

Annual Management Report









First and foremost,

Pathways management would like to take this opportunity to thank our staff for their boundless dedication to our mission during one of the most challenging years we have faced as a collective. There have been many lessons learned from 2020. Thank you for your perseverance and creative efforts to continue to deliver high quality, safe and engaging services and supports to our supported individuals. Pathways would not be possible without each and every one of you.

Thank you to our clients, their families and support networks for the trust and support you have placed in Pathways as we navigate through these challenging times.

We will continue to put the health and safety of our clients and staff first, and ensure you are being informed and involved as we move forward into 2021.



Why this Report?

- CARF and the Continuous Improvement Journey
- Vision, Mission & Guiding Principles

Who are we?

- Pathways at Glance
- Overview of Services & Characteristics of People we Support

Where are we going?

- Strategic Plan
- Cultural Competency & Diversity Plan
- Accessibility Plan
- Technology & Systems Plan

How are we doing?

- About the Management Report
- Stakeholder Engagement & Feedback
- Client Satisfaction Survey
- Employee Satisfaction Survey



CARF and the Continuous Improvement Journey

To continuously improve, you have to know where you have been, what you have learned, and how to get to the next step in your journey.

The Commission for the Accreditation of Rehabilitation Facilities (CARF) is an independent, non-profit accreditor of health and human services. The CARF standards are internationally recognized. Pathways believes that reviewing our services against CARF standards allows us the opportunity to continuously improve our services and demonstrate our commitment to transparent and accountable practices. Pathways to Independence received our fourth, three-year accreditation for



practices. Pathways to Independence received our fourth, three-year accreditation from CARF in December 2018 for the following programs:



This management report describes Pathways plans, summarizes the feedback we have received from our key stakeholders, and details outcomes and indicators that we use to inform our decisions and guide the next steps in our journey of continuous improvement.



Vision, Mission & Guiding Principles

Supporting people in living their best lives

Vision

"That all people enjoy a high quality of life as an accepted member of their chosen community"

Mission

"We support people in living their best lives"

We serve

"People with acquired brain injuries and/or developmental disabilities, who may also have complex needs"

Guiding Principles

Help, always

Create homes, not houses

Help everyone make a difference

Achieve more together

Take initiative in creative and resourceful ways

Embrace and contribute to new thinking

Value uniqueness, personal growth, and independence



Who are we?

Pathways to Independence is a community based agency providing assisted community living services and supports to 294 adults living with an acquired brain injury (ABI), and/or developmental disability who may also have complex needs based on their unique goals, abilities and choices. Our services include supportive housing options, centre- and community-based, employment and recreation programs, psychiatric counselling and behaviour therapy, court and justice-related services, and respite.

Operating in the Eastern Region of Ontario, with offices in Belleville and Ottawa. Pathways is fully accredited by the Commission for the Accreditation of Rehabilitation Facilities (CARF).

These supports are provided by professional staff, contracted services with community partners, professionals, family home providers and volunteers. Pathways Client Services team has primary responsibility for the provision of direct care to the people we support.





Pathways at a Glance

33

We have 33 homes and apartment buildings in the Lennox & Addington, Hastings & Prince Edward Counties and the Ottawa region.



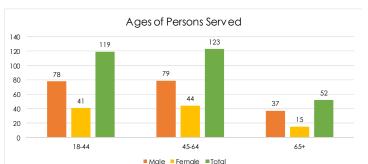


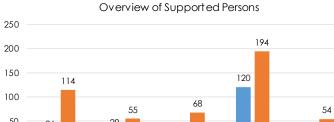
We have 5 community based program locations in Ottawa, Renfrew, Picton, Quinte West & Belleville.

We employ 488 dedicated professionals.

Women O

We support 294 men & women living with acquired brain injuries and/or developmental disabilities who may also have complex needs.





55 68 54

50 26 29 2 5

Community Supported Independent Living Family Home Community Integration Respite

■ ABI ■ DS





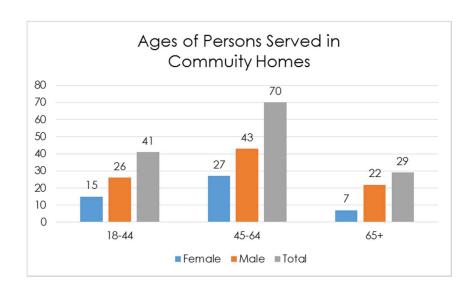
Overview of Services & the People we Support

Community Homes

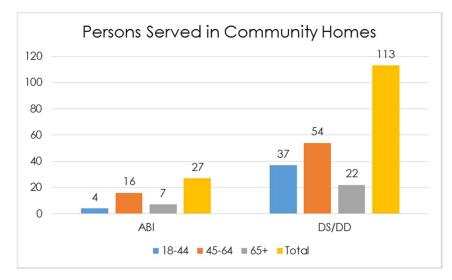
Staffed seven days a week, 24 hours a day, our supported homes provide a caring environment to small groups of adults making and sharing a home. Located in both rural and urban environments across south eastern and eastern Ontario, Pathways homes are customized to meet the physical and social needs of the people we support.

In 2020 Pathways operated 28 community homes:

- 2 in the Ottawa Region
- 3 in Napanee
- 3 in Quinte West
- **4** in Prince Edward County
- 16 in Belleville



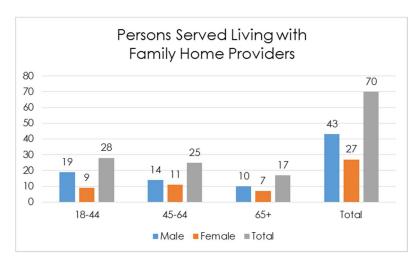






Family Home (Host Family Services)

Many adults with cognitive impairments are able and prefer to live with a Host Family. Following a rigorous approval and matching process that includes assessing shared interests, compatibility, location and access to services, a supported person lives with another family and shares in their lives. Supported by their natural family and professionals from Pathways to Independence, the Family Home program provides a stable living option to people with an acquired brain injury, a developmental disability or a dual diagnosis.



Pathways served
70
Supported persons by
40
Family Home Providers



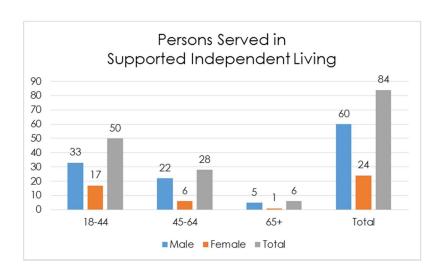


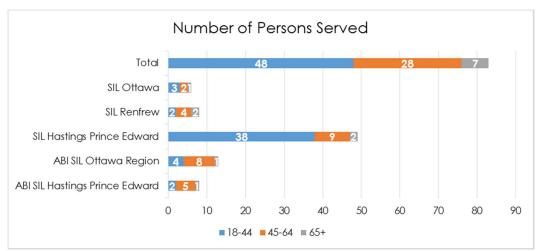
Supported Independent Living (Supported Living)

For clients who prefer and are able to live on their own, Pathways to Independence assists adults to find apartments and provides professional staff support based on their individual needs.

The agency provides Supported Independent Living programs for clients with acquired brain injury in Belleville and Ottawa, and for clients with developmental disabilities in Belleville.





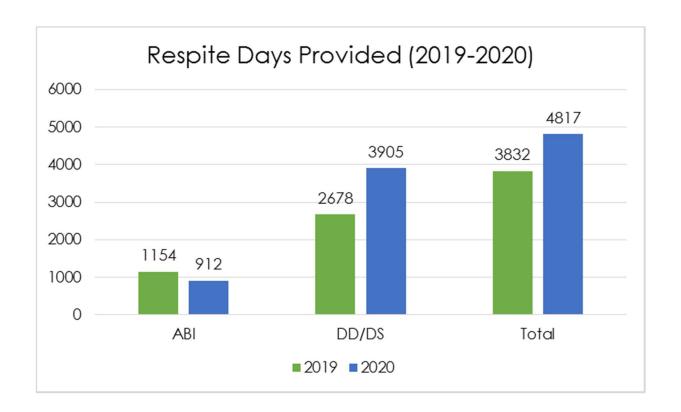




Respite Services

Pathways to Independence provides temporary accommodation at a 24 Hour Supported Home or a family home in an emergency or as a break from other living arrangements. Our contract with each Family Home Provider (Host Family) provides a number of days of respite per year. The supported person living with Host Family would live in an existing community home or family home network within Pathways for the duration of the host family's respite period.

