Pathways
to Independence

ANNUAL MANAGEMENT REPORT
2021

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- Vision, Mission & Guiding Principles

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Why this Report?

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 fifth, three-year accreditation from CARF in December 2021 for the following programs:

- Community Housing
- Supported Living
- Community Integration
- Host Family
- Respite Services

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.

Who are we?

Support People in Living their Best Lives

Pathways to Independence is a community based agency providing assisted community living services and supports to 397 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.

Operating in the Eastern Region of Ontario with offices in Belleville and Ottawa, our services include supportive housing options, centre and community based, vocational and recreation programs, psychiatric counselling and behaviour therapy, and respite.

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 is fully accredited by the Commission for the Accreditation of Rehabilitation Facilities (CARF).

be yourself

Pathways
to Independence
Acquired Brain Injury Services

be at home

be independent

be active and engaged

be understood

Pathways at a Glance

We support 276 individuals living with acquired brain injuries and/or developmental disabilities who may also have complex needs in our Community Home, Family Home and Supported Independent Living programs.

91
WOMEN

185
MEN

34

We have 34 homes and apartment buildings in the Lennox & Addington, Hastings & Prince Edward Counties and the Ottawa region.

An additional 121 individuals participate in our Community Integration programs or receive Respite services.

499

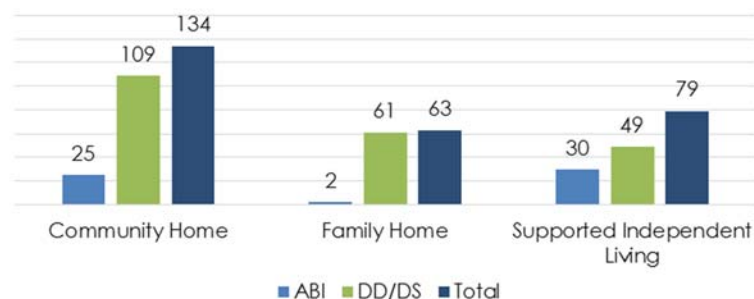We employ 499 dedicated professionals.

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

Overview of Supported Individuals

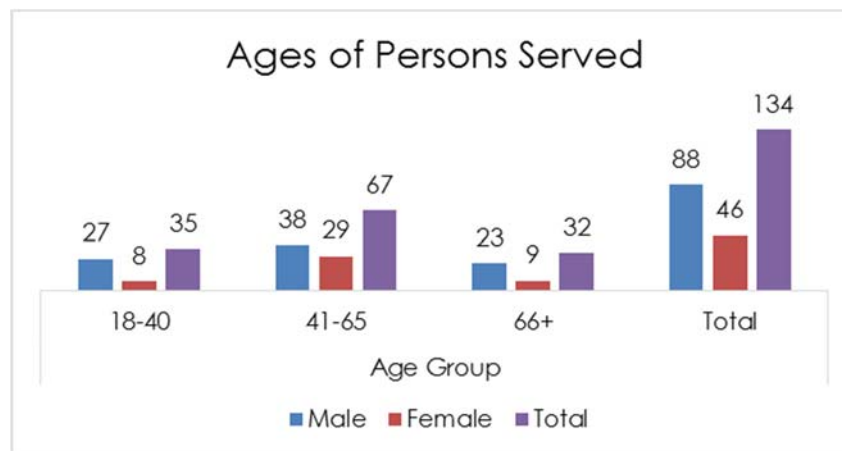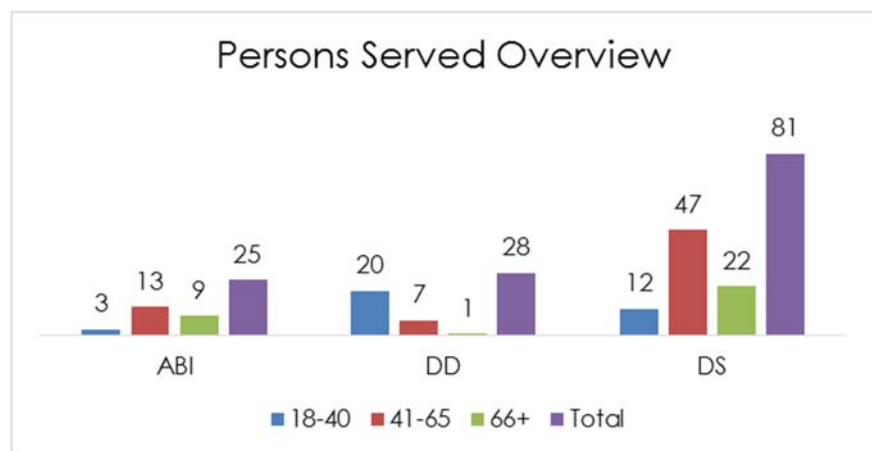|	ABI	DD/DS	Total
Community Home	25	109	134
Family Home	2	61	63
Supported Independent Living	30	49	79

Pathways
to Independence

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 Southeastern and Eastern Ontario, Pathways homes are customized to meet the physical and social needs of the people we support.

In 2021 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

Persons Served Overview

	18-40	41-65	66+	Total
ABI	3	13	9	25
DD	20	7	1	28
DS	12	47	22	81

Ages of Persons Served

Age Group	Male	Female	Total
18-40	27	8	35
41-65	38	29	67
66+	23	9	32
Total	88	46	134
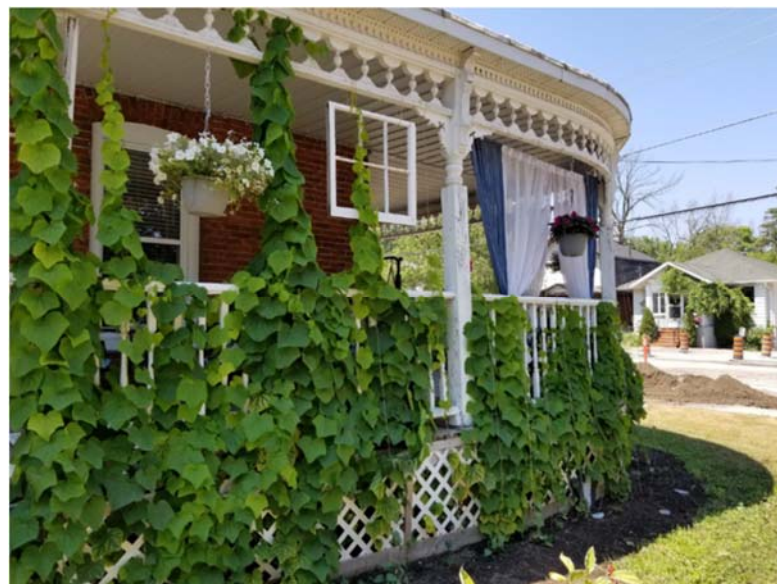
Family Home (Host Family Services)

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.

In 2021, 43 host families supported 63 individuals.

Persons Served Overview

ABI: 0, 1, 1, 2
DD/DS: 23, 25, 13, 61
Total: 23, 26, 14, 63

■ 18-40 ■ 41-65 ■ 66+ ■ Total

Ages of Persons Served

18-40: 18, 5, 23
41-65: 17, 9, 26
66+: 8, 6, 14
Total: 43, 20, 63

■ Male ■ Female ■ Total

Age Group
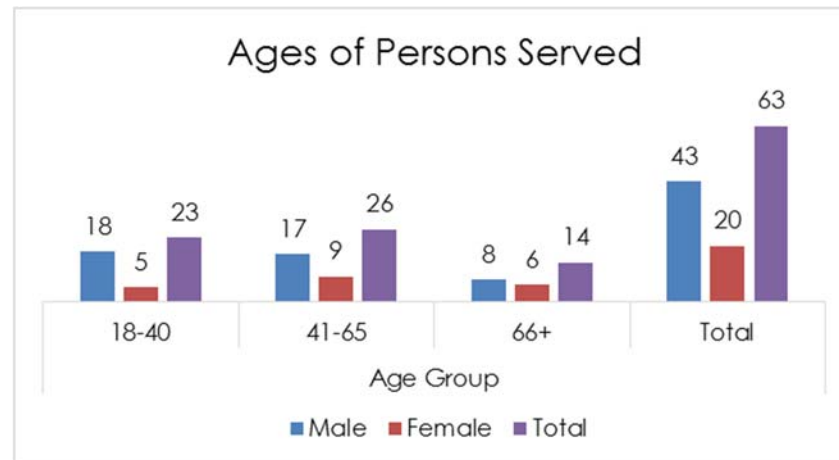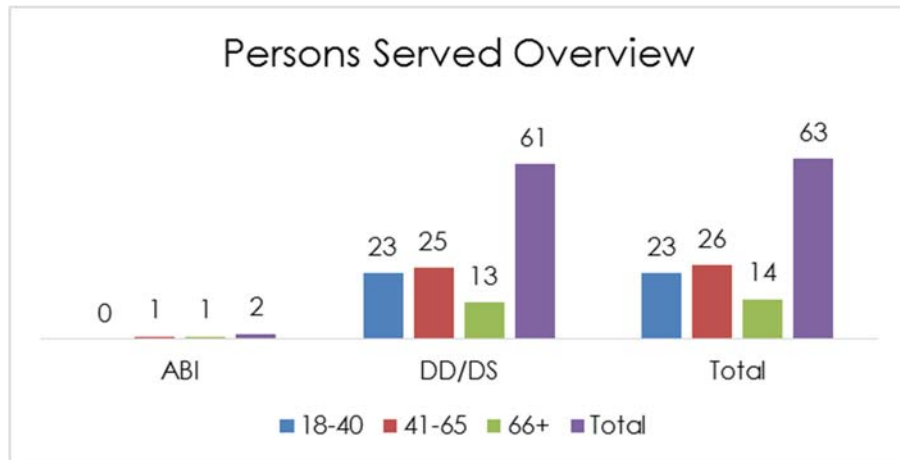
Supported Independent Living (Supported Living)

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 people living with acquired brain injury in Belleville and Ottawa, and for people with a developmental disability in Belleville.

