



**TABLE OF CONTENTS**

Mission Statement \_\_\_\_\_ Page 3

Guiding Principles \_\_\_\_\_ Page 4

Management Organizational Chart \_\_\_\_\_ Page 5

Outcomes Management Report \_\_\_\_\_ Page 6-19

Survey Analysis \_\_\_\_\_ Page 20-23

Health & Safety Report \_\_\_\_\_ Page 24-27

Risk Management Report \_\_\_\_\_ Page 28-32

Human Resources Report \_\_\_\_\_ Page 33-34

Strategic Plan Summary \_\_\_\_\_ Page 35-46

# Carmichael Enterprises Residential Programs Ltd

## Mission Statement

Carmichael Enterprises Residential Programs Ltd is dedicated to enhancing the lives of persons served. We will ensure that all persons served are treated with respect and dignity and that the rights of persons in our care are diligently maintained.

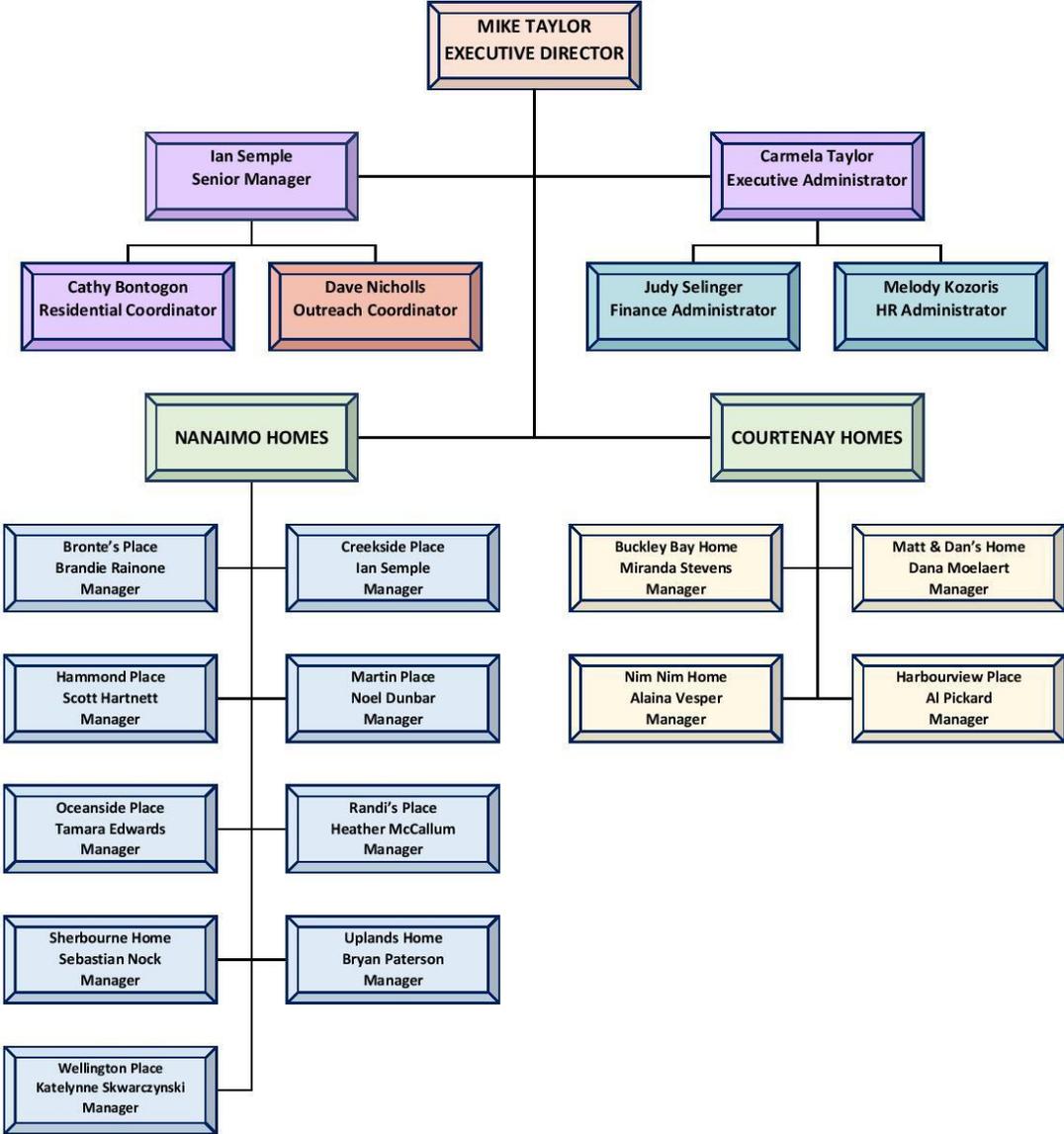
Furthermore, Carmichael Enterprises Residential Programs Ltd will advocate ensuring that all of the needs of individuals are met. By doing this, we create a safe and nurturing environment where individuals are supported and accepted as valued members of the community.

## **GUIDING PRINCIPLES**

Carmichael Enterprises Residential Programs Ltd will commit to the following Guiding Principles:

- ❖ THE PRINCIPLES AND VALUES INHERENT IN OUR MISSION STATEMENT
- ❖ THE DEVELOPMENT AND DELIVERY OF PROGRAM SERVICES BASED ON THE INDIVIDUAL NEEDS OF THE PERSON
- ❖ PROVIDE AND SUPPORT THE OPTIMUM PARTICIPATION IN DEVELOPING THEIR INDIVIDUAL SERVICE PLAN
- ❖ ENSURE THE PERSON-CENTRED PROGRAMS ARE CONSISTENTLY ADHERED TO AND MAINTAINED
- ❖ INFORM AND EDUCATE INDIVIDUALS REGARDING THEIR RIGHTS WHILE IN CARE
- ❖ ADVOCATE FOR THE POSITIVE PERSONAL DEVELOPMENT OF PERSONS SERVED
- ❖ CREATE AND MAINTAIN AN ENVIRONMENT OF OPPORTUNITY WHERE INDIVIDUALS MAY DEVELOP SKILLS THAT SUPPORT GREATER INEPENDENCE AND INTEGRATION WITHIN OUR COMMUNITY
- ❖ HOLD OURSELVES ACCOUNTABLE IN ENSURING THE GUIDING PRINCIPLES ARE DILIGENTLY MAINTAINED AND ADHERED TO

# SUPPORT STAFF



January 1, 2019

CARMICHAEL ENTERPRISES RESIDENTIAL PROGRAMS LTD

# **OUTCOMES MANAGEMENT REPORT**

**JANUARY 1, 2018 – DECEMBER 31, 2018**

## Carmichael Enterprises Residential Programs Outcomes Management Report

JANUARY 1, 2018 - DECEMBER 31, 2018

### INTRODUCTION

#### Outcomes Management System definition from CARF

"An Outcomes Management System aggregates and assesses data to determine if various stakeholders are satisfied with your service delivery, if they have benefited from your programs and services, and if your services were performed in an efficient manner, to enable you to:

- Assess service delivery and make needed program changes to enhance service delivery for persons receiving services.
- Design relevant staff training to meet the needs of the organization and thus enhance service delivery.
- Focus the organization as a whole on comprehensive, organizational performance, related planning, and consistent performance improvement.
- Enhance communications with identified stakeholders.
- Educate all staff members on their individual contribution to the accomplishment of the organization's vision and goals.