A total of 4817 days of respite were delivered over the fiscal year.





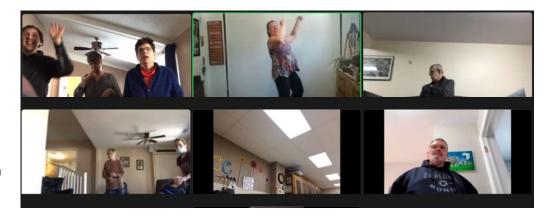
Program Services

Our centre-based and community-based programs and services are offered to the people we support as well as other members of the community who can benefit and enjoy our services within the greater Quinte and Ottawa regions. Due to the COVID pandemic, centre-based programs were not available and community-based programs were severely limited due to safety and public health restriction.

Pathways Recreation and program facilitators offered many unique and fun programs virtually to keep supported individuals engaged and connecting with family, friends and peers.

Virtual programs offered in 2020 included:

- ❖ BINGO!
- Pet Therapy
- Learning to Cook
- Crafts
- Painting
- Coffee Social
- Zumba Dance Classes
- Chair Yoga
- Musical Instrument Playing
- Card Making Friends for Kindness Program
- ❖ Men's Club



Pathways has over 150 clients participating in the Passport Program. These individuals may choose to use their funding to pay for these community-based programs. Funding for this program comes directly from the provincial government and it is up to the person who receives the money to decide how they would like to spend it. Participants with Passport funding can live independently and need not be involved in any other Pathways program.



Where are we going?

Strategic Plan

2020 marked the end of Pathways three year strategic plan. A new process to develop the next strategic plan was developed, however implementation of the process was deferred by the Board of Directors due the impact of managing the pandemic. The agency focused on keeping the people we support and our employees safe and healthy and continued to implement the goals and objectives established in the strategic and operational plans.

Highlights of these initiatives include:

| Excellence in our Programming & Services | Shift to virtual program delivery for supported individuals in group and supported independent living environments. Shifted to virtual clinical and medical appointments for supported individuals. Maintained the annual garden challenge in a "safe" way to keep clients and employees active and involved in keeping their homes beautiful. |
|---|--|
| Accessible and Appropriate Homes | Opened a new home for supported individuals.Partnered with Youth Hub to gain two apartments. |
| Extending our Reach | Continued SharePoint development and implementation. Co-led provincial Developmental Services vaccination Committee. Identified as regional lead for Infection Prevention and Control Practices (IPAC). Initiated local action team to mitigate risks from homeless population at main office building. |
| Reinforcing & Sharing our Culture | Implemented agency-wide workplace violence and risk assessment program and control measures. |



Staying safe and having fun

To keep the people
we support and
our employees
safe during
the COVID-19
pandemic
Pathways has used:



Plus approximately 3,000 smiles and 800 virtual hugs.









Cultural Competency and Diversity

Listening and Learning

CARF-accredited organizations identify leadership strategies that embrace the values of accountability and responsibility. Pathways demonstrates this strength in leadership, through its strategic planning process in a variety of areas including cultural competency and diversity planning.

An organization implements a cultural competency and diversity plan that:

- 1. Addresses 3 key areas:
 - a. Persons served
 - b. Employees
 - c. Other stakeholders
- 2. Is based on the consideration of the following areas:
 - a. Culture
 - b. Age
 - c. Gender
 - d. Sexual orientation
 - e. Spiritual beliefs and,
 - f. Socio-economic status.





Respect for diversity is embedded within Pathway's Statement of Client Rights:

Each person we support is protected and entitled to rights as identified by Canadian constitutional, provincial and other legislated rights. In addition to these protected rights, a person receiving support from Pathways to Independence has rights as they relate to the support and services received from us as a service provider. These rights (as they pertain to cultural competence and diversity) include:

To be recognized for their individuality, needs and preferences, including ethnic, spiritual, linguistic, familial and cultural factors.

Pathways to Independence Client Rights are embedded in the Agency's client-centred planning process. The annual person-centred plan is created or reviewed with each person served. Goals and actions are developed and implemented that may include supporting a person's interest in relevant aspects of their culture, religious or spiritual beliefs.



Pathways to Independence Client Rights

Each person we support is protected and entitled to rights as identified by the Canadian constitution, provincial, and other legislated rights. In addition to these protected rights, a person receiving support from Pathways to Independence has rights as they relate to the support and services received from us as a service provider. These rights include:

- 1
- To be dealt within a courteous and respectful manner, and to be free from mental physical, and financial abuse by the service provider.
- 2
- To be recognized for their individuality, needs, and preferences, including ethnic, spiritual, linguistic, familial, and cultural factors.
- 3
- To voice concerns or recommended changes about their community service, without fear of interference, coercion, discrimination, or reprisal; to be informed of policies and procedure affecting service provider operations, and to receive written information on the procedures for initiating complaints about the service provider.
- 4
- To develop and continuously adapt a Quality of Life Plan that clearly communicates to the person's support team their aspirations and goals for the future and highlights their preferences for the activity of daily living.
- 5
- To consent or refuse a community service.
- 6
- To have personal information such as records kept confidential in accordance with the law.
- 7
- To freedom of movement.
- 8
- To own and access personal possessions.
- 9
- To receive supports and services that respond to the unique needs and preferences of each person.



Cultural Competency and Diversity Plan – 2020 Achievements

| CARF | Standard Area of Issue Identifie | | live | Status/Action complete | d | Person | | Time Frame (eg. mm/yyy | (FTE and | | |
|----------------------------|---|---|-------------------|---|-------------------------------|---|-------------------|---------------------------|-----------------------------|----------------|-----------|
| Standard | Focus | ,,,,,,, | | , | | Accountable | Year Initiated | Target Date | Date Completed | Estimated | Actual |
| Culture | Building diverse and inclusive culture | "Diversity in this Day and Ac Workshop was created and delivered by frontline staff f supported Individuals introd various aspects of diversity how to be more inclusive | l or lucing | First session delivered to supporte individuals in both Q2 & Q3. | d | СН | 2019 | Ongoing | | N/A | N/A |
| Quarterly Update | Undeliv | Q1 rerable due to COVID | Uı | Q2 ndeliverable due to COVID | Und | Q3 leliverable due t | o COVID | l | Q Jndeliverable | | ID |
| Year End Report Back | Comprehensi | ve workshop created and de | livered th | roughout Q2 & Q3 of 2019. | | | | | | | |
| Culture | Building a Diverse and Inclusive Culture | Cultural competency to be incorporated into current c rights training | | | | ES | 2018 | Q1 2020 | | N/A | N/A |
| Quarterly Update | | Q1 training video – speak up, ncing, QLP, privacy, safety and religion | Plann | Q2 ing for content and integration | Initial co | Q3 mponent identifi delivered in G | | e 1st eler | ment delivered culture d | d: Video on i | religious |
| Year End Report Back | Cultural Com modules und | | ed for inte | egration into client rights training. 1 | st element s | uccessfully deliv | ered in Q4. | Developmer | nt and identific | cation of futu | ure |
| Culture | Celebrating our Diversity | The creation of ongoing ac and events to explore, pror and celebrate diversity | | Program staff create ongoing ac and events for clients that explore celebrate diversity. Cultural cooking classes held thro 2020: ✓ Cooking classes Learning through Arts and Music ✓ Virtual tours of countries mor | e and oughout workshops | SD & Program Team Staff | 2018 | 2020 | Ongoing | 200.00 | 200.00 |
| Quarterly Update | Drur | Q1 | V | Q2 irtual Cooking Classes held | Virt | Q3 ual Cooking clas | ses held | | Q Virtual cooking | · - | 7 |
| Year End Report Back | Program tear | Drumming classes held ogram team staff successfully delivered numer signing and delivering activities such as these | | activities for clients throughout the | | | | | | | |
| Culture | Celebrating our Diversity | Providing access to commu activities to strengthen dive and inclusion amongst the community and amongst o supported individuals | rsity | Supported Individuals attended t Belleville Waterfront and Multiculi Festival. | | SD & Program Team Staff | 2019 | 2021 | | 200.00 | 200.00 |