Persons Served Overview

	ABI SIL Ottawa	ABI SIL Quinte	SIL Quinte
18-40	6	0	37
41-65	13	6	11
66+	4	0	2
Total	23	6	50

Ages of Persons Served

	18-40	41-65	66+	Total
Male	27	23	4	54
Female	16	7	2	25
Total	43	30	6	79
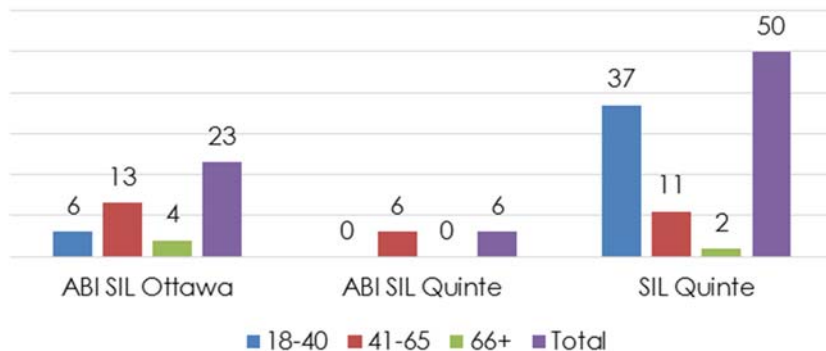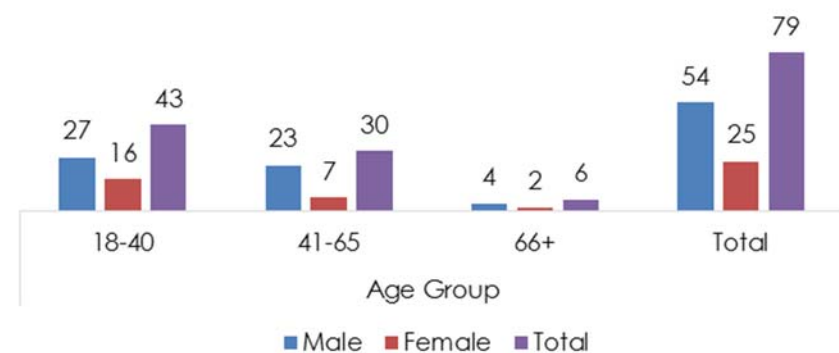
Respite Services

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 5299 days of respite were delivered over the fiscal year.
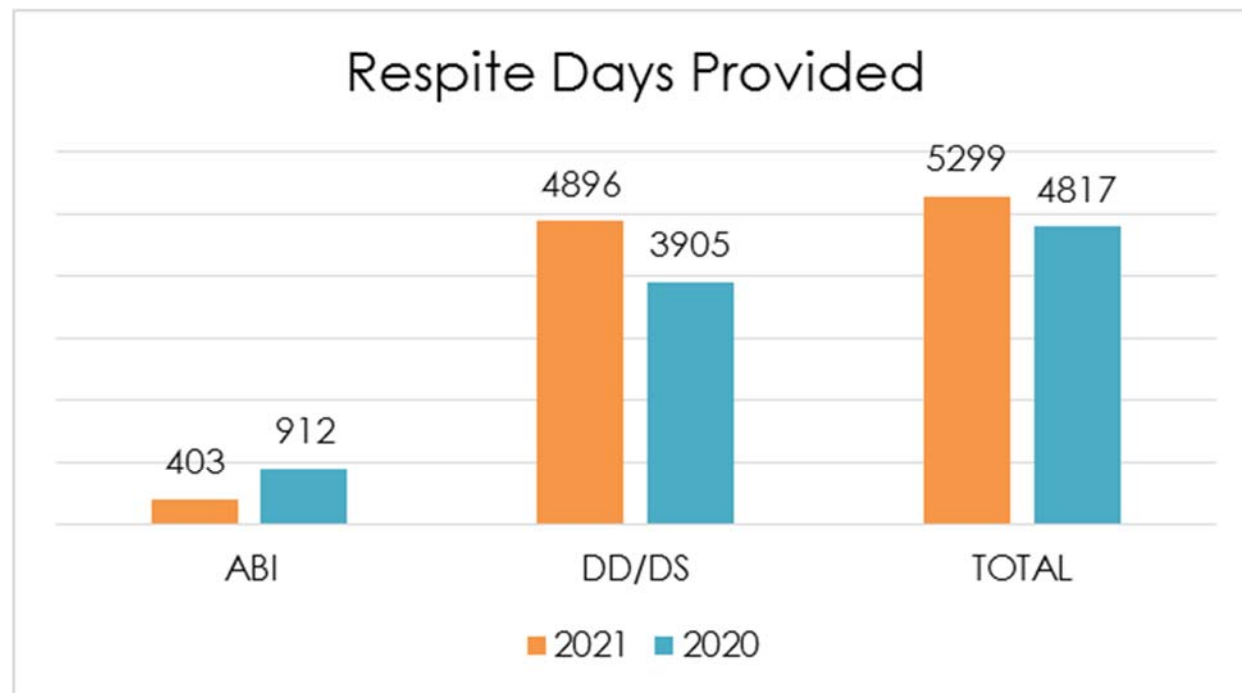
Community Integrations

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.

Instead, Pathways Recreation and Program Facilitators offered many unique and fun programs virtually to keep supported individuals engaged and connecting with fami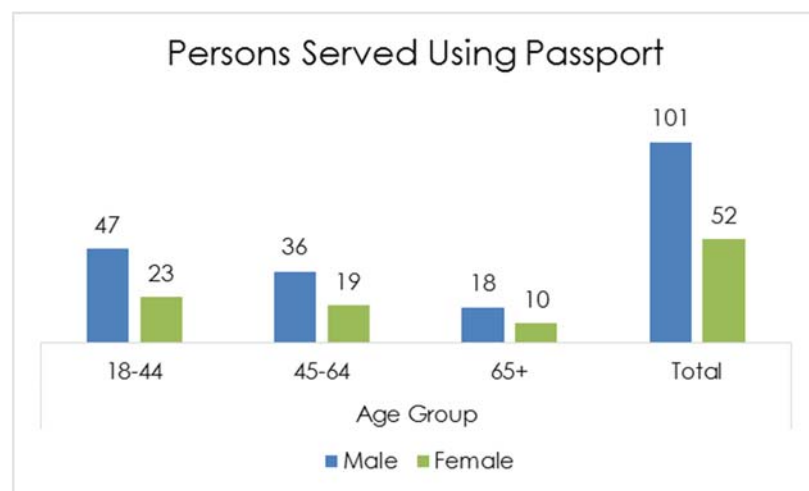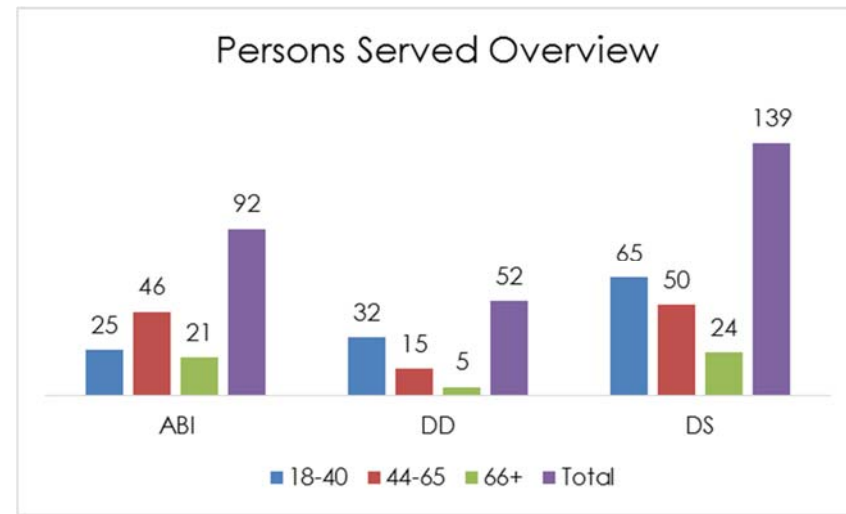ly, friends and peers. Participants completed satisfaction surveys for each program offered and the responses were reported to the Board of Directors as part of the 2021-22 Quality Assurance Plan. See page 29 for results.

Pathways also provides employment and volunteer facilitation services.

Persons Served Overview

	18-40	44-65	66+	Total
ABI	25	46	21	92
DD	32	15	5	52
DS	65	50	24	139

Persons Served Using Passport

Age Group	Male	Female
18-44	47	23
45-64	36	19
65+	18	10
Total	101	52

People participating in the Passport Program 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.

