, Service Delivery, Stakeholder Satisfaction, Financial Risk, HR, Legal, and IT.
- CLNG has again met “Compliance” following MCCSS’s annual compliance review in early February 2021. Programs reviewed included Group Living and SIL, and also included a “Covid prevention and preparedness checklist”.

Note: to view the complete Risk Management Plan visit our website or request a copy from our Administration office.

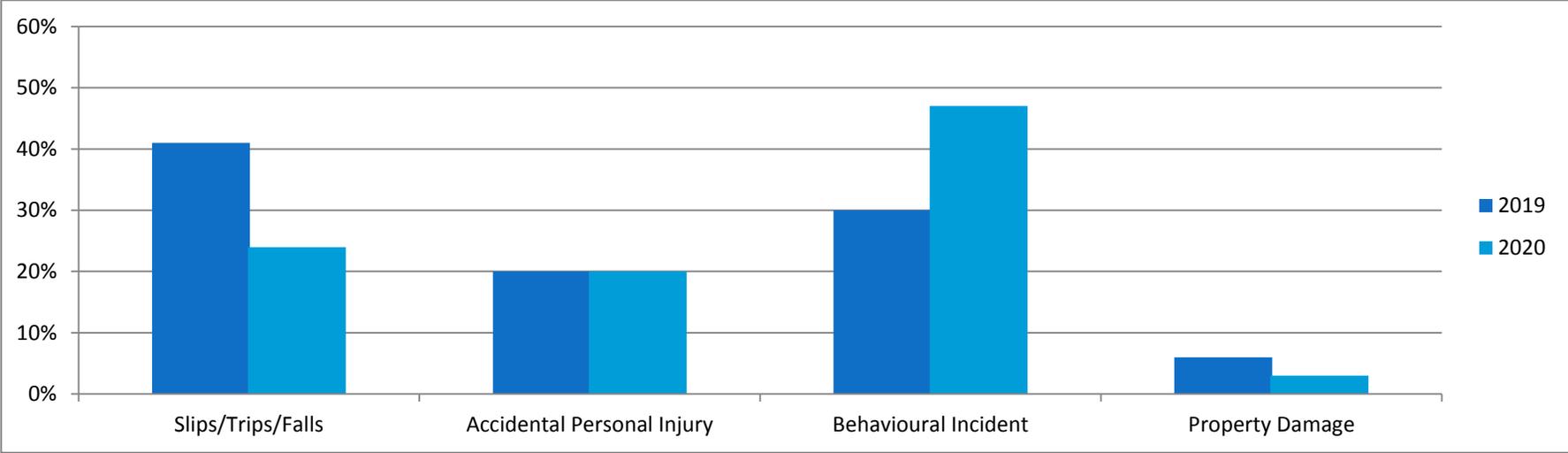


Health and Safety

2020 certainly was a year like no other. Like always we coped with the challenges of maintaining work and living environments to promote health and safety to diminish the occurrence of accident and incidents for all parties. In addition this year, we needed to deal with an incredible amount of regulations and expectations being introduced by our province, ministry, and business community relating to COVID 19.

The Health and Safety Committee has appreciated all the cooperation everyone has shown in being responsive to the enhanced safety protocols put in place. This committee also acknowledges the effort by the management team to ensure we have always had a good supply of Personal Protective Equipment and cleaning materials for infection control.

The following is a 2 year comparison of accident and incident reports: 95 reports were submitted in 2020 and 83 in 2019. This graph represents those accidents and incidents based on percentage of total reports. Incidents involving staff and individuals using our services are tracked as part of our risk management strategy. This allows us to identify ways to prevent future occurrences, identify areas for training, and determine a need for change or addition to policies and best practices.



Observations:

- Incident reports were up from the previous year, as well as reports involving challenging behaviour that was experienced by a number of people (this could be linked to frustrations from significant life style changes as a result of Stay At Home orders). Challenging Behaviour does remain a concern that requires continued staff training, good support systems, and consultation with 3rd party professional services to strive for positive outcomes for all parties.
- The Health and Safety Committee works in cooperation with the Employer and Employees to promote safe and healthy work and living environments.



Together We're Better – Accessibility

Ontario continues to draw closer to the original target of 2025 in creating an accessible and inclusive province where everyone can fully participate in everyday life in our communities and economy.

Our own Accessibility Committee continues to work in co operation with CLNG to identify and remove barriers within our services and living environments in an effort to make life as fully inclusive as possible.

Architectural Barriers:

- A number of assistive devices were installed at Maley St to accommodate the changing health needs fo two home occupants.
- Lydia St underwent a mini backyard makeover to enable some summer out door enjoyment, and turned some great looking raised flower boxes into vegetable gardens for easy use.