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| CARF | Program/ Area of | Issue Identified/Objec | tive | Status/Action complete | d | Person | Time Frame (eg. mm/yyyy) | | | Cost/Resource (FTE and/or \$) | |
|----------------------------|-------------------------------|--|--|--|---------------|---|-----------------------------|---------------------|-------------------|----------------------------------|--------|
| Standard | Focus | | | , | | Accountable | Year Initiated | Target Date | Date Completed | Estimated | Actual |
| Quarterly Update | | Q1 | | Q2 | | Q3 ance at Festival 2 possible due to C | | | Q | 4 | |
| Year End Report Back | Pathways is c | ommitted to supporting atter | ndance a | t community festivals and funding t | for same is c | ıllocated annual | lly. Once it is | safe to do so | o, events will b | oe schedule | d. |
| Culture | Celebrating our Diversity | Learning about other cultur participating in the Samarit Purse Project | | Individuals participate in a hands project that brings joy and hope children around the world throug shoe-boxes | to | SD & Program Team Staff | Dec 2018 | Ongoing Annually | | 200.00 | 200.00 |
| Quarterly Update | | Q1 | | Q2 | In | Q3 dividuals particip | oated. | | Q | 14 | |
| Year End Report Back | The Samaritar Continues ea | | activity the | at Pathways participates in, helping | g to provide | gifts of despera | tely needed | items for chi | ldren around | the world. | |
| Culture | Celebrating our Diversity | Providing Diversity Training t supported individuals | to Provide table top activities to develop cultural sensitivity and to learn to appreciate differences | | | SD & Program Team Staff | 2019 | Ongoing | Ongoing | 200.00 | 200.00 |
| Quarterly Update | | Q1 | | Q2 | | Q3 | | | Q | 4 | |
| Year End Report Back | Cultural and [| Diversity training is incorporate | ed into the | e learning and training plans throบถู | ghout the ye | ear. Diversity trai | ining opport | unities offere | d virtually eac | ch month. | |
| Culture | Celebrating our Diversity | Sharing Diversity and Inclusi Updates across the organiz | | Providing Diversity and Inclusivity to Managers at Quarterly manage meetings | | KG | 2020 | Ongoing | Ongoing | | |
| Quarterly Update | | Q1 | | Q2 | | Q3 | | | Q | 4 | |
| Year End Report Back | On hold due | to COVID | | | | | | · | | | |



Recognizing and Mitigating Barriers

Pathways Accessibility Plan addresses accessibility issues at our community homes, program locations and in the community at large. Pathways to Independence is committed to identifying and removing barriers that impede the ability of persons served to fully access our programs and the broader community as a whole. The plan also addresses accessibility issues that may arise for our employees and members of the general public.

Pathways to Independence Accessibility Plan is in keeping with the requirements of the Accessibility for Ontarians with a Disability Act, (AODA) Integrated Accessibility Standards Regulation 191/11 and CARF's ASPIRE Standard L: Accessibility.

The AODA Integrated Accessibility Standards Regulation (IASR) requires not-for-profit agencies that employ more than 50 people to develop accessibility policies, programs and procedures in the following areas:

- ✓ Employment,
- ✓ Information and Communication.
- ✓ Transportation, and the
- ✓ Built Environment.

AODA's Integrated Accessibility Standards have general requirements that are embedded in the 5 identified areas above.





Types of Barriers

An *architectural* barrier is any physical factor that makes accessing buildings or physical structures difficult for a person with disabilities. This may include narrow doorways, a staircase without a banister, bathrooms that are not physically accessible for all, alarms that are not able to be heard by individuals with hearing impairments, or even something as simple as the location of furniture.

An **environmental barrier** is any location or characteristic of the setting that compromises, hinders or impedes service delivery and the benefits to be gained. This may include flickering lights, a heavy scent, or a remote geographical location that restricts frequent access to services or events.

An **attitudinal barrier** is a negative attitude that people have towards persons served. Examples of this may include attitudes of neighbours or other community members about having people with disabilities living in their neighbourhood, or the lack of "person first" language used by agency personnel.

A **community integration** barrier is anything that may limit an individual's ability to access their community.



A transportation barrier is the lack of suitable and available transportation to allow a person with a disability to attend or participate in community services, programs, medical appointments, employment or other activities.

A **financial barrier** is a lack of financial resources that may require an agency to restrict or cancel a service or program.

An **employment barrier** is a policy, program, resource, tool, or way of conducting business that could restrict a person with disabilities from getting a job or doing their job well. This may include an agency only accepting hand written answers on an interview for a person with a learning disability, or giving a person with a visual impairment a job application form that is in text only.

A **communication barrier** is anything that prevents a person with disabilities from having access to information in a way that accommodates their disability and/or helps them to understand information. This may include not providing access to a TTY service, an interpreter, or a website that does not have the ability to increase font size or change colour to assist legibility.



Accessibility Plan – 2020 Achievements

| CARF or AODA | Program/Area of Focus | Issue Identif | ied/Objective | Status/Action comp | oleted | Person Accountable | Time Fi (eg. mm | | | (FTI | Cost/Resource (FTE & \$) In thousands | |
|---|--|--|---|---|-------------------------|---|--------------------|----------------|-------------------------------|--------------------------|---|--|
| Standard | 10003 | | | | | 7.0000 | Year Initiated | Target Date | | Estimated | Actual | |
| Architectural/ Built Enviro Barrier | Building Capacity to strengthen accessibility and suitability and planning | Housing Deve Committee to review our cui (suitability/act to support stro and ensure ac | continuously ent housing essibility/site) egic planning cessibility COVID. Committee to reconsideration and provide direction meetings, goals and outcomes and outcomes and provide direction meetings, goals and outcomes and provide direction meetings. | | connect in on on future | BC | 2019 | 2021 | On going | | | |
| Quarterly Update | Q1 Committee on hold du | | Q2 Q3 | | | | | ommittee on ho | Q4 Ild due to C | OVID | | |
| Year End Report Back | Housing committee developed and three meetings were held. Committee currently on hold and will look at further meetings in | | | | | | | ngs in 20 |)21 | | | |
| Architectural/ Built Enviro Barrier | Pathways homes renovated to accommodate accessibility | Washrooms re Crofton. Addi Dundas Street client protecti | ng mag locks to to assist in | Crofton washroom will be completed in the spring of Dundas mag lock system completed in spring of 20 | of 2021. to be | ВС | 2019 | 2020 | April 2021 | 22000 | | |
| Quarterly Update | Q1 | | | Q2 | | Q3 | | | ashrooms at Croundas proceedi | | 1ag locks at | |
| Year End Report Back | Work completed | | | | | | | | | · · · · · · · | | |
| Architectural/ Built Enviro Barrier | Pathways homes renovated to accommodate accessibility | West St comp accessible be two accessible | drooms and | West St completed Q2 | | ВС | 2019 | 2020 | 2020 | 200000 | 150000 | |
| Quarterly Update | Q1 West St renovation to be 2020 | egin spring | Renovation co | Q2 ompleted by June 2020 | We | Q3 est Street Comp | pleted | | , | Q4 | | |
| Year End Report Back | This large project began | in Q4 - March | and was over 90% | 6 complete by fiscal year e | nd with final | renovation cor | ncluded Q1 | June 20 | 020. | | | |
| Transportation | Ensuring safe and barrier free transportation of clients | Ensure all vehi appropriate for needs. Ensure are installed | | All wheelchair vans inspe Added safety shields to 5 client and staff protectio | vehicles for | BC | 2019 | 2021 | 2021 | 10000 | | |
| Quarterly Update | Q1 All Wheelchair vans | s inspected | | Q2 afety glass in Cannifton rheelchair van | | Q3 safety glass in neelchair vans | | an | Installed safety | Q4 glass in Ha | ig Rd van | |