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 3B3

613-962-2541

356 D Woodroffe Ave.
Unit 202
Ottawa ON K2A 3V6

613-233-3322

Stakeholder Engagement and Feedback

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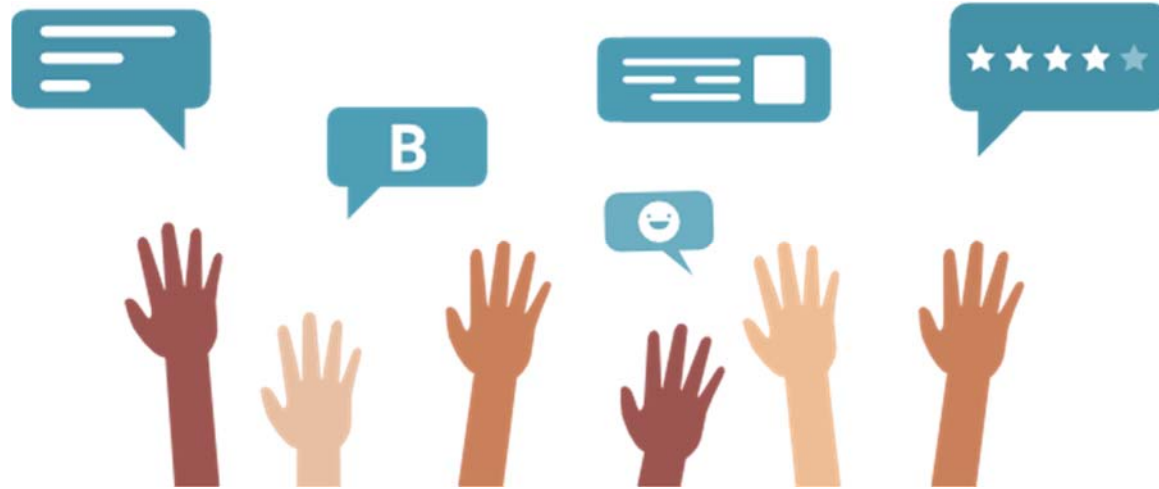
Pathways to Independence has both formal and informal channels to solicit feedback. These include:

- » 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
- » Informal feedback from community partners

Client Satisfaction Survey

In preparation for Pathway's CARF Accreditation Survey that took place in November 2021, the organization conducted a Client Satisfaction Survey in July and August. Over 175 (61% 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.

The results were shared with Pathway's staff, clients, their families and our other stakeholders in September 2021.

"I want to be me. Staff help me to achieve what I want to achieve."

uSPEQ Client Survey, Comments Section, July 2021

97% Overall Satisfaction with services!

98.6% of Clients said Pathways services and staff enabled them to do things better.

98.6% of Clients said they were able to make choices about their support that are important to them.

97% of Clients would refer Pathways to a friend or family member.

98.7% of Clients said they are able to celebrate and participate in activities related to their race, ethnic heritage, sexual orientation and religion or beliefs.

Overall Category Reponses
% Positive
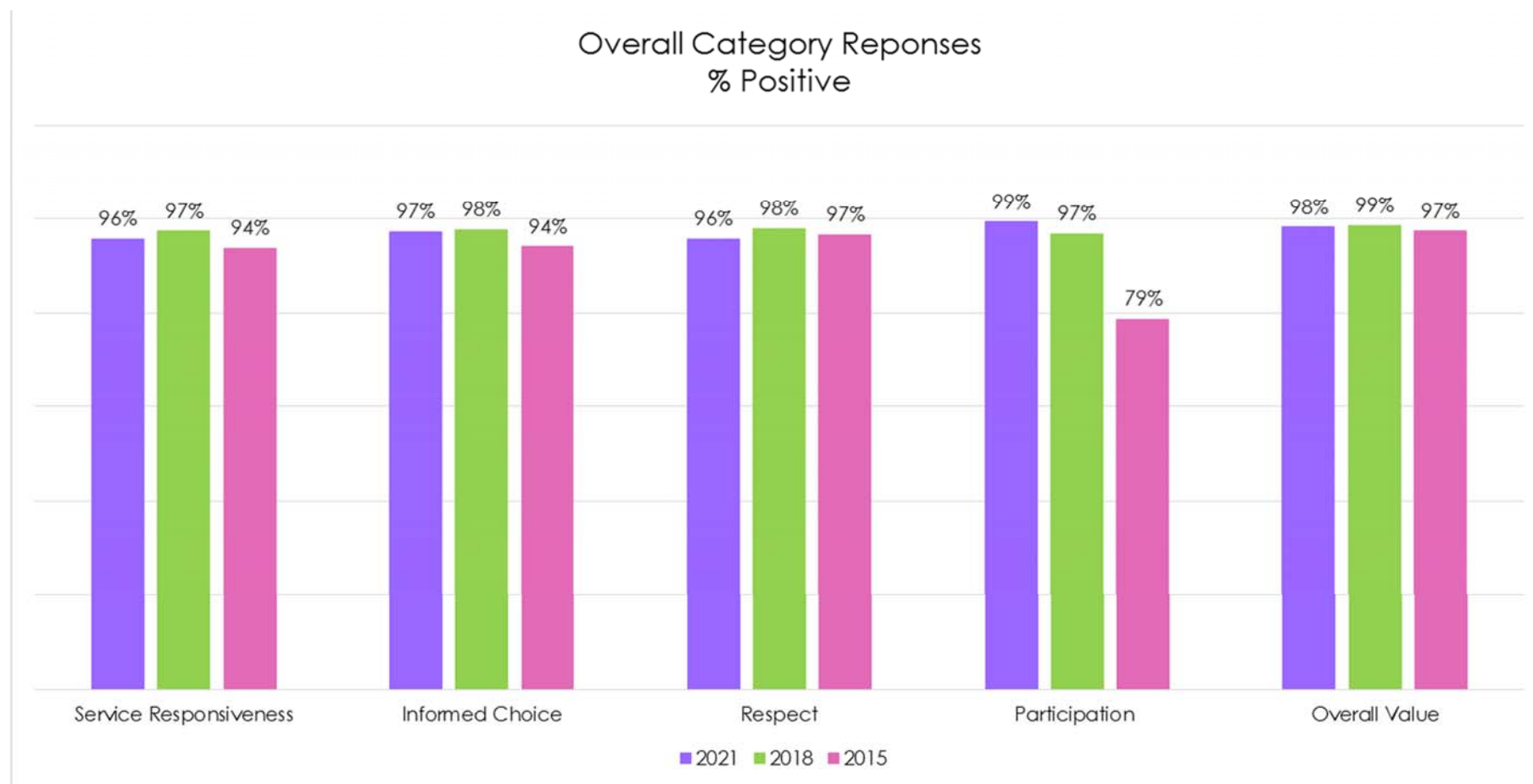
The decrease in the Service Responsiveness category is related to the question:
There are enough staff members to help me when I need it.

The decrease in the Respect category is related to the question:
Staff members do not tell other people things about me that I do not want them to share.

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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.

Highest Scoring Responses
% Positive

Category	2021	2018
Able to make important choices	100.0%	99.5%
Met my needs		99.0%
Service times ok for me		99.5%
Felt safe here		99.1%
Explained in a language I understood		99.0%
Services met my expectations		99.0%
Staff members help me with my problems	100.0%	
Staff members listen to me	99.4%	
I celebrate and participate in activities that are related to my sexual orientation	100.0%	
I celebrate and participate in activities that are related to my race or ethnic heritage	100.0%	

In 2021, questions related to personal expression and identity were included on the survey and two of the three questions scored 100%.

I celebrate and participate in activities related to my sexual orientation.
I celebrate and participate in activities related to my race or ethnic heritage.

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Lowest Scoring Responses
% Positive

Question	2021	2018
Know where/how to get help in the community		91.4%
Enough staff to meet my needs	87.3%	94.8%
Staff paid attention to what I said		95.8%
Staff made accommodations		97.1%
Services enabled me to do things better		97.1%
I am able to celebrate and participate in activities that are related to my religion or beliefs	96.3%	
Staff members do special things to meet my needs	94.7%	
I do not have to wait a long time to get support	90.2%	
Staff members do not tell other people things about me that I do not want them to share	88.5%	

■ 2021 ■ 2018

The third question related to personal expression and identity scored 96.3%, making it one of the lowest scoring questions asked.

I am able to celebrate and participate activities that are related to my religion or belief.

This response may be related to participation barriers due to COVID-19 restrictions including not attending places of worship or celebrating religious holidays with family as individuals normally would. Pathways will explore additional objectives related to expression of religion and beliefs in our 2022-23 Cultural Competency, Diversity & Inclusion Plan.

Action Planning

There are enough staff members to help me when I need it.
(87.3% positive responses / 12.6% disagree)

I do not have to wait a long time for support.
(90.2% positive responses / 9.8% disagree)

Staff members do special things to meet my needs.
(94.7% positive responses / 6.3% disagree)

Recruitment efforts are ongoing and a very high priority for the agency. While competing in a very competitive sector, Pathways is committed to ensuring the people we support have sufficient and consistent staffing support. One way we are addressing this concern, aside from recruitment efforts, is introducing a new Quality Assurance Measure on the 2022-23 Quality Assurance Plan related to Efficiency. By utilizing Workforce Now (ADP) data on sick time usage by full time direct care employees, Pathways can better understand and support staff to reduce the number of days used and therefore ensure the consistency of the staffing supports available to supported individuals. When there are consistent staffing compliments, there is greater opportunity for staff to spend extra time and give special attention to our clients.

