

OUTCOMES MANAGEMENT REPORT 2022



Inspiring Possibilities

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Executive Director's Report

We are pleased to provide the 2022 edition of the Annual Management Report. 2021-22 was a year that continued to challenge us in our fight against Covid.

The Emergency Orders, and all masking and infection prevention protocols remained in place for the entire year. In early 2021, vaccines were made available, and rolled-out through mobile clinics to the people we support in April, and June, and then boosters again in early January 2022. The Chief Medical Officer of Health mandated that all employers have vaccine policies in place that encouraged vaccinations. Due to the surge in cases in late December related to the Omicron variant, our Ministry then implemented mandatory Rapid Antigen Testing (RAT) for all employees, 2 to 3 times per week.

It wasn't until then, over the Christmas holidays in fact, that we were exposed to our first positive Covid case. The Omicron variant ran rampant through the organization, with 30% to 40% of staff infected and half of our homes in outbreak. Thankfully, because of the weakened variant, all people and employees fared out very well, with minor symptoms. Nonetheless, it was an extremely stressful period, involving the contact tracing and testing, scheduling challenges due to lack of staffing and positive Covid environments, and the constant reporting to our own Ministry, as well as the Ministry of Health and the Ministry of Labour.

Despite this being the 2nd year of the Pandemic, we began to move forward, all while learning how to deal and live alongside the Covid virus. The Board moved forward with two significant initiatives.

The Board completed a new Strategic Plan. From November 2021 to March 2022, consultant, Rob Wood, of 8020Info, led the process to review and determine the organization's strategic priorities. Information was gathered through on-line surveys and focus groups. Specific details can be found within the Strategic Plan report.

We were also very pleased to move forward with an amalgamation with Impact Residential Services. The announcement to review the potential for amalgamation was initially made in the Fall of 2019. While this was delayed due to the pandemic, work continued slowly, and in early January, the Board(s) made a formal announcement that they would each seek approval from their stakeholders to amalgamate April 1, 2022. Unanimous approval was obtained from the Board(s) members, families and the Ministry to make this possible. The new "CLNG" has now grown to over \$5 million budget, 97 employees and 12 residential homes.

Many thanks to all employees for their support and cooperation over the past year. Putting the Covid pandemic behind us, we are excited for what the future holds for Community Living North Grenville, Please reach out if you have any questions after reviewing this report.

Respectfully submitted,

Sandra McNamara

Executive Director



Our Management Report

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

Once again due to the pandemic and the ongoing and ever changing restrictions this report will continue to look a little different than in past years. We have had to adapt and change the ways we support the people and families who use our services.

This is our 14th Annual Management report. We put this report together every year to provide the people we support, families, staff, and our community partners with an overview of what has been happening within our organization over the past year. The feedback and data collected also helps us to look to the future for what services and supports may be needed in our community and how we can attempt to provide those services and supports.

This document is like a “report card”. It shows what we do and how we do it. Based on feedback from all of our stakeholders, it tells you what we are doing well and what we want to strive to do better.

If this report is hard to understand please;

- 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 you to understand the information better.

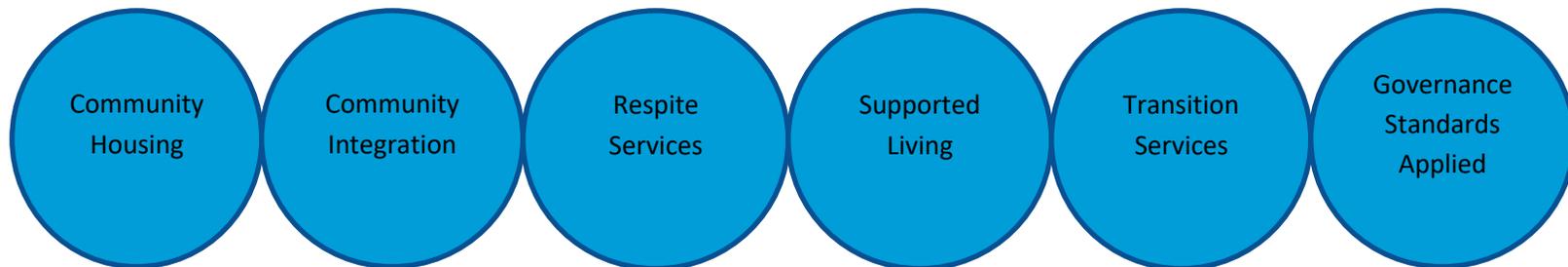
**This report refers to several plans, if you are interested in looking at the full version of Community Living North Grenville’s Risk Management Plan, Technology and System Plan, and/or Accessibility Plan, please visit our website at www.communitylivingnorthgrenville.ca under the “Resources” tab or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

Partnership with CARF

Community Living North Grenville is proud of our partnership with the Commission for the Accreditation of Rehabilitation Facilities (CARF). We have held this partnership for the past 14 years. This organization is an independent, non-profit accreditor of health and human services. The standards that we are required to meet each year through CARF are acknowledged all over the world.

We value this partnership with CARF because they respect our uniqueness as a grass roots organization founded by families for the overall wellness and inclusion of their family members in our community over the years. We sincerely believe that partnering with and reviewing our supports and services against these standards allows us the chance to constantly improve our services. It also gives us the opportunity to show our commitment to clear and accountable services and supports we provide to all of our stakeholders.

During our last visit from CARF, in 2019, Community Living North Grenville successfully completed our fourth 3 year accreditation for the following services:



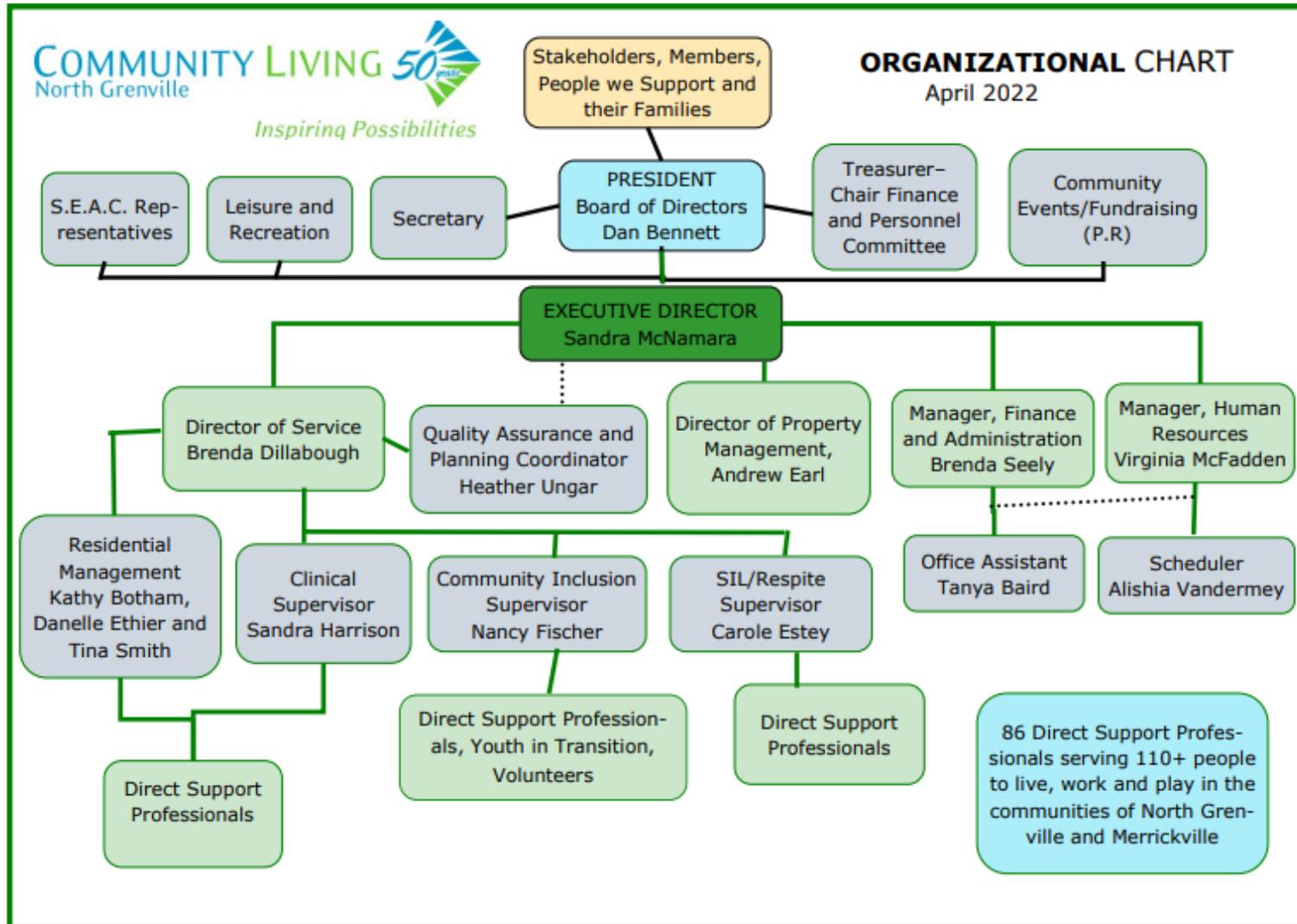
We are looking forward to our next accreditation which will be taking place this Fall 2022.

CLNG Board of Directors 2021-22

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 (resigned Jan '22)			X			Insurance Agent	X		
Vacant Position									
Vacant Position									

Organizational Chart

Board Governance Manual Section 1.2.5—Organizational Structure



Approved— April 2022

Strategic Planning 2022-2025

After a year long delay, the Board embarked on the Strategic Planning process.

“In September 2021, CLNG launched the process to renew its strategic plan and commitments to its mission, long-term vision and service values for the organization. It also identified some key strategic priorities to anchor and guide its activities over the next three years and beyond.”, as written in the plan.

This process was commissioned through the oversight committee and done jointly with the Board at Brockville & Area Community Living Association (BACLA).

Rob Wood, of 8020Info Inc., who led the last Strategic Plan in 2015, was retained again to complete the process. Through various surveys and on-line focus groups with all our stakeholders, the information received, was tabulated into 4 Strategic Priorities.

The vision, mission and values, were examined with a goal to update, summarize, and offer plain language.

As a result, the following Renewed Vision, Mission and Values were developed.

Our Vision:

Community Living North Grenville believes that all people should **be respected, valued and included**. We all should live in a state of dignity and have the opportunity to share meaningfully in all aspects of community life.

Our Mission:

Community Living North Grenville advocates for, promotes and facilitates the full participation, inclusion and citizenship of people who have an intellectual disability.

Our Values:

CLNG is guided by a set of values summarized below:

- Providing person-centred supports and individual choices/opportunities.
- Dignity, respect, security/safety, access to health care and income
- Rights/duties as citizens, meaningful friendships and community relationships.
- Family and community engagement.
- Comfortable and suitable homes that persons supported can call their own.
- Support from competent, caring and committed employees.

The following strategic priorities were developed which will guide the agency and its actions in the next three to five years.

Renew the Organizational Model

Review CLNG staffing and models to cope with emerging pressures.

This priority speaks to the need to adapt staffing and scheduling models, continue to enhance talent attraction and management practices, build CLNG's capacity to use technology, and pursue continuing organizational development and training.

Explore integration with BACLA

Build on the Shared Leadership Model to Advance Integration

As a proactive initiative to integrate developmental services with interested partners and in anticipation of future government direction, this priority sets out steps to assess options and, if beneficial, pursue greater organizational integration with BACLA.

Connect and Communicate

Pursue initiatives to engage internal and community stakeholders

The pandemic led to a significant disconnect at many levels — between management and front-line employees, between CLNG and community partners, and among persons supported, families, caregivers and homes. This priority focuses on connections to strengthen supports for people, their families and caregivers.

Transportation | Housing | Community

Collaborate with partners to address gaps in services/infrastructure.

Work with partners and advocate to bridge gaps in community infrastructure, services and opportunities. Explore creative ways to improve public transportation services, advance access to technology, and develop innovative housing opportunities to help ensure persons supported have access to safe, adequate and affordable housing and supports. Seek out more opportunities in community settings for persons supported to enjoy activities aligned with their personal goals.



Reflections in Residential Services

Community Living North Grenville provides support to 28 people in a number of shared living environments.

In 2021 we met with many stops and starts as we continued another year of living through COVID 19. There were periods of time when the 'lockdown' kept us at home with limited options. 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. There was a period of time when Staff were hard to recognize in their full PPE, family contact was changed to phone calls or face time, and community participation was diminished to drives, drive thru, or walks around the neighbourhood. We greatly appreciate everyone for working so hard to keep us safe, engaged, entertained, and connected. We were fortunate that people remained creative, remained patient, and simply tried new things or things differently.



Many people used zoom to stay connected to friends and activities. Bob, attending church in the comfort of his home.



Barry realized he had saved cash by not going out as much so spent some well earned money to buy a personalized bench to preserve his family name.



There were some milestone birthdays in 2021 for a number of people, who still managed to celebrate in some way with family and friends. Congrats to Joanne F on her 60th, Penny C on her 70th, Mark G on his 65th, Bill W on his 60th, and Dave K on being 80 years young!



In May of 2021 Clinton D passed away. It had taken him many years to find a place he could finally call home and fortunately he found that with CLNG.



Perhaps animals may have had trouble coping with the 'lockdown', or Cindy was just having fun with Bianca!

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 2021 there were no changes to the numbers, or persons served in Supported Independent Living.