Financial Barriers:

- Affiliation Funding (Policy 4-30) is available for people who may need financial assistance.
- CLNG worked in partnership with the United Counties, our own ministry, and Lockwood Brothers to create a beautiful and affordable housing project on Jack Street.
- Brenda S (manager of finance) did a fantastic job advocating on behalf of a number of individuals to utilize some of their unused passport funding to purchase ipads, games and gaming systems, snoezelen equipment, and other items. This provided some leisurely stimulation while coping with so many changes as a result of COVID 19 limitations (including stay at home orders).

Transportation/Community Integration

- CLNG continues to assist people to purchase accessible transportation through ATS (Allegiance Transportation Services).

Environmental Barriers:

- CLNG uses a scent and dye free disinfectant cleaner and recognizes the importance of having scent sensitive environments. Additional infection control measures were put in place in our fight against COVID, including making sure all parties have ample personal protective equipment easily accessible to them.

Employment Accommodations:

- All employees continue to receive annual on line training in accessibility standards and customer service.
- The CLNG benefit plan continues to be available to staff for medical care, as is the Employee Assistance Services to promote health and wellness.

Note: to review the complete Accessibility Plan, please visit our website, or request a copy from our administration office.



Technology and System Plan

Community Living North Grenville relies heavily on the use of computers, devices and electronic information to conduct its everyday business. Over the course of the last year, this was highlighted more than ever before. Because of the current pandemic, the need to connect and conduct business remotely made many changes necessary within our technology and IT systems. There was much learning and training required to adapt to this new way. While we knew there was work to be done to our IT infrastructure, it became a quick priority to update equipment and equip users with proper information to operate efficiently.

Several of the items that were included on the Technology and System Plan were addressed in 2020.

Of course, on the flip side, some of those Goals that were intended for 2020, have been delayed and included in the goals for 2021.

Summary of Activities for 2020

- To enhance communication between all parties, email addresses were configured for all employees through the Microsoft Office 365 accounts. This was necessary to keep everyone updated on important information.
- As the management team was deployed to work from home, additional equipment was setup to enable users to connect remotely.
- Video equipment was supplied in the way of cameras and mics to allow users to attend events and meetings virtually.
- Three video platforms were chosen as preferred methods of use for videoconferencing, Zoom, Microsoft Teams and BlueJeans.
- Community Supports staff was instrumental in developing and planning for several “Zoom” events in order to keep everyone connected through on-line supports.
- Towards the end of the year, CLNG was successful in acquiring the AIMS platform (Alliance Information Management System), a robust information system used to track information and services for people supported. This has been a desire for quite some time, and it will enhance our paper processes and replace the limited capacity within Comvida’s persons served database.

Goals for 2021

- Results and recommendations from the 3rd party IT audit, completed the previous year, will be reviewed and implemented as necessary.
- Recommendations following the 2019 CARF review will be implemented to conform to the 2019 technology standard.
- *The two goals above had been delayed and deferred from 2020.*
- Given the current Covid 19 pandemic, virtual conferencing and technology will continue to play a bigger role in how we connect with people, both in business operations and through virtual and on-line support. Research and training will be required in order to use technology far more than we have before.
- An implementation team has been formed for the development and implementation of the AIMS database. This team will be responsible for the complete roll-out of the database, as well as the training and on-going support to employees.

Note: to review the complete *Technology and System Plan*, please visit our website, or request a copy from our administration office.



Efficiency Measures

Adequate and timely orientation of new employees hired

Objective: To ensure timely and adequate orientation for all new employees hired.

Definition: All new employees hired will complete their orientation within one month of being hired and will report feeling confident and fully equipped to perform their assigned job duties, upon completion of their orientation.

Rationale: When new employees do not feel that they have received timely and adequate orientation there can be many negative impacts such as making errors which could cause liability issues and employee retention issues. Not having timely and adequate orientation has the potential of placing a very negative impact on the supports provided to the people who use our services.

Target: 90% of new employees hired will complete their orientation within one month of being hired and report that they felt confident in their job duties upon completion of their orientation.

Action Plan: To reach our target of 90%, we have begun to implement a very structured orientation process where each new hire meets with human resources, a health and safety rep, the quality assurance representative, and location supervisor, to ensure overall organizational orientation and location specific orientation is completed in a timely and adequate fashion. New hires will also work their first three shifts, in each location they are assigned to, job shadowing before they work alone.

Method: An orientation checklist will be completed, and dated, with all new employees as they go through their orientation. New employees will complete a survey, when their orientation is complete, to determine if they felt ready for their assigned job duties upon completion of this orientation.

Indicator	Who Applied To	Time of Measure	Follow-up Interval	Data Source	Obtained By	Target
Percentage of people hired that completed their orientation within one month of their hire date	All new employees	Jan 1, 2020 to Dec 31, 2020	Annually	Orientation Checklist	Human Resources	90% TARGET NOT MET
Percentage of new staff hired that report they felt confident to perform their full job duties after orientation was complete	All new employees	Jan 1, 2020 to Dec 31, 2020	Annually	New hire Survey	Human Resources	90% TARGET NOT MET

Key Findings:

Timely orientation of new employees hired

In 2019, 12 new part time employees were hired. 9 out of 12 new staff hired, or 75%, completed their orientation and began their full job duties within one month of being hired. Therefore, in 2019 we missed our target of 90% by 15%, with a result of 75%.