Staff members do not tell other people things about me that I do not want them to share.
(88.5% positive responses / 11.4% disagree)

In response to this survey question outcome and as part of the Quality Improvement Plan submitted to CARF in connection to a recommendations received on Pathways Accreditation Report, the Client Services senior management team will be reviewing best practices for the sector with respect to the release of confidential information. By reviewing our protocols and procedures against best practices, we can ensure we are utilizing strategies that are implemented consistently and proactively across the agency.
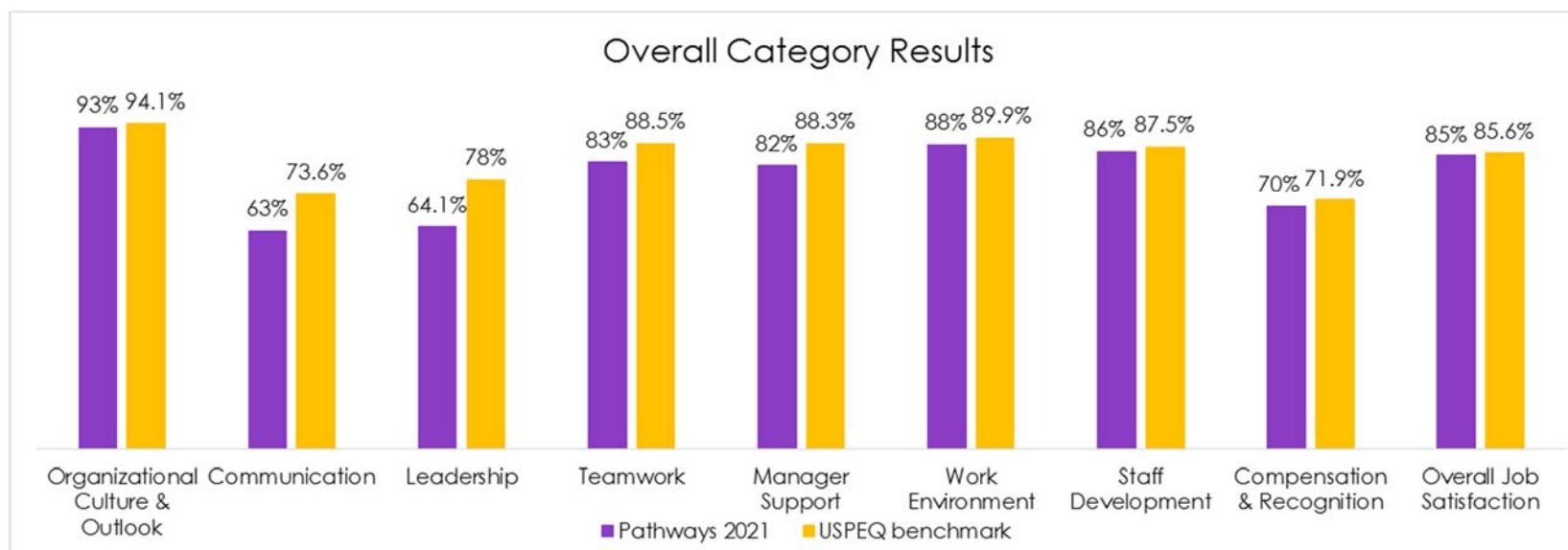
Web Based Anonymous Feedback

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 2021, Pathways received feedback related to protocols and procedures in place due to COVID-19. There was an impact on our supported individuals, their families and friends being able to spend time together and commemorate or share in anniversaries, birthdays, and other significant life events. Public Health, Ministry of Health and the Ministry of Children, Community and Social Services directives required us to make adjustments to our protocols around such social visits which was disappointing and challenging to all affected. Finding safe ways to remain connected and persevere through the temporary restrictions showed the powerful resilience of the people we support, their loved ones and our direct support staff.
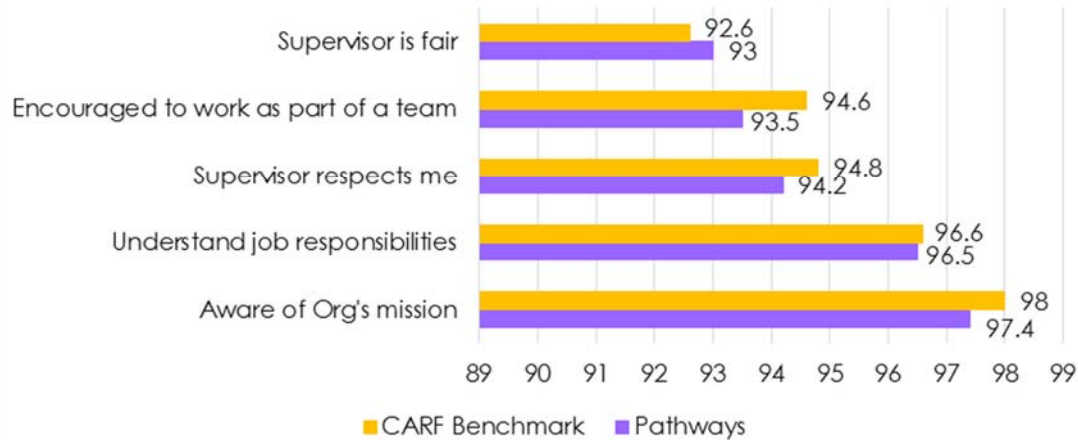
Employee Survey

In preparation of Pathway's CARF Survey that took place in November 2021, the organization conducted an Employee Survey earlier in the summer. Over 270 (56% response rate) employees participated in the anonymous, online survey and provided feedback on workplace culture and experience. The results were shared with Pathway's staff, clients, and our other stakeholders in September 2021.

Overall Category Results

Category	Pathways 2021	USPEQ benchmark
Organizational Culture & Outlook	93%	94.1%
Communication	63%	73.6%
Leadership	64.1%	78%
Teamwork	83%	88.5%
Manager Support	82%	88.3%
Work Environment	88%	89.9%
Staff Development	86%	87.5%
Compensation & Recognition	70%	71.9%
Overall Job Satisfaction	85%	85.6%

Overall Survey Outcome: **82%** Positive

The survey was designed by uSPEQ, a survey partner of CARF. uSPEQ designs and assists in the implementation of both client and employee satisfaction surveys in organizations around the world and prepares a benchmark report to assist agencies in comparing their results with those of similar organizations. The most recent uSPEQ Employee Satisfaction benchmark report was compiled in 2021 with predominately North American results in CARF accredited Aging Services, Behavioural Health, Employment & Community Services and Medical Rehabilitation. The results are comprised of survey data collected between January 2018 and December 2020 from over 64 organizations/ surveys with 11,473 responses. Overall, with the exception of leadership and communication, Pathways results were consistent with CARF benchmark data. Quality Assurance Plans are in place to address the lower scoring categories.

Five Highest Scoring Questions
Pathways vs. CARF Benchmark (% Positive)

Question	CARF Benchmark	Pathways
Supervisor is fair	92.6	93
Encouraged to work as part of a team	94.6	93.5
Supervisor respects me	94.8	94.2
Understand job responsibilities	96.6	96.5
Aware of Org's mission	98	97.4

Our employees love what they do and the people we support.

We heard that employees have respectful and open communication with their managers and collaborative, client-focused teamwork with colleagues.

Our employees want to be informed, respected and appreciated.

We heard that employees want to be more informed about agency plans and progress with an emphasis on staff support and management communication.

Action plans have been prepared to address these areas and additional efforts continue to be made to address communication and staff appreciation:

- Holiday Gift Card Distribution
- Staff Appreciation Gift Baskets
- Increased and Consistent Communications from Management on Agency News

Five Lowest Scoring Questions
Pathways vs. CARF Benchmark (% Positive)

Question	CARF Benchmark	Pathways
Updated about news/issues	79.5	59.9
Informed about plans/progress at org	78.3	53.2
Mgmt informed of staff concerns	70.1	52.7
Concerns taken seriously/follow up occurs	66.8	51.7
Asked for input on job decisions	67.1	44.4

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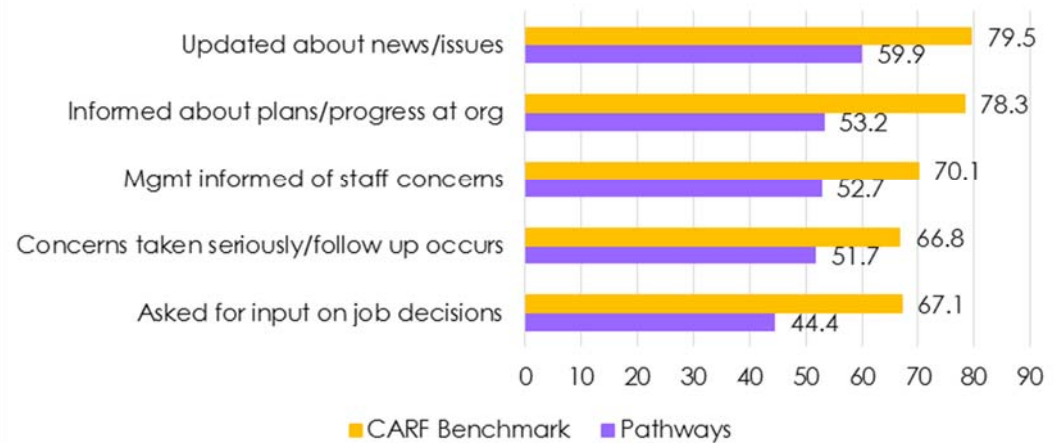
Demographics of Pathways Employees

Length of Service
- 12% Under 1 Year
- 20% 1 to 3 Years
- 24% 4 to 6 Years
- 6% 7 to 10 Years
- 39% Over 10 Years

Age
- 6% Under 25
- 29% 26 to 35
- 22% 36 to 45
- 27% 46 to 55
- 17% Over 55

Level of Education
- 16% Post-Graduate
- 15% 4 Year College Grad
- 67% College / 2 Year Degree
- 0.4% High School

I am a member of a Visible Minority
- 7% Yes
- 93% No

I am an Aboriginal person
- 1.3% Yes
- 98.7% No

I am a member of the LGBTQ2IA+ Community
- 6% Yes
- 94% No

Gender Identity
- 21% Male
- 76% Female
- 3% Gender Diverse

I am a person with a disability
- 5.8% Yes
- 94.2% No

Custom questions related to communications from management regarding COVID-19 pandemic response were included in this year's survey. The results of the questions were part of the 2021-22 Quality Assurance Plan.

