



Community Living South Muskoka Annual Management Report

2013 – 2014

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OVERVIEW OF QUALITY IMPROVEMENT PROCESS

Community Living South Muskoka is committed to having a performance measurement and management process. The goal is ensure that the organization achieves the organization's goal and vision through clear and accountable processes and objectives.

Services involved in Quality Improvement Process	Objectives of the Service
Community Participation	Promotes and enhances skill building utilizing a self-directed approach incorporating a person's interests, needs and personal goals established through person directed planning and individual support plan. The activities may access the local community or be centre based.
Employment	Services will be market driven and encompass planning, assessment, training and skill development leading to competitive employment with natural supports.
Residential Group Living	Provide group living supports to individuals in a way that ensures that the individual's needs are met, including supports for activities of daily living, participation in community activities of their choosing, maintaining personal relationships and family connections and providing for their health and safety based on person directed planning and individual support plans.
Supported Independent Living	Assists individuals that reside alone or with others but independent of family members or of a caregiver. Support is self-directed and may include activities of daily living, meal preparation, money management, accessing community infrastructures.
Family Home	Provide individuals with a supported integrated, yet independent living option to live as part of a family in their own community.
Adult Respite	Provide families or caregivers a short break from the full time responsibility of care giving. Services are flexible and responsive to the family's needs and may be used by the hour, day, weekend, or a block of time.
Children's Respite	Provide the primary caregiver of a child with special needs with a break from caregiving responsibilities in a variety of settings, and is flexible in time from hours to overnight breaks. The region has adopted a common respite funding model for children's respite and we support families to complete funding applications, provide screened respite contractors, and help families develop a respite plan.
Family Support	Works with the family providing emotional support, empowerment and advocacy, assisting in the development of individual family support plans and transition.
Resource Teacher	Assists families in integrating their children with special needs into licensed community pre-school programs and transitions to elementary school

STRATEGIC MANAGEMENT PLAN

To move toward the future outlined in our Goal and Vision Statement, the management team in consultation with the Board of Directors established three strategic priorities for 2013-2015.

Goal and Vision Statement

Community Living South Muskoka promotes a welcoming inclusive community where all are encouraged to reach their potential.

A welcoming inclusive community is one that believes:

- Every person is valued
- Every person has a need for love, friendship, and belonging to ensure their wellbeing and a meaningful life
- Every person is entitled to acceptance and respect
- Every person has the right to reach their potential
- In promoting creativity, flexibility and choice as a means of developing personal and community growth
- With every right there is an inherent risk
- With every opportunity there is an inherent risk
- In ensuring for all, full accessibility to information, services and resources
- Growing and learning are part of the personal responsibilities

The three strategic goals are:

- Business sustainability independent of Ministry Funding
- Increase Community Inclusion and Employment Opportunities
- Succession Planning and Leadership Development

BUSINESS SUSTAINABILITY INDEPENDENT OF MINISTRY FUNDING

Community Living South Muskoka believes that the Government of Ontario will never have enough resources to meet the needs of the developmentally disabled. With this goal in mind Community Living South Muskoka purchased a 35 acre farm on the outskirts of Bracebridge in 2007 called Morrison Meadows. Morrison Meadows strives to enrich the lives of Muskokans and visitors to the District by providing opportunities to enjoy farming, nature, and outdoor recreational activities and employment.

Our goal is to become a sustainable business that emphasizes that individuals with developmental disabilities are valued and seen as contributors in the community by the public. We wanted to create employment opportunities for the individuals we serve, and become an outdoor recreational space for our community to enjoy and see individuals with a developmental disability as capable, friendly, teachers, partners and community leaders. To date this initiative has been funded through sponsorships, donations and event revenue. Morrison Meadows has 3 main target audiences: families with small children, outdoor enthusiasts, and specialty groups including educational institutions.

There are three (3) outcomes that are the focus of Morrison Meadows:

1. Employment/ training opportunities for individuals with a developmental disability
2. Morrison Meadows is a venue of choice for outdoor recreational activities for families in Muskoka and partnering organizations.

3. Community awareness of the abilities of individuals with developmental disabilities leading to inclusion in all aspects of our community.

The activities undertaken this fiscal year to move this strategic objective forward include:

- Meetings with community partners to gain feedback and support for Morrison Meadows
- Development of a business plan
- Applications for funding to the Ontario Trillium Foundation and The Ministry of Community and Social Services Developmental Services Inclusion and Employment Opportunities Partnership Fund which were both approved at the end of the fiscal year and the work will occur during 2014-15
- Redefined the service delivery and staffing model for Morrison Meadows
- Work with the Town of Bracebridge on zoning and site plan for expanded service at Morrison Meadows
- Partner with the Simcoe Muskoka Catholic District School Board to build a greenhouse at Morrison Meadows and provide certification opportunities for students in the construction of the greenhouse. The work will be completed in 2014-2015.

INCREASE COMMUNITY INCLUSION AND EMPLOYMENT OPPORTUNITIES

In 2013-14 Community Living South Muskoka undertook a review of vocational services to better meet the needs of the individuals we served, meet the individual's person directed and individual support plans and have increase opportunity for community inclusion and employment.

The activities undertaken this fiscal year to move this strategic objective forward include:

- Monthly planning meetings with staff to develop the vision and service delivery model
- Presentation to the Board of Directors of the new model for service
- Presentation to Families for their feedback on the new model for service
- Implementation of new service model in the Fall of 2013

To further this goal, Community Living South Muskoka established a partnership with Bracebridge Taxi to provide transportation services for the individuals we support. Bracebridge Taxi purchased a wheelchair accessible vehicle to enable individuals to freely access their community on their own. Many of the individuals we support are excited that they no longer need staff to provide their transportation needs and are able to come and go from our vocational services and attend community events independently. The individuals look forward to seeing Cameron and the staff from Bracebridge Taxi every day. Thanks Bracebridge Taxi for being a great partner, offering friendship and support, and enabling the individuals we support to enjoy their independence.

SUCCESSION PLANNING AND LEADERSHIP DEVELOPMENT

The Board of Directors recognizes that, from time to time, there will be changes in the leadership team, and that such changes can be potentially challenging for the organization. Recognizing this, Community Living South Muskoka must have a comprehensive "Leadership Transition and Succession Plan" in order to ensure:

- Operational stability and accountability,
- Clear and open communication about the pending changes, and
- Adequate human resources and/or a recruitment plan to fill leadership roles.

The activities undertaken this fiscal year to move this strategic objective forward include:

- Development of a governance policy and procedure for transition to a successor for the retiring Chief Executive Officer
- Establishment of a transition team
- Determination of the successor to the Chief Executive Officer
- Development of a transition and training plan for the successor
- Development of a new organizational structure to be implemented in 2014-15

RISK MANAGEMENT

Community Living South Muskoka developed its first risk management plan in 2011. Effective risk management ensures the protection of the interests of individuals, families, staff, volunteers and the public. To ensure risks and resulting impacts are minimized for Community Living South Muskoka a risk management plan will be developed, maintained, and monitored on an annual basis.

The overall goals of the risk management plan are to:

- Provide safe and professional support and care to individuals in service
- Provide a safe environment for individuals, staff, visitors, and volunteers
- Protection of the Corporation's people, reputation, and assets
- Prevention of harmful events; and
- Ensure continuity of the organization.

The Management Team, headed by the Chief Executive Officer, is delegated the responsibility to develop, manage and report on the plan.

Risk Management often involves activities that deal with uncertainty and potential harmful future events. The risk management plan provides the opportunity to make responsible choices about how the organization conducts the business and responds to unexpected events. The basic principles of risk management are to consider people first, be practical, and use common sense.

The risk management plan includes the ongoing development of specific policies and procedures, training, asset management, supervision, clear expectations and controls that when applied protect people, limit losses and provides education and training. The following techniques could also be used to manage risk:

- Avoidance: discontinuing an activity or not offering a service
- Modification: implementing activities to reduce the level of risk to an acceptable level
- Retention: accepting all or part of the risk and preparing for potential consequences by accepting deductible costs or self-insuring
- Sharing: purchasing insurance, sharing responsibility with another organization or contracting the service to another business

Area of Risk	Description of Potential Risk	Likelihood	Severity	Strategies to Manage the Risk
People				
Persons Served	Injuries and Accidents	Moderate	Moderate	<ul style="list-style-type: none"> • Policies and procedures are followed and reviewed regularly • Staff receive training in SMG, First Aid/CPR, Lifting and Back Care, WHMIS • Staff receive orientation on the needs and support plans of the individuals under their care • Incidents and injuries are reported and reviewed by the Incident Report Management Committee for tracking of, treatment records, trends and recommendations to address concerns • Families are notified of any instances and copies of incidents reports provided as requested • Serious Occurrence reports are completed and filed with MCSS as required • Specific interventions are noted in individual plans and behavioural support plans • Behavioural supports plans are reviewed internally and externally at least twice a year • Behavioural support plans monitored by a Behaviour Therapist and signed off by a Psychologist • Bathing protocols are in place for accommodation services and signed off by the individual's physician • Health and Safety inspections in the home monthly • Safety checklists to be followed for association vehicles
	Missing Persons	Low	High	<ul style="list-style-type: none"> • Policy and procedure is in place and reviewed annually • GPS tracking is utilized when required • Protocol developed for staff to follow for individuals where elopement is a common occurrence • Manager On-Call 24/7 to assist as needed • Serious Occurrence reports are completed and filed with MCSS

Area of Risk	Description of Potential Risk	Likelihood	Severity	Strategies to Manage the Risk
People cont'd				
Persons Served	Missing Persons cont'd			<ul style="list-style-type: none"> • Protocols with local authorities as required • Registration with the Wandering Registry for individuals at high risk of elopement such as individuals with Alzheimer's
	Violence and Trauma	Low	Moderate	<ul style="list-style-type: none"> • Incidents are reported and reviewed by the Health and Safety Committee and Incident Report Management Committee • Medical and emotional support as required • Behavioural support plans in place • Policies and procedures are followed and reviewed regularly • Serious Occurrence reports are completed and filed with MCSS as required
	Abuse and Neglect	Low	High	<ul style="list-style-type: none"> • Policies and procedures are followed and reviewed regularly • Zero tolerance of abuse in the workplace • Suspected abuse and neglect is reported to the OPP and investigated • Serious Occurrence reports are completed and filed with MCSS as required • All staff and volunteers are required to complete annual training on abuse prevention and reporting • All individuals receiving service are offered annual training on abuse prevention
	Violation of Private or Confidential Information	Low	Moderate	<ul style="list-style-type: none"> • Policies and procedures are followed and reviewed regularly • Information included in Service Directory provided to families • Policy and procedure is posted on website for public access • Files are kept in a secure location • Files are maintained electronically, password protected and only authorized users can access information

Area of Risk	Description of Potential Risk	Likelihood	Severity	Strategies to Manage the Risk
People cont'd				
Employees	Injuries and Accidents	Low	Low	<ul style="list-style-type: none"> • Health and Safety committee comprised of Management and Union representative review all workplace injuries and accidents • Policies and procedures are followed and reviewed regularly • Orientation and training of staff in SMG, First Aid/CPR, WHMIS, Lifting • Slips, Trips and Falls policy in place and reviewed annually • Violence in the Workplace policy and procedures are in place and reviewed annually
	Illness	Low	Low	<ul style="list-style-type: none"> • Full time employees have paid sick days and short term and long term disability • Sick time credit usage is tracked on an annual basis • Attendance management system in process of implementation • Pandemic preparedness plan in place
	Communicable Diseases	Low	Low	<ul style="list-style-type: none"> • Blood Borne Communicable Diseases policy and procedure in place and reviewed regularly • Pandemic preparedness plan in place • Direction provided by local Health Unit as required • Notification of staff and families when suspected communicable disease occurs in the workplace • Employees made aware of individuals served who may have communicable diseases • Use of universal precautions in the workplace
	Employment Practices	Low	Moderate	<ul style="list-style-type: none"> • Staff recognition program in place • Adoption of Core Competencies for the Provincial DS HR Strategy • Policies and procedures in place and reviewed regularly • Employment Standards Act • Collective Agreements and Non-Union Terms of Employment agreements in place

Area of Risk	Description of Potential Risk	Likelihood	Severity	Strategies to Manage the Risk
People cont'd				
Employees	Workplace Violence	Moderate	Moderate	<ul style="list-style-type: none"> Incidents related to Violence in the Workplace are reviewed by the Health and Safety Committee Reviewed by Incident Report Management Committee if involving individuals and provides recommendations to Health and Safety Committee Violence in the Workplace survey completed and recommendations in process of implementation SMG training annually Behaviour support plans and best practices in place Manager On-Call process in place Cell phones at locations, portable phones in residential locations, and emergency numbers on hand Additional training for staff in homes with high needs Orientation and training in Violence in the Workplace Policies and procedures for Violence in the Workplace and Harassment and Bullying in the Workplace
Board of Directors	Criminal Activity Fraud Theft Legal Requirements Liability Turnover	Low	Low	<ul style="list-style-type: none"> Liability and Director's and Officer's insurance in place Governance policies and procedures in place and reviewed regularly Board members have criminal reference checks Board of Directors meets on a regular basis Minutes are maintained and document discussions, all motions, and action items Minutes are submitted to the Program Supervisor and Auditors for review Board of Directors has a succession planning governance policy and have implemented a transition plan for the Chief Executive Officer who will retire in 2015

Area of Risk	Description of Potential Risk	Likelihood	Severity	Strategies to Manage the Risk
People cont'd				
Board of Directors cont'd				<ul style="list-style-type: none"> At least 2 senior staff members are trained to assume the role of Chief Executive Officer should there be a need Governance policies clearly articulate the roles and responsibilities of the Board and Chief Executive Officer and executive authority and limitations of the Chief Executive Officer Board of Directors has a wide range of experience including financial, business, banking, family members and education Nominations committee looking at board recruitment The Treasurer of the Board meets on a monthly basis with the Chief Financial Officer to review the financial statements of the organization Financial presentations are made to the Board on a monthly basis
Community	Complaints	Low	Moderate	<ul style="list-style-type: none"> Complaints policy and procedures in place and reviewed regularly Complaints brochure and plain language version available to the public on the CLSM website Investigations process outlined in the complaints policy and procedures Rights Committee made up of external representatives may also address complaints related to a Rights violation
	Engagement	Low	Moderate	<ul style="list-style-type: none"> Agency management team is active in community, regional and provincial initiatives Examples include: Muskoka Best Start Network, Muskoka Human Services Planning Council, leadership summits, North East Region Respite Network, Muskoka Parry Sound Nipissing Family Home Network, North East Region Urgent Response Committee, OASIS, Near North Executive Directors, North East Region ED Planning Table