In 2020, 7 new part time employees were hired. 6 out of 7 new staff hired, or 86%, completed their orientation and began their full job duties within one month of being hired. Therefore, in 2020 we missed our target of 90% by 4%, but we were 11% closer to reaching our target than last year, which shows that our structured orientation process that was implemented is working.

Adequate orientation of new employees hired

In 2019, new hire surveys, to determine if new staff felt confident to perform their full job duties, were sent to all 12 new hires and 5 were returned completed. From these 5 new hires that completed the survey, 5 or 100% reported that they felt confident to perform their full job duties after orientation was complete. Therefore, in 2019 we exceeded our target of 90%.

In 2020, new hire surveys, to determine if new staff felt confident to perform their full job duties, were sent to 5 of the new hires (2 resigned before surveys could be sent) and 3 were returned completed. From these 3 new hires that completed the survey, 1 or 33% reported that they felt confident to perform their full job duties after orientation was complete; however the other 2 respondents said they “neither agreed or disagreed with the statement”. Therefore, in 2020 we did not meet our target of 90%.



Respite apartment use

Objective: To measure how and when the respite apartment is in use.

Definition: Ensuring that respite is available to people within our community has become invaluable. Out of home respite provides a safe and supportive environment for people to learn. Planned respite is a proactive and preventative way for people to experience life. Collecting data on how and when the respite apartment is used will help us to determine as an association if it is being used efficiently.

Rationale: Community Living North Grenville is required to provide the Ministry of Children, Community and Social Services with data in regards to how we use the funding dollars allocated for Respite. The data collected will help us identify whether the amount of funding dollars is adequate for the needs that people have in this sector for Respite.

Target: Respite apartment is in use 237 days of the year, or 65% of the time. Remember that young people want to enjoy respite with their friends. Accessibility is an issue for this location, making it necessary to provide this support in another location.

Action Plan: To reach our target of 65%, the Respite apartment will be made available to families and individuals in our community looking for services in regards to respite and/or independent skill building. Community Living North Grenville will continue to promote the use of our respite apartment for self-funded and for week day respite.

Method:

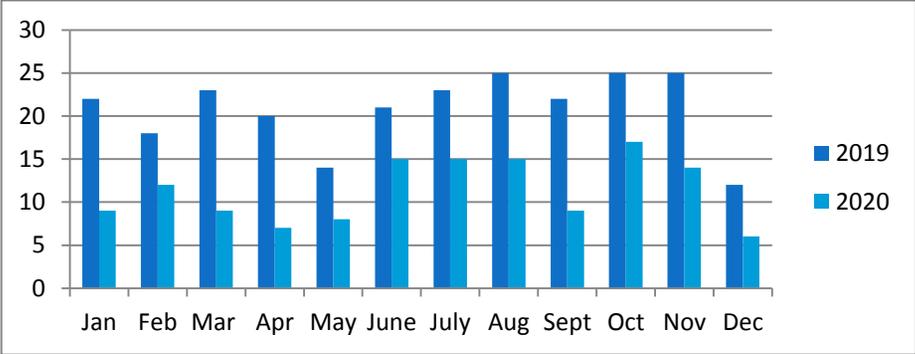
- During the intake process, information on the respite apartment will be presented to people.
- Information regarding availability is tabled at the Leeds and Grenville Out of Home Respite Advisory committee for Adults and the Leeds and Grenville Respite for Children With Complex, Multiple, Special needs, who meet on a quarterly basis.
- Development of a plain language fact sheet to be provided during intake, along with developing a plain language set of criteria for accessing the location during times when the respite apartment is self-funded.
- Promotion of the respite apartment to Community Supports during the redevelopment of their services.

Key Findings:

In 2019, the Respite apartment was used 206 days for overnight respite and 44 days by Community Supports for skill development, such as cooking classes, etc. throughout the year. In total the respite apartment was used 250 days this year. This is an **increase**, from 2018, in usage for the apartment when it was used 245 days throughout the year. Therefore, in 2019 the respite apartment was used 71% of the time, indicating **we exceeded our target** of 65% by 6%.

In 2020, the Respite apartment was used 136 days for overnight respite and due to the pandemic restrictions was not used by Community Supports for skill development, such as cooking classes, etc. throughout the year. In total then, the respite apartment was used 136 days this year. This is a **decrease**, from 2019, in usage for the apartment when it was used 250 days throughout that year. Therefore, in 2020 the respite apartment was used 39% of the time, indicating we did not meet our target of 65% by 26%. The covid19 restrictions had a great impact on the results for respite usage this past year.