COVID-19 Communication % Positive

- I am satisfied with the communication from leadership: 84.4
- I understand the information about covid as it relates to my job and worksite: 82.6
- I feel confident that Pathways created a safe work environment for me through the pandemic: 89.3
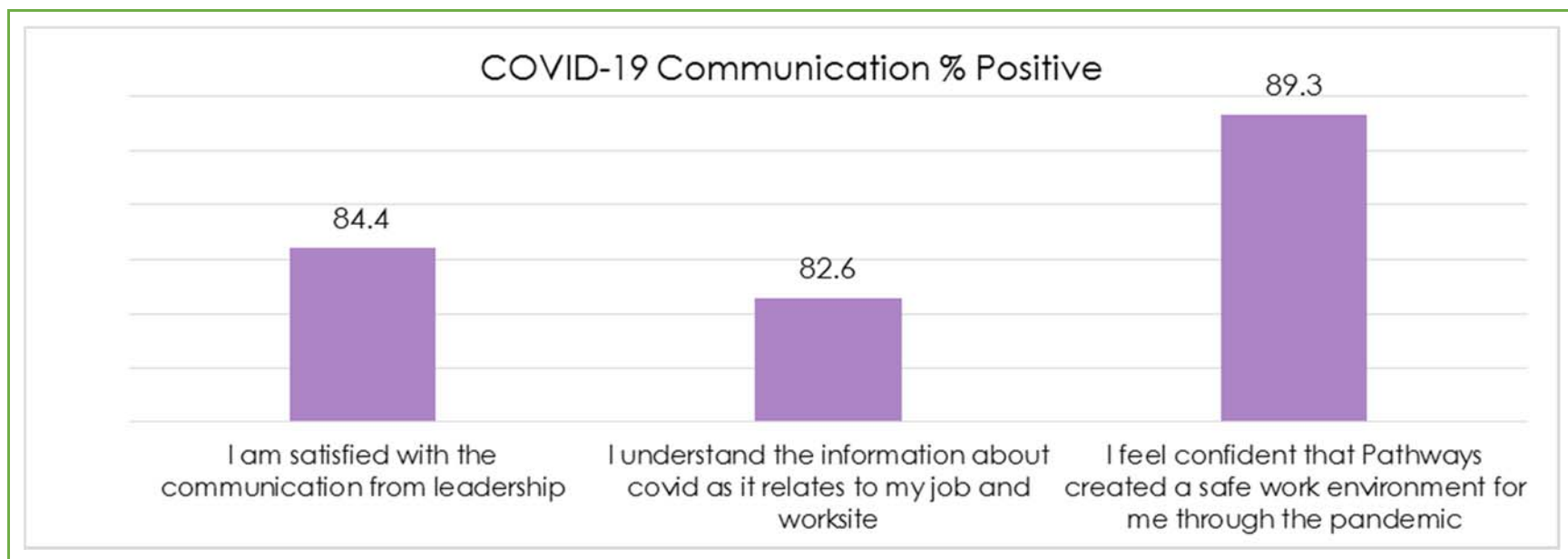
Employees felt communication was clear and that Pathways created a safe work environment.

Action Planning

Detailed agency results were reviewed against uSPEQ benchmark results and key themes were discussed with the Management team in early October 2021. In person action planning was restricted due to the resurgence of COVID Omicron cases.

The management team has begun to address the overall results in the Communication category by increasing the consistency of agency-wide updates and adding a new Quality Assurance Measure to the 2022-23 Quality Assurance Plan related to Communication Satisfaction. A quarterly 'Pulse Survey' will be conducted by uSPEQ with questions related to overall communication, job satisfaction and COVID response so the agency has more up-to-date feedback from employees and can better address action planning strategies in 2022.

At the end of 2021, there were significant changes to the Pathways Executive leadership team including the roles of Chief Executive Officer and Chief Operating Officer. After 23 years with the organization, 11 as CEO, Lorrie Heffernan retired from the position and Darlene McKenny, formerly Pathway's Chief Operating Officer, was her successor. Darlene has been providing leadership and direction to the client and clinical services teams and working to ensure successful implementation of the agency's strategic directions since 2011. As Darlene assumed the CEO position, Pathways' own Senior Manager, Intake and Clinical Services, Susan Miles, was the successful candidate for the Chief Operating Officer position.

Changes in Executive leadership such as these make an impact on agency culture. The results of the Employee Satisfaction Survey have remained part of active discussions with the Executive team and continue to inform day-to-day decision making. As the agency returns to normal operations and the efforts of Management and the Executive teams can move beyond the focus of COVID / pandemic response, professional development and leadership training will be a priority.

Where are we going?

Strategic Plan

2020 marked the end of Pathways three year strategic plan, however, it continued to guide the operations of the agency and to navigate through 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 of the 2021-22 fiscal year. A new Strategic Plan process will begin in 2022.

Highlights of these Strategic Plan initiatives include:

Excellence in our Programming & Services	• Continued to offer a wide diversity of virtual programs for supported individuals based on their interests. • Created new employment and volunteer opportunities for supported individuals once pandemic restrictions lifted. • Ensured vaccinations for COVID were available and administered to supported individuals in keeping with their beliefs.
Accessible and Appropriate Homes	• Opened a new home for supported individuals and planned for new homes in Kemptville and Renfrew.
Extending our Reach	• Continued SharePoint development and implementation. • Led provincial implementation for COVID vaccination. • 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	• Continued to recruit, orient and train new team members. • Completed Workplace Violence Risk Assessments for all worksites.

Outcomes & Indicators

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

- ✓ Community Housing
- ✓ Community Integration
- ✓ Host Family Services
- ✓ Supported Living
- ✓ 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.
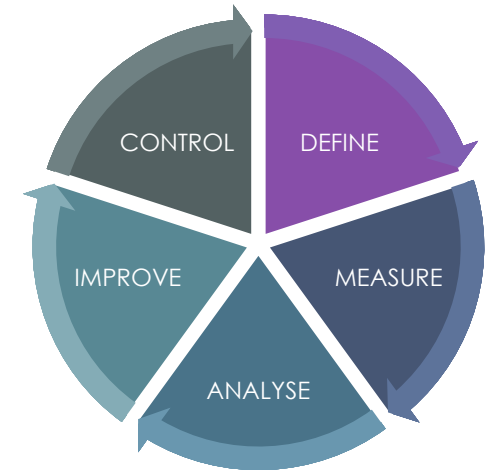
Pathways Quality Assurance Plan addresses the Performance Measurement and Management requirements of the CARF standards with the following performance indicators:

2021 Performance Indicators	Efficiency	Effectiveness	Service Access	Satisfaction
% of supported individuals participate in a service plan (QLP)			X	
% of supported individuals who complete the probationary period		X		
# of new positions created		X		
% of recreation assessments completed within 14 days of being accepted into service			X	
% of Supported individuals report that they are satisfied with the programs and are engaging with their peers				X
Reduction in incidents for same person over time		X		
Functional Centres (office departments) fully operational on SharePoint	X			
# of internal driven workflow forms on SharePoint developed and launched	X			
% positive satisfaction response of new employees after employee orientation				X
% of employees reporting agree and strongly agree on specific communication questions – i.e. COVID response				X

Quality Assurance

Strategic Goal – Excellence in Our Programming & Services

Supported Individuals Have Opportunity to Direct their Services
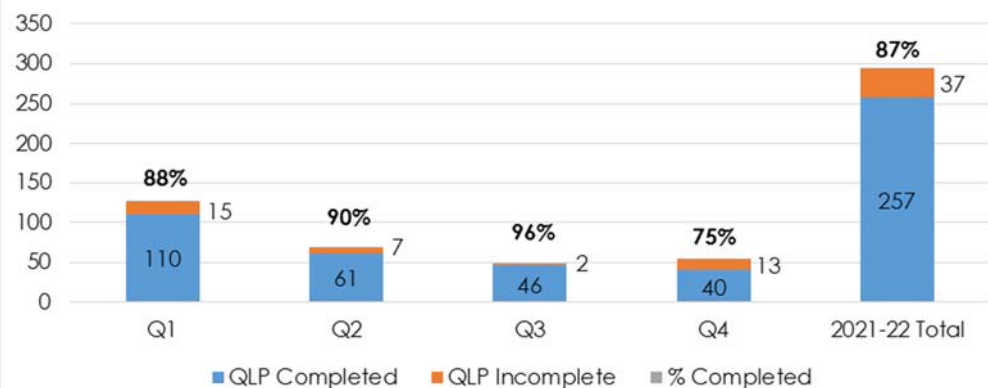
Performance Indicator	% of supported individuals to participate in a service plan (QLP) annually and within one year of the previous plan.		
Target Outcome	100% **87%**	**Type of Indicator**	Service Access
Department	Client Services	**Data Source**	Nucleus
Data Limitations	None	**Applies to**	All Supported Individuals
Year End Report & Follow Up Actions	257 QLPs were updated this year with a quarterly participation average of 87%. 37 QLPs remain overdue, 17 of those are due to the supported individual declining to participate, which resulted in the target for this indicator not being met. Complete outstanding QLPs.		