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| CARF or AODA | Program/Area of Focus | Issue Identifie | titiod/Objective Status/Action completed | | Person Accountable | | Time Fran (eg. mm/y | | Cost/Resource (FTE & \$) In thousands | | |
|---|---|---|--|---|--|------------------------------|------------------------|----------------|---|----------------------|--------|
| Standard | 1000 | | | | | | Year Initiated | Target Date | Date Completed | Estimated | Actual |
| Year End Report Back | Installing safe protective | barriers in multipl | e vans has add | I to the safety and security f | or both clier | nts and staff. | | | | | |
| Architectural/ Built Enviro Barrier | Ensuring the safety of clients, staff and visitors | Parking and traf addressed to er safety and secu Pathways Increase lighting safety and add | nsure the rity on site at g to ensure | "One way" parking through being breached. Parking to ensure the flow of traffic Office was controlled and of public traffic ensured. I Wheel Chair ramp built at building and three new Whorking spaces added. Added new LED lighting to parking lots and around the building. Installed fencing the office to add addition protection. | arm install c at Head I the safety New rear of heel Chair o all ne main behind | ВС | 2019 | 2020 | 2020 | 35000 | |
| Quarterly Update | Q1 | | Dorl | Q2 ing arm installed | Liabti | Q3 ng and fencing | r installed | · | | Q4 | |
| Year End Report Back | All projects were succes | sfully completed. | Fair | ung arm installed | <u>Ligniii</u> | ng ana tencing | girisialiea | | | | |
| Information/C ommunicatio n Barrier | Employees understanding of the Accessibility for Ontarians with Disability Act (AODA), and the public service responsibility when supporting clients in the community | Inclusion of AOE all new hire orie | | Mandatory orientations he hiring cycle – ongoing thro the year. | , | ML | Ongoing | Ongoin g | Ongoing | N/A | N/A |
| Quarterly | Q1 | | | Q2 | | Q3 | | | | Q4 | |
| Update Year End Report Back | Ongoing AODA training has beer | | grated into Path | Ongoing nways orientation and onbo | arding proc | Ongoing esses for some | time and a | continues t | | Ongoing e. | |
| Information/C ommunicatio n Barrier | Strengthening the access to services and information that is convenient, clear and understandable. | Pathways writte and some client policies difficult understand and | specific to | Supportive employment p reviewed, and document and their content were up ensure that they were simple asily understood. | s/forms odated to | DP CR | 2018 | 2020 | Ongoing | N/A | N/A |
| Quarterly Update | Q1 On hold due to | COVID | On h | Q2 old due to COVID | Oı | Q3 n hold due to (| COVID | | On hold | Q4 d due to COVID | |
| Year End Report Back | | | | more simplified versions we | | | | nalysis to i | | | |
| Information/C ommunicatio n Barrier | Strengthening the access to services and information that is | Review of the A Ontarians with a Act's requireme all employees w | n Disability nt to ensure | Continue to identify and work directly with Identified employees who require accessible information and ensure that they fully | | DP JM | 2018 | Ongoin g | Ongoing | N/A | N/A |



| CARF or AODA | Program/Area of | Program/Area of Focus Issue Identified/Objective | ed/Objective | Status/Action comp | oleted | Person Accountable | | Time Fran (eg. mm/y) | | Cost/Resource (FTE & \$) In thousands | | | |
|---|--|--|--|--|--------------------------------|------------------------------|-------------------|-------------------------|--|---|------------|--|--|
| Standard | 1000 | | | | | | Year Initiated | Target Date | Date Completed | Estimated | Actual | | |
| | convenient, clear and understandable | identified disal access to the emergency m information in accessible to t | agency's easures a format that is | understand the policies of procedures of the agency Provide accommodation interview process for emplearning disabilities. | y. s in the | | | | | | | | |
| Quarterly | Q1 | | | Q2 | | Q3 | | | 1 | Q4 | | | |
| Update | Ongoing | | | Ongoing | | Ongoing | | | Ongoing established for employees and candidates | | | | |
| Year End Report Back | with learning disabilities | o work directly v | with identitied inc | dividuals to ensure a smoot | n, well inform | ea ana positive | s establishe | ed for employ | ees ana ca | naiaates | | | |
| Information/C ommunicatio n Barrier | Strengthening the access to services and information that is convenient, clear and understandable | | implementation of tools for managers to use throughout the recruitment process that are streamlined and easy to understand | | 2018 | 2020 | 2021 | N/A | N/A | | | | |
| | | | | Increase in the successfu employment of individua desk; maintenance crew | ls: Front | | | | | | | | |
| Quarterly Update | Q1 On hold due to | COVID | On h | Q2 old due to COVID | 0 | Q3 n hold due to (| COVID | | On hold | Q4 due to CO | VID | | |
| Year End Report Back | On hold due to COVID | 00110 | | 0.0.000 | , , | | 301.5 | | 31111313 | 400 10 00 | | | |
| Information/C ommunicatio n Barrier | Strengthening the access to services and information that is convenient, clear and understandable | Ensure Pathwo content is con AODA regulati new AODA rec organizations a accessibility of content that the addition, any of they do not over control over as must also be con | npliant with ons. Under quirements, must ensure the any web ney own. In content that wn, but have a third party, | To meet the deadline WG standards, Pathways has back end wok to ensure website, including web-b are accessible. | begun all that their | DP CR | 2021 | 2021 | 2022 | N/A | N/A | | |
| Quarterly Update | Q1 | | | Q2 | | Q3 | | | Back end wo | Q4 ork complet | ed | | |
| Year End Report Back | In Q4 all back end work for the visually impaired. | was completed | by external serv | ce provider. New website | under develo | pment with tex | kt hovering | explanati | ons over imag | jes to expla | in content | | |
| Attitudinal Barrier | Perceptions of persons with developmental disabilities, acquired brain injury and those with dual diagnosis in | Highlighting ar the accomplis people with di public Pathwo meetings | hments of sabilities at all | Client art is promoted an showcased throughout the Insertion of client art into Pathways calendar to be to clients, families and stannually. | ne year. the distributed | DP MR SD | | Ongoing | Ongoing | N/A | N/A | | |



| CARF or AODA | Program/Area of Focus | Issue Identifie | d/Objective | Status/Action comp | leted | Person Accountable | | | (FT | desource E & \$) ousands | |
|--------------------------|--|---|---|--|---|-----------------------|-------------------|----------------|-------------------|--------------------------------|--------|
| Standard | | | | | | | Year Initiated | Target Date | Date Completed | Estimated | Actual |
| | the broader community | | | Art shows held throughout Art show held in local Belle for people with ABI as par OBIA's Brain Injury awarer event schedule. Supported individuals invovariety of fundraising ever community: Home to Heart poinse fundraiser; Pathways and sale held at Path head office | eville library t of the ness month blved in a nts in the ettia art show | | | Build | Completed | | |
| Quarterly | Q1 | | | Q2 | | Q3 | | | | Q4 | |
| Update | On hold due to | COVID | On h | old due to COVID | 0 | n hold due to (| COVID | | On hold | due to CO | VID |
| Year End Report Back | All events halted due to | COVID and no so | ocial gatherings | | | | | | | | |
| Financial Barrier | Increased access to funds to support community engagement | Promote comm funds to provide individuals with resources to att and activities in community that not be able to a | e supported financial end events the they may | Pathways Foundation Cor Access Plan budgets \$5,00 variety of events and active supported individuals Urdue to COVID, we did not this fund in 2020-21. | 00 for a vities for nfortunately | SH PM | | 2020 | 2021 | Ongoing | 0 |
| Quarterly | Q1 | | | Q2 | | Q3 | | | ı | Q4 | |
| Update | On hold due to | COVID | On h | old due to COVID | 0 | n hold due to (| COVID | | On hold | due to CO | VID |
| Year End Report Back | Unfortunately due to CC | OVID these funds v | were unable to | be accessed | | | | | | | |
| Community Integration | Perceptions of persons with developmental disabilities, acquired brain injury and those with dual diagnosis in the broader community | Build and devel relationships to employability of disabilities Engage Individu format in order social interaction | oromote the f people with wals in a virtual to continue | Further development passport program by introducing virtual programming. Continue to promote activities and accom of the agency and programming are support through mark events, materials and media. | events, plishments eople we ceting | RB SD | | 2020 | Ongoing | N/A | N/A |
| Quarterly | Q1 | 1 | | Q2 | | Q3 | | | | Q4 | |
| Update | Ongoing | | | Ongoing | | Ongoing | | | C | ngoing | |
| Year End Report Back | Pathways continues to c | create and devel | op new virtual p | programming opportunities t | to support in | dividuals and p | oromote so | cial inclusi | on | | |
| Community Integration | Perceptions of persons with developmental disabilities, acquired | Promote and as individuals to be volunteers and | successful | Pathways supported indiv successful employees and volunteers within their con | k | RB SD | Pre 2013 | Ongoing | Ongoing | N/A | N/A |