Number of Days the Respite Apartment was Used



Business Function Outcomes

To operate within budget

Objective: To operate within budget.

Definition: To ensure Community Living North Grenville utilizes Ministry of Children, Community and Social Services (MCCSS) budgetary funding in an effective and efficient manner and not be in a deficit situation at year end.

Rationale: To ensure seamless supports for people who use our services, managing financial resources is critical. Community Living North Grenville responds to the challenge by setting a target of operating within two percent of approved budget.

Target: Community Living North Grenville will operate within 2% of their approved MCCSS budgetary funding for the year.

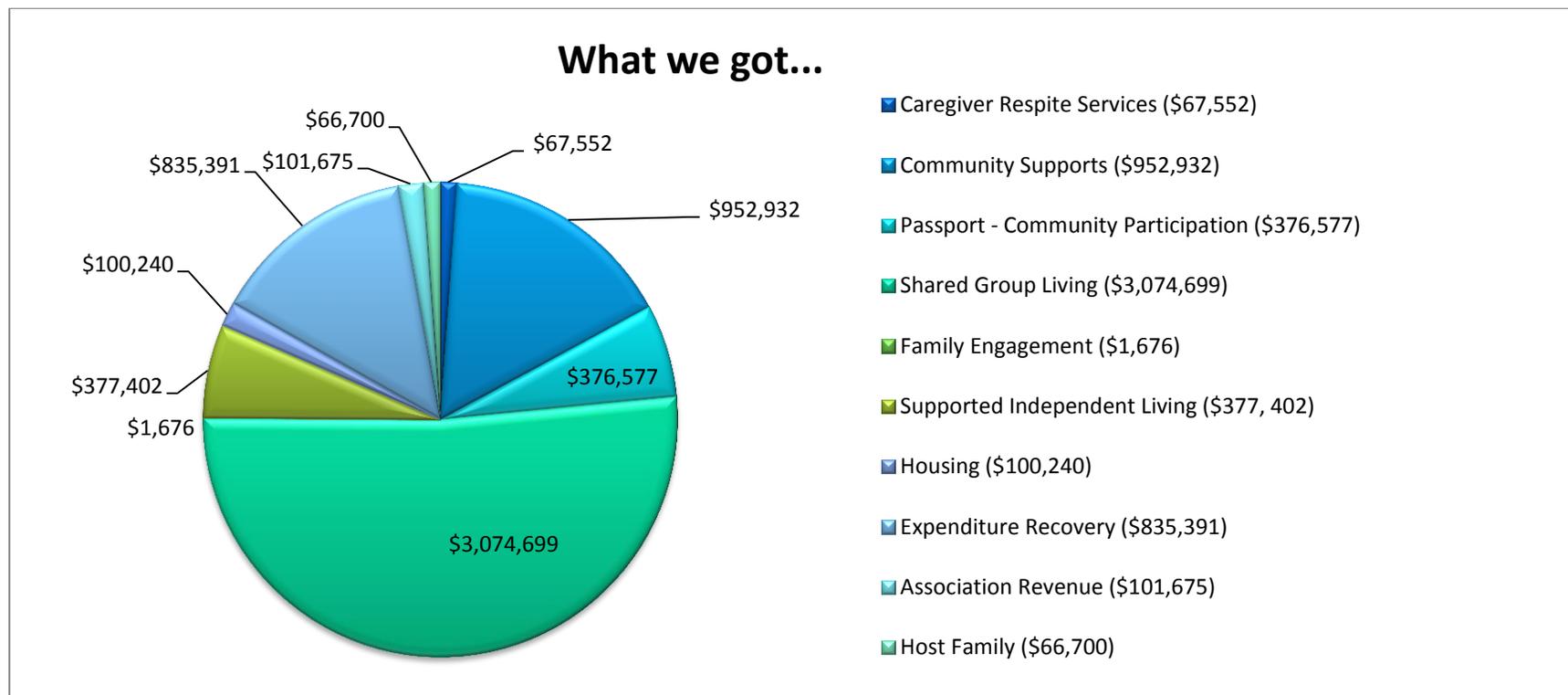
Method: Budget is set out at the beginning of the year and approved by the board of directors. Budget includes staffing and other operating expenses. They are approved by the MCCSS. It continues to be monitored on a monthly basis by the Executive Director, Board of Directors, Manager of Finance and Administration, and the Director of Service. Quarterly reviews are submitted to MCCSS.