Area of Risk	Description of Potential Risk	Likelihood	Severity	Strategies to Manage the Risk
People cont'd				
Community	Engagement cont'd			<ul style="list-style-type: none"> Family staff quality assurance committee was used as sounding board for program changes, concerns, and service delivery improvement Three family meetings were held in the past year to gain feedback from families on abuse training and program changes for Community Participation and Employment Services
Property and Assets				
Buildings	Damage	Low	Low	<ul style="list-style-type: none"> Insurance and deductible in place Annual submission of infrastructure surveys for major repairs and maintenance to MCSS for all properties
Vehicles	Damage, Accident and Theft	Low	Moderate	<ul style="list-style-type: none"> Insurance and deductible in place Vehicle replacement plan in place Completion of vehicle safety checklists
Furnishings, Supplies, and Equipment	Damage Theft	Low	Low	<ul style="list-style-type: none"> Insurance and deductible in place Policy and procedure for procurement, maintenance and inventory of goods is in place and monitored annually Review of needs annual during the budget process
Technology	Security Information Management Privacy and Confidentiality Theft Damage	Low	Moderate	<ul style="list-style-type: none"> Building is monitored or alarmed at all times Client Information Management was developed by the MCSS and is external to the agency and monitored for privacy and confidentiality compliance on an ongoing basis Access to information is restricted by passwords and authorization levels Insurance and deductible in place Technology replacement plan is developed on an annual basis Data backup is external to the agency, and an offsite system is capable of running our server Policies and procedures are in place related to access, protection and disclosure and are reviewed annually

Area of Risk	Description of Potential Risk	Likelihood	Severity	Strategies to Manage the Risk
Property Assets cont'd				
Financial Practices	Fraud Legal Requirements to Record, Report Investment Losses	Low	High	<ul style="list-style-type: none"> Financial policies and procedures are in place and reviewed annually Insurance and deductibles in place External audit completed annually Signing officers and limits are determined within financial policies Payments require 2 signatures Expenditure variances are reviewed by the Board monthly
Organization				
Reputation and Profile	Negative Media Coverage Loss of Credibility	Low	Moderate	<ul style="list-style-type: none"> Avoid activities that threaten the organization's profile or may cause a negative impact on its reputation Membership in OASIS Publicity waiver for individuals and volunteers Policies and procedures are in place for communication with the media, risk management, computer information technology, cellphones in the workplace and are reviewed regularly Adherence to Goal and Vision statement

RISK RATINGS

Description	Likelihood	Severity
Ratings	Low – there is little likelihood the risk would occur, or policies, procedures and best practices are in place that would minimize the risk	Low – the impact on the Association would be minimal if the risk were to occur
	Moderate – there is likelihood that the risk would occur during the year, however, protocols and practices are in place to mitigate the risk as it occurs	Moderate – there would be some impact on the Association if the risk were to occur
	High – there is likelihood that the risk would occur on a frequent basis and no policies, procedures, protocols or best practices are in place to address the risk	High – the impact on the Association would be significant if the risk were to occur

ACCESSIBILITY PLAN

Community Living South Muskoka is committed to identifying and removing barriers that reduce the ability of individuals served to fully access both our services and the community as a whole.

Our goal is to:

- identify the barriers
- identify solutions to remove or address the barrier
- establish partnerships to eliminate barriers in the community
- advocate for accessibility issues to be addressed in the community

Area	Barrier Identified	Action Completed	Completion Date
CLSM and Community	Accessible Transportation and a transit system not available within the Town of Bracebridge	Established partnership with Bracebridge Taxi to provide assistance with the purchase of an accessible taxi and lobby the Town of Bracebridge to issue an accessible taxi license Participated in survey and met with Town of Bracebridge regarding development of a transit system for the Town of Bracebridge, CLSM's recommendations were included in their revised recommendation to the Town of Bracebridge council.	November 2013 2016
Morrison Meadows	There are no heated accessible washrooms for people utilizing Morrison Meadows.	Septic system installed in 2013 Grant proposal submitted to Trillium to renovate the existing garage for 3 accessible washrooms, warming area and picnic shelter Proposal approved by Trillium, construction to begin in Spring 2014	August 2014
Town of Bracebridge Offices	The town offices are not fully accessible	Provided letter of support to the Town for their funding application which was subsequently approved.	2014
Community	The Town of Bracebridge is difficult for individuals with mobility issues to access places in the community	CLSM actively advocates for changes and has a representative on the Accessibility Committee for the Town of Bracebridge Agency staff are mapping areas where individuals can participate in the community	Ongoing
Agency	Complete an accessibility review of all service areas	Review of 15 Depot Drive to be completed in summer of 2014	Ongoing
Agency	Website does not meet new accessibility standards	Website redesigned and will launch in 2014	April 2014

TECHNOLOGY PLAN

There is an increasing need to address technology in the workplace both from an efficiency standpoint and the provision of assistive technology to the individuals served by Community Living South Muskoka. An effective technology plan addresses the following areas:

Area	Actions taken during 2013-14	Future actions proposed
Hardware	<ul style="list-style-type: none"> • Server was upgraded in 2012-13 to support the software upgrade in 2013-2014 • Obsolete servers are being destroyed as information is transferred to new server • High speed internet capacity in all programs and fiber optic service at 15 Depot Drive. • Upgrade of workstation computers as finances permit • Photocopiers have scanning capability 	<ul style="list-style-type: none"> • Explore opportunities that reduce the need for internal server capacity • Continue upgrading workstation computers as finances permit
Software	<ul style="list-style-type: none"> • Navision software was upgraded and tested 	<ul style="list-style-type: none"> • Portal and intranet site is in process of upgrading • Email and document storage will be web based in 2014-15 • Transition from Office 2010 to the Office 365
Confidentiality and Security	<ul style="list-style-type: none"> • Data is secure through the use of passwords, user groups, and limited rights to data information on a need to know basis • Main servers are protected by CISCO firewall • Client files are maintained on CIMS and is external to the agency and monitored for confidentiality 	
Backup Policies and Disaster Recovery Preparedness	<ul style="list-style-type: none"> • All data and operating system software located on agency servers is backed up daily both internally and externally • An external computer also has the capability of restoring the offsite data and being operational within two days should the need arise 	<ul style="list-style-type: none"> • Development of a written business continuity plan
Assistive Technology	<ul style="list-style-type: none"> • Cash register programs and My Voice programs are available on site • On staff technologist is able to adapt equipment and software to support individuals unique communication needs upon request 	
Virus Protection	<ul style="list-style-type: none"> • Network servers and all workstations are protected by virus protection 	

PLAN TO SECURE INPUT FROM STAKEHOLDERS

The following outlines Community Living South Muskoka's plan to secure input from its four groups of stakeholders:

Year	Individuals Served	Families/ Care providers	Staff	Other Stakeholders
2013	<ul style="list-style-type: none"> Implementation of ISP tracking to celebrate successes and identify barrier to success 	<ul style="list-style-type: none"> Three meetings held with families and caregivers to get feedback on program changes and abuse prevention training for individuals 	<ul style="list-style-type: none"> Electronic survey on violence in the workplace circulated and recommendations are being addressed 	
2014	<ul style="list-style-type: none"> Individuals receiving adult services satisfaction survey to be completed 	<ul style="list-style-type: none"> Satisfaction survey for families receiving children's services to be completed 	<ul style="list-style-type: none"> Electronic survey on working alone to be completed What staff needs from management survey to be completed 	<ul style="list-style-type: none"> Satisfaction survey of other stakeholders to be completed
2015		<ul style="list-style-type: none"> Satisfaction survey for families of adults receiving services 	<ul style="list-style-type: none"> Staff satisfaction survey to be completed 	

PLAN TO DISTRIBUTE PERFORMANCE IMPROVEMENT INFORMATION

It is important that information related to performance improvement is shared with all stakeholders and that there is opportunity to receive feedback and suggestion on the process. The following are the steps that management will take to ensure that this information is shared on a regular basis:

Method	Timelines	Feedback Invitation
Annual management report will provide yearly update of all performance improvement activities	Annually in Sept	Annual report contains contact information for Management Staff
Agency website will contain annual report, annual management report and financial statements	Annually after AGM in Sept.	All users will be encourage to provide feedback via email or telephone
Agency newsletter will highlight some of the successes each year	Quarterly	Will encourage email or telephone feedback
Annual management report will be available to staff on the team site	Annually	Feedback can be given at team meetings
Annual management report provided to external stakeholders	Annually	Contact information will be sent with report

REVIEW OF ORGANIZATION'S POLICIES AND PROCEDURES

Community Living South Muskoka ensures that the governance and operational policies and procedures are reviewed on an annual basis. The following outlines how this was completed in 2013-14 and the actions taken:

GOVERNANCE POLICIES AND PROCEDURES

Policy	Policy #	Review Date	Action Taken	Reviewed by
MISSION AND VALUES				
Goal/Vision Statement	1.1	24-Aug-12	Remained As Is	Chief Executive Officer
Guiding Principles/Values	1.2	24-Aug-12	Remained As Is	Chief Executive Officer
FUNCTIONS OF THE GOVERNING BODY				
Functions of Board of Directors	2.1	29-May-13	CEO Title Change	Board of Directors
Planning Function	2.2	24-Aug-12	Remained As Is	Chief Executive Officer
Policy Development Function	2.3	29-May-13	CEO responsible for review and recommend revisions or new policies to Board of Directors	Board of Directors
Monitoring Quality and Effectiveness	2.4.1	29-May-13	CEO Title Change Add ensures meeting Quality Assurance Regulation 299/10	Board of Directors
Monitoring Human Resources	2.4.2	29-May-13	CEO Title Change	Board of Directors
Monitoring Financial Resources	2.4.3	28-May-13	Amend to reflect current positions and practices	Board of Directors
Monitoring Financial Resources: Fundraising	2.4.4	28-May-13	Resource could be used at discretion of CEO and delete reference to Foundation	Board of Directors
Functions of Board of Directors: Risk Management Statement	2.4.5	24-Aug-12	Remained As Is	Chief Executive Officer
Management Function	2.5	29-May-13	CEO Title Change	Board of Directors
Advocacy Function	2.6	29-May-13	Board in consultation with CEO will develop	Board of Directors
Governance Function	2.7	29-May-13	Develop and implement an annual self-evaluation process	Board of Directors
Board Responsibilities	2.8	29-May-13	CEO Title Change	Board of Directors
Hiring of Relatives of Staff Members	2.9	24-Aug-12	Remained As Is	Chief Executive Officer
Pay Equity	2.10	24-Aug-12	Remained As Is	Chief Executive Officer
RESPONSIBILITIES OF INDIVIDUAL BOARD MEMBERS				
Code of Conduct	3.1	29-May-13	CEO Title Change	Board of Directors
Materiality	3.2	29-May-13	Remained As Is	Chief Executive Officer
GOVERNANCE PROCESS				
Governing Documents	4.1	24-Aug-12	Remained As Is	Chief Executive Officer
Governance Structure	4.2	29-May-13	CEO Title Change and portfolios of Board	Board of Directors

Policy	Policy #	Review Date	Action Taken	Reviewed by
GOVERNANCE PROCESS CONT'D				
Governance Style	4.3	29-May-13	CEO Title Change	Board of Directors
Governance and Management Operational Work plan	4.4	29-May-13	CEO Title Change	Board of Directors
Board Operations	4.5	24-Aug-12	Remained As Is	Chief Executive Officer
Communications Protocols	4.6	29-May-13	CEO and Chair Title Change	Board of Directors
EFFECTIVE MEETINGS				
Open/Closed Meetings	5.1	24-Aug-12	Remained As Is	Chief Executive Officer
Agenda and Meeting Minutes	5.2	29-May-13	CEO and Chair Title Change	Board of Directors
Parliamentary Procedure	5.3	24-Aug-12	Remained As Is	Chief Executive Officer
Conflict of Interest Guidelines	5.4	24-Aug-12	Remained As Is	Chief Executive Officer
Attendance Record	5.5	29-May-13	Chair Title Change	Board of Directors
BOARD OPERATIONS				
Board Recruitment and Selection	6.1	24-Aug-12	Remained As Is	Chief Executive Officer
Board Orientation and Training	6.2	29-May-13	Amended to reflect orientation package for the Board	Board of Directors
ACCOUNTABILITY OF THE CHIEF EXECUTIVE OFFICER				
Delegation to the Chief Executive Officer	7.1	29-May-13	CEO Title Change	Board of Directors
Chief Executive Officer Job Description	7.2	29-May-13	CEO Title Change and reflect introduction of core competencies for Provincial DS HR Strategy	Board of Directors
Employment Contract	7.3	29-May-13	CEO Title Change	Board of Directors
Authority and Limitations	7.4	29-May-13	Replace with 2008 version and CEO Title Change	Board of Directors
Reporting Process to Board of Directors	7.5	29-May-13	Amend key components of CEO reporting	Board of Directors
Performance Evaluation Process	7.6	29-May-13	CEO Title Change	Board of Directors
Leadership Transition & Succession Planning	7.7	27-May-13	NEW	Board of Directors

OPERATIONAL POLICIES AND PROCEDURES

Policy	Policy #	Review Date	Action Taken	Reviewed by
INTRODUCTION				
Goal and Vision Statement	1-10	26-Aug-13	Remained As Is	Chief Executive Officer
Organization Chart	1-20	2-Aug-13	Remained As Is	Chief Executive Officer
Policy & Procedure Introduction	1-30	2-Aug-13	Remained As Is	Chief Executive Officer