However, in 2021, John Turmelle became homeless as Stonehaven Boarding Home, where he resided, was sold. His room and board were terminated on May 31, 2021. John spent some time with friends, working as a farm hand, but that did not work out. While looking for alternative housing, he spent time between the respite apartment, Lydia St. home, and the Clothier Inn. In November of 2021 he moved to Lydia St. on a regular basis, although not permanent, while he continues to look for a permanent residence.

Respite by the Numbers

Due to CoVid19 restrictions, and staff shortages, the number of adults supported in respite continued to be down. There were **5 adults** supported in respite in 2021; but during 2021 the number increased to **6**.

CLNG target hours for providing respite/year is **7,500 hours** and we provided **3,998 hours** of respite to these adults in 2021.

Respite Services

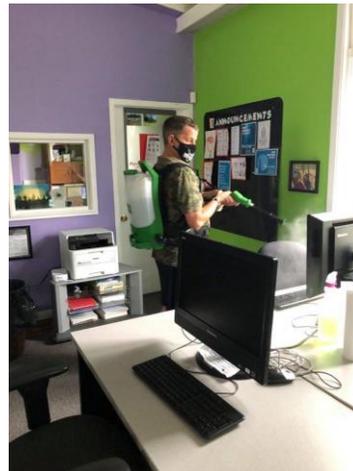
Community Living North Grenville is the host agency in this area for RespiteServices.com. This is a provincial website co-ordinating a network of agencies & organizations providing respite for people. Respite workers are matched through a data bank to families looking for support.

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

Reflections in Community Supports

As the year went on more of the community began to open up again and people were able to participate in some leisure and recreation activities and events. Restrictions continued to be lifted and you could actually join in with a small group of friends to enjoy those activities that had been on hold. Diane, out of the Merrickville Office was able to stay connected with Seniors living in area long term care homes, by weekly phone calls and some outdoor visits.

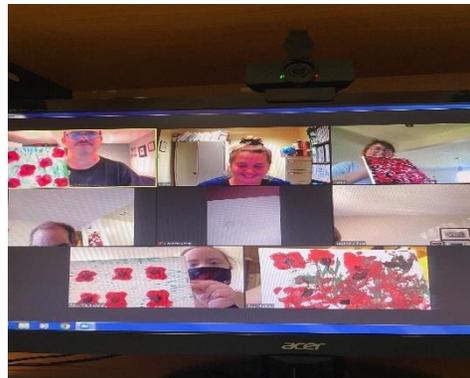
Visiting a Museum was something we took for granted until we could not. Finally we could enjoy them 2 years later. Justin having fun among the dinosaurs!



Although Jamie looks like he is trying out for a part in the Ghost Busters movie, he really is just following the cleaning protocols at his work. He is thrilled to be back working his regular hours at the Kemptville Youth Centre.



Ian and a few friends got to enjoy a trip to Parc Omega where they met up with some “new friends” who were more than happy to take the snacks he was sharing.



Zoom continued to be a good way to stay connected with family and friends, to participate in a number of events, and share some great social time with your acquaintances. Here a group is working on a Remembrance Day craft.



People became creative with their time and we saw many random acts of kindness. Heather is accepting a pay it forward gift from Community Living Dundas in Morrisburg. It was so great to see people remain positive.

A number of people were determined to try new things in 2021. Jess tried some hiking on Settler's Trail. Doug tried his hand at some baking. Jeff always wanted to try kayaking. And Drake spent some time exploring window art.



Brian is a man of few words. He was able to let Donna know pretty clearly what it meant for him to be back riding again.



Max is excited to be back bowling and says she is still pretty good at it!



Employment Report

The Covid -19 pandemic has continued to have an impact on employment for the people who use our services. The uncertainty of it all has cautioned employers to have people return to their jobs largely due to financial concerns.

In addition, it has also made them not want to commit to creating new employment roles. With that being said, we did still have a large number of people return to work as their roles were vital to the cleanliness and safety of everyday operations.

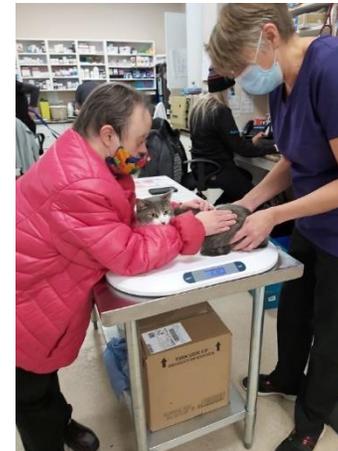
We continue to build strong partnerships within our community which will aid in increasing our employment opportunities in the future. Coming out of 2021, I am happy to report that we are on the upswing of things so we look forward to a brighter 2022. (Submitted by Kaitlyn Utman)

Jillian keeps the Community Living Office clean and germ-free.



Braedan got his first job at Walmart and started on August 24, 2021.

Joanne continues to work with her long-time employer The Brigadoon in Oxford Mills.



Jamie ensures the Kemptville Youth Centre stays in operation by keeping everything clean and sanitized.

Bianca loves animals and working at the Kemptville Animal Hospital. Here she is pictured assisting with her cat Cindy.





WE LOVE OUR VOLUNTEERS



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 2021

CLNG's Cultural Competency and Diversity Plan has taken a back seat over the last 2 years; however, it is necessary that we move forward with a comprehensive plan to embed cultural sensitivity and diversity in our culture.

Goals for 2022

- Further develop the cultural competency and diversity plan to include action items and timelines.
- Update and reflect the plan in CLNG's Policies and Procedures.
- Prepare for the introduction of the plan and its training to all employees
- Monitor and evaluate the effectiveness of the implementation.

Supporting People to Exercise Their Rights

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

We talk a lot about how it is often difficult to distinguish between 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 (2021) the Rights Advisory Committee did not formally meet due to Covid19 restrictions. However, restrictions were discussed and reviewed on an individual basis. New restrictions were discussed with those bringing them forward and existing restrictions were extended for one year based on staff and supervisor input.

In 2021;

- There were a total of 24 total restrictions, including 2 new restrictions put into place.
- 5 restrictions were resolved.
- Annual rights training was provided to all Community Living support staff and Board members.