Carmichael Enterprises Residential Programs has developed its outcome management system based on staff input, the interests of persons served, families and identified stakeholders using the services and community stakeholder quality expectations. This is an ongoing formal system designed to continually measure and manage results for the organization as a whole.

The organization provides specialized services for a diverse and unique service population which have a variety of different and ever changing needs.

## BACKGROUND AND DATA COLLECTION

In 2004, Carmichael Enterprises Residential Programs established outcomes for its service areas in preparation for CARF Accreditation. The outcomes are based on CLBC/MCFD contracted outcomes, service needs of individuals served, and CARF accreditation standards. The outcomes system identifies performance in three categories: **satisfaction, effectiveness and efficiency.**

To measure **satisfaction**, the organization surveys individuals and/or families of individuals who receive support in our residential programs as well as members of each person's multi-disciplinary team. The survey process involved a combination of one to one survey interviews with persons served through the use of satisfaction surveys, and surveys completed by the defined stakeholder groups. Data was collected from the survey results and correlated for analysis. Upon completion of the analysis, key areas were focused on and performance improvement strategies developed.

To measure **effectiveness**, data on individuals attaining their ISP goals is collected on a semi-annual basis from service plan reviews and correlated for analysis.

To measure **efficiency**, specific information in various areas was collected utilizing various tools throughout the year and correlated for analysis.

## PROGRAM DESCRIPTIONS

### **Hammond Place**

Hammond Place is a licensed CARF accredited 5 bed residential program which was established in 1998. Hammond Place currently provides placements to young adults over the age of 19. Hammond Place has provided placements to a wide variety of individuals over the years and currently supports individuals with Autism, medically fragile clients, and clients with high behavioral needs. Hammond Place offers a variety of life-skills programs and the staffing team is highly skilled and passionate about supporting people with disabilities. Community integration is at the forefront of the program's focus and the team has been highly successful in removing any potential barriers to service for the clients.

### **Wellington Place**

Wellington Place is a licensed CARF accredited 4 bed residential program providing placements for male teens. Youth placed within the home tend to be of high behavioral and emotional needs as well as severe addiction issues. The program at Wellington Place has been designed to assist youth in developing social skills, life-skills, and pursuing their education in order to promote independent living. A continued focus in this home is to encourage individuals to gain the skills and the confidence necessary to live within the community as independently as possible given their abilities and vulnerabilities associated with addictions.

### **Harborview Place**

Harborview is a CARF accredited one bed home providing residential placement for a young adult with severe Autism in the Comox area. This program utilizes a residential care-aide approach which involves at times staff members staying at the home for 24 hrs. Staff are required to possess skills in personal care as well as have experience supporting persons with medical needs. The staff team within the home are highly skilled and focus on providing a therapeutic environment for the young man which provides true quality of life.

## Oceanside Place

Oceanside Place is a licensed CARF accredited residential program, serving up to 5 adults full time. Established in 2002, this program was constructed for Carmichael Enterprises "from blue-print to building block", always bearing in mind the needs of the persons being served. Oceanside Place has always been open to supporting individuals from a variety of backgrounds with a wide array of needs. It has been with this inclusive philosophy that the program has become well known for its work with persons served with Autism, Attention Deficit Disorder, mental illness, and developmental delays. The staff bring with them their unique experience and knowledge, so that our service population is assured the highest quality of care. With backgrounds in: nursing; child and youth care; psychology; early childhood education; and counseling, all programs and therapeutic approaches remain current and holistic. To that end, persons served receive plans of care that are developmentally appropriate and tailored to their specific needs. Barriers to communication, learning, and behavioural challenges are overcome by giving our persons served different ways to express their needs. Oceanside Place continues to be a cornerstone in the special needs community for providing care that is dignified, compassionate, and professional.

## Sherbourne Home

CARF accredited 2 bed staffed resource for 2 individuals with severe autism and extreme behaviours. The program focuses on community inclusion, life-skills development and self-management for the individuals living in the home. The staff are dedicated to improving the quality of life and the on-going goal of community integration. The staffing team are highly skilled in crisis management and have as their main focus self-management for the individuals in the program.

## **Creekside Place**

Creekside Place is a CARF accredited adult resource with staffed component in main area, and 2 supported living suites providing placements to 5 adults. Creekside Place is on a secluded 3 acre property in South Nanaimo. Creekside provides a quiet and private location which was selected to meet the needs of a specific service population. Known province wide for supporting individuals with high behavioral needs, Creekside's team has often been called upon for Crisis Response in and around the central Vancouver Island area. The staff are highly skilled and have extensive experience supporting individuals with extreme behavioral needs. Creekside has often been utilized to stabilize individuals in crisis so that they may return home or to their community placements. This program also has as its focus programs based on choice, preference and skill development applicable to each individual receiving those services.

## **Randi's Place**

Randi's Place is a CARF accredited one bed staffed resource for a young adult with a day program and life-skills development included. This program focuses on community inclusion, life-skills development and self-management for one individual living in the home. The staff are dedicated to promoting independence for this young woman and self-management.

## **Shamrock Home**

Shamrock Home is a Home-Share model for a young adult with outreach staffing to support with life-skills development. This program provides opportunity for self-direction, independence, and increased community involvement. The service component primarily focuses on guidance and choice and provides the individual various ways to express themselves in pro-social fashions.

## **Community Outreach Team**

Community based outreach services for individuals that live independently with crisis response component. This program is quite unique as it provides services in the most non-intrusive and innovative ways possible. The team has very flexible and creative schedules to support individuals that have been deemed as “Staff Resistant” and extremely difficult to manage. The team is available 7 days a week and support individuals with appointments, court appearances, accommodation, as well as life-skills and community activities.

## **Uplands Home**

Uplands Place is a CARF accredited 2 bed program that supports youth with behavioral issues and addictions that are also involved with the criminal justice system. The program focuses on life-skills, recreation, community integration, and works closely with other agencies to ensure continuity of care with regards to case management. The program has recently begun steps towards becoming a licensed 4 bed program due to the ever-growing need for additional beds especially for youth with addictions.

## **Matt and Dan’s Home**

Matt and Dan’s is a CARF accredited 2 bed adult resource which supports 2 higher functioning young men with severe mental illness who also happen to be brothers. This program as well may utilize the residential care-aide approach wherein staff members may work a 24 hr. live-in type of shift. This program focuses on community integration, living skills, and provides a wide array of activities for the brothers to engage in.