| CARF or AODA | d Program/Area of Issue Identified/Objective | | d/Objective | Status/Action comp | leted | Person Accountable | Time Frame (eg. mm/yyyy) | | | Cost/Resource (FTE & \$) In thousands | |
|-------------------------|--|-------------------------------------|----------------------|---|--|-----------------------|-----------------------------|----------------|-------------------|---|--------|
| Standard | | | | | | | Year Initiated | Target Date | Date Completed | Estimated | Actual |
| | brain injury and those with dual diagnosis in the broader community | and contributing their communiti | • | working in factories; florist coffee shops to name a feas attending college. On over 25 supported individu competitive employment 20 hold volunteer positions given time throughout the | ew as well average vals hold and over s at any | | | | | | |
| Quarterly | Q1 | | | Q2 | | Q3 | | | | Q4 | |
| Update | On hold due to | COVID | On hold due to COVID | | | n hold due to C | COVID | | On hold | due to CO | √ID |
| Year End Report Back | Supported individuals fo | r pathways did no | ot work due to (| COVID. | | | | | | | |

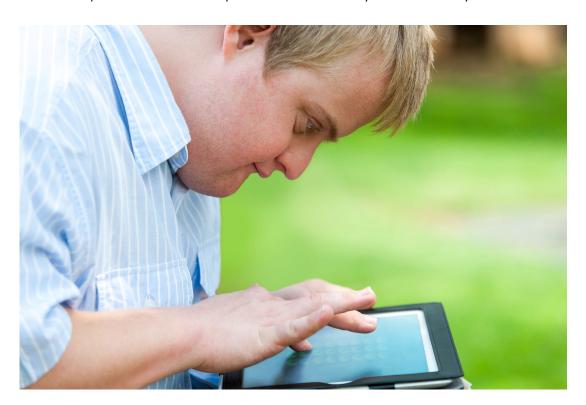


Technology & Systems

Planning for Now and the Future

The necessity of reliable, secure and accessible technology and system support is more important than ever, at Pathways and around the world. In March 2020, with the shift of our office staff to working from home and community programming pivoting to online platforms, our technology infrastructure was put to the test. In 2019, our Technology and System Plan was created to be innovative, collaborative, flexible and focused on service-delivery. Throughout 2020, a number of projects and initiatives were completed in pursuit of those principles.

The plan ensures that Pathways' technology and systems are practical, well defined and position both IM&IT and the business to successfully, efficiently and effectively deliver services to those we support. The plan will also see information and data management tools and processes developed to ensure they are secure yet accessible.





Technology & Systems Plan

| CARF Standard | Program / Area | Issue Identified/Obj | ective | Status/Action complete | t t | Person Accountable | Time Frame (eg. MM/YYYY) | | Cost/Resource (FTE and/or \$) | |
|--|--|--|---|---|-----------------|----------------------------------|-----------------------------|----------------|--|--------------|
| | 0110003 | | | | | Accountable | Year Initiated | Target Date | Date Completed | |
| Communication Technologies | SharePoint - Electronic Forms | Develop and launch 3 internal driven workflo on SharePoint | | Open source/ free application researched: Form-tool selected create electronic forms. Multiple forms generated: Static Supplies (Fin), Employee Chang (HR), New Employee Form (HR), Maintenance Request (Testing 31st) | onary e Form | Sr. Mgr. IMT | 2019 | Jan 2020 | 2021 | |
| Quarterly | | Q1 | | Q2 | | Q3 | | | Q4 | |
| Update | 1 fo | rm in Test | 1 f | orm in production, 1 in test | 2 fc | orms in productio | on, 1 in test | 3 foi | rms in production, | 1 in test |
| Year End Report Back | There are 3 activ | e forms in production – completed | | d | | | | | | |
| Software | Learning Management System | Investigate COTs prod designed to administe document, track repo deliver training and educational programs their integration with SharePoint | er ort and | Deferred due to prohibitive cos associated with procurement of implementation | | Sr. Mgr. IMT | 2018 | 2020 | Deferred | |
| Quarterly Update | | Q1 | | Q2 | | Q3 | | | Q4 | |
| Year End Report Back | On hold due to c | costs involved of integra | ted with S | harePoint solution. | | | | • | | |
| Services purchased or contracted | SharePoint Implementatio n of six units. | SharePoint areas of fo Finance; Human Reso IMT; Management; Operations; Board of Directors. | | Management/office Introduction - Completed Training of executive team for Board held with Brazen Bytes – Completed. Training for phase one staff scheduled Deferred due to Covid 19 pandemic | | Zycom Vendor Sr. Mgr. IMT | 2017 | 2020 | 2021 | |
| Quarterly Update | deferred due to | | Teams. | Q2 ing – SharePoint, One Drive, Board training completed. | Во | Q2 ard portal fully op | | | Q4 w "Executive" unit work star | rted. |
| Year End Report | | | | e executive & admin assist have h | iad "Boa | rd" related site o | n SharePoint | training c | completed. Board | portal fully |
| Back | | | on the Executive unit will continue next fisc | | | Langer | 1 0000 | | 0 1 | 10000 |
| Services purchased or contracted | NAVEX Policy Tech Migration to Cloud | Premise based solution support to expire in Ju Vendor provides migra path to cloud solution | ne 2020. ation | Met with vendor regarding mig Test environment established. F tested. Records migrated. System live i | ?ecords | NAVEX, Zycom Sr. Mgr. IMT | 2020 | Jun 202 | 0 Jun 2020 | ~13000/year |

26



| CARF Standard | Program / Area of Focus Issue Identified/Objective | | | Status/Action completed | I | Person Accountable | Time Frame (eg. MM/YYY | | | Cost/Resource (FTE and/or \$) |
|-------------------------|---|--|---------------------------|--|-----------|--------------------------------|---------------------------|----------------|-------------------------------|----------------------------------|
| | Of Focus | | | | | Accountable | Year Initiated | Target Date | Date Completed | |
| Quarterly Update | | Q1 of necessary migration, ion planning | Migrati | Q2 on of premise solution to cloud | | Q3 N/A | | | Q4 N/A | |
| Year End Report Back | NAVEX Policy Tec | ch successfully migrated | to cloud | , no training required as most chai | nges trar | nsparent to user. | New admini | strative feat | ures. | |
| Software | 2008-2016 Server Upgrade | Substantial uplift from server 2008 to 2016 or virtual or hosted devic Virtual desktop Image by staff were upgrade | several ces. s used | Software and licenses purchase Installed, upgraded by Zycom Images updated. | d | Zycom Sr. Mgr. IMT | Mar 2020 | Mar 2020 | Mar 2020 | |
| Quarterly Update | Son york Lingrador | Q1 d from 2008 to 2016 | Minorro | Q2 evisions to virtual desktop image | | Q3 N/A | | | Q4 N/A | |
| Year End Report Back | | d and images updated. | | evisions to virtual desktop image | | IN/A | | | N/A | |
| Hardware | UPS replacement & installation of server room environmental monitoring gear | During the 2008-2016 upgrade, sufficient do was reserved for UPS replacement and instof network monitoring hardware: video, temperature & humid | allation | Replacement UPS requirements scoped. Servers taken offline (scheduled upgrade). UPS replaced. Server room environmental mor solutions installed, configured. | | Vendor Sr. Mgr. IMT | Mar 2020 | Mar 2020 | Mar 2020 | |
| Quarterly Update | Devices installe | Q1 d, configured, tested | Devices | Q2 s remotely monitored | De | Q3 evices remotely r | monitored | D | Q4 Devices remotely | monitored |
| Year End Report Back | Devices, installed fell within accept | | ices remo | tely monitored at intervals through | nout eac | ch quarter for var | iability or afte | er power out | ages. All enviro | nmental results |
| Hardware | Wireless Access Point and Cabling | During office move to areas formerly leased Walsh and Associates Wireless Access points upgraded throughout building, additional co was completed. | by | Dated wireless access point loci identified & replaced with updotechnology. Additional cabling installed in neoffice areas. | ited | Vendor Sr. Mgr. IMT | 2020 | 2020 | 2020 | |
| Quarterly Update | WAF | Q1 Pinstalled | Cabling spaces | Q2 g installed in some new office | Α | Q3 dditional Cabling | g installed | | Q4 | |
| Year End Report Back | Wireless Access P | · | ditional co | abling or new office areas installed | | | | | | |
| Software | Abilitii | Internal leave tracking corrupted. Solution Identified for absence tracking Solution implemented | | Vendor engaged, ADP absence reports authored for export, ADF export & scripting authored, test validated. | | Vendor, HR, Sr. Mgr. IMT | 2020 | 2021 | 2021 | |
| Quarterly Update | Reports and Scrip | Q1 oting authored, tested | | Q2 System in place | | Q3 | | | Q4 | |