Supported Individuals Transition to Competitive Employment

	# of Individuals to Complete PP	# of Individuals to Not Complete PP	% Completed
Q1	0	0	0%
Q2	3	0	100%
Q3	2	0	100%
Q4	0	0	0%
2021-22 Total	5	0	100%

Performance Indicator	% of supported individuals who complete the probationary period.		
Target Outcome	90% **100%**	**Type of Indicator**	Effectiveness
Department	Client Services	**Data Source**	Manual Spreadsheet
Data Limitations	None	**Applies to**	Supported Individuals in Work Placements
Year End Report & Follow Up Actions	100% of individuals in competitive employment opportunities during this fiscal year completed their probationary period. The target for this indicator was exceeded. Continue supporting individuals throughout the employment process.		

Strategic Goal – Excellence in Our Programming & Services

New Employment Partnerships and Positions Created for Supported Individuals in Local Businesses

	# of New Positions Created
Q1	4
Q2	2
Q3	0
Q4	3
2021-22 Total	9

Partnership businesses include retail, grocery, home improvement/care, trucking, restaurants, food bank, and non-profit organizations.

Performance Indicator	# of new positions created.		
Target Outcome	5 **9**	Type of Indicator	Effectiveness
Department	Client Services	Data Source	Manual Spreadsheet
Data Limitations	None	Applies to	Supported Individuals Seeking Employment
Year End Report & Follow Up Actions	Nine new employment partnerships and positions were created for supported individuals with local businesses this year, two of which were 3 month contracts. The target for this indicator was exceeded. Continue developing new partnerships in our communities and find the right roles for our supported individuals.		

Individuals Purchasing Fee for Service Passport Programs have Recreational Assessment Completed

	No. of Individuals Purchasing Fee for Service Passport Programs	No. of Completed Assessments	% of Recreation Assessments Completed
2021-22 Total	30	30	100%

Performance Indicator	% of recreation assessments completed within 14 days of being accepted into service.		
Target Outcome	100% **100%**	Type of Indicator	Service Access
Department	Client Services	Data Source	Manual Spreadsheet
Data Limitations	None	Applies to	Individuals purchasing Passport Programs
Year End Report & Follow Up Actions	This indicator's target was met in that all external individuals purchasing fee for service passport programs have had a recreational assessment completed. Complete outstanding assessments for internal participants.		

Strategic Goal – Excellence in Our Programming & Services

Supported Individuals Report Satisfaction with Programs
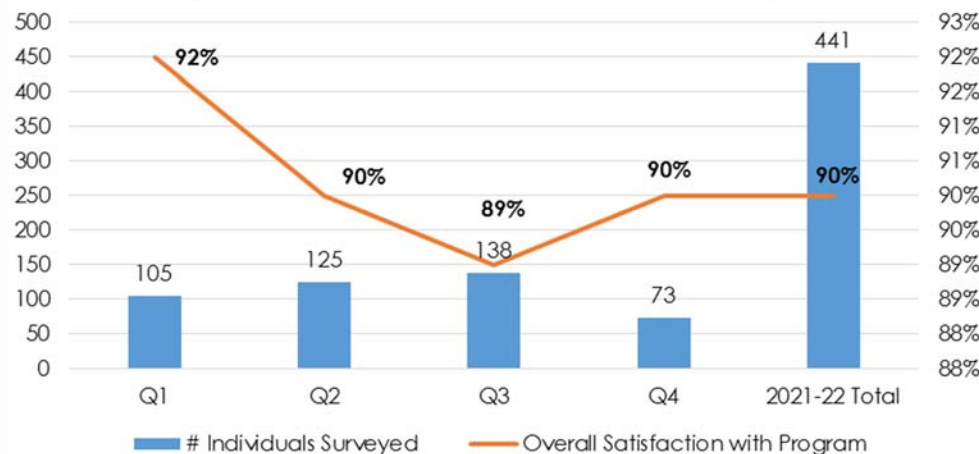
Performance Indicator	% of supported individuals report that they are satisfied with the programs and are engaging with their peers.		
Target Outcome	100% **90%**	Type of Indicator	Satisfaction
Department	Client Services	Data Source	Survey / Spreadsheet
Data Limitations	None	Applies to	All Supported Individuals Participating in Programs
Year End Report & Follow Up Actions	Over 441 surveys were conducted this year with an average overall satisfaction of 90% reported. The target for this indicator was not met. Analyze survey results to determine which programs will be offered in 2022-23.		

Reduction in Incidents Over Time
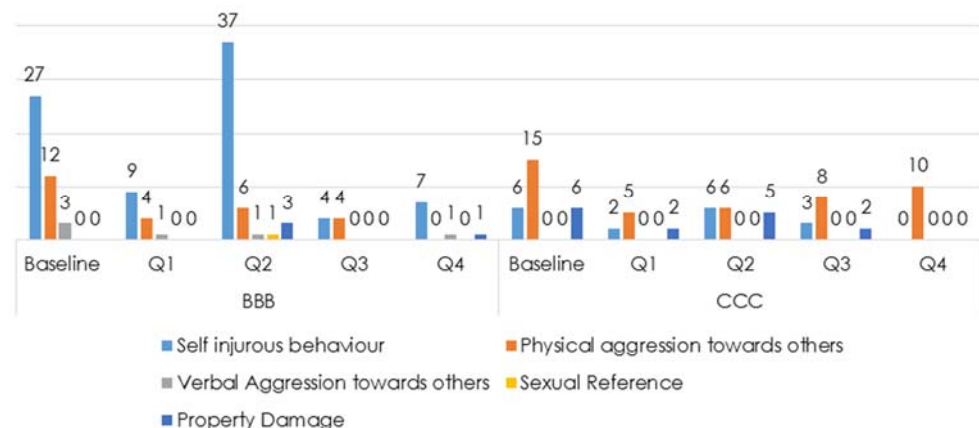
Performance Indicator	Reduction in incidents for same supported individual over time.		
Target Outcome	-50% **-54%**	Type of Indicator	Effectiveness
Department	Client Services	Data Source	Nucleus
Data Limitations	None	Applies to	All Tracked Individuals
Year End Report & Follow Up Actions	Incidents for clients BBB and CCC reduced by an average of 54% resulting in the target for this indicator being exceeded. The agency has demonstrated over time that we are able to successfully reduce the number of incidents of complex behaviours with clients over time. This indicator will not continue into 2022/23.		

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Strategic Goal – Extending Our Reach

Year End Report & Follow Up Actions

Significant input and feedback regarding content and style has drastically improved SharePoint homepage and ancillary sites. Sites are taking shape and iterating towards release. Planning to launch homepage in June 2022 and be accessible to all employees.

A common folder structure/layout for group homes is being developed to address role/permission management issues and will ease a similar migration to SharePoint as those logical architecture units (LAUs) are developed. The target for this indicator was not met given it has been on hold for most of the year.

The 6 LAUs to be completed; develop new group of LAUs to migrate to SP. Launch Home Page.

Performance Indicator	Office departments fully operational on SharePoint			
Target Outcome	6 **Deferred**	**Type of Indicator**	Efficiency	
Department	Information Management & Technology	**Data Source**	SharePoint	
Data Limitations	None	**Applies to**	Assigned Employees/ Departments	

Employees Able to Use and Update Forms in SharePoint

	Launched	Developed, Awaiting Feedback	In Development
Q1	1	5	0
Q2	4	6	0
Q3	2	-1*	2
Q4	0	2	-1*
2021-22 Total	7	12	1

* – form abandoned

Performance Indicator	# of internal driven workflow forms on SharePoint developed and launched			
Target Outcome	10 **7**	**Type of Indicator**	Efficiency	
Department	Information Management & Technology	**Data Source**	SharePoint	
Data Limitations	None	**Applies to**	Agency Wide	

Year End Report & Follow Up Actions

The agency has approximately 180 internal forms and the migration of PDF or Word format forms to electronic format requires IMT to build supporting tables, lookup, views and applicable roles or permission. Currently this includes ~34 supporting tables and lookups with ~25 forms of varying complexity at various stages of development. Forms may go through several iterations of revisions due to changes in workflow or practice. While 7 forms qualify as Launched, IMT has developed an additional 12 forms that are awaiting feedback from stakeholders/user reviewers. However, due to the impacts of COVID-19 on user reviewer's workload, they have not been able to provide the necessary feedback to IMT for the forms to be Launched which has affected this indicator's outcome. The target for this indicator was not met. This indicator will be removed from the 2022-23 QA Plan but will remain an objective on the Information & Management Information work plan for the next fiscal year.

Continue to develop and test forms to launch.

Strategic Goal – Reinforcing & Sharing Our Culture

New Employees are Able to Work Effectively on First Shift

	# of Surveys Sent	Response Rate	% Positive Response
Q1	34	35%	83%
Q2	27	52%	100%
Q3	20	55%	91%
Q4	17	35%	100%
2021-22 Total	98	44%	93.5%

Performance Indicator	% positive satisfaction response of new employees after employee orientation			
Target **Outcome**	100% **93.5%**	**Type of Indicator**	Satisfaction	
Department	Human Resources	**Data Source**	Survey Monkey	
Data Limitations	None	**Applies to**	New Employees	
Year End Report & Follow Up Actions	Average positive satisfaction of new employees after orientation was 93.5%. Average response rate for the year is 35%. Plan to return to in person orientation where surveys can be completed in person on last day once pandemic restrictions lift will increase response rate. The target for this indicator was not met. Survey now integrated into Orientation Training process to ensure more responses are received.			