Policy	Policy #	Review Date	Action Taken	Reviewed by
EMERGENCY				
Emergency Preparedness Plan	2-10	22-Aug-13	Revised contact information, added EPT team member, developed plans for Family Home & SIL	Chief Executive Officer
Elevator	2.45	6-Aug-13	Revised supplier and malfunction information	Chief Executive Officer
Fire & Other Inspections	2.50	19-Aug-13	Remained As Is	Chief Executive Officer
Incident Reports	2.60	19-Aug-13	Added rights restriction information, revised PRN information, added violence in workplace checklist	Chief Executive Officer
Risk Management	2-65	20-Aug-13	Remained As Is	Chief Executive Officer
Missing Persons	2-70	20-Aug-13	Revised to reflect changes in Serious Occurrence reporting	Chief Executive Officer
Prohibited Practices	2-80	20-Aug-13	Remained As Is	Chief Executive Officer
Serious Occurrences	2-100	20-Aug-13	Updated to reflect the 2013 Ministry guidelines	Chief Executive Officer
PERSONNEL				
Employment Practices	3-10	20-Aug-13	Revised orientation checklists	Chief Executive Officer
Confidentiality	3-20	20-Aug-13	Correction of job title	Chief Executive Officer
Computers/Information Technology	3-25	20-Aug-13	Remained As Is	Chief Executive Officer
Personnel Records	3-30	20-Aug-13	Remained As Is	Chief Executive Officer
Dress Code	3-45	20-Aug-13	Remained As Is	Chief Executive Officer
Criminal Reference Check	3-50	22-Aug-13	Added Family and respite providers to policy	Board of Directors
Cellphone in the Workplace	3-60	21-Aug-13	NEW	Board of Directors
Hiring of Relatives	3-80	20-Aug-13	Remained As Is	Chief Executive Officer
Recruitment and Hiring	3-90	20-Aug-13	Added reference to Governance Policy 7.7	Board of Directors
Succession Planning	3-91	20-Aug-13	Remained As Is	Chief Executive Officer
Investigations	3-95	20-Aug-13	Remained As Is	Chief Executive Officer
Employment Medicals	3-120	20-Aug-13	Remained As Is	Chief Executive Officer
Physical/Mechanical/Secure Isolation/Time Out Restraint/ PRN	3-160	16-Sept-13	Added section on use of prescribed medication and consent and notification	Chief Executive Officer
Physical Restraint Training	3-165	20-Aug-13	Remained As Is	Chief Executive Officer
Standards of Conduct	3-200	20-Aug-13	Remained As Is	Chief Executive Officer
Corrective Discipline	3-205	20-Aug-13	Remained As Is	Chief Executive Officer
Employee Initiated Transfer	3-210	20-Aug-13	Remained As Is	Chief Executive Officer
Volunteers Unpaid Placements	3-300	20-Aug-13	Remained As Is	Chief Executive Officer
ADMINISTRATION				
Conflict of Interest	4-20	20-Aug-13	Remained As Is	Chief Executive Officer

Policy	Policy #	Review Date	Action Taken	Reviewed by
ADMINISTRATION cont'd				
Daily Record Keeping	4-30	20-Aug-13	Remained As Is	Chief Executive Officer
Well Water	4-40	20-Aug-13	Remained As Is	Chief Executive Officer
Water Testing Compliance for Family Home	4-41	21-Aug-13	Added section 2, 5 and 7	Board of Directors
Discrimination	4-50	20-Aug-13	Remained As Is	Chief Executive Officer
Pay Equity	4-75	20-Aug-13	Remained As Is	Chief Executive Officer
Inclement Weather	4-90	20-Aug-13	Remained As Is	Chief Executive Officer
Media Relations	4-110	20-Aug-13	Remained As Is	Chief Executive Officer
On Call	4-120	20-Aug-13	Remained As Is	Chief Executive Officer
Shift Responsibility	4-150	20-Aug-13	Remained As Is	Chief Executive Officer
HEALTH AND SAFETY				
Blood-Borne Communicable Diseases	5-10	20-Aug-13	Remained As Is	Chief Executive Officer
Health and Safety - Workplace	5-20	20-Aug-13	Remained As Is	Chief Executive Officer
Early and Safe Return to Work	5-30	21-Aug-13	Remained As Is	Chief Executive Officer
Lifts and Transfers	5-40	21-Aug-13	Remained As Is	Chief Executive Officer
Smoking	5-50	21-Aug-13	Remained As Is	Chief Executive Officer
Vehicles	5-60	21-Aug-13	Revised to current practice	Chief Executive Officer
Slips, Trips, and Falls	5-70	21-Aug-13	Remained As Is	Chief Executive Officer
Anaphylactic Allergies	5-100	21-Aug-13	Remained As Is	Chief Executive Officer
Violence in the Workplace	5-120	21-Aug-13	Remained As Is	Chief Executive Officer
Harassment and Bullying in the Workplace	5-125	21-Aug-13	Remained As Is	Chief Executive Officer
Right to Refuse Unsafe Work	5-130	21-Aug-12	Remained As Is	Chief Executive Officer
Firearms Policy for Family Home	5-135	22-Aug-13	Revised to reflect current legislation	Chief Executive Officer
PEOPLE SUPPORTED				
Abuse	6-10	16-Sept-13	Revised to include family providers and duty to report	Chief Executive Officer
Eligibility for Service	6-15	21-Aug-13	Remained As Is	Chief Executive Officer
Admission to Adult Services	6-20	21-Aug-13	Amend to include new role of Admission and Discharge Committee	Chief Executive Officer
Discharges from Adult Services	6-21	21-Aug-13	Amend to include new role of Admission and Discharge Committee	Chief Executive Officer
Safety and Security	6-25	22-Aug-13	Remained As Is	Chief Executive Officer
Bathing and Swimming	6-35	22-Aug-13	Revised to include family home/respite providers	Chief Executive Officer
Behavioural Treatment and Procedures	6-40	22-Aug-13	Remained As Is	Chief Executive Officer
Complaint/Feedback Process	6-50	16-Sept-13	Revised to include general public and section 11 regarding abuse reporting	Chief Executive Officer

Policy	Policy #	Review Date	Action Taken	Reviewed by
PEOPLE SUPPORTED cont'd				
Personal Finances	6-54	22-Aug-13	Revised to include family home and the role of the family home provider	Chief Executive Officer
Safeguards of Personal Belongings	6-55	22-Aug-13	Remained As Is	Chief Executive Officer
Vacations People Supported	6-70	22-Aug-13	Remained As Is	Chief Executive Officer
Pets	6-75	23-Aug-13	Remained As Is	Chief Executive Officer
Do Not Resuscitate (DNR)	6-77	23-Aug-13	CEO Title Change	Chief Executive Officer
Individual Rights	6-80	23-Aug-13	Remained As Is	Chief Executive Officer
Rights Committee	6-81	23-Aug-13	Revised to reflect current practice of incident report review	Chief Executive Officer
Individual's Care and Treatment	6-85	16-Sept-13	Revised to include Family Home Provider and medical treatment	Chief Executive Officer
Medication Administration	6-90	29-Aug-13	Revised section regarding supervised pours	Chief Executive Officer
Medication Administration for Family Home	6-91	29-Aug-13	NEW	Board of Directors
Transition Planning Policy	6-95	28-Aug-13	Revised section 2	Chief Executive Officer
Person Directed Planning	6-100	23-Aug-13	Remove reference to Facilitator's Group	Chief Executive Officer
Individual's Rights to Participate in Publicity	6-115	26-Aug-13	Remained As Is	Chief Executive Officer
Natural Supports	6-120	26-Aug-13	Remained As Is	Chief Executive Officer
Illness – Individuals Supported	6-125	26-Aug-13	Remained As Is	Chief Executive Officer
Individual Support Plan Agreement	6-135	29-Aug-13	Revised to include completion of tracking form	Chief Executive Officer
FINANCIAL				
Corporate Credit Cards	7-20	26-Aug-13	Remained As Is	Chief Executive Officer
Donations	7-30	26-Aug-13	Remained As Is	Chief Executive Officer
Fundraising	7-40	26-Aug-13	Remained As Is	Chief Executive Officer
Banking	7-50	26-Aug-13	Remained As Is	Chief Executive Officer
Purchase/Disposition of Property	7-70	26-Aug-13	Remained As Is	Chief Executive Officer
Payment Processing	7-80	26-Aug-13	Remained As Is	Chief Executive Officer
Payroll/Benefit Administration	7-100	26-Aug-13	Revised to reflect current collective agreements	Chief Executive Officer
Petty Cash	7-110	26-Aug-13	Remained As Is	Chief Executive Officer
Contracts	7-120	26-Aug-13	Remained As Is	Chief Executive Officer
Purchasing Policy	7-130	26-Aug-13	Revised to reflect HST	Chief Executive Officer
Unbudgeted Expenses	7-140	26-Aug-13	Remained As Is	Chief Executive Officer
Financial Statements & Returns	7-150	26-Aug-13	Remained As Is	Chief Executive Officer
Insurance	7-160	26-Aug-13	Remained As Is	Chief Executive Officer

Policy	Policy #	Review Date	Action Taken	Reviewed by
FINANCIAL cont'd				
Expenses Eligible for Reimbursement	7-180	26-Aug-13	Remained As Is	Chief Executive Officer
CLIENT INFORMATION MANAGEMENT SYSTEMS (CIMS)				
Personal Health Information Records	8-05	23-Aug-13	Remained As Is	Chief Executive Officer
Privacy	8-10	23-Aug-13	Remained As Is	Chief Executive Officer
Retention, Microfilming, Destruction of Personal Health Information and Financial Records	8-15	23-Aug-13	Remained As Is	Chief Executive Officer
Personal Health Information Statement	8-20	23-Aug-13	Remained As Is	Chief Executive Officer
Information Practices	8-30	23-Aug-13	Remained As Is	Chief Executive Officer
Access to Personal Health Information by Individual	8-40	23-Aug-13	Remained As Is	Chief Executive Officer
Disclosure of Personal Health Information	8-50	23-Aug-13	Remained As Is	Chief Executive Officer
Correspondence Fees	8-60	23-Aug-13	Remained As Is	Chief Executive Officer
Consent - Implied/Express	8-70	23-Aug-13	Remained As Is	Chief Executive Officer
Information Practices - Complaint	8-80	23-Aug-13	Remained As Is	Chief Executive Officer
Correction to Personal Health Information	8-90	23-Aug-13	Remained As Is	Chief Executive Officer
Access to Personal Health Information Need to Know	8-100	23-Aug-13	Remained As Is	Chief Executive Officer
Notification of Stolen, Lost or Access by Unauthorized Person	8-110	23-Aug-13	Remained As Is	Chief Executive Officer
Search Warrant and Subpoena	8-120	23-Aug-13	Remained As Is	Chief Executive Officer

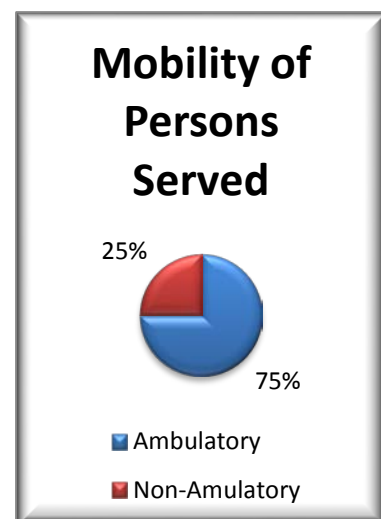
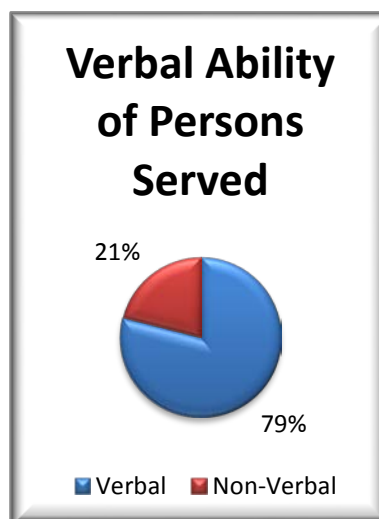
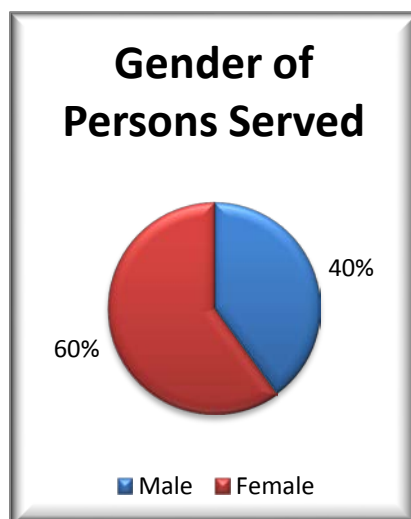
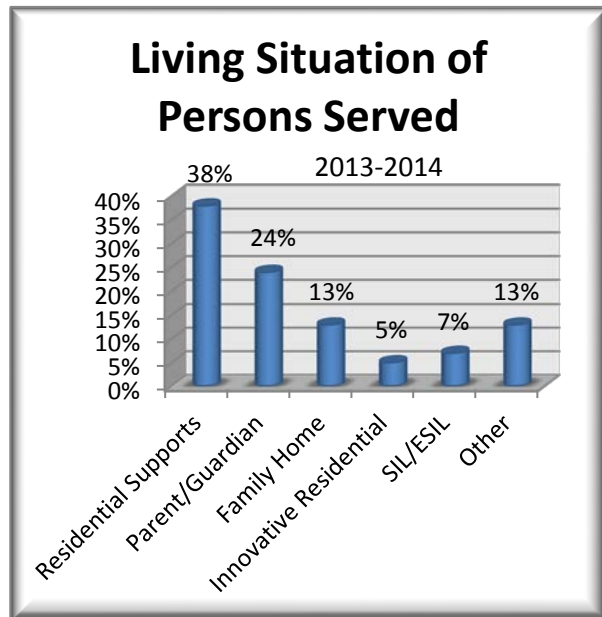
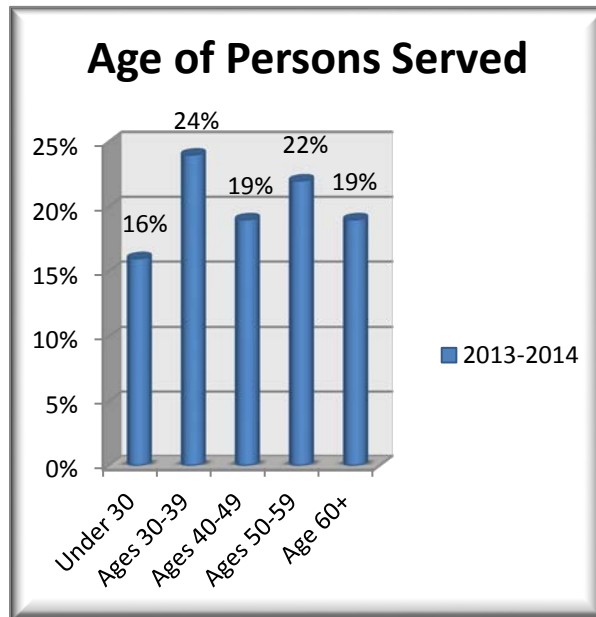
Characteristics of Individuals Served - Community Participation Services