Rights Committee Members

Jackie Ritskes (Former supervisor)

Carole Estey– Secretary (CLNG SIL/Respite Supervisor)

Jason Turmaine– (Self-Advocate)

Kelly Pinhey – (Parent)

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

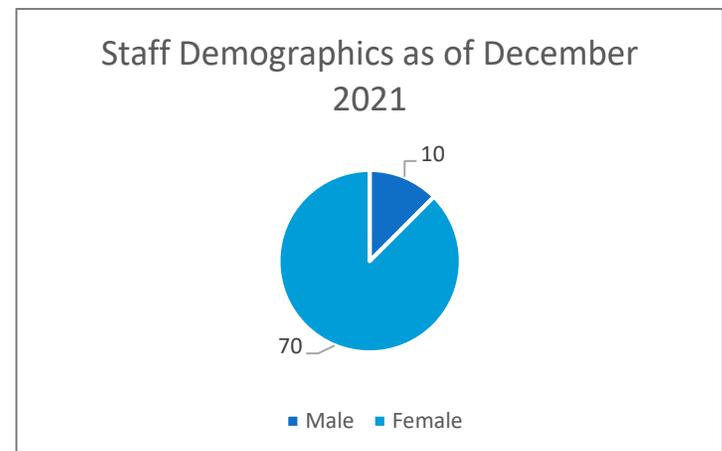
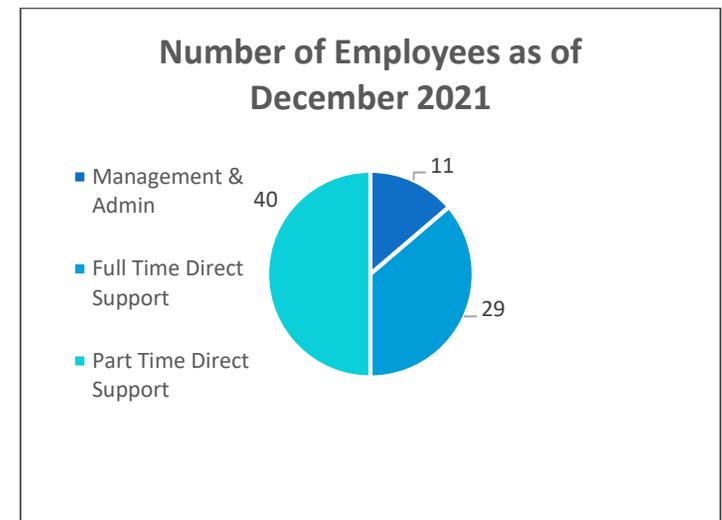
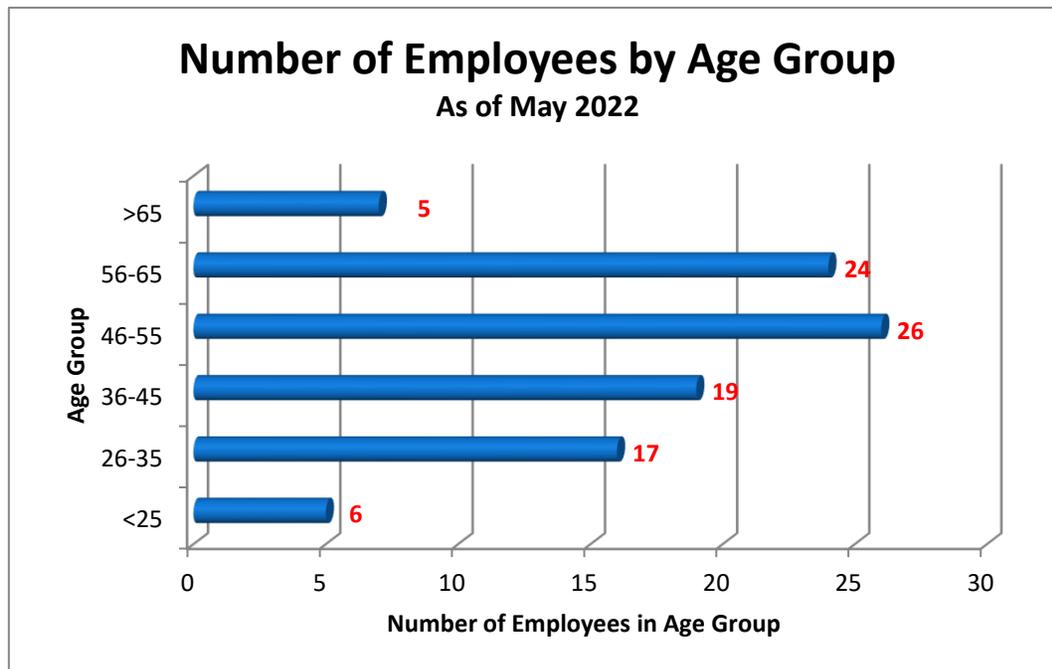
Lynn Turnbull – (community member)

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

Heather Ungar – Quality Assurance and Planning Coordinator

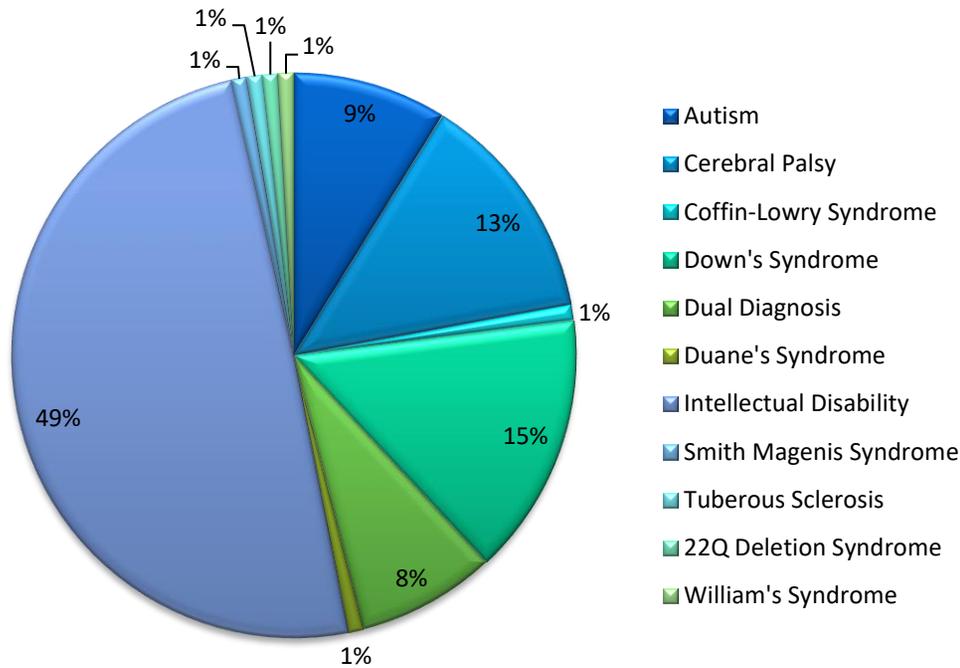
Human Resource Management

- As of December 31, 2021 Community Living North Grenville had 80 staff members
- We hired 13 new Direct Support Professional employees in 2021
- One summer student was hired to assist with lawn care
- 1 part time Direct Support employee moved into a full time permanent position
- 7 employees left CLNG in 2021
- Our turnover rate is 8.75%
- The average age of all employees is 48 years old.



Characteristics of Persons Served

Diagnosis Influencing Support



Mobility Assisted:

Limited Mobility	8
Unlimited Mobility	94
Wheelchair Usage	10

*There are 2 more people with unlimited mobility since last report.