Employees are Satisfied with Communication from Pathways Management
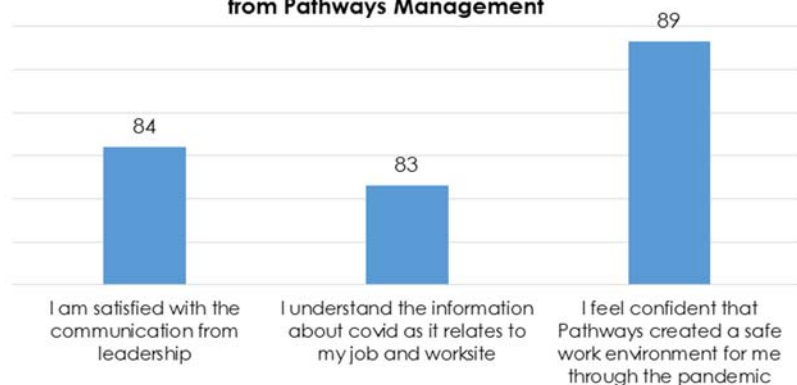
Performance Indicator	% of employees reporting agree or strongly agree on specific communication questions regarding COVID response			
Target **Outcome**	75% **85%**	**Type of Indicator**	Satisfaction	
Department	Human Resources	**Data Source**	Survey	
Data Limitations	None	**Applies to**	All Employees	
Year End Report & Follow Up Actions	The target was achieved and memos continued to be sent from the COO to all employees with updated guidance and directives from the Ministry. The 6th wave of the pandemic is fully in force at the end of the fiscal reporting period. A pulse survey will be sent to all employees with these questions in the new reporting period to ensure communications are still being positively received.			

Risk Management

	Potential	Probability	Status Indicator
High	Significant impact and ramifications. Immediate and urgent action required.	Very likely to occur	Mitigation strategies are initiated and indicators of success have not yet been achieved.
Medium	Medium impact and ramifications. Action required to mitigate risk.	May occur about half the time	Mitigation strategies are underway and indicators of success are in progress, and/or partially achieved.
Low	Minor impact, monitor, no action required.	Unlikely to occur	Mitigation strategies are established and indicators of success have been achieved.

Full Risk Register available upon request.

Risk Identifier	Risk	Potential	Probability	Mitigation Strategy	Person Accountable	Indication of Success Report Processes	Status Indicator
Organizational	Covid-19 Pandemic	H	H	Debrief 2nd wave Covid response and update planning for 3rd and 4th wave. Twice weekly manager meetings information sharing & planning. Weekly emails direction and communication to all staff. Review and update pandemic policy	CEO	IPAC, Isolation, Testing processes up to date and maintained as evident through manager audits. Pandemic plan updated. **%** Staff Vaccinated **%** Clients Vaccinated	M
Strategic / Organizational	Health Transformation and MCCSS Reform Unknown future direction and expectations of funders	H	H	Participate in Ministry discussions Update Business Assessments Strategic planning and ongoing strategy and direction conversations with Board.	CEO	This is a multi-year initiative with multiple components (2 different initiatives) Maintain or increase levels of service provision.	M

Risk Identifier	Risk	Potential	Probability	Mitigation Strategy	Person Accountable	Indication of Success Report Processes	Status Indicator
Occupational Health & Safety	MOL workplace investigations	H	H	Debrief from Kemptville investigation and acting on lessons learned regarding preparation, document requirements etc.	CHRO/ COO	Investigation complete and recommendations implemented. Debrief complete and plan to implement any recommendations. Incident summary complete. Workplace Violence Risk Assessments implemented in response to initial incident (and charges) for all Pathways worksites. Continue to re-assess WV risks on a continual basis. Await final information from MOL in July 2021.	L
Programs & Services / Occupational Health & Safety	Violence involving persons served	H	H	Review and update of H&S Assessments Environmental reviews and installation of protective features as appropriate (mag locks, safe rooms, panic buttons etc.) Enhanced training Complete Risk Assessments for Supported Individuals Creating specialized living environments Security services secured to mitigate risk to employee as required.	CHRO COO CFO	WVRA in progress for all worksites Environmental Plan with costs 100% staff trained in identified homes Establishing criteria for model for new home	M
Programs & Services	Complaint Resolution Risk of reputational damage if complaints go unresolved	H	H	Record complaints and review with QA/RM reports. De-briefing where appropriate	COO Sr. CSM	100% of complaints are resolved.	M
Programs & Services	Behaviour Support Plan – Absence of complete Internal & External Signature requirements	H	H	Re-prioritize Digital Signatures project on the technology management plan to ensure project concept to implementation is achieved this fiscal.	CFO COO	Digital Signature Software identified, approved, procured and installed for identified users.	M

Risk Identifier	Risk	Potential	Probability	Mitigation Strategy	Person Accountable	Indication of Success Report Processes	Status Indicator
Human Resources	Residential Staffing Model Part-time EE usage, lack of skills/experience; high head count=high costs	H	H	Research on options Collective bargaining	COO CHRO	Propose pilot with costing & outcomes identified for implementation next fiscal year	H
Human Resources	Collective Bargaining – significant cost containment (1% of total comp) legislation in place. Potential for strike	H	M	Potential for pandemic pay funding to be added based on sector lobbying	CEO COO CHRO CFO	Bargaining successful and new Collective Agreement ratified by bargaining unit members in February 2022.	L
Information Management & Technology	Potential of loss or harm related to technical infrastructure or the use of technology Maintaining security of information and systems Ensuring strict privacy protocols	H	M	External review of system security Policy for use of systems Regular audits of users and policy Tech plan & replacement schedule (CARF Requirement) Vendor support review	CFO Sr. Mgr. IT	No interruptions in service No privacy or security breaches. 100% sign off on Privacy Policy	M
Information Management & Technology	Unsecure electronic medical file transfer	H	H	Add secure, compliant and efficient electronic medical file transfer project to the technology management plan and re-prioritize the plan to ensure EFT is a priority for this fiscal	CFO COO Sr. Mgr. IT	EFT software identified, procured and installed for identified users	L
Financial	Fraud – client funds Trustee Program	M	L	Policies re: accountability and process (CARF Requirement) Annual audit. Trustee program annual reconciliation statement	CFO COO	Audit report complete with no identified issues or concerns. Monitoring by CFO; no fraud.	L

Risk Identifier	Risk	Potential	Probability	Mitigation Strategy	Person Accountable	Indication of Success Report Processes	Status Indicator
Legal / Compliance	QAM Compliance	M	M	Review past QAM reports Policy reviews OH&S walk through Orientation - Staff training	COO	Compliance certificate obtained	M
Governance	PTI Board's ability to recruit skilled, experienced Board members	H	M	Identify skills and experiences utilizing skills matrix and develop & implement a targeted recruitment plan	Exec Committee of Board CEO	2 positions filled on the Board	M

Cultural Competency & 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, and that
2. Is based on the consideration of the following areas:
   a. Culture
   b. Age
   c. Gender
   d. Sexual orientation
   e. Spiritual beliefs
   f. Socio-economic status
   g. Language
   h. Other factors, as relevant.

Respect for diversity is embedded within *Pathways 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)

Pathways 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 with in 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.

2021 Cultural Competency and Diversity Plan

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Person Accountable	Time Frame (eg. mm/yyyy)		
				Year Initiated	Target Date	Date Completed
Culture	Building a Diverse and Inclusive Culture	Corporate programs support diversity and inclusion - Reviewing the new staff orientation program with a view on diversity, understanding and responding to the different cultural and language needs of new hires	DP JM	2021	2021-22	2022

Status / Action Completed	Q1	Q2	Q3	Q4
	Recruitment postings advertised on First Nations Technical Institute. Educational equivalencies completed for credentials from other countries. Driver's License requirements waived for candidates that don't have them.	Recruitment postings advertised on First Nations Technical Institute. Educational equivalencies completed for credentials from other countries. Driver's License requirements waived for candidates that don't have them.	Increased hiring of candidates from diverse cultural and racial backgrounds. Created student aid position with qualification requirements that allowed for International Students with diverse backgrounds to be considered.	Continued to hire candidates from diverse background for Ottawa and Quinte positions.

Year End Report Back	Some success with hiring new employees from varied cultural, racial, and educational backgrounds. Continuing to assess credentials from educational institutions that are not Human Services oriented, continued to support candidates without full driver's license with accommodations until pandemic restrictions ease.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Person Accountable	Year Initiated	Target Date	Date Completed
Culture	Building a Diverse and Inclusive Culture	Corporate programs support diversity and inclusion - Research and understand the diversity in our community and our client group to determine if it is reflected in our employee group.	DP JM	2021	2021-22	2022

Status / Action Completed	Q1	Q2	Q3	Q4
	Upcoming Employee Satisfaction Survey and Client Experience Survey contain questions geared toward diversity and inclusion.	Survey results received and analysis is underway.	Diversity Highlights from Surveys were shared with Managers and action planning meetings will be scheduled to further review the results with staff.	HR Manager attended webinar on Recruitment practices to attract candidates who are not Canadian citizens or Permanent Residents. Action plans from employee survey deferred due to pandemic.