Number of Persons Served: 100

Vacancies Declared to DSO: 7

Average Age: 45

Demographic Information



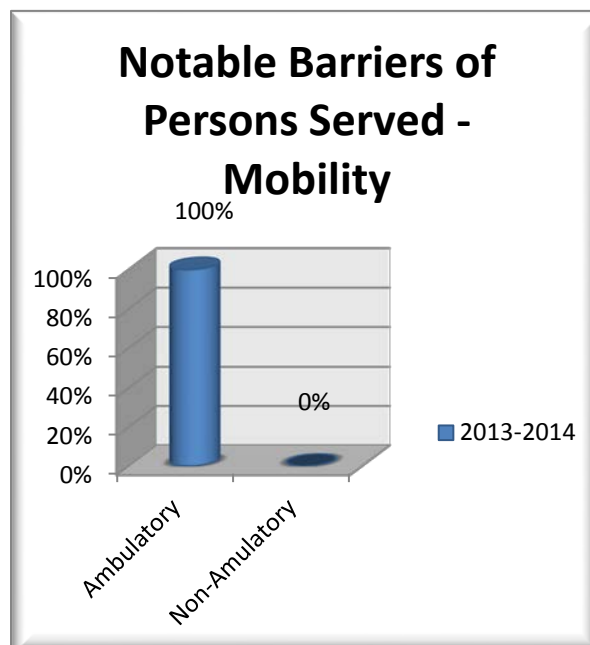
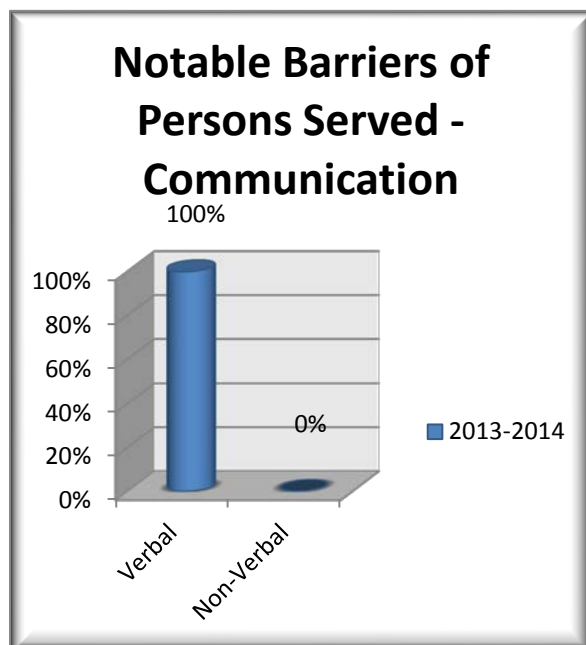
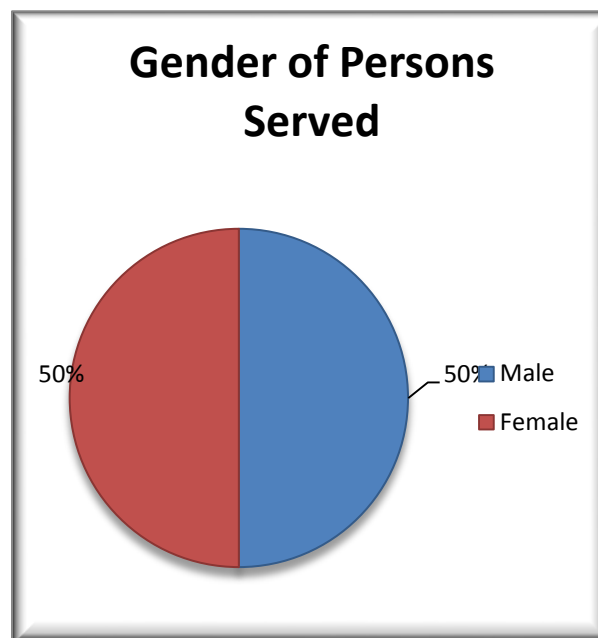
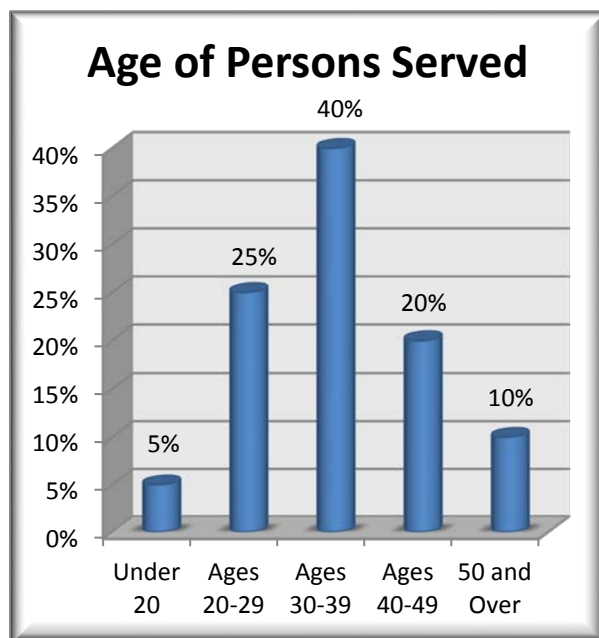
Characteristics of Individuals Served - Employment Services

Number of Persons Served: 20

Vacancies Declared to DSO: 6

Average Age: 35

Demographic Information



Characteristics of Individuals Served - Residential Group Living

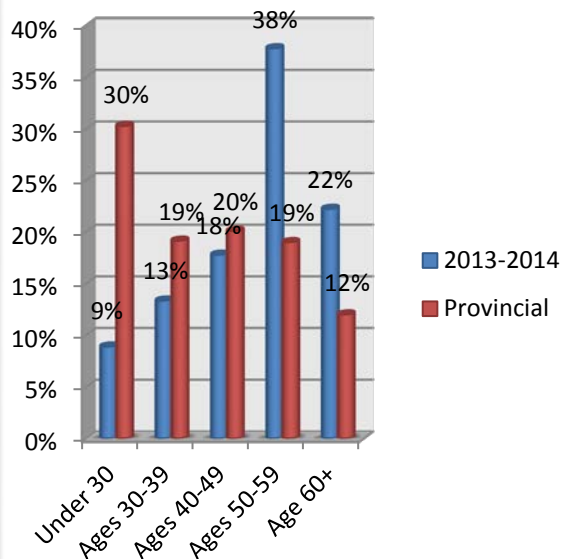
Number of Persons Served: 45

Vacancies Declared to DSO: 4

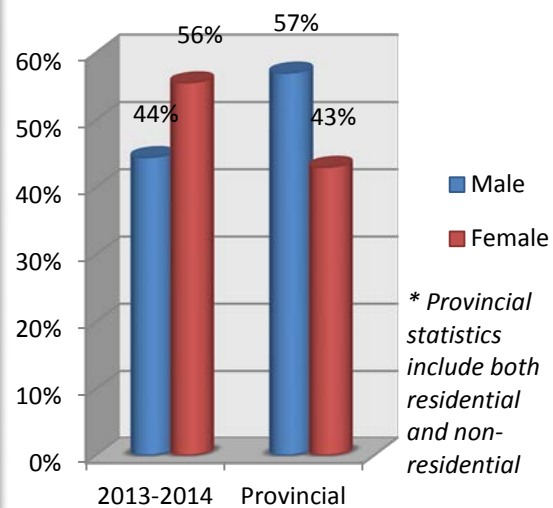
Average Age: 44

Demographic Information

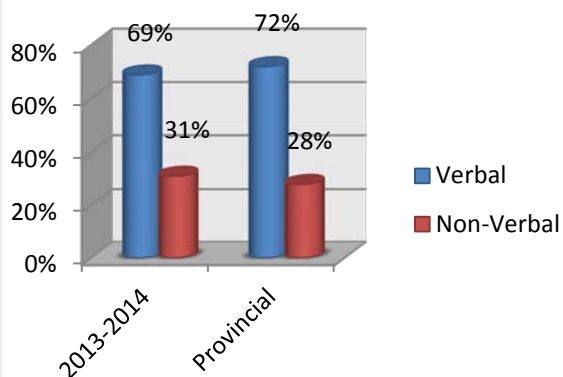
Age of Persons Served



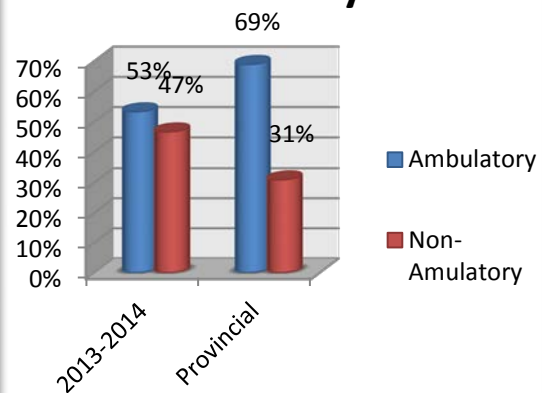
Gender of Persons Served



Notable Barriers of Persons Served - Communication



Notable Barriers of Persons Served - Mobility



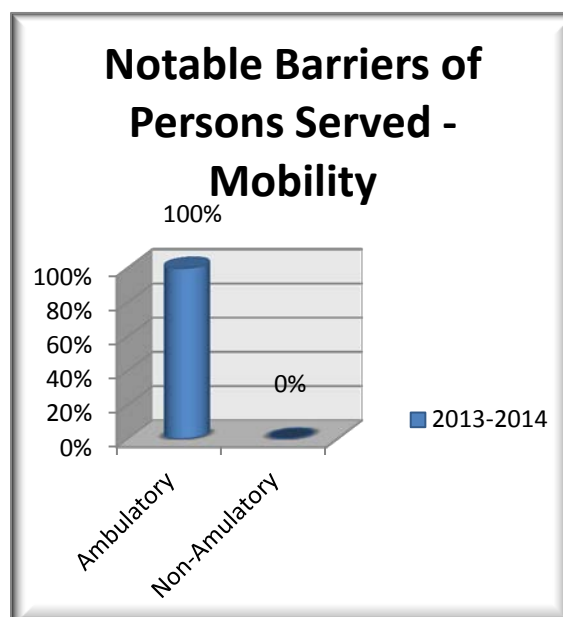
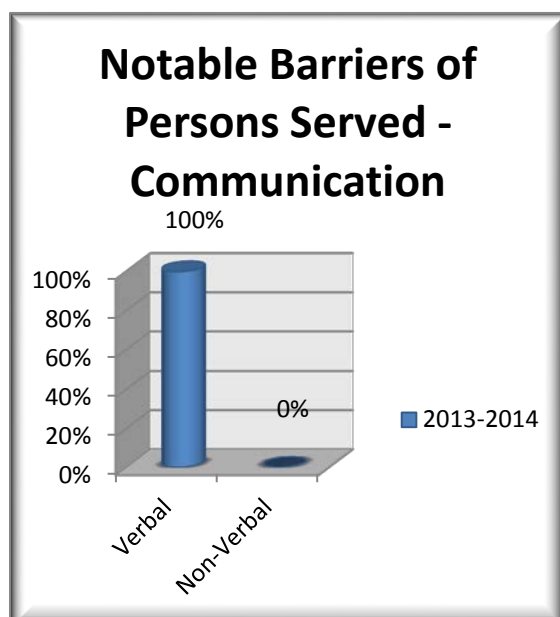
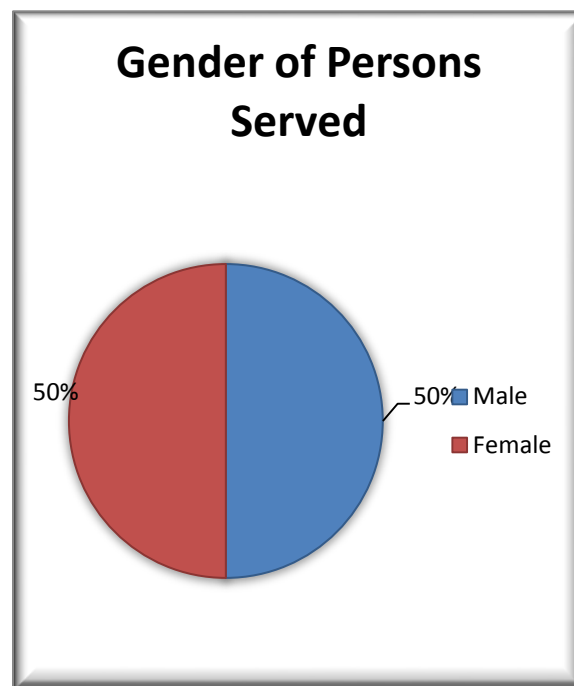
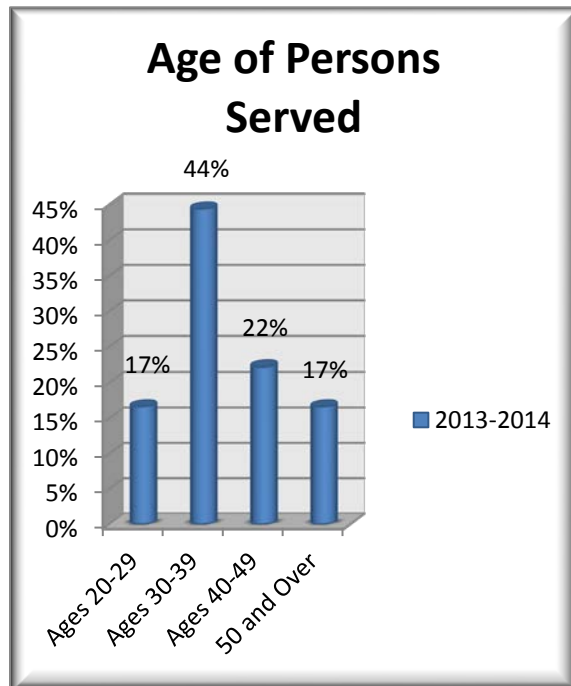
Characteristics of Individuals Served - Supported Independent Living