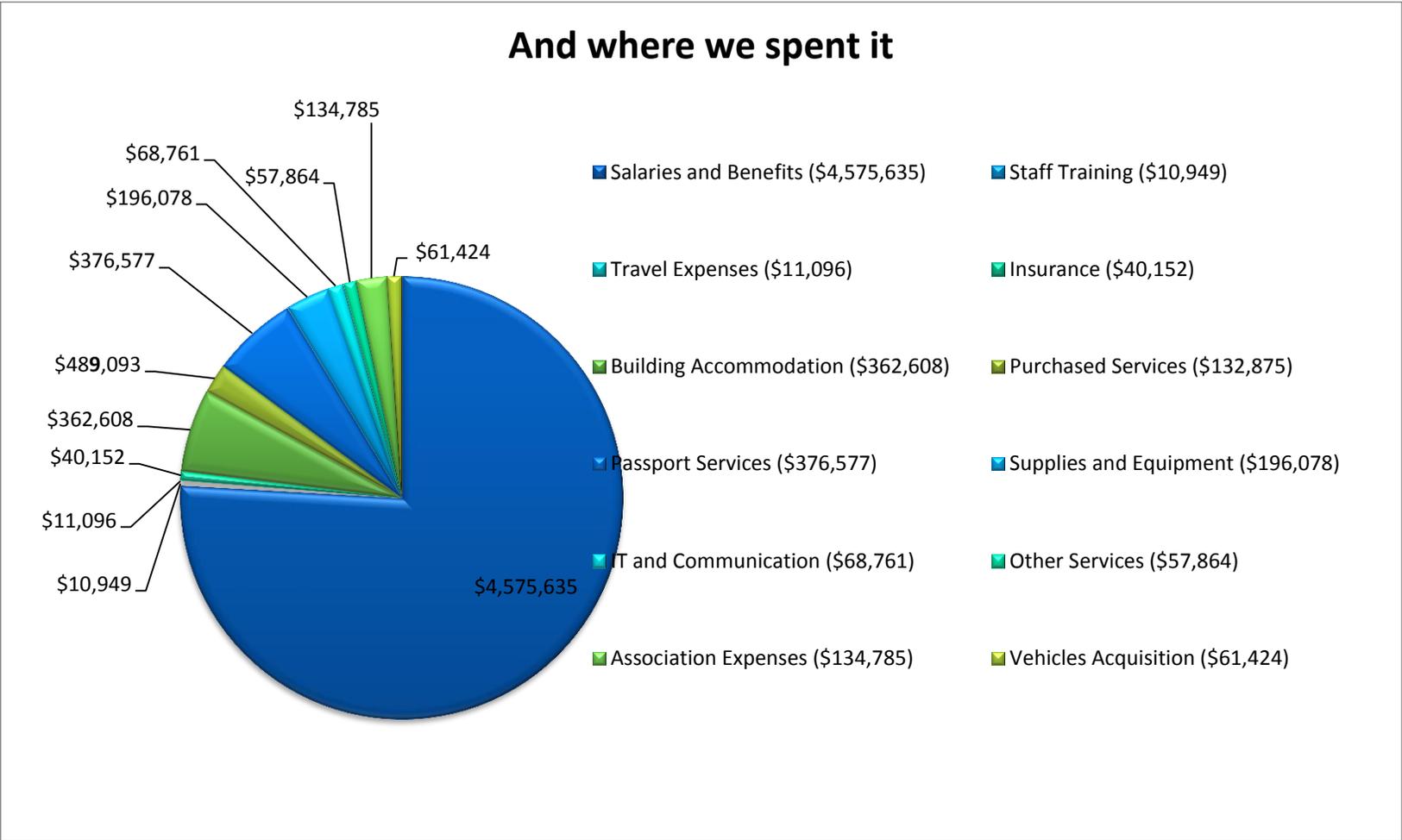
Key Findings: May 2021: At the annual audit completed by an independent accounting firm, it was reported that, for the fiscal year 2020-2021, Community Living North Grenville delivered balanced budgets within programs, with a surplus declared in its Group Living budget. The Group Living budget increase is due to Ministry funded Pandemic Pay and Wage Enhancement (\$396 837) for our essential workers. The surplus is due to an excess of Wage Enhancement dollars from the Ministry, which will be recovered. Community Living did not receive any “one time funding” for Dedicated Supportive Housing (DSH), as is usual, to balance that budget. Community Living received authorization from MCCSS to cover the deficit in DSH, from Group Living.

Passport funding continues to be an important source of revenue. Although not fully utilized for support this year due to COVID restrictions, the temporary expansion of admissible expenditures did allow for the purchase of much needed technology and sensory items by supported individuals.

Also due to COVID 19, all fundraising activities were cancelled. It should be noted that many of the Comedy Night Sponsors donated their sponsorship to Community Living, which is reflected in Association Revenue.

Indicator	Who Applied To	Time of Measure	Follow-up Interval	Data Source	Obtained by	Target
To operate within 2% of approved MCCSS funding for all programs	All Community Living North Grenville services	Annually April 1, 2020 to March 31, 2021	Monthly Report to Executive Director and Board of Directors	Annual Audited Financial Statements by independent accounting firm	Finance Manager and Administration	Operate within 2% of budget TARGET MET





All staff will maintain up to date mandatory training

Objective: To ensure all staff maintain up to date mandatory training.