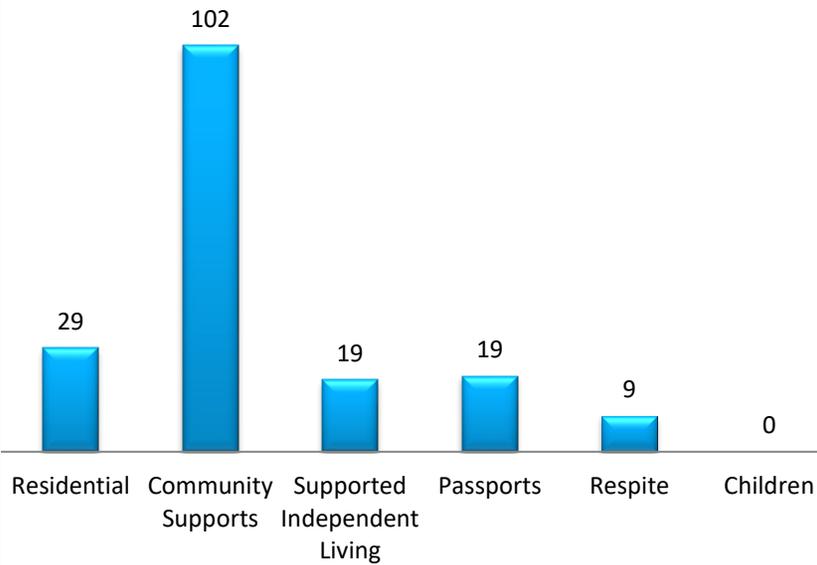
In 2021 the Respite home supported many people for a total of 3998 hours.



We support 72 men and 40 women

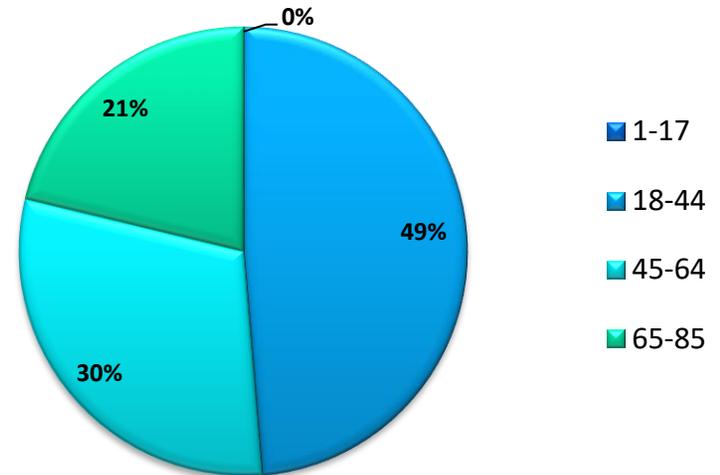
*Last report we supported 68 men and 44 women.

How We Support



*Please note that some of the Persons served may use more than one service.

Ages of Person's Served



*There are 2% more people in the 18-44 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
2021	<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 2021, Community Living North Grenville continued to partner with the Ministry of Housing, the Municipality and local builders to offer affordable housing.</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 Family/Person Supported Survey

- **Purpose**

To ensure that families and the people we support are satisfied with the supports provided to them by Community Living North Grenville.

- **Process**

Surveys that consisted of 9 questions were sent to all families and people we support via survey monkey and email, to fill out and return to Community Living North Grenville.

For the purpose of this report we collected data on 1 of the 9 questions:

****Are you satisfied with the supports that you/your family member receive at Community Living North Grenville?**

- **Results**

We had a very low return rate. In total 89 surveys were distributed, with 11 family members and 2 people we support (15% response rate) sending back their surveys. 12 of the 13 surveys that were returned indicated that people were satisfied with the services that they receive and 1 family member indicated that they were not satisfied.

- **Proposed Action Plan:**

Discuss and research ways to increase the surveys response rate such as; delivery method, frequency of surveys being sent, etc.

Summary of Community Partners Survey

- **Purpose**

To ensure that the Community Partners we work with to support individuals, who are either employed or volunteer in our community, are satisfied with the services provided by Community Living North Grenville.

- **Process**

Surveys that consisted of 5 questions were sent to all Community Partners we work together with to fill out and return to Community Living North Grenville.

- **Results**

Community Partners (with a 24% response rate) sent back their surveys and these were the results;

1. Is Community Living responsive to your needs.....do you know how to get a hold of us if needed?
-8 out of 8 Community Partners answered YES
2. Are the people you employ/have volunteering valued members of your business?
 - Do they take breaks with other people on your team? – 2/8 replied YES
 - Do they have input into team discussions? – 2/8 replied YES
 - Do they have a specific job description? – 8/8 replied YES
 - Do they receive regular feedback about how they are doing? – 7/8 replied YES
 - Do they get invited to team meetings, activities, etc. – 4/8 replied YES
 - Do they have the opportunity to try new tasks? – 3/8 replied YES
3. Is there room for growth on your team?
-4/8 answered YES

4. On a scale of 1-10 (1 being dissatisfied and 10 being extremely satisfied) please rate your overall level of satisfaction with the employee/volunteer you work with.
 - 6/8 answered with 10
 - 2/8 answered with 9

5. Are there any ways in which we could ensure a more positive experience for both you and your employee or volunteer? Please let us know.
 - All 8 survey replies stated that it has been a positive experience working with Community Living North Grenville and the employees/volunteers that they have working with them.



Risk Management

Risk exists in our day-to-day operations of Community Living North Grenville.

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.

Due to the continued Covid-19 pandemic, this year was still spent mitigating the risk of contracting the Covid-19 virus. All Emergency Orders remained in place for the entire year.

To live life means that everyone takes a certain amount of risk in their lives. The restrictions that were continually placed on congregate care settings to reduce the risk to people supported contradicted the rights of those people to interact with their families/ friends and in community settings. Finding the balance between their rights and our responsibility to keep people safe was a constant battle.

Summary of Risk Management 2021-22

- In addition to the measures that were implemented last year (PPE, social distancing, stay at home orders, etc.), the following was further implemented to reduce the risk of infection of the Covid-19 virus.
 - Vaccines were made available in early spring 2021. A vaccine team comprised of two health nurses from Rideau Community Health Services, and CLNG's clinical supervisor, toured the County to deliver vaccines; 1st dose in April 2021, 2nd doses in June 2021, and the booster in Jan 2022.
 - The Chief Medical Officer of Health mandated that all employers have vaccine policies that include the requirement for vaccinations and/or testing.
 - In late December 2021, the Ministry imposed mandatory testing requirements of 3 times per week for all employees.
- CLNG remains at a "Low" risk rating through the Ministry's Risk Assessment process. 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 continues to meet "Compliance" following MCCSS's annual compliance review in November 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.