Number of Persons Served: 18

Vacancies Declared to DSO: 0

Average Age: 36

Demographic Information



Characteristics of Individuals Served - Family Home

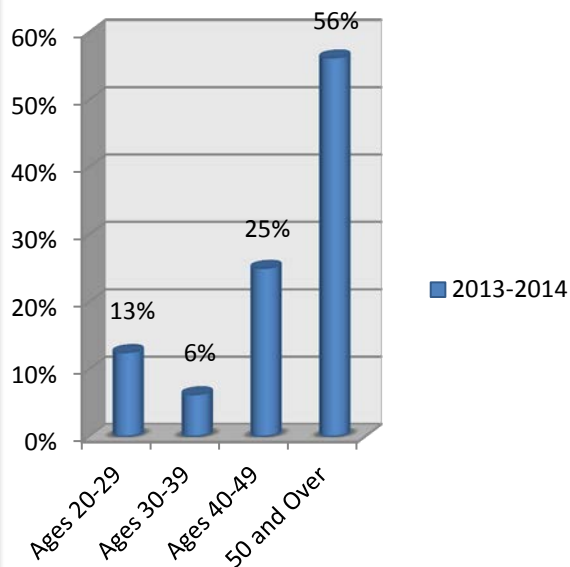
Number of Persons Served: 18

Vacancies Declared to DSO: 2

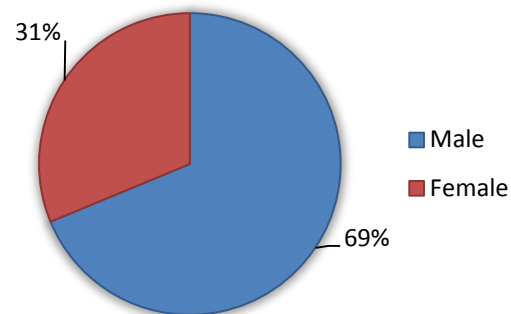
Average Age: 57

Demographic Information

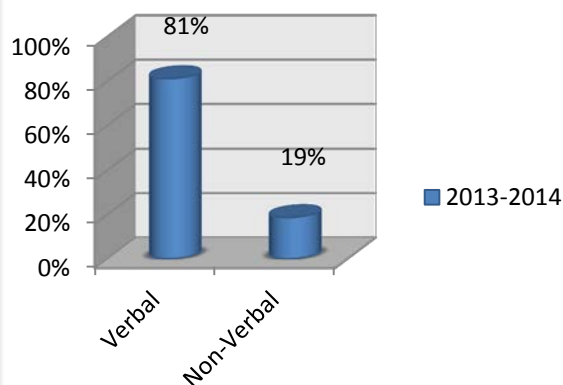
Age of Persons Served



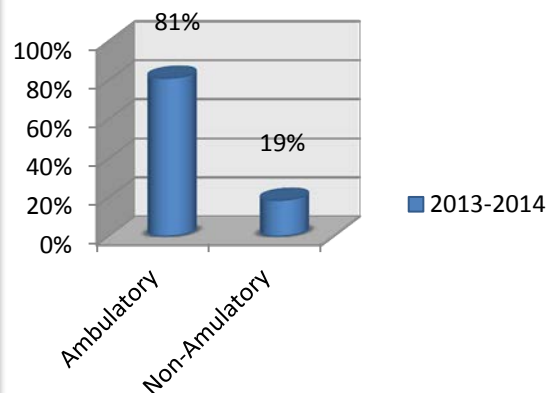
Gender of Persons Served



Notable Barriers of Persons Served - Communication



Notable Barriers of Persons Served - Mobility



Characteristics of Individuals Served – Adult Respite

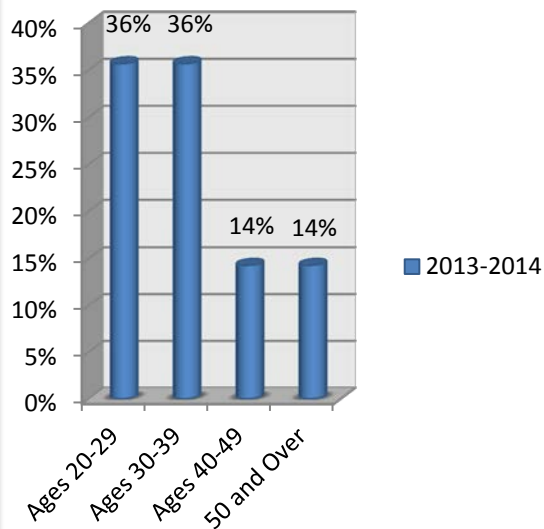
Number of Persons Served: 14

Vacancies Declared to DSO: 2

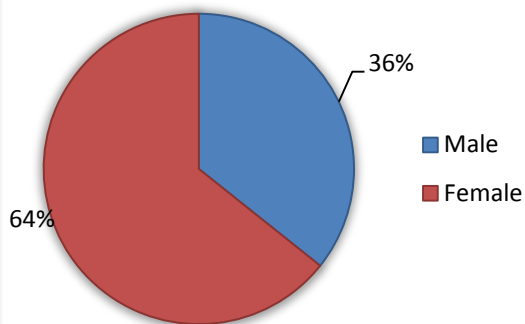
Average Age: 34

Demographic Information

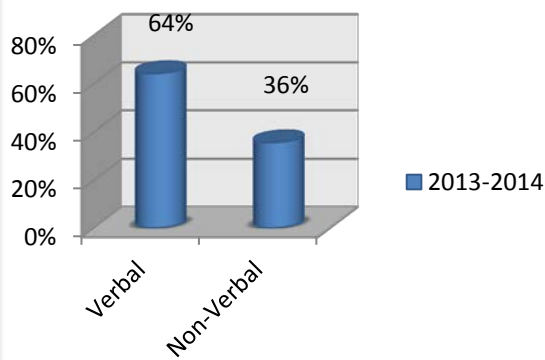
Age of Persons Served



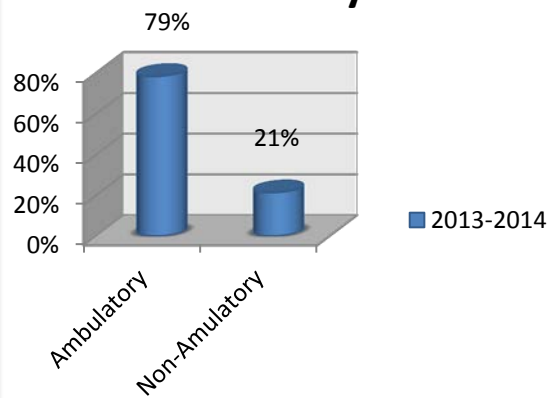
Gender of Persons Served



Notable Barriers of Persons Served - Communication



Notable Barriers of Persons Served - Mobility

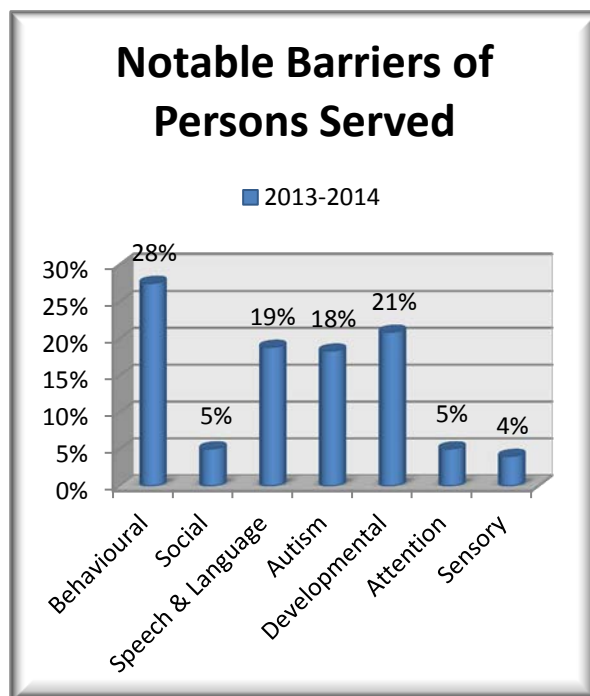
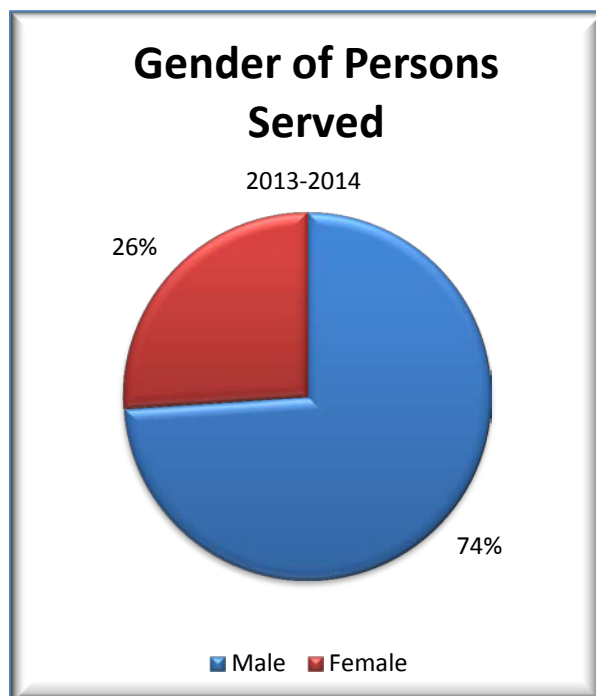
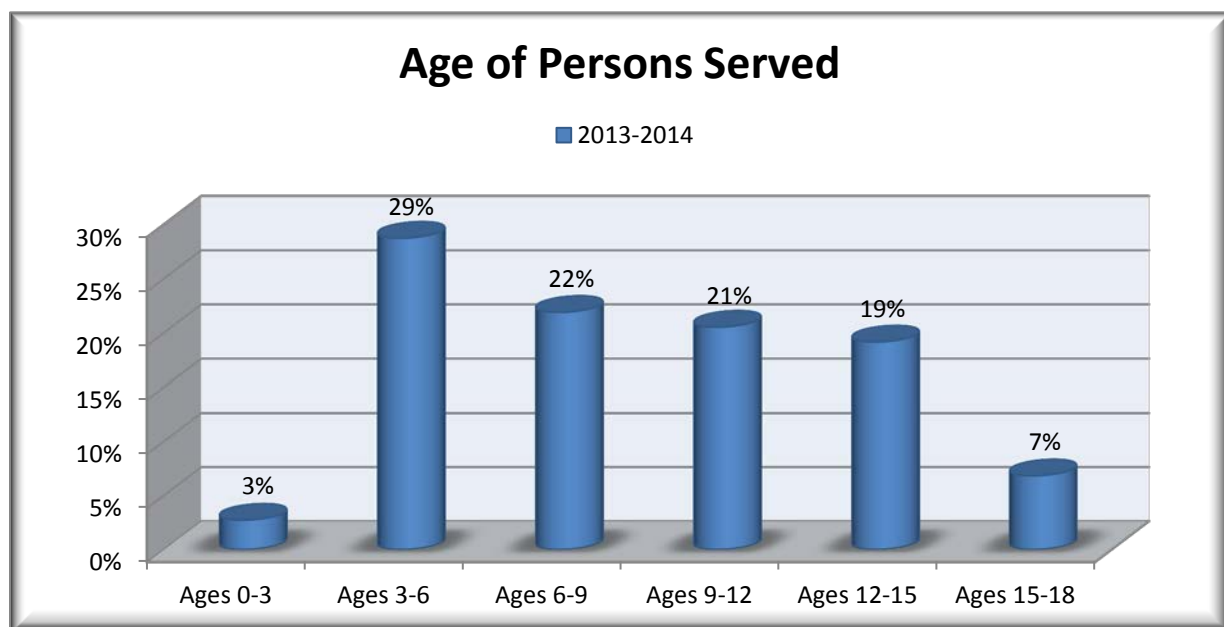