## **Buckley Bay Home**

Buckley house is a CARF accredited dual resource that provides residential support in the upstairs and downstairs areas of the home. The home is situated on a large ocean view lot in beautiful Buckley Bay. The upper level currently has a program for a young adult who has transitioned into adult services and focuses on independent living, community mobility, and general life-skills. The lower level of the home at present is a 1 bed program providing one to one support for a young adult with autism.

## **Martin Place**

Martin Place opened in June 2017 as a 2-bed staffed residential and community inclusion program for adults who may have significant behavioral challenges. Persons served are encouraged to develop independent living skills and the program is designed based on their needs, goals, and interests. The skilled care team is flexible and supportive of the individuals in their care and they strive to ensure safety, and personal responsibility both within the home and the community. They are dedicated to improving the quality of life for persons served.

## **Nim Nim Home**

Nim Nim Home was welcomed into Carmichael Enterprises in November of 2016. This home and its skilled team of caregivers, supports 2 adults with varied physical, mental and cognitive challenges. Each adult resides on a different level within the home so they have an opportunity to live as independently as possible, while still having access to staff support which is shared. Nim Nim's team works with the individuals in the home assist them in their personal goals, and to inspire and support opportunities to connect with others in the community.

All of the residential programs provide a warm nurturing home environment that is safe and secure. Individuals are provided with their own room to ensure privacy needs are met. Each person's space is a reflection of his or her personal needs choices and preferences. From this secure base, individuals are given the opportunity and encouraged to develop their life- skills, knowledge and interests, and be active participants in the community.

Carmichael Enterprises Residential Programs offers individualized programs designed focusing on each person's strengths, needs, choices and preferences. For each individual, a multi-disciplinary team is identified by the individual and their family, usually made up of a CLBC facilitator, MCFD Social Worker, key-worker and professionals involved in specific areas of the individual's life. Individual Service Plans (ISPs) are developed based on input from the individual and his or her identified support team. ISPs are the compilation of documents and information that act as a reference guide to the individual's likes and dislikes, relevant history, medical information, support needs and strategies. Direct input from the individual is obtained from the person's personal planning book. The ISP includes specific domains relevant to their care on a holistic level.

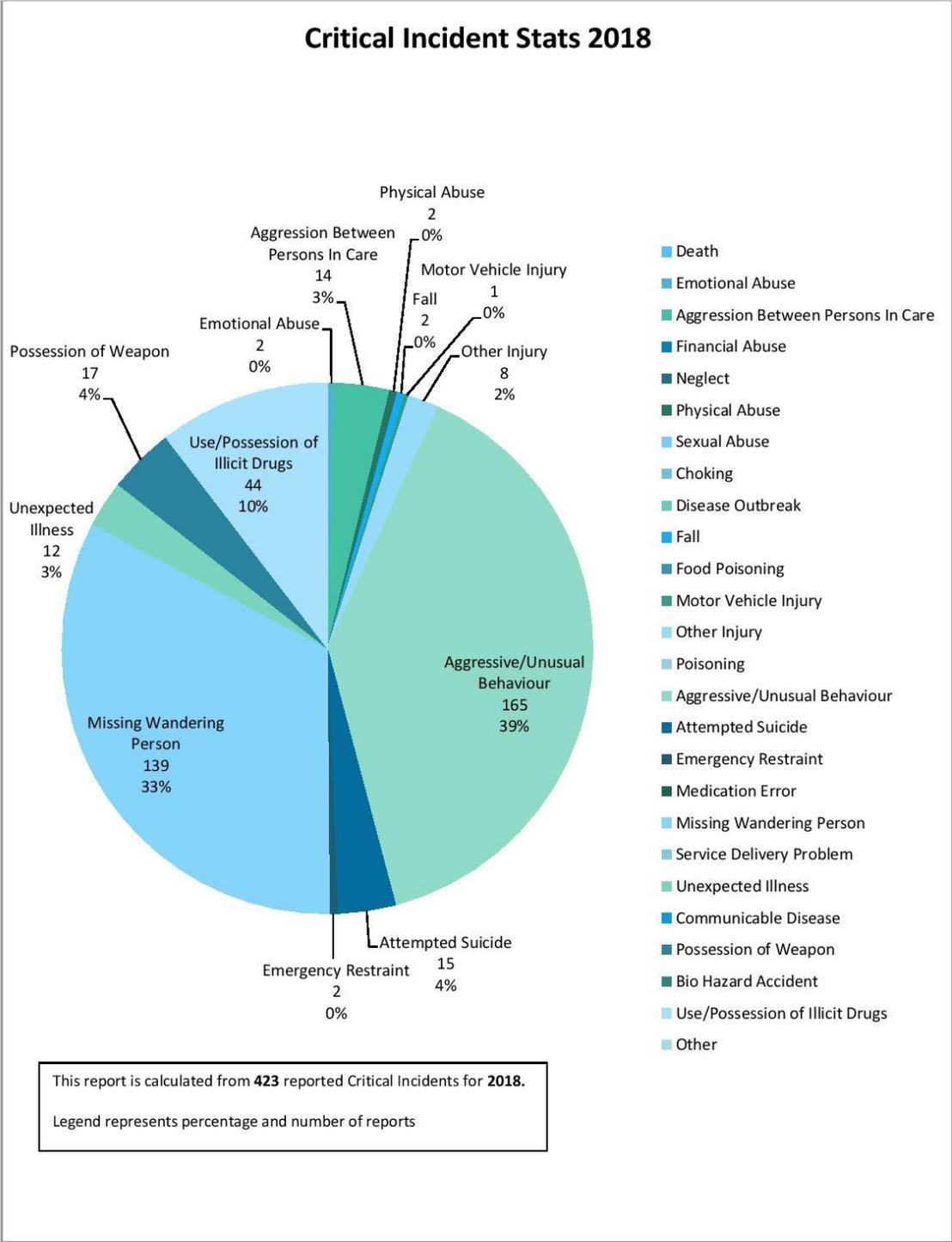
**PROGRAM OUTCOMES**

**Emergency Safety Interventions/Physical Management**

Dates: January 2018 – December 2018

Objectives	Indicator	Who Applied To	Time Of Measure	Data Source	Obtained By	Goal	Outcome
<b>EFFECTIVENESS</b>							
Decrease in violent incidents warranting the use of Emergency Safety Interventions	% of incidents involving use of Emergency Safety Interventions	All programs	On-going	Incident Reports Progress notes internal incidents, near misses	Program Staff	90%	76%
<b>EFFICIENCY</b>							
Persons served are stabilized and demonstrate safe behaviors that allow them better quality of life and increased community integration	Community access goals are met.	All persons served	Every 6 months	Short term outings and ISPs	Program staff	90%	24% of incidents involving violence and aggression required PM
<b>SATISFACTION</b>							
Staff demonstrate increased knowledge and confidence in dealing with potentially violent individuals	% or # will indicate success	Staff	Annually	Staff surveys	E.D	90%	88%

- Due to the service population this will be an on-going goal of the organization and will be part of the core training for all staff.
- Changes that have impacted: Medication changes. Staff changes, new placements some of which have severe mental health issues coupled with significant substance use which is a new service population for the organization.