Definition: All staff will receive and complete all mandatory training that pertains to their employment at CLNG.

Rationale: When staff have access to and complete training in a timely manner, supports that people receive will meet all of the requirements established by the Ministry of Children, Community and Social Services and will continue to increase the quality of supports that we provide to people.

Target: 95% of staff will complete all mandatory training when trainings are established as due.

Action Plan: To reach our target of 95%, we have implemented an internal training system to complete all organizational specific training and continue to organize First Aid, CPR and CPI training when needed for each staff member. Human Resources continue to track that all training is met for each staff by the deadlines set out.

Method: All staff will receive monthly reminders and access to complete monthly organizational training on our internal training system. All staff will complete First Aid/CPR every 3 years and CPI every 2 years as required.

Indicator	Who Applied To	Time of Measure	Follow-up Interval	Data Source	Obtained By	Target
Percentage of staff that have maintained up to date monthly internal training	All employees	Jan 1, 2020 to Dec 31, 2020	Annually	Reports from internal training system	Human Resources	95% TARGET NOT MET
Percentage of staff that have maintained First Aid/CPR and CPI training	All employees	Jan 1, 2020 to Dec 31, 2020	Annually	Training reports from internal training system	Human Resources	95% TARGET NOT MET

Key Findings:

In 2019, 76 of 78 staff maintained and kept up to date on monthly organizational specific training. Therefore, in 2019 we **exceeded our target** of 95% by 2%, with a result of 97%. In 2019, all staff maintained and kept up to date First Aid/CPR and CPI training. Therefore, in 2019 we **exceeded our target** of 95% by 5%, with a result of 100%.

In 2020, 71 of 76 staff maintained and kept up to date on monthly organizational specific training. Therefore, in 2020 we slightly **missed our target** of 95% by 2%, with a result of 93%. In 2020, in person training for First Aid/CPR and CPI was limited due to COVID restrictions. Therefore, in 2020 **we fell short of our target** of 95%, with a result of 60%. In 2021, our focus will be to catch-up on all the training missed in 2020.



Effectiveness Measures

People who use our services will set and meet at least one goal

Objective: To ensure that people who use our services are setting goals and meeting them every year.

Definition: All people who receive services from CLNG will set and meet at least one goal every year, as identified in their Self Directed Support Plans.

Rationale: When people who use our services continuously set and work towards meeting their goals they realize their options for making progress and move towards the meaningful life they want.

Target: 90% of people who use our services will set and meet at least one goal every year.

Action Plan: To reach our target of 90% people we support will set and meet at least one goal a year. When they have reached a goal they will set another goal so that people are continuously working towards a goal at all times.

Method: Every person that we support will set at least one goal, formally, at least once a year in their Self Directed Support Planning meeting. These goals can be revised throughout the year, by staff and people who use our services, as goals are met and/or changed. MCCSS will review SDSP's to determine that goals are being set and worked towards during their annual compliance review. As goals are set they will be entered into our data collection tool, Comvida, where we will be able to monitor if they are being met.

Indicator	Who Applied To	Time of Measure	Follow up Interval	Data Source	Obtained by	Target
People who use our services are setting and meeting at least one goal every year.	All people receiving supports from CLNG.	January 1, 2020 – December 31, 2020	Annually	SDSP's/Compliance Review/ Comvida	Support Staff/Planning Coordinator	90% TARGET MET

Results 2019:

People who use our services through **Residential Support** exceeded the target of 90%. 27 out of 29, or 93% of people set and met at least one goal this year.

People who use our services through **Supported Independent Living** did not meet the target of 90%. 17 out of 19, or 89% of people set and met at least one goal this year.

People who use our services through **Community Supports** did not meet the target of 90%. 49 out of 59, or 83% of people set and met at least one goal this year.

Therefore all people who use our services combined did not meet the target of 90%, as only 93 out of 107, or 87% of people set and met at least one goal this year.

Results 2020:

People who use our services through **Residential Support** exceeded the target of 90%. 27 out of 29, or 93% of people set and met at least one goal this year.

People who use our services through **Supported Independent Living** did not meet the target of 90%. 16 out of 19, or 84% of people set and met at least one goal this year.

People who use our services through **Community Supports** exceeded the target of 90%. 50 out of 54, or 93% of people set and met at least one goal this year.

Therefore all people we support exceeded the target of 90%. 93 out of 102, or 91% of people set and met at least one goal this year.

****Note:**

Due to covid19 restrictions some of the people that use our services were not able to participate in the community as much as in past years and therefore were unable to meet any community based goals they had set for the year.

People who use our services will have a self directed support plan

Objective: To ensure that people who use our services have their Self Directed Support Plan completed annually or within 16 months of the previous year's plan.

Definition: The Self Directed Support Plan involves the person we support, families, friends, and support staff. Person directed planning puts the person who uses our services at the heart of the important decisions that will affect their own lives.