| CARF Standard | ard Status/Action completed | Person Accountable | Time Frame (eg. MM/YYYY) | | | Cost/Resource (FTE and/or \$) | | | | |
|-------------------------|-----------------------------|------------------------------------|-----------------------------|--------------------------------|---------|----------------------------------|-------------------|----------------|---------------------|----------|
| | OI TOCUS | | | | | Accountable | Year Initiated | Target Date | Date Completed | |
| | | | | | Addit | ional reports & so tested | cripting done, | | · | |
| Year End Report Back | Abilitii leave tracl | king system in place, onl | ine, acce | essible. | | | | • | | |
| Hardware | Server Replacement | Replace aging Nutani; (3 modes) | x server | Purchased and installed in Mar | ch 2021 | Vendor, Sr. Mgr. IMT | 2021 | 2021 | 2021 | \$54,000 |
| Quarterly Update | | Q1 | | Q2 | | Q3 | 1 | SELHIN | Q4 approved purc | :hase. |
| Year End Report Back | Server upgrade o | completed. | | | | | | | · | |



How are we doing?

About the Pathways Management Report

Pathways primary purpose is to provide services to adults with disabilities in ways that enhances their quality of life while ensuring the most efficient and effective use of human and financial resources. Efficient and effective are terms often assumed to be about controlling costs, and in many management driven data reports, effective and efficient indicators are used that reflect costs, time used or saved, or number of instances a service or other utility is accessed. Providing data that measures a person's quality of life is extremely difficult to do in a quantifiable manner. This management report identifies measurements and data to illuminate agency growth and direction informed by our vision, mission and guiding principles. Where practical, benchmark and outcome measures have been identified with best demonstrated practices, external research, and/or past internal history and in all cases provide a baseline for us to establish goals and objectives to further enhance our services and programs.

Alternate format availability



Pathways ensures that everyone can access the same information in a format that facilitates their understanding and accommodates each person's unique requirements. If you require the information in this report in a different format, please contact Pathways and we will provide the information in a manner that meets your needs.

Our contact information is:

289 Pinnacle Street Belleville, ON K8N 4Z2 613-962-2541 356 D Woodroffe Ave. Unit 202 Ottawa ON K2A 3V6 613-233-3322



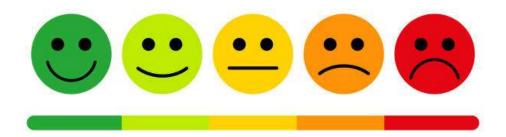
Stakeholder Engagement and Feedback

Alignment with CARF principles

To learn and grow an organization requires feedback. To change, an organization needs to set goals and measure results to improve processes and programs. The process of stakeholder feedback and meaningful outcome measurement is a key principle of CARF accreditation.

Pathways to Independence has both formal and informal channels to solicit feedback. These include:

- Client Surveys;
- Complaint and Appeal Processes;
- Web Based Anonymous Feedback;
- Employee Surveys;
- Community member involvement on Sub Committees of the Board, such as the Quality Assurance Committee;
- Client-Tenant Meetings;
- Subject specific focus group meetings with clients and employees to discuss housing needs/issues, part time callback concerns, program services transitions;
- Cascading Management forums and meetings;
- Informal feedback from community partners





Web Based Anonymous Feedback

In an effort to ensure that all people have the opportunity to provide feedback to the agency, Pathways provides an anonymous email based feedback process on our website: www.pathwaysind.com. In all situations the feedback email message is forwarded to the appropriate Manager with a copy to the Executive management team. If the individual provides their name, the Manager will respond to the person directly. We encourage people to provide their name and contact information so that we can respond directly and engage in further discussion. If the person submitting the feedback wishes to remain anonymous, the email is forwarded on to the appropriate Manager for information.

In 2020, Pathways received enquiries regarding becoming a family home provider, and if our Snoezelen room was open.

Our Snoezelen room was not open during the pandemic and the enquiry regarding the Family Home Program was followed up by the Manager of the program.





"If I were to rate Pathways out of 10, I would give it a 10".

USPEQ Client Survey, Comments Section, June 2018

Over 190 (56% response rate) clients and their support staff took the time to give us their thoughts about how things are going at Pathways and answer a survey.

98.4% overall satisfaction with services!

97.2% of clients said they would refer Pathways to a friend.

98.9% of clients said Pathways services enabled them to do things better

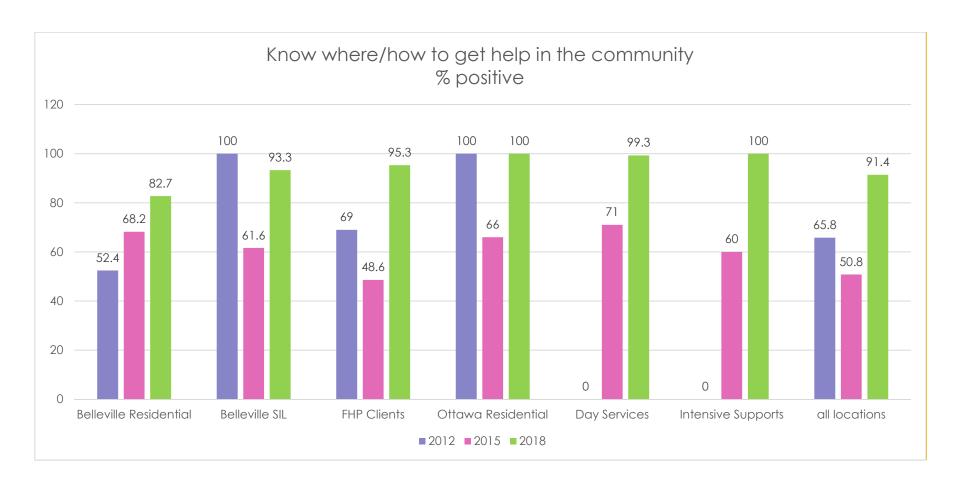
98.9% of clients said they were able to make important choices

98.9% of clients said Pathways was respectful of their culture

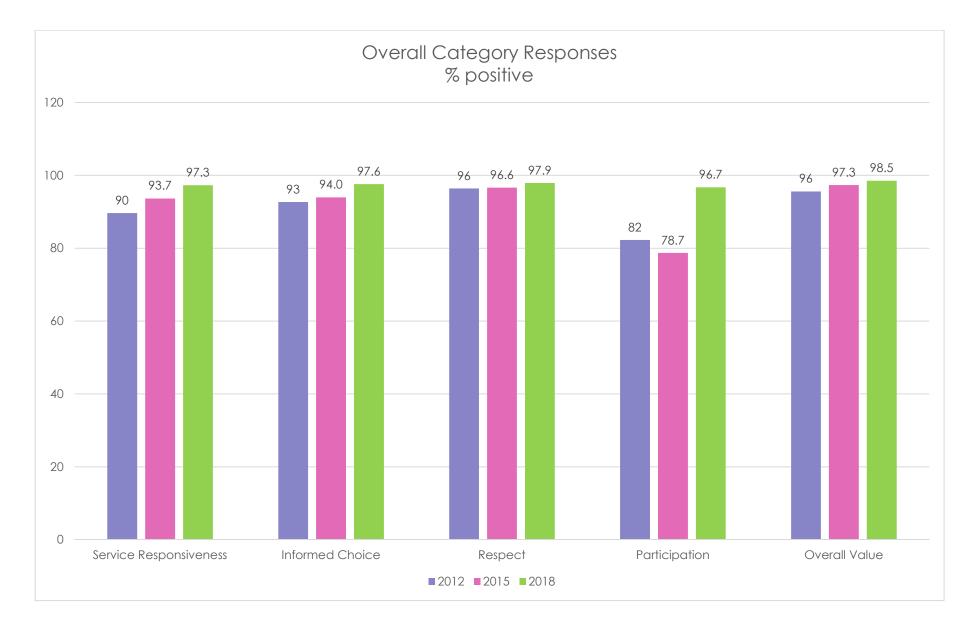


Pathways overall category results have been consistently positive since 2009 with the exception of the participation category that shows a drop from 93% positive in 2009 to 79% positive in 2015.