Characteristics of Individuals Served – Children’s Respite

Number of Persons Served: 73

Average Age: 9.4

Demographic Information

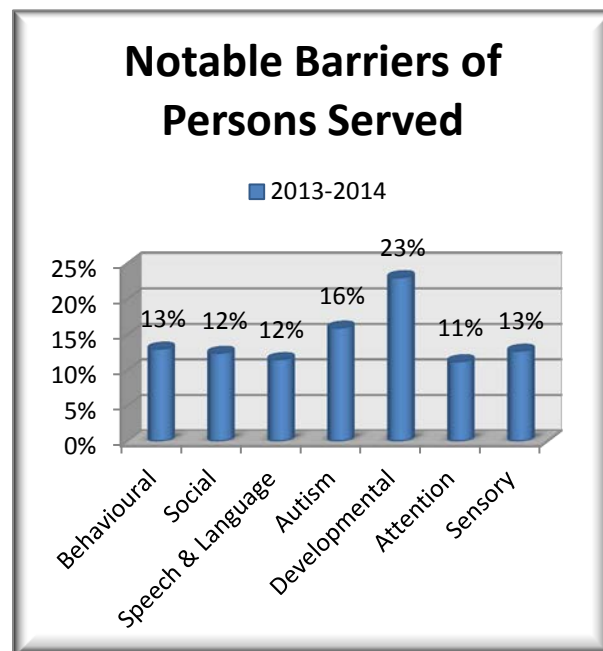
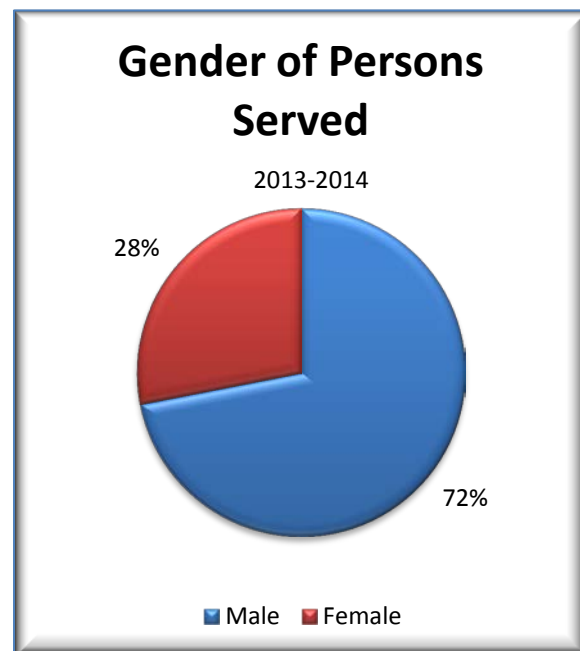
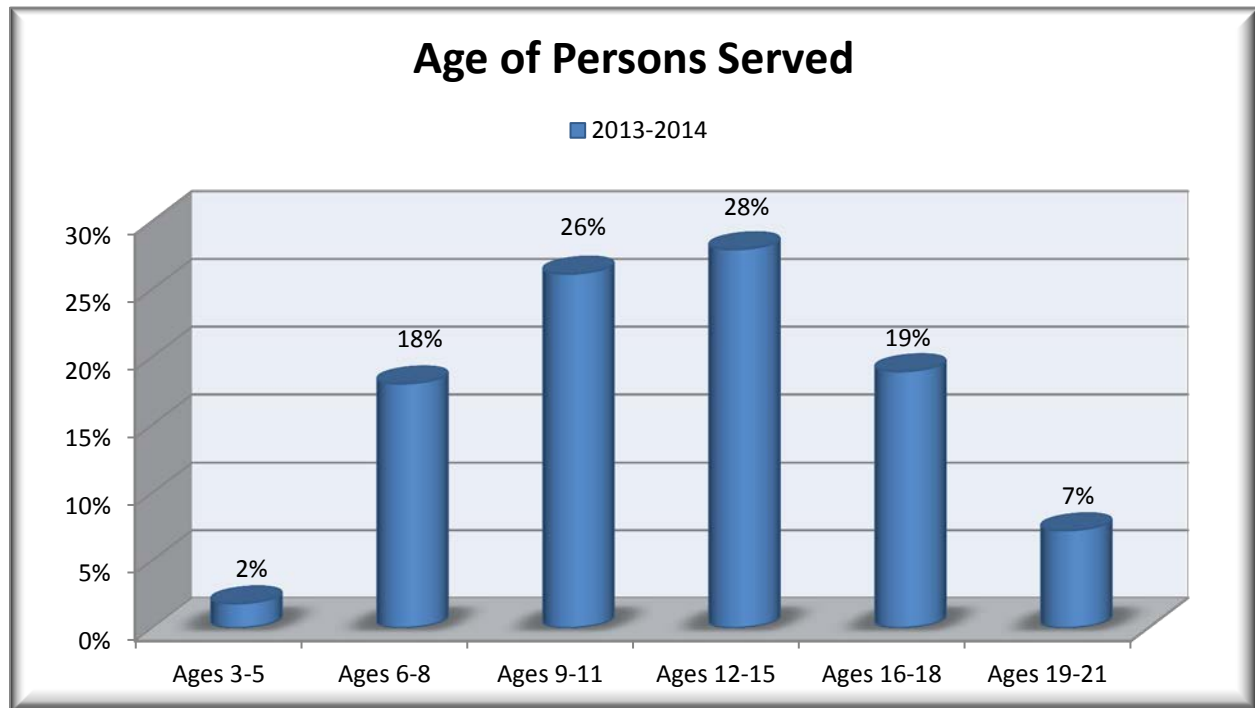


Characteristics of Individuals Served – Family Support

Number of Persons Served: 114

Average Age: 12.5

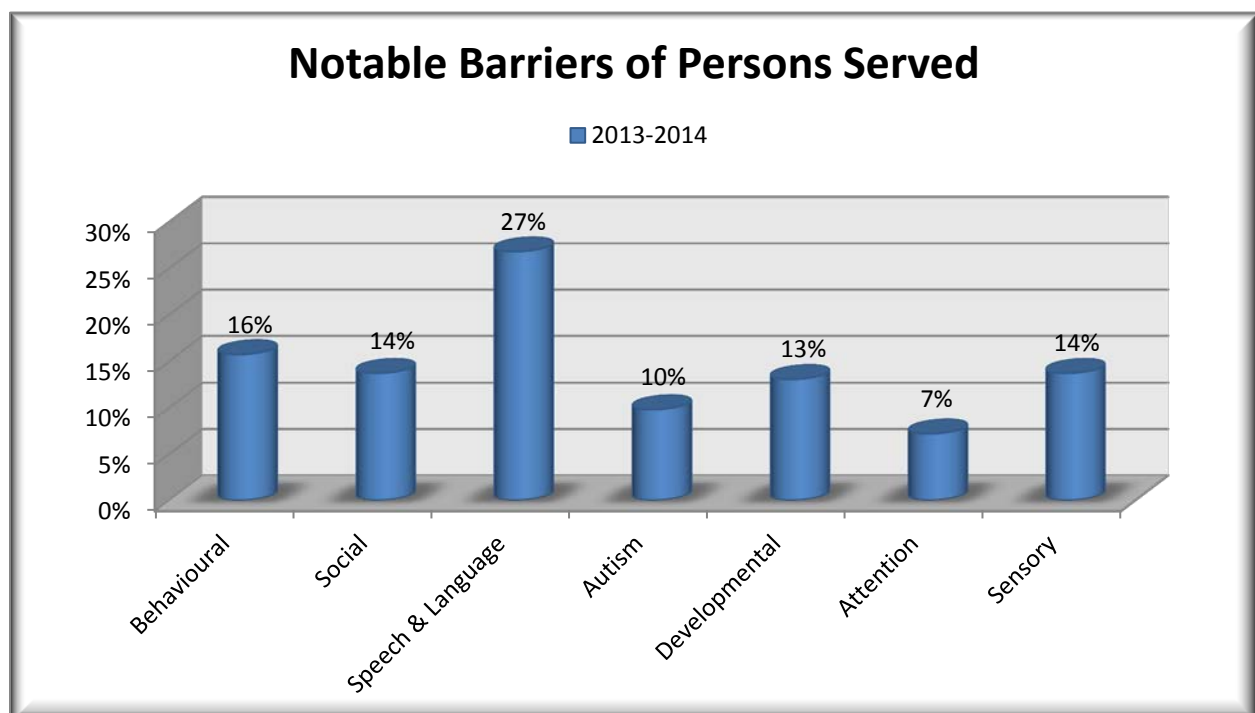
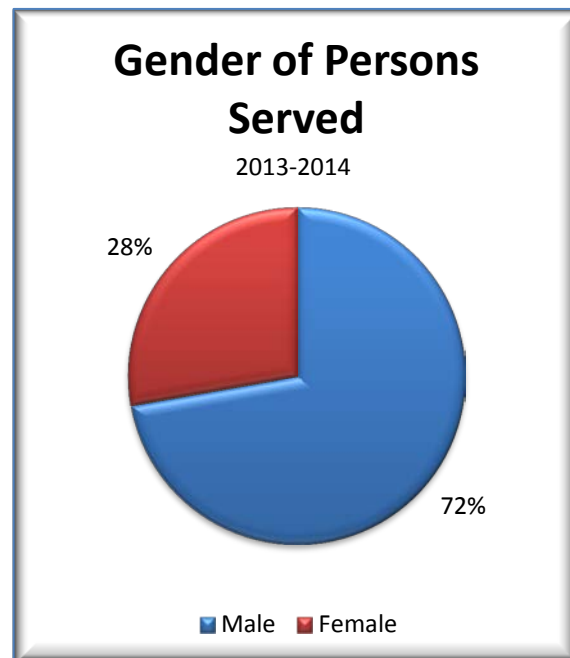
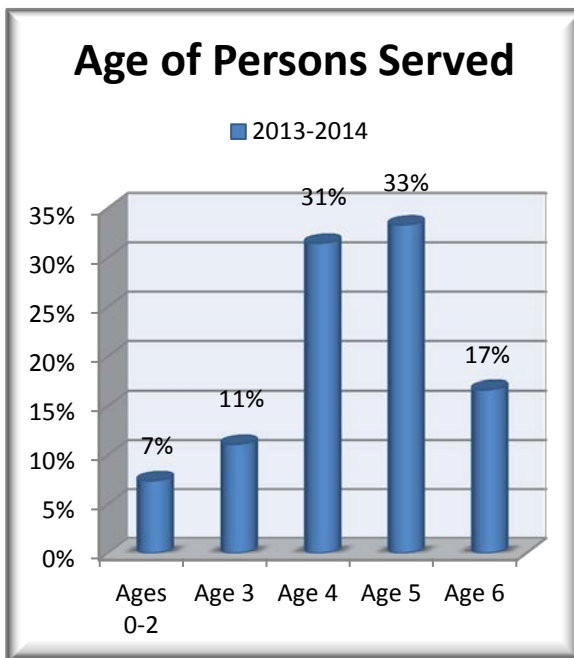
Demographic Information



Characteristics of Individuals Served – Resource Teacher

Number of Persons Served: 54

Average Age: 3



Effectiveness Measures – Community Participation Services

Objective:

To increase access to the community for individuals served through Community Participation Services.

Rationale:

The goal is to provide individuals with a developmental disability Community Participation Services and Supports that promotes social inclusion, individual choice, and independence. Community Living South Muskoka embraces meaningful opportunities that are responsive to the individual's needs, promotes personal growth and commitment, no matter the level of disability. As such, a target was set that on average at least 50% of an individual's support and service would occur in the community. In order to address this target, the agency had to develop a new model for transportation services to access the community.

Indicator	Applied To	Time of Measurement	No. of Occurrences	Data Source	% increase over prior year
Use of association vehicles or accessible taxi to access activities in the community	All staff who are employed in Community Participation Services	April 1, 2012 to March 31, 2013	697	Vehicle bookings and taxi invoices	n/a
Use of association vehicles or accessible taxi to access activities in the community	All staff who are employed in Community Participation Services	April 1, 2013 to March 31, 2014	1670	Vehicle bookings and taxi invoices	140%

Outcome:

Providing additional access to the community through a new transportation model has increased community access 140% in the past year.

The partnership with Bracebridge Taxi to provide accessible transportation services for the individuals we support in the Bracebridge area had a direct impact on our ability to provide opportunities for social inclusion, individual choice, access to the community no matter the level of disability, leading to independence and individual choice.

Limitations:

During the fiscal year Community Participation Services was in the process of restructuring services and supports to meet the target that on average at least 50% of an individual's support and service would occur in the community. The actual participation in the community will be the measurement that is tracked for 2014-15 to measure the effectiveness of the restructuring of the service and individual participation in the community.

Effectiveness Measures – Resource Teacher

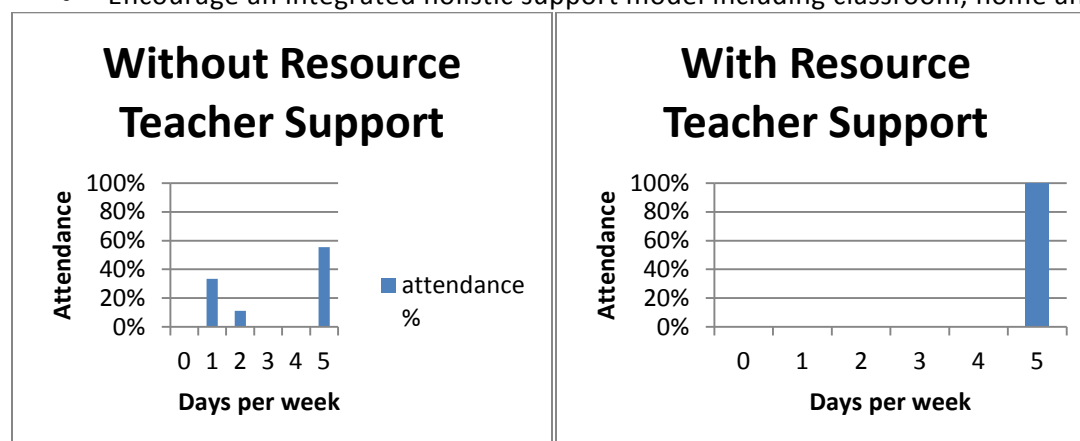
Objective:

This was the second year of a pilot project for pre-school aged children with significant needs who are transitioning into school who otherwise would not be able to attend. The focus was to ensure success for full day early learning by working as an integrated team towards optimum child development, student learning and inclusion.