Rationale: The process of self directed planning gives people more choice and control over their own lives. Person directed planning is an ongoing process that begins with listening in order to understand what is really important to a person. Planning decisions build on dreams, strengths and capacity. Person directed planning may be focused on the development of relationships as well as on ways to access community resources to develop a good life. The Ministry of Children, Community and Social Services requires Community Living North Grenville to annually have each person we support to participate in a Self Directed Support Plan. Each person's plan is completed during their birthday month.

Target: Our target will be 95%.

Method: Support staff will initiate conversations and plans with the people we support and set a date for a formal or informal meeting. A standard form is used as the basis for writing and planning each year. Once everyone is satisfied with the plan it is used to determine the priority outcomes for the individual that uses our services.

Considerations: There might be times when a Self Directed Support Plan does not get completed annually during a person's birthday month due to; illness, vacation, or personal preferences. When people receive services through Community Support in addition to Residential Support or SIL support, their SDSP is completed and recorded by either Residential or SIL supports, in consultation with Community Supports.

Indicator	Who Applied To	Time of Measure	Follow-up Interval	Data Source	Obtained By	Target
To ensure that people who use our services have their SDSP completed annually	All people receiving services from CLNG	January 1 st , 2020 to December 31 st , 2020	At the monthly manager's meetings	Persons Served Data Base	Administrative Support	95% TARGET NOT MET

Results 2019:

People who use our services through **Residential Support** exceeded the target of 95%. 29 out of 29, or 100% of people had their Self Directed Support Plans completed within 16 months of the previous plan.

People who use our services through **Supported Independent Living** met the target of 95%. 18 out of 19, or 95% of people had their Self Directed Support Plans completed within 16 months of the previous plan.

People who use our services through **Community Supports** did not meet the target of 95%. 54 out of 59, or 92% of people had their Self Directed Support Plans completed within 16 months of the previous plan.

Therefore all people who use our services combined did not meet the target of 95%. 101 out of 107, or 94% of people had their Self Directed Support Plans completed within the 16 months of the previous plan.

Results 2019:

People who use our services through **Residential Support** exceeded the target of 95%. 29 out of 29, or 100% of people had their Self Directed Support Plans completed within 16 months of the previous plan.

People who use our services through **Supported Independent Living** exceeded the target of 95%. 19 out of 19, or 100% of people had their Self Directed Support Plans completed within 16 months of the previous plan.

People who use our services through **Community Supports** did not meet the target of 95%. 48 out of 54, or 89% of people had their Self Directed Support Plans completed within 16 months of the previous plan.

Therefore all people who use our services combined did not meet the target of 95%. 96 out of 102, or 94% of people had their Self Directed Support Plans completed within the 16 months of the previous plan.



Service Access Measure

Ensuring families receive prompt services after referral

Objective: To ensure families receive prompt services after the initial request for services.

Definition: When people or their families require support Community Living North Grenville will respond in a timely manner.

Rationale: Community Living North Grenville strives to engage families as quickly as possible. It is our priority to respond to families and people looking for services in a timely manner so they will be in the best position to receive service as resources become available.

Target: People and their families will have their requests presented to Developmental Services Ontario South East Region within sixty days following the initial request for service from a family or their designate. We expect to achieve a 95% success rate.

Method:

- Community Living North Grenville employs a supervisor on staff to interview people and put together their application package to be sent to Developmental Services Ontario South East Region.
- People and their families will be made aware of the process and be informed of all the steps. The supervisor will remain connected with people and their families applying for services to monitor progress.
- An assessment officer from Developmental Services Ontario will visit the person at their home or at a local pre-arranged location to complete the remaining necessary paperwork and assessments.
- Community Living North Grenville does not confirm a person's eligibility for service. Developmental Services Ontario will connect with the family upon their determination if the person is eligible or not.

Considerations: People and families must provide Community Living North Grenville with certain documents in order for them to present a complete application package to Developmental Services Ontario. This will affect the timeframe in which the application will be sent from Community Living North Grenville.

Indicator	Who Applied To	Time of Measure	Data Source	Obtained by	Target
Percentage of people looking for services whose profile submitted to Developmental Services Ontario-South East Region	All people looking for services requiring their profile to be submitted	Sixty days from the initial contact	Interview with families and persons served assessments	Intake Team	Greater than 95% TARGET MET

In 2020, our intake team met with a total of 2 people who were looking for services. The shortest interval of time before initial contact and meeting with us was 5 days and the longest was 19 days. Therefore, we **met our target** of 60 days from initial contact until our meeting with them to discuss possible services.

Both people were already confirmed eligible for supports by Developmental Services Ontario before meeting with them.

They were given information about services and supports elsewhere due to being out of our catchment area, and/or looking for services that we do not provide (services specific to acquired brain injury).