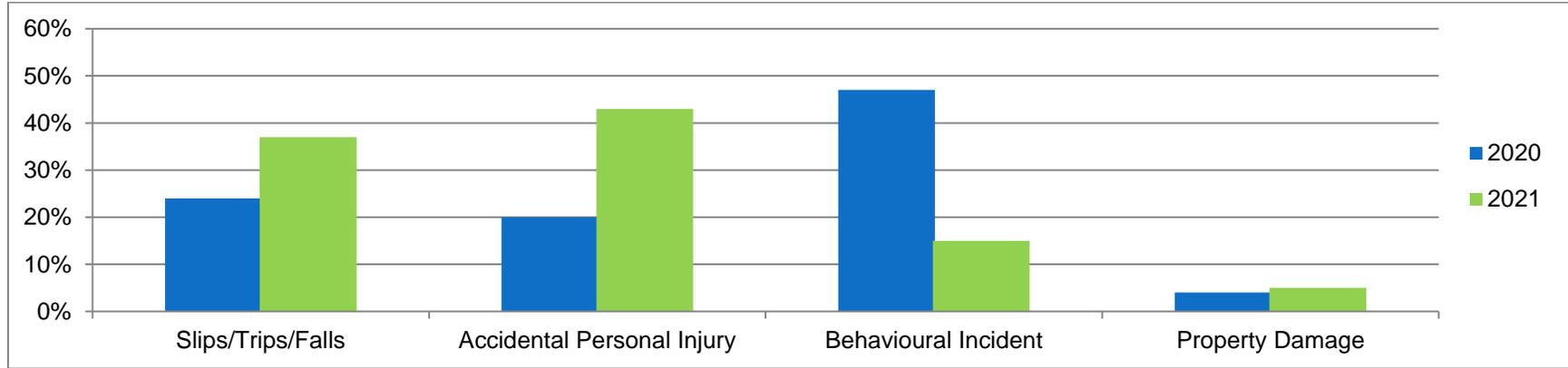
Health and Safety

In 2021 the main focus was on promoting health and safety practices in our work and living environments as we lived through COVID 19. Enhanced safety measures occurred in all locations, including self assessment screening tools, temperature checks, use of full PPE, and Rapid Antigen Testing. CLNG was successful in coping through the first three waves in which it was reported that a number of staff and people using our services went for COVID testing. At the end of the year we began to see the first positive cases of COVID within our Association.

The Ministry Compliance, as well as our first Ministry of Labour Inspections both focused on safety measures specific to COVID to ensure practices kept people healthy. CLNG was proactive in arranging mobile clinics to come to our living and work environments to provide immunization. The HR Department organized N95 fit testing clinics for staff during this time as well. We do recognize that COVID 19 will be with us for some time and we have to continue to accept practices that will enable us to cope with COVID, while living life to the best of our ability.

The H&S Committee has appreciated all the cooperation everyone has shown in being responsive to enhanced safety protocols. 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: 65 reports were submitted in 2021 and 95 in 2020. This graph represents those accidents and incidents based on percentage of total reports. Incidents involving staff and individuals using 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 to policies and best practices.

**Observations:**

- Incident reports were down from the previous year, which could be related to Stay At Home orders
- There was a direct relation to slip/trip/falls and Accidental Personal Injury (A number of falls were reported by persons using services with a result of staff reporting personal injury when assisting people to regain their balance) Training and awareness provided for Aging in Place and Back Care.
- 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

In 2021 the Community Living North Grenville Accessibility Committee worked to make a Multi Year Accessibility Plan to show how important it is to know what the accessibility needs of people with disabilities are.

To get ready for the CLNG multi year accessibility plan the committee had lots of ideas, to identify and then try to get rid of accessibility barriers:

- Keep an accessibility committee made up of people who use the services of CLNG, staff, and management
- One person from the committee will be on the municipality accessibility advisory committee. A staff can help that person do a good job if they want or need help. Our committee also tries to help the community understand that we all have a job to do to have accessible places for everyone to use
- The committee will look at what the Association has done each year to try to get rid of accessibility problems and make sure the Association follows the Accessibility for Ontarians with Disabilities Act
- The Committee will do an accessibility survey every year to check to make sure accessibility is in place for everyone, and so people can let the committee know of accessibility problems
- The Committee will work with the Health and Safety Committee because they do regular work place inspections to get rid of barriers
- The Committee will look at the multi year accessibility plan every year to make sure it is a good plan and works for people with disabilities
- The Committee will post the plan so the CLNG Executive Director, the Board of Directors, people using the services of CLNG, staff, and people in the community can see it, and understand why accessibility is so important for everyone.



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Technology and System Plan

Community Living North Grenville relies heavily on the use of computers, devices and electronic information to conduct its everyday business. The current pandemic has highlighted the need to address our technology and IT systems. Employees became accustomed to using technology more widely through email communication and virtual environments. That together with the implementation of the AIMS system database will require efficient operation of IT equipment. Many items remain as a priority on the Technology and System plan, and will need to be addressed in the near future.

Summary of Activities for 2021

- Users are embracing a virtual environment, which involves a shift in learning, as well as an increased use of technology.
- In addition to the contract with OTGroup to monitor the network and equipment, an employee has been contracted to assist with the daily, or more simple, IT needs of the organization.
- An implementation team was formed for the development and implementation of the AIMS (Alliance Information Management System) database. For most of the year, this team had worked to develop and customize the database in preparation for roll-out within the organization.

Goals for 2022

- Two goals that have been delayed and carried over previously include:
 - Installing two-factor authentication, which came as a recommendation from the 3rd party IT audit, completed in 2020; and
 - Review and update IT policies as recommended following the 2019 CARF review to conform to the 2019 technology standard.
- Launch of the AIMS database, Training has begun to all employees, with a goal to implement in the Summer/Fall of 2022.
- Given the increased use of technology and on-line presence, cyber-security training will be required and scheduled for all employees.

- Introduce enhanced features of Microsoft 365 accounts, which will include the setup of shared file storage in One-Drive, and shared calendars and teams to enhance communication.

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 we support.

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 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, 2021 to Dec 31, 2021	Annually	Comvida & Orientation Checklist	Human Resources	90% 92% - TARGET 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, 2021 to Dec 31, 2021	Annually	New hire Survey	Human Resources	90% 75% - TARGET NOT MET

Key Findings:

Timely orientation of new employees hired

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%.

In 2021, 13 new part time employees were hired. 12 out of 13 new staff hired, or 75%, completed their orientation and began their full job duties within one month of being hired. Therefore, in 2021 we exceeded our target of 90%.

Note:

* The one employee who did not complete their orientation within one month ended up on a medical leave shortly after her hire date which is what interfered with her timely orientation.

Adequate orientation of new employees hired

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%.