Rationale:

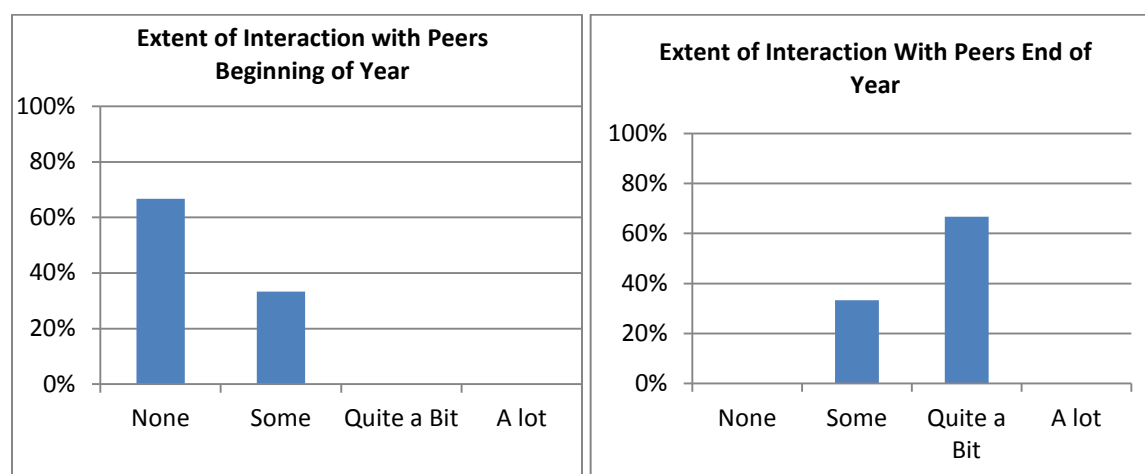
With the introduction of full day early learning, these children would no longer be in the childcare setting, and therefore, no longer have access to the traditional clinical support model. In particular, there were the following emerging themes:

- Ensure seamless clinical services, such as OT/PT and Speech
- Ensure that all parties are confident that full day early learning is ready to meet the developmental needs of all children
- Pilot best support practices in the classroom, through modelling and on-going support to school personnel by the special needs Resource Teachers.
- Encourage an integrated holistic support model including classroom, home and community.



Having the Resource Teacher here as a go – to – person is incredibly important. It helped ensure a successful integration for a high needs

Everything has worked. Can't see anything that hasn't worked. Having someone to help us with the school is great!



There's nothing that didn't work. I could say a million things that did work.

Resource Teachers at school lessened anxiety for the child. Enabled the Education Assistant to learn strategies and abilities of the child. Working together as a team has enabled the child to attend full time and move forward to seek a diagnosis.

Effectiveness Measures – Children’s Respite

Objective:

In 2008-09 The Ministry undertook a review of Children’s Respite. Following the review a Regional Respite Network was formed to follow through with the report’s recommendations. The intent was to strengthen the respite service system to families of children and youth with developmental disabilities and provide fair and equitable access to respite for families of children and youth in the North East Region.

Rationale:

The service providers across the North East Region worked together with the Ministry to create common eligibility criteria, a common respite application, and a standardized assessment process. The new respite model for children will provide:

- Equitable funding for all families regardless of their location
- Funding based on identified family needs and resources available

Families can determine how they prefer respite to be provided from the array of respite options available. Community Living South Muskoka will support families to complete funding applications, provide potential screened respite contractors for families to contract for respite service help families to complete a respite plan and reimburses families for their respite costs through the funding allocated through the common application process

Impact on Families in South Muskoka:

There has been a very positive impact on families in South Muskoka with families receiving substantial increases in their respite funding. During the first 2 years of the implementation phase Community Living South Muskoka did experience a drop off in families applying for respite due to the increased work to complete the common application and the limited funding available under the previous model. Families are now experiencing the value of the new model and in 2014–15; additional families have applied for respite services.

Year	Community	Number of Children Receiving Respite	Funding Received
2011-12 Last year of the old funding model	South Muskoka	84	\$39,800
	Huntsville	42	\$32,000
2013-14 New model has been implemented	South Muskoka	65	\$135,032
	Huntsville	48	\$129,188

Service changes for 2014-15

An electronic application form was developed during 2013-14 and applications for 2014-15 were sent and completed by families electronically. Effective April 1, 2014 Huntsville will be administering their own respite funding.

Quality Assurance Measures

Individuals Training

In accordance with Ontario Regulation 299/10 Quality Assurance Measures and Community Living South Muskoka must provide annual training to the adults we serve in the areas of abuse prevention, diet and nutrition, goals, vision and service principles, privacy, confidentiality and consent, individual's rights, relationships and self-esteem and wellbeing.

Families had presented concerns to Community Living South Muskoka on the requirement to report abuse and suspect abuse allegations to the police and the measures and education that would occur regarding this regulation. A family and staff committee was struck to discuss the impacts of the new regulations and provided feedback on how to improve communications, and the training to be provided. In addition to the training that is listed below that occurred for the individuals Community Living South Muskoka also developed a Service Directory for families to outline services offered, admission and discharge, eligibility and mandatory information regarding consent, privacy, abuse, goal, vision and services principles, and complaint process.

Training	2012/13	2013/14
Abuse Prevention	31	94
Diet & Nutrition	40	60
Goal, Vision and Service Principles	29	123
Privacy, Confidentiality and Consent	5	58
Individual's Rights	53	41
Relationships	31	49
Self Esteem and Well being	25	44

Staff Training

In addition to the training required for individuals served the organization provides training for staff under a number of legislations and they include the following:

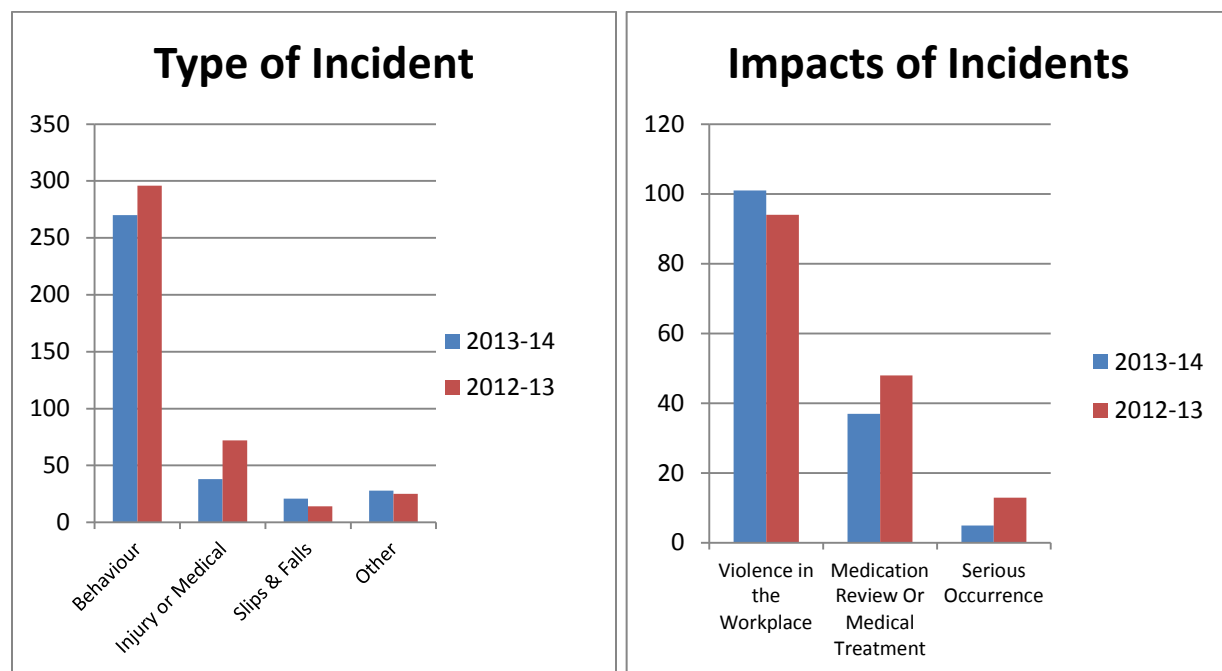
Training	2012/13	2013/14
Abuse	94	66
Core Competencies	109	27
First Aid & CPR	44	62
Goal, Vision and Service Principles	120	138
Individual's Rights	93	66
Policies and Procedures	120	138
Orientations	34	25
Safe Management Group	104	117
Small Water System Management	2	
Violence in the Workplace	36	43
WHMIS	20	25

Incident Report Management

Community Living South Muskoka requires that all employees report all accidents, injuries, or incidents requiring medical attention, medication errors, physical restraints, behavioural incidents, and serious occurrences. Staff must also report medication administration of PRN's as a result of a behaviour situation or when used for a medical condition or incident on a consistent basis (i.e. more than once or twice a week).

Findings:

The tracking of the incidents reports highlighted the following information:



Monitoring:

In order to meet compliance requirements the management team developed an incident report management committee to review all incident reports within the organization. The purpose of this committee is to review all incident reports, the recommendations of the team and supervisor, and provide additional recommendations as warranted. A status update on the implementation of the recommendations occurs on a monthly basis until complete. On an annual basis the incident report management committee also performs an internal review of the individual behavioural management protocols for each individual. Should the incident identify violence in the workplace the committee shares the information with the Joint Health and Safety, along with the recommendations and provides an opportunity for the committee to provide feedback. The Joint Health and Safety committee may undertake an investigation of any of the incidents that warrant a follow up. The Joint Health and Safety Committee will provide their report to the Chief Executive Officer and Chief Operations Officer for implementation.

The recommendations will identify training needs, protocol development, environmental assessments, behavioural intervention, and program development as well as best practices to be implemented.

Serious Occurrences

Type	2012	2013
Death	1	0
Serious Injury	2	2
Alleged, Witnessed, Suspected Abuse	2	1
Missing Person	0	0
Disaster on Premise	0	0
Complaint about Operational, Physical, Safety Standards	0	0
Complaint made by or about a client, or Other Serious Occurrence involving a client	5	2
Restraint of client	8	0
Total	18	5
Enhanced Serious Occurrences initially reported within 3 hours	0	0
Serious Occurrences initially reported within 24 hours	18 100%	5 100%
Enhanced/Serious Occurrence Inquiry Reports submitted within 7 working days	18 100%	5 100%
Number of Serious Occurrences requiring additional action or information, at the request of the Ministry, after submission of the Serious Occurrence Inquiry Report	2	1

Compliance Reviews

In 2012, the Ministry of Community and Social Services amended their compliance inspections in accordance with the changes in legislation under Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008 and Quality Assurance regulations 299/10. Community Living South had three homes reviewed in the first phase of the new compliance review in 2012 and achieved 100% compliance. The Ministry introduced a pilot project in 2013 for agency wide compliance and Community Living South Muskoka was selected to undergo a compliance review in Sept. 2013. The results of the compliance reviews for 2012 and 2013 are as follows:

Date	Location	Policies & Procedures	Board Records	Staff & Volunteer Records	Individual Records	Records & Documentation	Site Inspection
11-20-12	Fraserburg	100%	100%	100%	100%	100%	100%
11-21-12	Spencer	100%	100%	100%	100%	100%	100%
11-15-12	Woodward	100%	100%	100%	100%	100%	100%
09-16-13	SIL/ESIL Family Home Young Manitoba Douglas Third Muskoka Beach Honey Harbour Community Participation	100%	100%	One issue and change completed within 10 days for 100%	Four issues and changes completed within 10 days for 100%	100%	100%

Service Access Measures

In July 2011, the Ministry of Community and Social Services introduced a single point of access to Adult Services through Developmental Services Ontario. This new access organization eliminated the existing admissions and intake process for developmental service providers and required all individuals 18 and over requesting service to enter through the DSO. This has meant a significant shift in declaring and filling vacancies for organizations and has delayed the time from declaration to the date service delivery commences. This has increased management time for intakes and admission for service as we no longer know the individuals being referred. The first meeting with the DSO identifies potential matches for the vacancy using non-identifying information. The organization then determines if one of the individuals appears to be a suitable match and lets the DSO know of their interest in supporting the individual. The DSO will then contact the individual and their family to confirm whether they want to pursue the referral or if they are going to decline. If the family declines the process starts all over. If they agree to move forward with service planning the DSO then provides the organization with the individual's name and a copy of the application and support intensity scale assessment. It is only at this point the organization can start to work with the family to develop a service plan.

The following is the impact this transition has created on referral to service timelines:

Community Participation

Vacancy Declaration Date	No. of Individuals Presented by DSO	No. of Vacancies	No. of Days for Match to be Confirmed and Identifying Information Provided	No. of Days from Match to Service Delivery	Total Number of Days from Declaration to Service Delivery
July 4, 2013	3	1	141	3	144
	3	1	159	7	166
	3	1	151	110	261
	3	1	189	1	190
Jan. 24, 2014	3	1	150	1	151
	3	1	67	118	185
	3	1	62	1	63
	3	1	77	11	88

Accommodation Services – expected result by the Ministry 60 days

Vacancy Declaration Date	No. of Individuals Presented by DSO	No. of Vacancies	No. of Days for Match to be Confirmed and Identifying Information Provided	No. of Days from Match to Service Delivery	Total Number of Days from Declaration to Service Delivery
Feb. 4, 2012	4	1	Still vacant 786 to date		
Feb. 27, 2013	1	1	84	36	120
Mar. 25, 2013	2	1	58	71	129

Vacancy Declaration Date	No. of Individuals Presented by DSO	No. of Vacancies	No. of Days for Match to be Confirmed and Identifying Information Provided	No. of Days from Match to Service Delivery	Total Number of Days from Declaration to Service Delivery
Apr. 12, 2013	1	1	76	22	98
Jun. 11, 2013	1	1	232	47	279
Oct. 1, 2013	1	1	66	48	114
Oct. 1, 2013	5	1	181	57	238
Nov. 14, 2013	5	1	291	Still in process for out of district placement	

Children's Services

Community Living South Muskoka accepts referrals for children's services directly from families, doctors, teachers, day care providers or other professional supports. Eligibility is determined by the agency. The children's services team meets on a monthly basis, reviews referrals for service, and assigns a staff member to work with the family. Statistics for referral to intake for the Resource Teacher and Family Support Programs are as follows:

Program	No. of Referrals in the Year	Days from Referral to Intake for Service Delivery		
		Shortest	Longest	Average
Resource Teacher	29	1	39	15
Family Support	20	1	24	12