## Critical Incident Analysis

In 2018 there were 423 incidents of violence and aggression in which 2 of them required emergency safety interventions. Once again this is a substantial decrease as related to physical management and the organization continues to support some of the highest needs individuals in the province.

The organization has currently expanded and will expand again this year to generate additional revenue that will assist with funding for ongoing training opportunities. SIVA Safety management training will continue to be utilized and we are hoping to have 100% of the staffing teams trained in the next few months as well as provide refreshers as well. This is again will be reliant on funding.

The main area remains in the Missing and Wandering/AWOLS by clients. These numbers were generated by 2 programs that support teens with addiction issues that are also involved in the criminal justice system. The organization will continue to utilize the reporting policies in place to ensure all members of the multidisciplinary team are well informed when a youth is absent as well as ongoing communication with community agencies such as the RCMP, probation, and funding bodies are kept informed during all AWOLS

## Behavioral Support/Self-Regulation

Dates: January 2018 – December 2018

Objectives	Indicator	Who Applied To	Time Of Measure	Data Source	Obtained By	Goal	Outcome
<b>EFFECTIVENESS</b>							
Persons served will work through a collaborative approach with staff on developing personalized person-centered safety plans	Reduction in negative behaviours Demonstrated internal locus of control	All persons served	Semi-annually as part of the persons ISP	ISP Incident Reports	Managers Key-workers, staff	100%	73%
<b>EFFICIENCY</b>							
Persons served will be provided with opportunity to develop internal focus of control thus decreasing need for Emergency Safety Interventions by staff.	Success in community as per ISP goals, reduction in internal and Critical Incident reports.	All persons served	Monthly and semi-annually	ISP Reviews Incident reports	Manager and key-workers	100%	76%
<b>SATISFACTION</b>							
Persons served and stakeholders indicate satisfaction in regards to the community access goals in integration goals for persons served.	% or # will indicate success	All persons served Stakeholder groups	Annually	ISPs Surveys	E.D	100%	100% clients 83% families

- SIVA Wise Plans are a collaborative approach to promote self-management for persons served.
- Due to the service population and the overall philosophies of the organization this will be an on-going goal of the organization.
- We will attempt to create WISE Plans utilizing a collaborative approach but in some cases will need to create behavioral support plans for our youth programs in the event youth refuse to be part of the process.
- Carmichael will also work with CBI to ensure positive behavior supports are always being utilized by staff teams.

## Community Integration

**Dates: January 2018 – December 2018**

Objectives	Indicator	Who Applied To	Time Of Measure	Data Source	Obtained By	Goal	Outcome
<b>EFFECTIVENESS</b>							
Persons served achieve goals as identified in their ISPS in relation to community access and integration	% of persons served who achieve progress toward at least one goal in their ISP and participate in social outings or activity separate from group-home	All persons served	Semi-annually	ISP reviews	Staff, Managers & key workers	95%	90%
<b>EFFICIENCY</b>							
Persons served access community resources as related to personal goals and improve social skills and quality of life.	% of persons served who access community resources independently or supported by staff	All persons served	Semi-annually	ISP reviews Short-term outing sheets	Staff	95%	100%
<b>SATISFACTION</b>							
Maximize the satisfaction with the services received.	% of participants who indicate satisfaction % other key stakeholders who indicate satisfaction	All persons Served and stakeholder groups A,B	Semi – annually/ Annually	Surveys	Data Manager	95%	83%

**Definition of Terms: Community Resources – any resource outside the program site or the person’s group home.**

Persons served are consistently integrated into the community regardless of their needs and challenges. The organization ensures all persons served are **“A Part of”** the community as opposed to **“Apart”** from the community and all teams consistently advocate for the individuals in their respective programs.

## Survey Analysis for Persons Served

The organization utilizes this survey tool on a semi-annual basis to assess the satisfaction of youth and adults receiving services. The rating system is based on 1 to 3 rating system with picture symbols to ensure accurate input from the individual, 1 indicating the person is unhappy with the way services are provided in that respective area, 2 indicating they are not sure and 3 indicating they are very happy and have no concerns. The surveys are conducted with the assistance of a key worker and or a person selected by the individual. Ratings of 1 were identified for an Action Plan.

Survey Questions	Outcomes
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- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>▪ I feel good about asking staff for help?</li> <li>▪ I am involved in daily decisions that affect my life?</li> <li>▪ I get to pick the clothes I wear?</li> <li>▪ I am able to do what I want when I have free time?</li> <li>▪ I have regular contact with my family and friends?</li> <li>▪ I am treated with respect by staff at the group home?</li> <li>▪ People knock before entering my room or bathroom and respect my privacy?</li> <li>▪ I have my own safe and personal space?</li> <li>▪ I like the food at the home I live at?</li> <li>▪ I am familiar with the group home rules and expectations?</li> <li>▪ I go to places in the community that I want to go?</li> <li>▪ I know who to talk to if I have questions or complaints about my care?</li> <li>▪ I participate in community, social, and recreational activities which I enjoy?</li> <li>▪ My cultural and religious needs are met?</li> </ul> | <p>21 individuals surveyed</p> <p>78% “Happy” responses to indicators asked and answered 229/294</p> <p>14% “Unsure” about some questions 40/294</p> <p>7% of responses were “Unhappy” 20/294</p> <p>One client (Buckley Bay) noted they were unhappy in all of the statements 1-14. With this survey removed there were only 2% 6/294 of responses that were unhappy.</p> <p>Response will involve Residential Coordinator and Buckley Bay manager meeting with client to further explore their concerns or reason they are unhappy with support.</p> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## 2018 Total Stakeholder (Family Surveys) Completed

### Questions 1-4 re: Carmichael Enterprises organization:

23/24 (96%) total responses are all agree / strongly agree  
1 disagreed with

- I am pleased with the information I receive about the resource, the organization, and its programs prior to and during placements (HP)

### Questions 5 – 9 re: care of persons served:

25/30 (83%) total responses are all agree / strongly agree  
1 disagreed with

- Persons served are provided the opportunity to access various activities of their choice in the community (HP)
- Persons served are provided the opportunity to have direct input into their service plans on an ongoing basis. (HP)
- The organization ensures that the ISP has input from all parties listed on the support team. (HP)

2 disagreed with

- The staff ensure that the hygiene and personal care needs are consistently met. (HP & NN)

### Questions 10 – 13 re: Competency, professionalism and approachability:

23/24 (96%) total responses are all agree / strongly agree  
1 disagreed with

- Carmichael Enterprises staff ensure that the residences are maintained in a clean and safe manner and foster a homelike atmosphere. (NN)

### Questions 14 – 17 re: Overall satisfaction:

23/24 (96%) are all agree / strongly disagree  
1 disagreed with

- I feel the organization distributes adequate information regarding its programs, services, and policies.