In 2021, new hire surveys, to determine if new staff felt confident to perform their full job duties, were sent to all 13 of the new hires and 4 were returned completed. From these 4 new hires that completed the survey, 3 or 75% reported that they felt confident to perform their full job duties after orientation was complete. Therefore, in 2021 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:

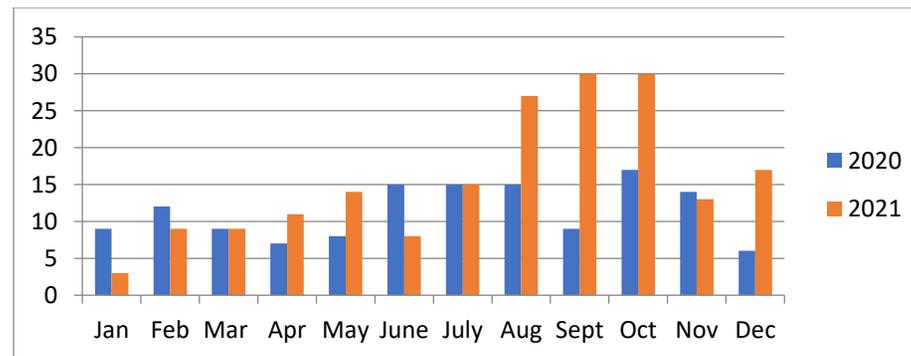
- During the intake process, information on the respite apartment will be presented to people.
- Information regarding availability is tabled at the Leeds and Grenville Out of Home Respite Advisory committee for Adults and the Leeds and Grenville Respite for Children with Complex, Multiple, Special needs, 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 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.

In 2021, the respite apartment was used 186 days for overnight respite and, due to the pandemic restrictions, was not used by Community Supports for skill development, such as cooking classes, etc. This is an **increase**, from 2020, in usage for the apartment when it was used 136 days throughout that year. Therefore, in 2021 the respite apartment was used approximately 50% of the time, indicating we did not meet our target of 65% by 15%.

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 persons served, 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.

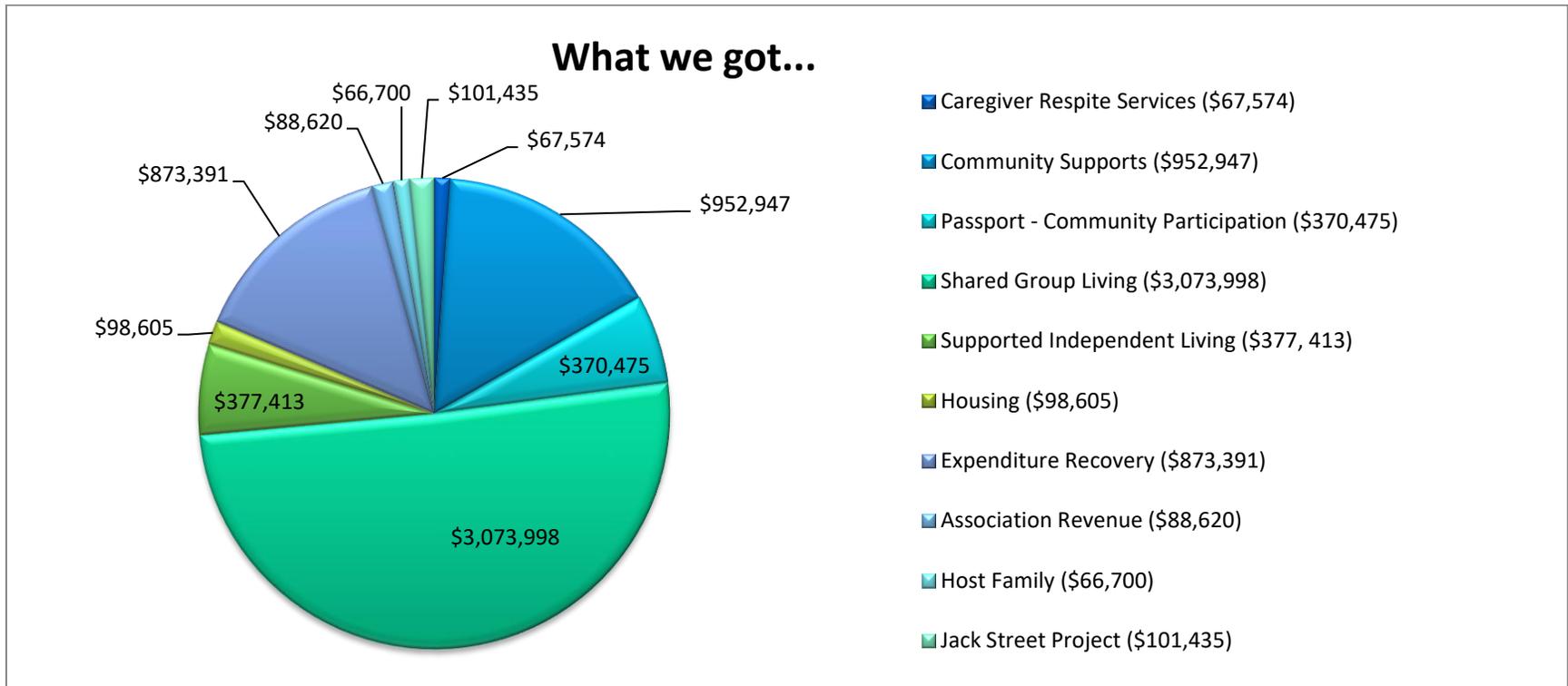
Method: Budget is set out at the beginning of the year and approved by the board of directors. Budget includes staffing and other operating expenses. They are approved by the MCCSS. It continues to be monitored on a monthly basis by the Executive Director, Board of Directors, Manager of Finance and Administration,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

Key Findings: June 2022: At the annual audit completed by an independent accounting firm, it was reported that, for the fiscal year 2021-2022, 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 Temporary Wage Enhancement (\$396 144) for our essential workers. The surplus is due to an excess of Wage Enhancement dollars from the Ministry, which will be recovered (\$53984) and expenses that were deferred until the next fiscal year as they were not deliverable this year (\$53866). 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.