The key question that affected this decline in scores related to the question "I know where and how to get help in the community". Action planning with managers, staff and employees through staff meetings in 2016 and 2017 resulted in a significant improvement in this question response.

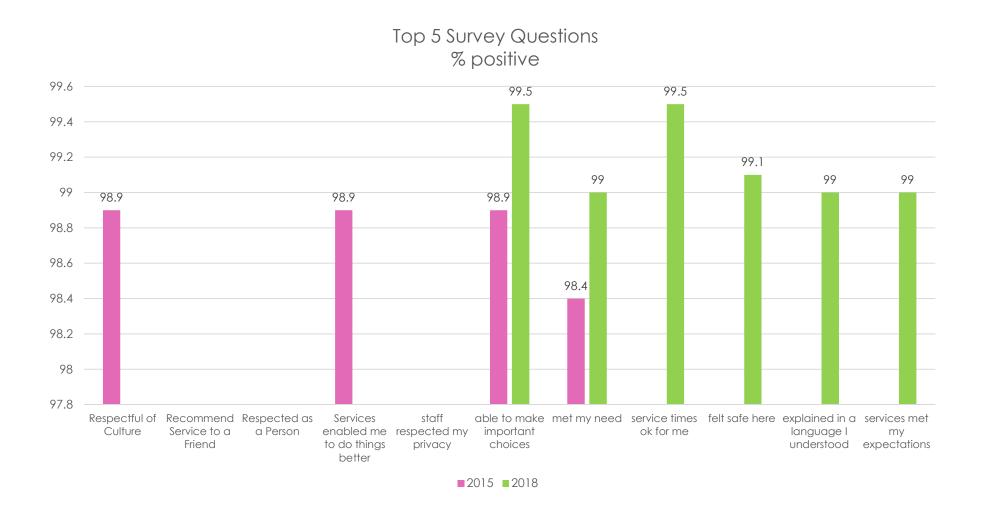








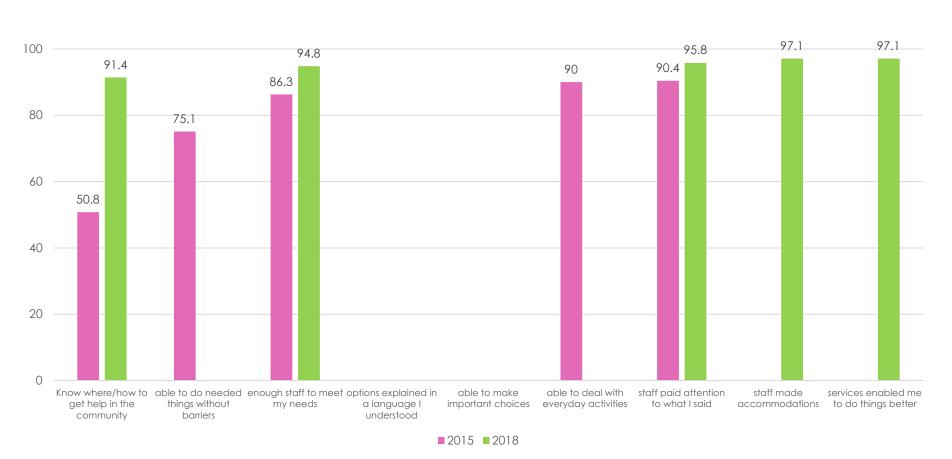
Each survey report has two quick sections that help us to understand the 5 questions that scored the highest positive responses and the 5 questions that scored the lowest positive responses.





5 Lowest Scoring Questions % positive







Employee Satisfaction Survey

In 2018, Pathways conducted an employee satisfaction survey designed by USPEQ, a survey partner of CARF. USPEQ designs and assists in the implementation of both clients and employees in organizations around the world and prepares a benchmark survey to assist agencies in comparing their results with those of similar organizations.

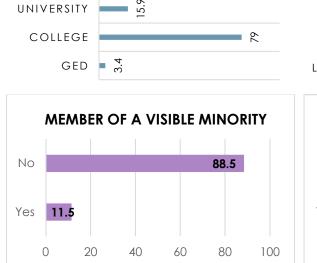
The USPEQ Employee Satisfaction benchmark survey was compiled in 2017 with predominately North American results in CARF accredited Aging Services, Behavioural Health, Employment & Community Services (ECS) and Medical Rehabilitation. Sixty-four percent of the survey results came from Canadian agencies in ECS and Aging Services. The benchmark survey results were used to compare the results of Pathways employee satisfaction survey.

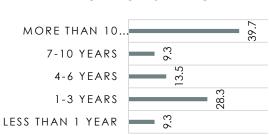
The response rate from all employee groups to the survey was 60.8%.

Demographics of Pathways Employees

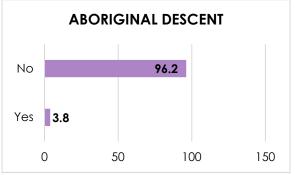
EDUCATION LEVEL

POST GRAD

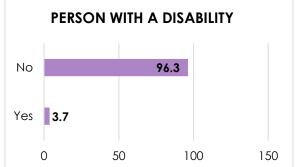




LENGTH OF SERVICE

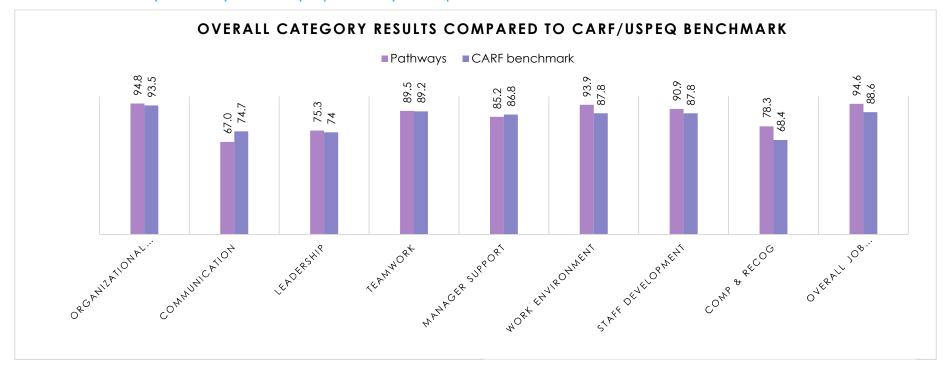


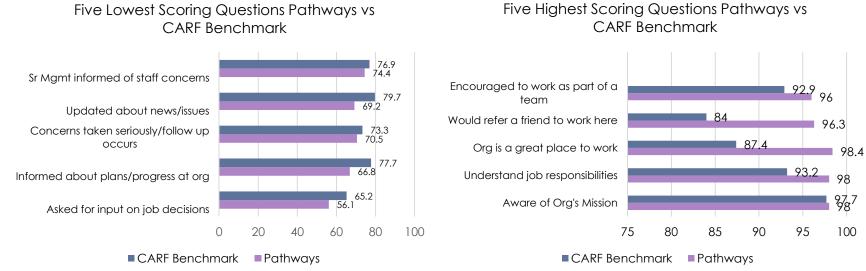






Overall Pathways survey results (% positive) compared to CARF/USPEQ Benchmark







CARF Employee Satisfaction Survey - Action Plan and Follow Up for 2020

Action Plan Overview:

The initial survey was conducted September 24 – October 5, 2018 in preparation for CARF survey. The Learning and Development Manager reviewed the agency results, benchmarked results and key themes with Management team at our quarterly "Let's Talk" meeting on November 1, 2018. Next Steps were to create an action plan to go over results and obtain feedback.

| | Survey | Response Action Plan | | |
|--|---|---|--|--|
| Develop Feedback Questions | | Meet with Sta | Meet with Staff | |
| Target 5 Result/Outcome | Questions Developed | Meet with all staff | Target 100% | |
| Learning and Development Manager in consultation with executive January 2019 | V 5 categories of questions created | 100% All staff have opportunity to provide feedback | Learning and Development Manager attended staff meetings and callback meetings January to June 201 | |
| | Review Re | esults & Gather Feedback | | |
| Overall Job Satisfaction | | Compensation and Reco | Compensation and Recognition | |
| Agree with results. Happy to be affiliated with Pathways. | | , i | Feel fairly compensated. Ottawa does not feel fairly compensated, believed there is a higher cost of living in the area. | |
| Staff Development | | Work Environment | Work Environment | |
| Staff are pleased and appreciate the training that they receive. | | Content with the environment in which the | Content with the environment in which they work. | |
| Manager Support | | Teamwork | Teamwork | |
| Feel that communication with manager is good. | | Feel that team work within homes amongst | Feel that team work within homes amongst staff is good. | |
| Leadership | | Communication | Communication | |
| Definition of leadership is different for everyone | | Has improved over the last couple of years | Has improved over the last couple of years. | |
| Organizational Climate | | Overall | Overall | |
| It appears the organizational climate is good. | | Many staff are very pleased to work at Path | Many staff are very pleased to work at Pathways. | |



Outcomes & Indicators

Pathways to Independence is accredited by CARF for the following programs;

- Community Housing,
- Community Integration,
- ➤ Host Family Services,
- Supported Living and,
- > Respite Services.

In keeping with CARF's principle of continuous improvement, every program receiving accreditation must clearly identify measurable outcome based goals and activities to build upon the delivery of services to the persons served by the agency. CARF further requires indicators for the following four categories:

- 1. **Efficiency**: measures resource allocation & use such as time spent, dollars spent, numbers served.
- 2. **Effectiveness**: measures how services and programs impact the people we support.
- 3. Service Access: measures some aspect of the barriers involved to use or access services by the client
- 4. Satisfaction: measures the extent to which the people we support and other stakeholders are happy or satisfied with the services Pathways provides.

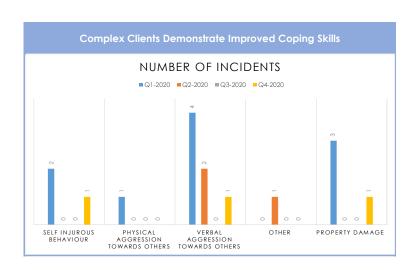
The following three pages highlight the outcomes of the Quality Assurance and Risk Management indicators for 2020.

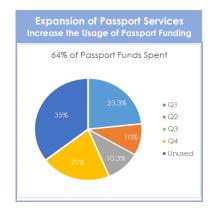


Quality Assurance

Excellence in Our Programming & Services







Extending Our Reach

Employees Able to Use & Update forms in SharePoint

Develop & launch internal workflow forms on SharePoint

Target: 3 Launched: 5

Quick Response to Clients in Crisis Calls

After hours calls responded to within

100% within 20 min

Accessible & Appropriate Homes

SIL Clients have New Apartments

Clients Transition to more Independent Living

Target: 4 Completed: 6

Reinforcing & Sharing Our Culture

Employees Working Effectively
1st Shift

88%

Provide More Online Training Resources to Staff to Facilitate Access & Reduce Cost

Transition new or revised programs to online learning

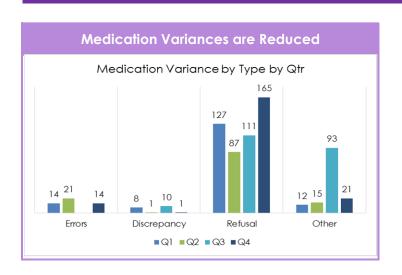
Target: 3 Completed: 5

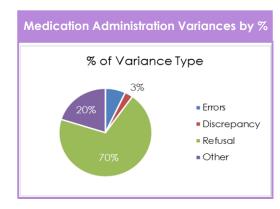
Employees Able to Navigate
SharePoint

Deferred

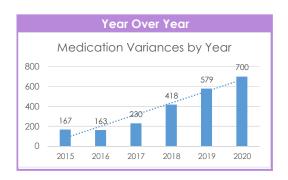
Risk Management

Clients Receive Right Medication at the Right Time (5 R's)









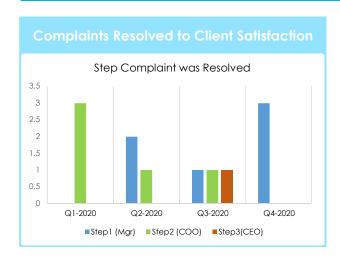
NOTES

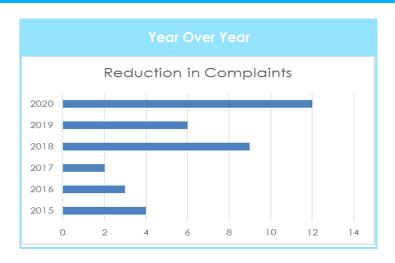
Managers are alerted when there is a med variance and complete tracking form as they happen.

The Client Services Team discusses and reviews this information regularly to determine training needs.

Most refusals are associated with SIL clients.

Client Complaints are Heard & Responded To





ACTION

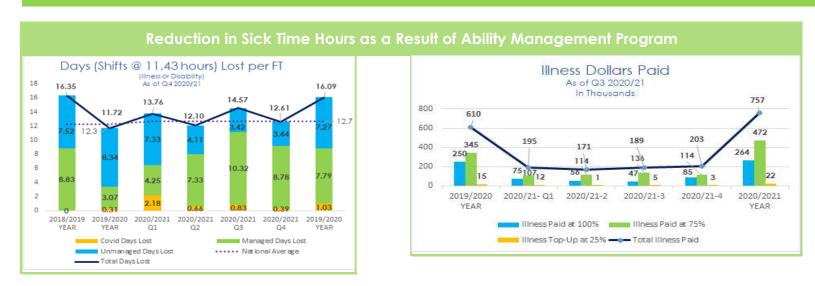
Continue to monitor and track complaints and time to respond.

NOTES

Most complaints related to COVID-19 restictions and procedures. All complaints resolved so client's satisfaction.

Risk Management

Employees Are Healthy and Attend Work as Needed



ACTION

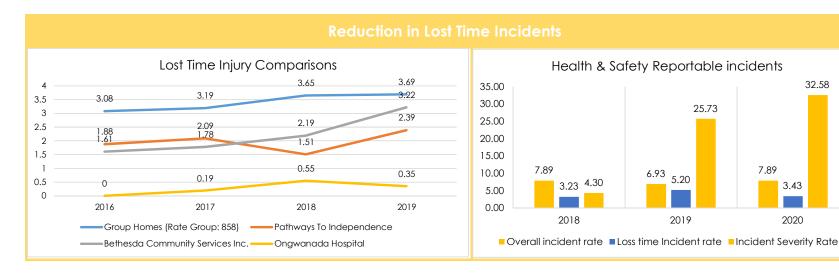
Continue to tack and provide staff with supports and services via Lifeworks program.

NOTES

Dollars paid and days lost continues to increase, due largely to COVID and employees staying home when ill or self-isolating.

In addition, the outcome of Kemptville incident on staff health. Overall, an increase in the number of hours that are managed with supporting med doc.

Employees Experience Safe Working Conditions



ACTION

Complete Workplace Risk Assessments at all worksites.

NOTES

32.58

Ministry of Labour compliances notices fully met as of October 2020 regarding Kemptville incident. Working group performing Workplace Risk Assessments.



For information about this report please contact:

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Organizational Effectiveness Officer
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