## 2019 Employee and Professionals Survey Summary

Employees identified many strengths of Carmichael Enterprises programs and organization including comments such as:

- It's willingness to change and evolve with the clients;
- Advocating for community access for all of their clients;
- Diversity;
- Promoting staff, encouraging employees to grow and continue learning;
- Open door policy feels like staff are able to seek help and advice from managers in homes or Head Office without judgement;
- The employees.

Ideas shared for improvement of the organization continue to include a desire for more opportunities for education and training specific to diagnoses of our current and evolving client groups. Employees would appreciate more opportunities for dialogue and feedback with office personnel, as well as program managers. There were a number of suggestions relative to Human Resources i.e. seeking more staff, maintaining regular wage rate when asked to do additional hours, increase in Vacation days, or adding paid sick days in order to support health and well-being, and increased wages to assist in attracting and retaining staff.

Managers received positive feedback, with 88% of survey responses noting Agree or higher to all 6 statements. Suggestions for improvement were to ensure all staff are held accountable for tasks. Ensuring positive efforts are commented on, not just areas in need of improvement, will also support more commitment and engagement from team members. Transparency of why protocols or policies are developed or adjusted will assist the team in their understanding and may result in less resistance to the change, supporting more consistency in their application.

Feedback regarding teammates revealed there are some challenges with communicating across shifts, welcoming and considering the ideas or opinions of others, and maintaining professionalism and support of team members in the home. Ideas shared to try to address these concerns include:

- Company provided team building exercises in community or at the home;
- To follow the rule and regulations of the company and ask for help wherever one of the staff members is less experienced; always have the team spirit;
- If there are suggestions for how to deliver better care for the clients don't hesitate to voice those suggestions, share thoughts and ideas;
- I feel that because we work in a house sometimes people can become too comfortable in their role as a worker and professionalism can get lost. I would like to see a day training on keeping up professionalism. What is acceptable and what is not. How to appropriately speak to co-workers and do shift exchange. What to do when you are unhappy at work with your co-workers.
- Everyone held to same standards i.e. cleaning, doing their job and actually doing stuff with the clients.

This year we also asked our employees to share recent examples of when they felt proud in the work. They shared stories of gained confidence in development of skills, and connections with persons served who were quite challenging. There were stories of having input into client programs and service plans, the pride of maintaining a clean and safe environment, and seeing clients re-connect in the community and progress or succeed in their goals. The many examples provided demonstrate the compassion and commitment our employees have to assisting our persons served, and how fortunate we are to have them as the most important part of our organization.

Specific areas of learning desired include diagnosis specific training as mentioned previously, but some also expressed a desire to develop more practice in, or opportunity to learn about, the documentation and processes required to effectively work in a management position such as scheduling, leadership, and regulatory bodies and legislation (MCFD, CLBC, Licensing, Employment Standards, WorkSafe, etc.)

## HEALTH AND SAFETY

### 2018 - 2019

The Health and Safety goal of the organization is to provide all employees, practicum students, outside agencies, staff and persons served with a safe and healthy environment. The organization recognises that there is always a degree of risk and is committed to providing the lowest degree of risk possible.

#### **The organization is committed to:**

- Providing a safe and healthy work environment;
- Maintaining and promoting a comprehensive health and safety program;
- Establishing standards of maintenance of facilities and equipment;
- Developing safe work procedures and practices;
- Supporting and evaluating managers regarding their safety responsibilities;
- Reporting accidents to the WorkSafe BC and Community Living BC

#### **Managers are committed to:**

- Maintaining a safe and healthy work environment;
- Adequately training and supervising employees in safe work procedures;
- Enforcing safety regulations;
- Reporting and investigating all accidents;
- Inspecting work areas for hazards;
- Promoting workplace safety;
- Acting on safety recommendations.

#### **Employees are committed to:**

- Conducting themselves in a safe and responsible manner;
- Maintaining a safe and healthy work environment;
- Knowing and complying with all safe work procedures and practices;
- Reporting injuries, unsafe acts or conditions and broken equipment, immediately to their manager.

**“The organization’s health and safety committee is dedicated to providing a safe and healthy environment to all staff and persons served. The committee will work to provide appropriate policies and procedures in accordance with: WorkSafe BC, CLBC, MCFD, Community Care Facilities Licensing regulations and standards and CARF standards.”**

## Health and Safety Annual Report

### Completed Activities for 2018

- Designated time per month for the Health & Safety Coordinator to do regular site visits within both communities
- Uniformity in Health and Safety Binders
- Uniformity in Health and Safety Boards
- Uniformity in Work-Safe BC Boards
- Resources providing faxing safety drills to Health and Safety Committee
- Inclusion of pharmacy print outs for client medications in MAR
- Implementation of WHMIS symbols and Safety Data Sheets for each home
- Updated Quarterly Inspection
- Health and Safety has become a standing issue at staff meetings
- Quarterly OHS Committee meetings occurred every 3 months, MSAC occurred
- Violence in the Workplace Risk Assessment completed for Hammond Place
- Competency based training for staff in H&S and emergency preparation created
- All programs adhered to Health and Safety policy, protocol, and CARF Standards

**Dates: January 2018 – December 2018**  
**Health and Safety Outcomes**

Objectives	Indicator	Who Applied To	Time Of Measure	Data Source	Obtained By	Goal	Outcome
<b>EFFECTIVENESS</b>							
Maintain a safe, healthy clean environment	% of licensing reports that did not have a health, safety or high hazard rating	All group homes	Annually	Licensing Reports, External and Internal Inspections	Manager, H&S Rep	90%	67%
<b>EFFICIENCY</b>							
Group-homes provide clean and safe environments for staff and persons served.	H&S Inspections clear.	All group homes	Quarterly On-going	Internal Inspections	H&S Rep	100%	90%
<b>SATISFACTION</b>							
Maximize satisfaction of individuals living in home. All stakeholders report satisfaction with environment	All stakeholders indicate organization provides safe environment	All persons served and stakeholder A.B	Semi-annually, Annually	Survey to Applicable stakeholders	Managers E.D	100%	100%

## External Inspection Schedule

In addition to several inspections conducted by internal personnel, our group-homes are frequently inspected by external agencies throughout the year. Carmichael Enterprises strives to address any and all recommendations made within the context of an external inspection.