Looking Back in 2020



When you believe in yourself anything is possible!!
Paige practiced, when the rink was open the beginning of this year, her skating each week and achieved her goal of skating around the entire rink.



Alixé and Bianca got creative at home by participating in virtual paint nights.

This October we held a pumpkin carving contest. This was Anny & Adelle's creative entry.



Every May is Community Living month. We always celebrate with a month of fun events. This year we had people send pictures to us on our annual Community Living Gear/Blue and green day.



Bianca works at the Kemptville Animal Hospital and happened to be working the day her cat, Cindy, was in for her shots. She was a great assistant to the vet giving the shots.

As the covid19 restrictions continued throughout the year we had to become very creative to stay connected to each other. We started offering a number of activities through zoom. Kaitlyn was showing John the ins and outs of zoom. So although we were not all able to be with each other in person everyday we are making sure that we continued to connect with people through all of our zoom activities.



Birthday celebrations looked a little different this year but Paul celebrated his 60th birthday on October 18, 2020, with a lot of decorations and cake with his housemates.

Data Integrity

Community Living North Grenville recognizes the importance of data collection. We do this to ensure **“that all Persons live in a state of dignity, share in all elements of living in the community, and have the opportunity to participate effectively”**.

Reliability is meant to ensure that data is collected consistently and in a way that could be reproduced at another time and by other people.

- **Outcomes Interview** tool was designed by The Council on Quality and Leadership. Community Living North Grenville modified this outcomes tool to fit our organization. The people that complete the interviews with persons served have received training and were certified through The Council.
- **Human Resources** department collects and monitors data in relation to attendance. Data is collected from some internal documents and the integrated HR & Staff Scheduling database system, Comvida. This minimizes the risk of the data not being collected the same way each time.
- **Information Technology** is monitored by a third party working closely with Community Living North Grenville’s Technical Support staff. Community Living North Grenville purchased a data collection tool, Comvida. Using this tool will make sure the data collected is correct.
- **Financial Information** is generated by the Finance Manager monthly for each program and submitted to the Executive Director for review. Financial reports are also reviewed at the monthly Board of Directors meetings. A yearly financial audit is performed by an independent accounting firm. The Ministry of Children, Community and Social Services requires an annual Transfer Payment Annual Reconciliation (TPAR) and an Annual Information Return (AIR) is provided for the Ministry of Housing (Supportive Housing).
- **Intake** documents which are used to collect information are provided through an assessment process by our local Developmental Services Ontario regional office. The same tool is used for each person who goes through the intake process, thus ensuring the information is uniform.

- **Information gathered about Persons Served** is gleaned from the General Service and Self-Directed Support Plans, Medical Appointment Forms, Face Sheets, Quarterly Reports and Risk Assessments. Primary advocates along with their supervisors complete these above mentioned forms thus ensuring uniformity.

Validity means the data measures what it intends to measure.

- Community Living North Grenville trusts its data is valid because it comes from persons served, support staff, family members and all others who have a vested interest in ensuring quality of service.

Completeness means only that the data is complete as possible and that obtainable data is not missing.

- We collect data on all programs locations and all persons served to ensure that it is complete.
- Records of persons served are annually updated by the primary advocate. This information is then given to Administrative Support to input into the data base.

Accuracy means that all data is recorded properly and that any errors are caught and corrected.

- Spot checks are completed by Program Managers, Primary Advocates and the Executive Director to ensure accuracy.
- Data accuracy is verified through channels of management and staff. It is substantiated by accompanying documentation.

Glossary of Terms

Objective:	The goal intended to be obtained.
Definition:	An explanation of the goal.
Rationale:	A description of why the objective is important to all involved.
Target:	The level to which the program aspires to reach.
Method:	A description of how Community Living North Grenville works towards the attainment of the goal.
Key Findings:	A description of any noteworthy information that may have been uncovered when analyzing the data, including a comparison of data over time.
Consideration:	Any vulnerability in the method of collecting and/or analyzing the data which may impact the outcome.

Types of Measures

Efficiency:	A measure that examines different aspects of resources used, such as adequate and timely orientation of new employees hired.
Business Function:	A measure that examines different administrative aspects of the agency.
Effectiveness:	A measure that examines the direct impact of our services on the persons served.
Service Access:	A measure that determines if persons served and their families are accessing services in a timely fashion.

Contact Information

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Director of Services	Brenda Dillabough	Ext 113
Residential Supervisor	Tina Smith	Ext 125
Residential Supervisor	Kathy Botham	Ext 131
Clinical Supervisor	Sandra Harrison	Ext 130
SIL/Respite Supervisor	Carole Estey	Ext 112
Community Inclusion Supervisor	Nancy Fischer	Ext 114
Quality Assurance & Planning Coordinator	Heather Ungar	Ext 136

Visit Our Website: www.communitylivingnorthgrenville.ca

If you have any questions or comments about this Management Report

please contact Sandra McNamara at (613) 258-7177 ext 111.