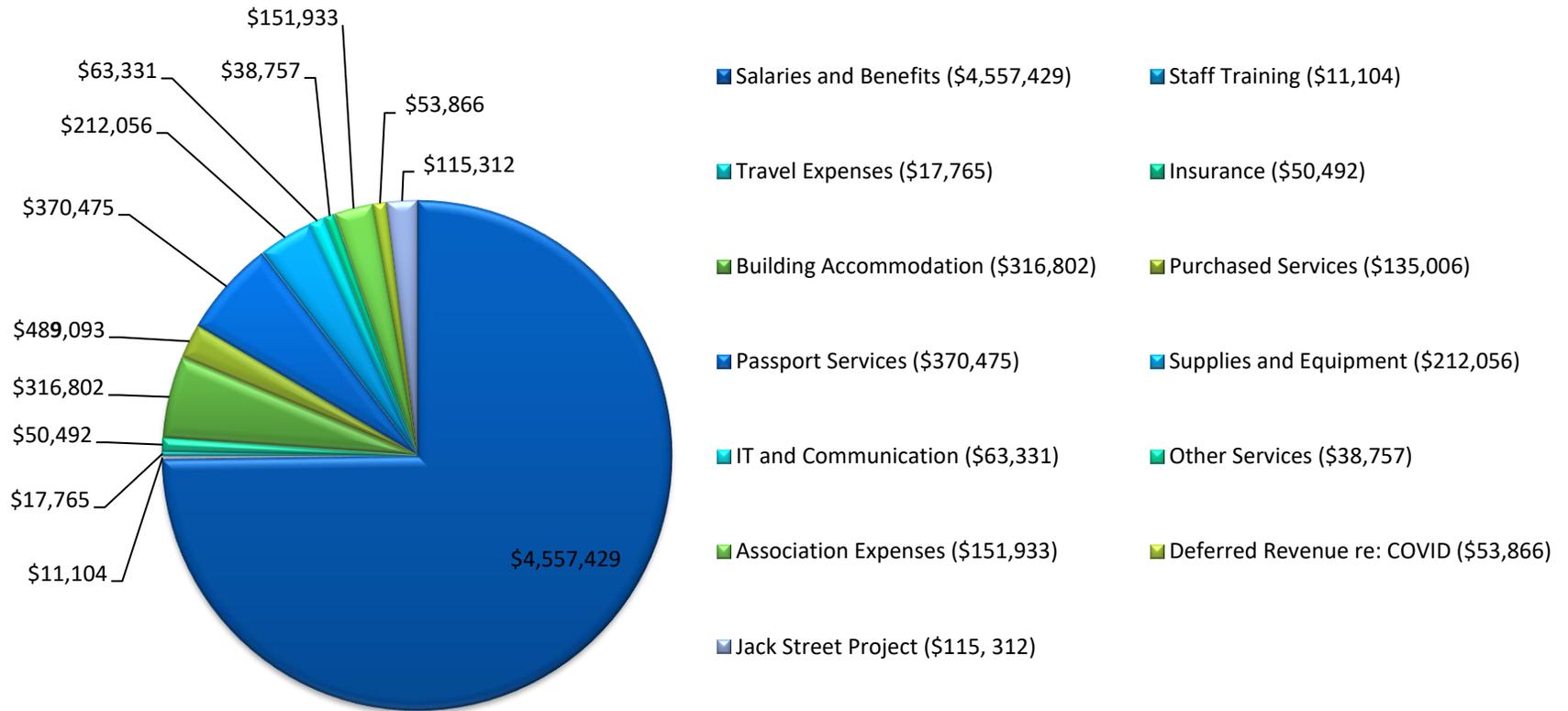
Passport funding continues to be an important source of revenue. Again, it was not fully utilized for support this year due to COVID restrictions. The temporary expansion of admissible expenditures remained in place and allowed for the purchase of much needed technology and sensory items by supported individuals.

Also due to COVID 19, all fundraising activities were cancelled.

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, 2021 to March 31, 2022	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



And where we spent it



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.

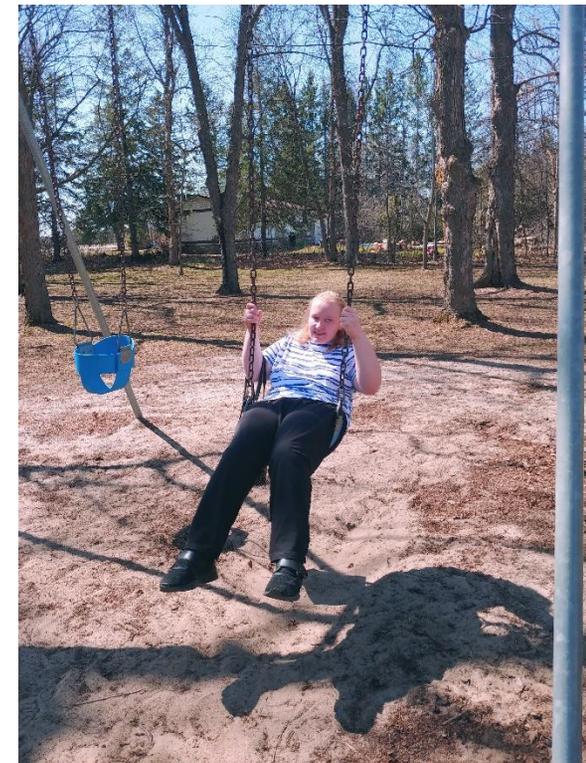
Method: All staff will receive monthly reminders and access to complete monthly organizational training on our internal training system. All staff will complete First Aid/CPR every 3 years and CPI every 2 years as required.

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, 2021 to Dec 31, 2021	Annually	Reports from internal training system	Human Resources	95% 82.5% - TARGET NOT MET
Percentage of staff that have maintained First Aid/CPR and CPI training	All direct support employees	Jan 1, 2021 to Dec 31, 2021	Annually	Training reports from internal training system	Human Resources	95% 100% - TARGET MET

Key Findings:

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.

In 2021, 66 out of 80 staff maintained and kept up to date on monthly organizational specific training. Therefore, in 2021 we missed our target of 95% by 12.5%, with a result of 82.5%. **In 2021**, all staff maintained and kept up to date First Aid/CPR and CPI training. Therefore, in 2021 we exceeded our target of 95% by 5%, with a result of 100%.



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 NOT MET

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.

Results 2021:

People who use our services through **Residential Support** did not meet the target of 90%. 23 out of 29, or 79% 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%. 11 out of 19, or 58% 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%. 17 out of 54, or 31% of people set and met at least one goal this year.

Therefore all people we support exceeded the target of 90%. 51 out of 102, or 51% of people set and met at least one goal this year.

****Note:**

Due to continuing 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. Many of the staff were reassigned and did not have access to our tracking database and therefore data for 2021 was also missing.

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. Also, due to continuing covid19 restrictions some of the people that use our services were not receiving services or services were put on hold and therefore did not meet for a Self Directed Support Plan this year. Many of the staff were reassigned and did not have access to our tracking database and therefore data for 2021 was also missing.

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 , 2021 to December 31 st , 2021	At the monthly manager's meetings	Persons Served Data Base	Administrative Support	95% TARGET NOT MET

Results 2020:

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.

Results 2021:

People who use our services through **Residential Support** exceeded the target of 95%. 28 out of 29, or 96% 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%. 42 out of 54, or 78% 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%. 88 out of 102, or 86% 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 2021, our intake team met with a total of 5 people who were looking for services. The shortest interval of time before initial contact and meeting with us was 9 days and the longest was 23 days. Therefore, we **met our target** of 60 days from initial contact until our meeting with them to discuss possible services.

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

They were given information about our services and supports and are now being supported in some capacity by CLNG.



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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Scheduling Coordinator	Alishia VanderMey	Ext 135
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.