Date	Agency	Focus
Jan 2018	Nanaimo Fire Dept.	Annual Review/Inspection
Jan 2018	Western Canada Fire Protection	Sprinklers/Emergency lights
Sept 2018	BC Housing Corporation	Physical Inspections
Dec 2018	Real Insurance	Insurance Evaluations
Jan- Dec 2018	Community Care Facilities Licensing	Ongoing Inspections
January 2018	Western Canada Fire Protection	Portable Fire Extinguishers

*Internal inspections will be done by the main Health and Safety Coordinator to ensure consistency and accuracy.*

# Carmichael Enterprises Residential Programs Risk Management Plan

JANUARY 1, 2019

## INTRODUCTION

### **Person based risk management is the foundation!**

"A successful risk management plan is comprised of Identification of risk, evaluation and analysis of loss exposures, recommendations to rectify identified exposures, implementation plan review, and monitoring risk reduction in performance improvement activities for outcomes potential. Risk management is defined as the realization of unwanted adverse consequences to human life, health, property or the environment. Carmichael Enterprises' risk management plan provides the framework used for all risk management decisions and actions to ensure maximum efficiency in managing and addressing potential risks to persons-served, employees, management, stakeholders and community. Establishment and effective monitoring of the organization's risk management program consists of:

- ✓ Understanding the numerous exposures to possible loss present within the organization
- ✓ Selecting a proper risk control technique or combination of techniques that fits each identified circumstance
- ✓ Monitoring and analyzing the decisions made
- ✓ Identification of staff training
- ✓ Making changes when needed.

## General Liability

### Identification of risks to persons served:

- ✓ Medications
- ✓ Behavioral Issues
- ✓ Suicide or attempted suicide
- ✓ Personal Safety
- ✓ Vulnerability in regards to abuse and exploitation
- ✓ Community participation risks
- ✓ Vehicular accidents
- ✓ Elopement or wandering

### Crisis management/emergency response:

- ✓ Service Plan management
- ✓ Crisis Plans
- ✓ Emergency Preparedness
- ✓ Review of Incident reports and investigations through committee
- ✓ Sentinel events

## Professional Liability

- ✓ Insurance management
- ✓ Anticipated exposure
- ✓ Exposure correction
- ✓ Obtaining appropriate warranties on significant capital purchases.
- ✓ Password protected access to any internet/on-line activities by office staff.
- ✓ Contractual Agreements

## Risk Rating and classification

- ✓ Low risk would be identified and assigned level 1
- ✓ Medium risk would be identified and assigned level 2
- ✓ High risk would be identified and assigned level 3

**Risk Management/General Liability**

**Identification of risks to persons served:**

Identified Risk	Liability Particulars	Risk Control Technique	Method of Review/Timeline	Results of Review
Medications	Medication errors, Health risks to persons served	Ongoing policy development and review by Health & Safety Committee	Policy Reviews, as needed, annually	Core training in medication management will be provided to all staff by October 2019
Behavioral Issues	Safety issues for persons served, staff	Creation of safety plans, ISPs meetings with CCFL On-going work with CBI to monitor safety plans	Incident analysis, Quarterly, Safety plan reviews with Behavioral Cons.	Regular reviews with outside assistance are working at this time.
Suicide or attempted suicide	Death of persons served	Safety management evaluation/Crisis Plan	H&S Policies On-going	Currently in place
Vulnerability in regards to abuse and exploitation	Risks to persons served	All employees and volunteers who have direct contact with persons served must be screened and have thorough criminal background checks X2	On-going	No issues at this time
Community participation risks	Risks to persons served	Personal Safety Plan, SIVA	As needed, semi-annually	All clients access the community and meet their community integration goals.
Supporting Addictions Population	Risk to persons served/ risk to staff	Training for staff Re: Addictions. Revise Infection Control Plan	On-going	Newly identified risk
Elopement or wandering	Injury to persons served, community safety	Policies through H&S Committee. Managers will keep detailed contact and communication log for AWOL clients.	Annually/ as needed	Ongoing issues with AWOLS, policies in place and working.

**LEVEL 3 Classification**

**Risk Management/General Liability**

**Crisis management/emergency response:**

Identified Risk	Liability Particulars	Risk Control Technique	Method of Review/Timeline	Results of Review
Service Plan Management	Services of persons served not being met.	On-going review of ISP On-going collection of data and input from persons served and stakeholders MCFD CPOCs to be added to the ISP Process	Semi-annually/On-going	Current Service Delivery Model is very successful
Safety Plans	Injury to staff and clients/ community safety	On-going reviews of Safety Plans by Behavioral supports	Upon admission if required, In conjunction with ISP, As needed	No issues at this time
Emergency Preparedness, Sentinel events	H&S of persons served and staff	Policies through H&S Staff Training	Internal , External Inspections, Annually	H&S training for all staff required.

**LEVEL 2 Classification**

**Risk Management/Professional Liability**

Identified Risk	Liability Particulars	Risk Control Technique	Method of Review/ Timeline	Results of Review
Insurance Management	Professional liability to organization	Insurance coverage will be reviewed each year with the <b>Real Insurance Broker</b> to determine any new risk(s) and review coverage to ensure coverage is adequate	Annual review of insurance by Executive Director and broker	Adequate coverage at this time
Vulnerability of Capital purchases	Financial exposure	Obtaining appropriate warranties on significant capital purchases	Upon purchase and ongoing	Due to high costs regarding vehicle maintenance new vehicle purchases are needed.
Confidentiality breaches of Sensitive data and information	Confidentiality risks	Password protected access to any internet/on-line activities by office staff. Maintaining state of the art virus protection and firewalls for computer network. <b>Policy on internet usage.</b> <b>Review of technology and system plan through Mosaic</b>	Computer tech On-going, annually,	No issues
Contract management and accounts payable regarding funding/Missing funding	Inability to make payroll and financial obligations	Monthly review of financial statements and actuals. Request increase to current company overdraft.	On-going	Currently in place as of Jan 2019.
Vehicular accidents	Financial liabilities, Injury to persons served, staff, community members	Vehicle Insurance through ICBC (\$3,000,000) Liability. GPS Tracking in all company vehicles Policy development/ Transportation, and or upon request annual review of insurance, all staff members will submit driver's license abstract as employment condition	As needed and annually	In place and no issues

**LEVEL 1 Classification**

# Human Resources Report

**2019**

## Human Resources

To ensure the highest quality of service delivery for persons served, Carmichael Enterprises is committed to utilizing strategies and guidelines to recruit and retain qualified personnel. Our Human Resources goal as a service provider is being responsible for providing the necessary skills and knowledge needed for employees to be successful in their positions. Through regular reviews of organization standards and programs, Carmichael Enterprises identifies trends and needs and makes recommendations for continued quality improvement.

Carmichael Enterprises currently has 145 employees.

The following totals are as of December 31, 2018.