Business Function Measures – Staff Injury

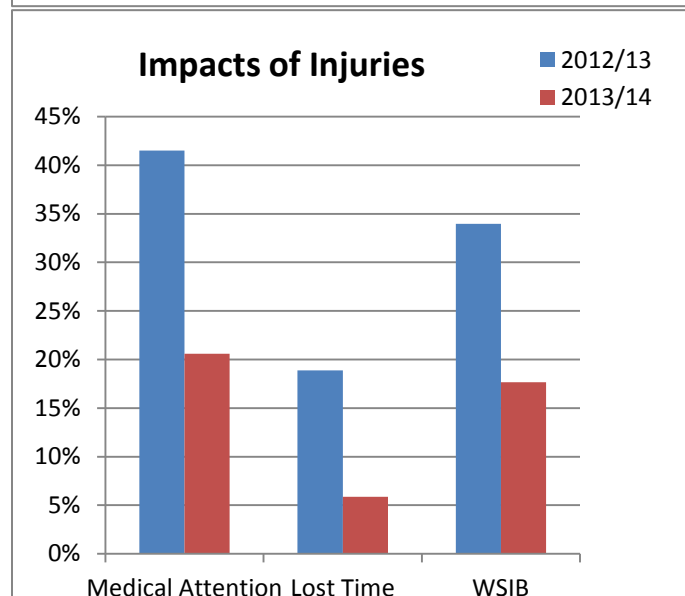
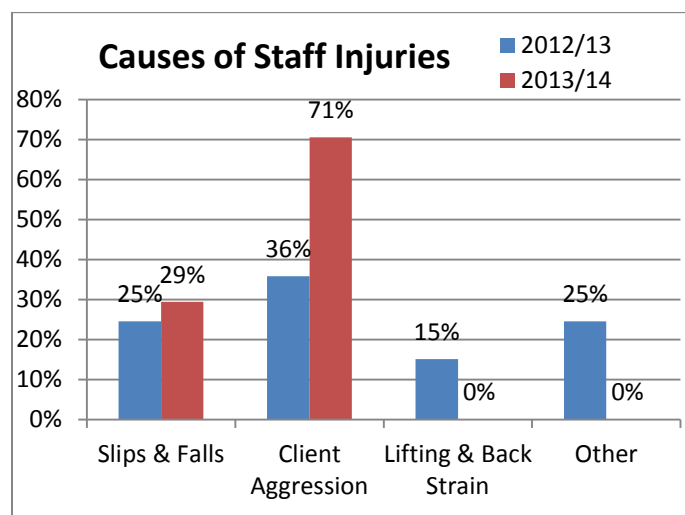
Objective

To reduce the number of work-related staff injuries

Rationale

Staff injuries are frequently indicative of Health and Safety and Violence in the Workplace concerns. The Joint Health and Safety Committee study the impacts of workplace violence and injuries and conduct investigations as required and make recommendations for change to reduce or eliminate future incidents that result in staff injuries.

Year	Slips & Falls	Client Aggression	Lifting & Back Strain	Other	Total
2012-13	13	19	8	13	53
2013-14	10	24	0	0	34



Outcomes

In December 2010 Community Living South Muskoka underwent a Workwell Risk Management Plan with the Workplace Safety and Insurance Board (WSIB) due to the number of WSIB claims and lost time. In 2011, Community Living South Muskoka introduced slips, trips and falls hazard analysis program. Community Living South Muskoka also provides training on proper lifting techniques and has mechanical lifts in service areas where there is a need. In 2013-14 there was a reduction in the number of slips and falls injuries from the prior year and a significant reduction in injuries related to lifting and back strain.

Trends

Community Living South Muskoka has seen an increase in the number of individuals with behaviour challenges and this has had a direct influence on the number of incidents of staff injury related to client aggression. An incident report management committee was implemented in 2013-14 to review incidents and make recommendations on training, and modifications to support plans.

Business Function Measures – Attendance Management

Objective

To implement an attendance management program within Community Living South Muskoka and reduce the use of sick time.

Rationale

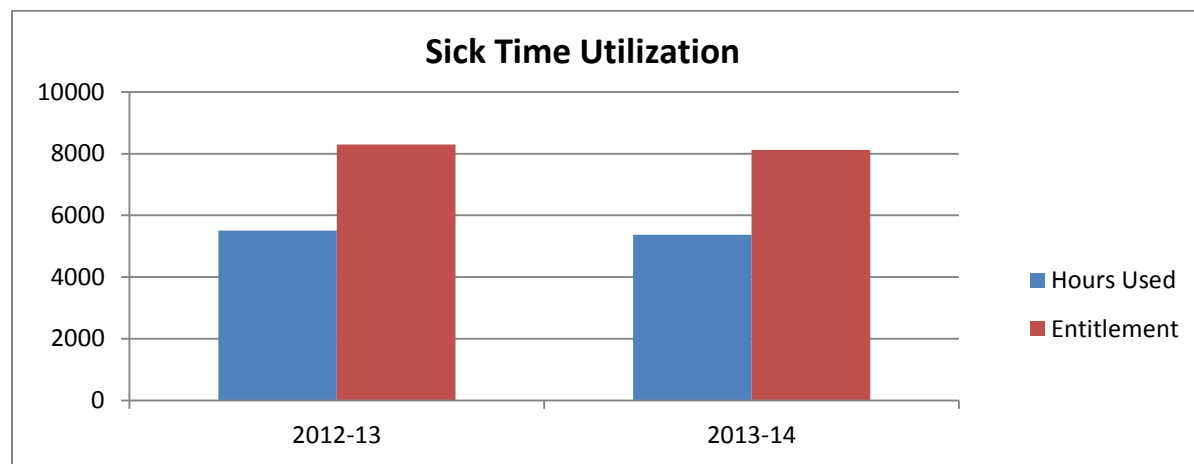
The use of sick time has a direct impact and cost to the organization including:

- Fellow team members having an additional workload
- The time and cost of finding and paying trained replacement staff to ensure required staffing supports are in place
- The negative effect on the ability of the agency to provide quality service
- The negative impact to the individuals supported

By developing an attendance management program, staff will be made aware when their use of sick time is approaching the agency's threshold and management will work with the employee to explore ways of improving their attendance to meet reasonable attendance standards. It will also provide an opportunity to discuss areas for improvement in the service area that may be affecting their attendance.

Target

To reduce the use of sick credits from 66% to 50%.

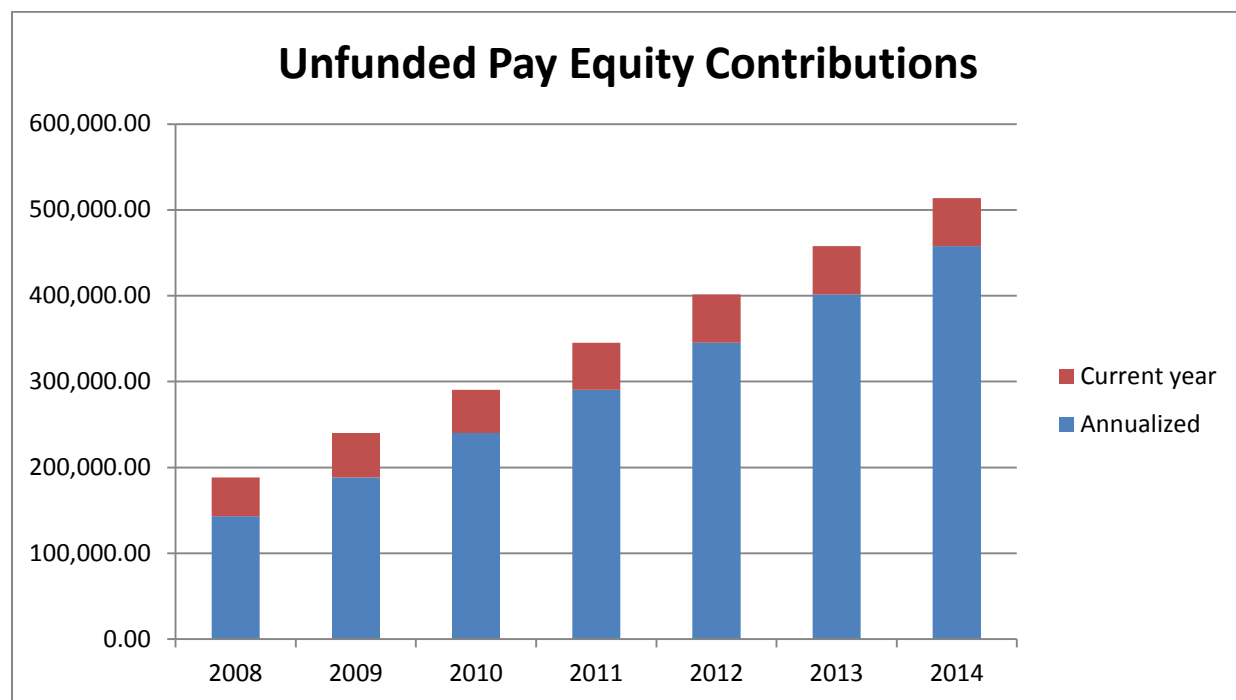


Trends

Community Living South Muskoka includes time used for compassionate medical reasons where the staff member must attend appointments or care for family members. With our aging population there has been an increase in the past few years of staff caring for elderly parents or providing transportation to out of town appointments. This impact has been noted by governments within Canada and over the past few years we have seen increased eligibility for leaves to enable care provision to occur. Community Living South Muskoka enables these leaves to be integrated into their existing credits. While we incur the cost of employee's utilizing their sick credits we are not experiencing additional unpaid leave time to support these family obligations.

Business Function Measures – Pay Equity

Community Living South Muskoka has already endured four years of funding freezes, while incurring costs and meeting our legislated pay equity obligations. Pay equity legislation requires the agency to provide 1% of the prior year's payroll to our employees each year until the proxy pay equity target is met. To date, the Government has not funded approximately \$500,000 worth of pay equity expenses leaving Community Living South Muskoka to find the funds internally. Our pay equity obligation will not be met until 2046 and we still have an additional \$1.7 million that we are obligated by legislation to provide to meet the proxy pay equity target rate. If the Government does not provide additional funding to address this legislated requirement or amend the legislation the impact on Community Living South Muskoka will be the loss of approximately 60,000 service hours once pay equity is fully achieved every year. The future impact on Community Living South Muskoka is one full time position every year for the next 32 years or 34% of our fulltime work force if the government does not provide funding to offset this legislated liability. This is not acceptable.

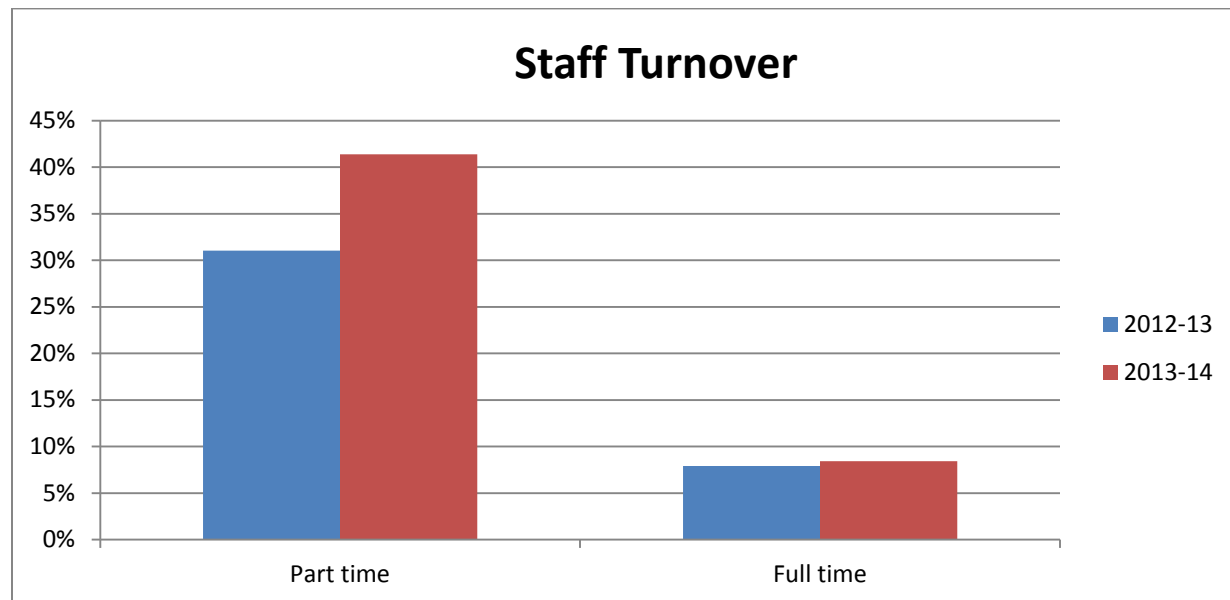


To manage this unfunded liability and ensure that staff receives the pay equity they are legally entitled to the following measures have been taken over the past few years:

- Consolidated two group homes into one new group home
- Reduced management team by 2 positions and 1 position working reduced hours
- Reduced group home staff by 5 positions when homes consolidated through attrition
- Call-in hours eliminated in vocational services
- Delayed filling vacancies, maternity leaves, and sick leaves
- Reduced repairs and maintenance budgets
- Established administration contract for shared services with OASIS

Business Function Measures – Staff Turnover

Over the last few years Community Living South Muskoka has seen an increasing trend in staff turnover. Significant turnover occurs in the part-time entry level positions within the organization which includes the call-in casual staff and assistant residential counsellors. The turnover rate for Call-in Casual staff was 50% in 2012-13 and 44% in 2013-14. For the assistant residential counsellors the turnover rate was 17% in 2012-13 and 35% in 2013-14.



Call-in Casual staff often work for multiple part time jobs in order to support themselves and will often leave if a full time position becomes available in another organization that they work for, receive higher wages, or if they have more consistent hours. During the last four years Community Living South Muskoka has endured funding freezes and it has impacted on our ability to retain qualified staff.

Turnover in the full time positions was 8% per year and has occurred due to restructuring, retirements, promotions to management positions within other organizations, and lifestyle choices where job share arrangements have been implemented.

Community Living South Muskoka trained their management team on performance management and coaching and this has also had some impact on increased turnover.

Increased staff turnover has had the following impacts on Community Living South Muskoka:

- Lack of consistency for the individuals we serve
- Increased overtime
- Capping of time off requests for staff to ensure we have coverage available in all locations
- Scheduling pressures
- Increased demand on Human Resources and Management to support the hiring process