Administration	Management	Front Line Support Staff
5	14	126

Male Employees	%	Female Employees	%	Total Employees
75	51.7%	70	48.3%	145

Age	Male Employees	%	Female Employees	%	Total % of all staff
Age 19-25	4	2.8	15	10.3	13.1
Age 26-35	24	16.5	20	13.8	30.4
Age 36-45	16	11.0	12	8.3	19.3
Age 46-55	20	13.8	15	10.3	24.1
Age 56-65	10	6.9	7	4.9	11.7
Age 66-75	1	.7	1	.7	1.4

## Human Resources/Staff Training

January 2018 - December 2018

OUTCOME	INDICATOR	APPLIED TO	TIME OF MEASURE	DATA SOURCE	OBTAINED BY	TARGET	ACTUAL
<p>Ongoing funding for professional development opportunities</p> <p>Maximize skills for staff/confidence in performing their duties.</p> <p>Maximize the satisfaction with the staff reaching their educational goals</p>	<p>Ongoing Training/education for front-line support staff/ Staff skills</p> <p>Service delivery improved in all areas</p> <p>% of staff reporting skill development/confidence</p>	<p>All staff</p> <p>All areas of programs</p>	Annually	<p>Staff files</p> <p>Performance Evaluations</p> <p>Employee Surveys</p>	E.D	100%	65%

TRAINING PROGRAM 2018	STAFF ATTENDANCE
SIVA Safety Management Training	32
SIVA Train the Trainer	2
SIVA 1 Day ~ Day of Caring	12
IVA Train the Trainer ~ Recertification	3
Diagnosis Based ~ In Service	23
Health & Safety ~ In Service	35
Other	0

# Carmichael Enterprises Strategic Plan

## Summary

January 2019 to December 2019

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### Strategic Focus

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Carmichael Enterprises makes a positive difference in the lives of people with disabilities, families, and individuals as they live in the community.

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### Vision

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We envision a future where our organization provides a broad array of services for people with disabilities, families with child care needs, and all who may benefit from our services. The services we offer will be of exemplary quality. Our staff will have integrity and will be dedicated, creative, well trained, and committed to teamwork. Our work environment will be challenging and rewarding. The organization will be financially healthy allowing us to be flexible and responsive to the needs of current and potential clients. The agency will be involved in partnerships with others who share our vision and values, and provide consultation to groups and individuals as requested.

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## Values

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### QUALITY:

- We are dedicated to total stakeholder satisfaction.
- We evaluate our efforts and strive to improve.
- We make a positive difference in people's lives.
- We promote individual and organizational growth.

### TEAMWORK:

- We recognize and respond to the needs of others.
- We are committed to working together toward common goals.
- We are responsible to each other.
- We build on each other's strengths.

### STEWARDSHIP:

- We are accountable to our stakeholders.
- We manage resources effectively and efficiently.
- We plan today to prepare for tomorrow.
- We maintain financial strength.

### INTEGRITY:

- We work with a passion to do the right thing.
- We care about what we do.
- We are committed to high standards and adhere to our code of ethics.
- We keep our word.

## The organization's goals will always be:

<u>S</u> - Specific <u>M</u> – Meaningful <u>A</u> – Achievable <u>R</u> – Realistic <u>T</u> – Time Specific
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- Goal /Objective: Brief description of goal/objective and from what area or system the goal/objective originated from.
- Task/Strategy: How will this goal/objective be addressed? And through what system or modality may this goal/objective be implemented.
- Time Frame: When will goal be addressed and expected to be completed by.
- Responsibility: Person or persons responsible to accomplish identified goal or objective.
- Status Report: Additional actions required and current status of established goal.

## S.W.O.T. ENVIRONMENT SCAN

This **Environmental Scan** is a summary of the internal strengths, weaknesses, and external opportunities and threats related to the organization. This scan assists in the development of the outcomes management system.

The **time line** captures information from Jan 2018 to December 2018

Purpose of completing the scan is to:

- Maximize the positive impacts of the organization's outcomes management system
- Utilize an outcomes management system that is useful in determining the effectiveness, efficiency and satisfaction for persons served.
- Assist in planning and decision making regarding resource allocation, and future directions for the organization
- Improve systems and standards to better protect persons served and the organization against unforeseen negative events.
- Provide a better use of resources by focusing on results for persons served.
- Activities will shift to a more proactive approach to providing services.

**Process:** Discussions with key internal and external stakeholders as well as annual surveys to identify strengths, weaknesses, opportunities and threats to the organization.

### Strengths

- There is dedicated Executive, Management, and staff support for using the outcome management system as a tool to improve the overall responsiveness and effectiveness in service delivery.
- The organization continues to obtain 3 year accreditation status by CARF and received exemplary designation.
- Executive Director is readily available to all stakeholders.
- Carmichael Enterprises has been providing highly respected services for unique individuals and their families since 1998. Over the past 20 years many useful and relevant procedures, policies and practices have been developed to meet the continuing changing needs of the services the organization provides.
- Ongoing staff commitment, qualifications, consistency and knowledge of individual's needs.
- Values and philosophies through the organization's Code of Ethics
- Consistent removal of barriers to service.
- Pro-active and creative approach to specific service needs of each individual.
- Creativity regarding internal program development for persons served.
- The organization continues to be approached by CLBC and MCFD to potentially mentor other organizations seeking to obtain CARF Accreditation.

### Weaknesses

- No new funding for training has been allocated at this time and this poses problems in regards to meeting recommendations by CARF as well as Community Care Facilities Licensing especially within the youth homes. This also is very challenging in regards to recruitment.
- Currently the organization is not funded for sick days for staff and this remains a problem in regards to staff well-being and morale as staff come to work sick and must support high needs and medically fragile clients.
- Currently there are discrepancies between the 2 funding bodies in regards to staff wages which has left the organization covering increases without additional funding.

### Opportunities

- A CARF accredited organization has established formal credibility in regards to service delivery.
- Personnel have greater opportunities to share their experience in the outcome management system. This will enhance self-esteem, professional perspective and their contributions to CARF accreditation in future on-site evaluations.
- Connection to community – resources, community awareness, partnerships and networking.

### Threats

- Continued funding issues regarding training monies which leaves some programs vulnerable as it relates new service population ie: Addictions population.
- Liability has since increased exponentially at 2 programs due to new service population.
- The ability to recruit qualified and skilled staff for Youth programs has become significantly more difficult due to MCFD not providing increases to non-union service providers, this will become more challenging over next few years as unionized agencies received ongoing increases over the next 3 years.

## Identified Stakeholders

### Internal

- Persons receiving services from Carmichael Enterprises, Adults and children.
- Staff
- Management Team: Support staff.

### External

- Families and friends of persons served (Group A)
- Community Living British Columbia (Group B)
- MCFD/ CFS Social Workers (Group B)

## QUALITY EXPECTATIONS

### Individuals / Families

- Skilled staff
- Therapeutic and holistic service approach
- Welcoming
- Safe
- Resourceful staff
- Effective services
- Practical and useful services
- Respect and appreciation
- Advocacy/Person focused
- Accredited
- Barrier free environment

### Funding Sources

- Agency has proven track record in supporting high needs individuals others cannot or will not provide services to
- Qualified and well trained staff
- Accountability – deliver results
- Results Focused and Person-centered
- Safe environment
- Persons served needs are consistently met
- Multi-service programs
- Leader in training and mentoring
- Financial accountability

### Staff Expectations

- Tools or resources to do their work
- Positive, supportive, safe place to work
- Expect support from Management and Director
- On-going participation and access to agency sponsored trainings
- Strong sense of team
- Job safety
- Competitive wages and benefits/sick time

## DEMOGRAPHICS

Having a clear understanding of the people we support, their needs, and choices is very important in providing effective person-centered services and programs. The following demographic information will form the baseline data for the 2018 demographic report.

### Characteristics of Persons Served Adult/Children

#### Gender, Ethnicity, Diagnosis/ Disability

Male	Female	Aboriginal	Autism	FAS/FAE	Other	Adult	Children
54	8	13	19	20	23	56	6

#### Demographics/Funding Bodies

Nanaimo	Other Communities	CLBC	MCFD
52	10	56	6

#### Service Particulars:

Fulltime Placements	Respite	Crisis Outreach
23	1	31

## HUMAN RESOURCE GOALS FOR 2019

In conjunction with the performance improvement plan for 2018, Carmichael Enterprises has developed several goals designed to improve the human resources management within the organization these goals are as follows:

Goal	Task	Timeframe	Responsibility	Status
Ensure all new employees can drive company vehicles and transport clients	Request dates from new staff showing when they will be eligible to obtain full license and make this an employment requirement	On-going	Residential Coordinator	Improvement in this area but some staff still able to drive.
Team debriefing when incidents occur with staff and clients.	Create policy where-in written debriefing is required after serious incidents occur. Have debriefing as part of regular agenda at staff meetings	On-going	Management team, Residential Coordinator	Team debriefing occurs following significant incidents and additional supports offered to staff
Look at adding sick days for all fulltime staff members.	Another increase is coming from funded bodies, management team will discuss option of using increase for sick days and establish implementation	September 2019	Executive Director, Management team	This is reliant on contracts by both funding bodies
All staff complete core training modules in all areas as defined by accreditation standards	Re-allocate funding within global budget to pay for training.  Expansion to create revenue stream to allow for additional training	December 2019	Executive Director	Pending as funding needs to allocated

## HEALTH AND SAFETY GOALS FOR 2019

Goal	Task	Timeframe	Responsibility	Status
Competency based training for staff in H&S and emergency prep	Provide new training to all staff as per CARF recommendations	On-going	Executive Director	Will be completed by Dec 2019
Complete Workplace Risk Assessments for Work-Safe BC	Conduct staff surveys and prepare reports to identify areas for improvement	On-going	H&S Coordinator	Completed
Ensure all programs adhere to Health and Safety policy, protocol, and CARF Standards	Bring new resource(s) into line with current company Health and Safety standards	On-going	Health and Safety Coordinator	Completed
Creation of OHS Committee Mandatory 4-Hour Training Module	Create and administer training to OHS committee members	On-going	Health and Safety Coordinator	Pending
Conduct Annual Evaluation of OHS Committee	Evaluate effectiveness of OHS Committee and MSAC and identify areas in need of improvement	December 2019	Residential Coordinator, Health and Safety Coordinator	Pending

## ACCESSIBILITY GOALS FOR 2019

It is the vision of Carmichael Enterprises to continually strive for a person-centred service delivery model which is responsive, accountable and that provides opportunities for personal growth and achievement for persons with disabilities. Through the accessibility plan we are committed to consistently addressing and removing all barriers to service to ensure persons receiving services are given every opportunity to live and grow within their community.

Goal	Task	Timeframe	Responsibility	Status
Ensure organization continues to provide barrier free environments for persons served	Consistently review Accessibility Plan, and complete status report.	On-going and at management meetings	Executive Director Accessibility Coordinator	Completed
Ensure staff understand Accessibility as related to persons with disabilities	Have a regular accessibility column within the news-letter to ensure accessibility remains a constant focus of the organization	On-going	Executive Director, office staff	Completed
Ensure stakeholders understand barriers to service and are educated on how to respond appropriately	Accessibility information added to stakeholder handbook	Jan 2019-2020	Executive Director, Management team.	Will be present in 2020 handbook
The Organization has recently relocated and is more accessible physically to individuals with mobility issues	Speak with current property owner to obtain small ramp for front of building, this will also be put into the 2019 Accessibility Plan	October 2019	Executive Administrator	Small wheel chair ramp being considered at this time

## RISK MANAGEMENT GOALS FOR 2019

Carmichael Enterprises' Risk Management Plan provides the framework used for all risk management decisions and actions to ensure maximum efficiency in managing and addressing potential risks to persons served; employees, management, stakeholders and community. Establishment and effective monitoring of the organization's risk management plan consists of both professional liability and general liability.

Goal	Task	Timeframe	Responsibility	Status
Ensure organization continues to monitor its current Risk management plan	Reviews will be generated but not limited to; investigations, complaints, legal actions.	On-going and at management meetings	Executive Director Management Team	Review conducted for Dec 2019
Ensure staff understand policies as related to Risk Management	Review policies associated with and applicable to Risk management on a systemic level.	On-going	Executive Director Residential Coordinator	Added Risk management plan into Management summary for 2018
Ensure company vehicles are safe and risk free.	Ensure company vehicles are continuously inspected and maintenance schedules are strictly adhered to, service template to be filled out monthly.	On-going	Executive Director, Management team.	Completed
Maintain environments within homes that are free of violence and potential injury to clients and staff	Utilize internal screening tool/process for new placements to assess potential risks to the program as a whole	On-going	Executive Director	Currently in place.

## BUSINESS GOALS FOR 2019

In conjunction with the performance improvement plan for 2018, Carmichael Enterprises has developed several goals designed to improve the business functions of the organization these goals are as follows:

Goal	Task	Timeframe	Responsibility	Status
Internal contract review and management with MCFD	Arrange contract review with MCFD managers to address deficit	June 2019	ED	New contract numbers given to MCFD to address major shortfall
Provide additional training opportunities for all staff that meet CARF standards and address staff surveys	Put full computer lab into head office and design E-learning in house	June 2019	ED Residential Coordinator	Completed
Reduction in stress leaves and non-medical types of leaves and management of short term disability claims	Create a corporate "Wellness" program for all employees	September 2019	Executive Director, Management team	Model has been developed and is being slowly implemented
Complete internal scan of all potential talent within the organization to assist with succession planning.	Create internal Leadership and management training program covering various areas of practical hands on day to day job duties	October 2019	Executive Director	First modules to begin in September