Year End Report Back	ECS Survey conducted in 2021 reported a 90% strongly agree score that Pathways adequately provides for diversity, equity and inclusion in the workplace. We will continue to work to ensure our work practices foster inclusion for all employees and clients.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Person Accountable	Year Initiated	Target Date	Date Completed
Culture	Celebrating our Diversity	The creation of ongoing activities events, social leisure and educational programs to explore, promote and celebrate diversity - Celebrate and educate providing opportunity for the people we support to understand the various cultures that make up our community.	SDM	2021	2022	2022

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Person Accountable	Time Frame (eg. mm/yyyy)		
				Year Initiated	Target Date	Date Completed
Status / Action Completed	**Q1** Belleville & HPE – Virtual Programs for SIL, FH and Residential clients: - Dutch Cultural Theme Activity - East Indian Cooking Class - Hawaiian Culture Theme Activity - LGBTQ Pride Discussion - History of Canada's Indigenous Culture Exploration - Program "I Spy" for individuals with hearing impairments Ottawa – Virtual Programs for SIL and Residential clients: - Museum of History: Arctic, Ecological Impact, Culture - Mexico and the cultural traditions of Cinco De Mayo - Museum of History: Egypt, Cultural History - Galapagos Island: Heritage, Biodiversity and Economy - Arm Chair Travels explored Jamaica's history, culture, economy and biodiversity - Canada's Aboriginal Heritage: Recent Exposure of the Residential School System Renfrew – Virtual Programs for SIL clients: - National Women's History Museum Virtual Tour - Africa: PowerPoint Cultural Learning - Pyramid of Giza Virtual Tour - Hinduism: PowerPoint Cultural Learning - Antarctica: PowerPoint Cultural Learning - Getty Museum Virtual Tour - Latin America: PowerPoint Culture	**Q2** Belleville & HPE – Virtual Programs for SIL, FH and Residential clients: - Mexican cooking - Discussion "Why diversity Works" - Tai Chi (Japan) - Cultural celebrations around the world - International peace day - Homes chose to cook a dish from Poland Ottawa – Virtual Programs for ABI, SIL and Residential clients: - Jeopardy included section on West Coast Geography - Museum of History documentary on the Dark Universe - Around the World: Donegal Ireland - Jeopardy included a section on European Geography - Around the World: Savannah - Docu-Series on Our Planet: One Planet - Docu-Series on European Mythic Culture - Jeopardy included a section on World Geography - Relax time included a docuseries on Our Planet; Frozen Worlds - Around the World Renfrew Virtual Programs for SIL clients ABI Club: - Canada Day - Arabian Culture - Haitian Culture - Irish Culture - Welsh Culture - Learning the culture behind Tai Chi exercise - Truth and Reconciliation Celebration - Indigenous Culture	**Q3** Belleville & HPE – Virtual Programs for SIL, FH and Residential clients: - Oktoberfest - Thankfulness Project - Good Samaritan Project - Children Around the World - Indigenous Table Talk Ottawa – Virtual Programs for ABI, SIL and Residential clients: - Thanksgiving Special - Mindfulness 101 - Around the World, Hawaii - Arm Chair Travels: Costa Rica - Self-Care Challenge - Arm Chair Travels: Atlantis - Mindful Moments - Museum of History - Documentary: Coastal Seas - Christmas Who Am I? Renfrew Virtual Programs for SIL clients ABI Club (PowerPoint and Video Presentations about culture, language and history): - Spain - Germany - Remembrance Day - Christmas	**Q4** Belleville & HPE – Virtual Programs for SIL, FH and Residential clients: - Racial Equality Program - Virtual about Mindfulness - Cultural Diversity - Chinese New Year - Traditional Foods of Canada - Shrove Tuesday - International Women's Day - St. Patrick's Day Ottawa – Virtual Programs for ABI, SIL and Residential clients: - Arm Chair Travels; Kenai Fjords - Martin Luther King - Around the world; Zambia - Chinese New Year - Groundhog Day - Black History Month - History of the Super Bowl - African safari - Around the World; Mardi Gras - Mindfulness - Purim - St. Patrick's Day Renfrew Virtual Programs for SIL clients ABI Club (PowerPoint and Video Presentations): - Columbia - Panama - Finland - Poland - Africa			

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Person Accountable	Time Frame (eg. mm/yyyy)		
				Year Initiated	Target Date	Date Completed
Year End Report Back	Successfully introduced a wide variety of social, leisure and educational programs that celebrated and explored diversity and international cultural practices and traditions. Participation and interest in these programs was strong and it will continue to be part of our recreational programming into 2022-23.					
Culture	Celebrating our Diversity	Partner with our local territory (Mohawk Territory) to provide education/experiences for both people we support and staff to understand the Indigenous culture and opportunities we can make together to access their services where appropriate.	SDM	2021	2022	2022

Status / Action Completed	Q1	Q2	Q3	Q4
	Note*: *Due to the ongoing Covid-19 pandemic, Pathways has not been able to actively partner with our local territory on educational activities, but we look forward to re-engaging in such in-person initiatives, post pandemic.*	**Note*: *Due to the ongoing Covid-19 pandemic, Pathways has not been able to actively partner with our local territory on educational activities, but we look forward to re-engaging in such in-person initiatives, post pandemic.***	**Note*: *Due to the ongoing Covid-19 pandemic, Pathways has not been able to actively partner with our local territory on educational activities, but we look forward to re-engaging in such in-person initiatives, post pandemic.***	**Note*: *Due to the ongoing Covid-19 pandemic, Pathways has not been able to actively partner with our local territory on educational activities, but we look forward to re-engaging in such in-person initiatives, post pandemic.***
	Belleville and HPE – Virtual Programs: - Indigenous Culture - Exploration: Virtual table talk discussion on Indigenous culture and the recent controversy over the Residential Schools Ottawa and Renfrew – Virtual Programs: - Canada's Aboriginal - Exploration: Heritage, the recent exposure of Canada's residential school system Organization-Wide – Activity Guide - Distributed electronically in honour of National Indigenous Peoples Day	Belleville and HPE – Virtual Programs: - Indigenous Culture - Discussion "Why Diversity Works" - Celebration of International Peace Day Ottawa and Renfrew Virtual Programs for SIL clients ABI Club: - Discussion on Indigenous Culture - Truth and Reconciliation Celebration	Belleville and HPE – Virtual Programs: - Indigenous Culture - Indigenous Table Talk Ottawa and Renfrew Virtual Programs for SIL clients ABI Club: - Indigenous Table Talk and continuation of discussion on Indigenous cultures and traditions - Communication and helpful resources on National Day for Truth and Reconciliation, which also falls on Orange Shirt Day - Staff is encouraged to wear an orange shirt and join Pathways in educating ourselves and others through personal reflection, education and awareness activities. - Resources on indigenous arts, culture and heritage are provided.	Belleville and HPE – Virtual Programs: - Indigenous Culture - International Women's Day - Racial Equality Program Ottawa and Renfrew – Virtual Programs: - Discussion on Indigenous Culture; Resources on indigenous arts, culture and heritage are provided

Year End Report Back	Virtual programs provided educational and social opportunities to staff and supported individuals to learn about local Indigenous cultures and traditions. Due to COVID, Pathways was not able to partner with our local territories on educational activities for in person participation, but intend to re-engage with these partnerships and create more opportunities as COVID restrictions allow.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Person Accountable	Time Frame (eg. mm/yyyy)		
				Year Initiated	Target Date	Date Completed
Culture	Celebrating our Diversity	Identify individuals that come from "other" cultures as appropriate and educate the team on cultural appropriate activities or practices.	SDM	2021	2022	2022

Status / Action Completed	Q1	Q2	Q3	Q4

	Belleville and HPE – Virtual Programs
	
	- Implementation of virtual/live programs based on cultures identified.
	  o E.g. Individual at William Street home is Punjabi, staff researched culture and provided music, cuisine etc.
		Belleville and HPE – Virtual Programs
		
		- Cultural celebrations around the world and exploring cultural and ethnic backgrounds of supported individuals.
		  o E.g. virtual cooking presentation of a Polish dish, as one of the individuals has a Polish background
		Ottawa and Renfrew - Virtual Programs
		
		- Exploration of various traditions and cultures such as Chinese, Welsh, Irish, Haitian and Arabian
			Belleville and HPE – Virtual Programs
			
			- Thanksgiving Special
			- Self-Care Challenge
			- Mindful Moments
			- Christmas Who Am I?
			Ottawa and Renfrew - Virtual Programs
			
			- Exploration of various traditions and cultures such as German and Spanish
			- Exploration of how and when is Christmas celebrated throughout the world.
				Belleville and HPE – Virtual Programs
				
				- "Virtual about Mindfulness" discussion focused on different countries and how they achieved mindfulness (nature, meditation etc.) also how this can be implemented clients daily lives.
				- Cultural Diversity
				- Chinese New Year
				Ottawa and Renfrew - Virtual Programs
				
				- Purim
				- PowerPoint and videos: Columbia, Panama, Finland, Poland and Africa.

| Year End Report Back | Virtual programs provided education and social opportunities to staff and supported individuals to learn about "other" cultures and educate them on traditions and other cultural practices such as food, music, language, etc. | | | |

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Person Accountable	Year Initiated	Target Date	Date Completed
Culture	Building a Diverse and Inclusive Culture	Sharing Diversity and Inclusivity activities, events & updates across the organization - Providing Diversity and Inclusivity Updates to Managers at Quarterly management meetings	SDM	2021	2022	2022

Status / Action Completed	Q1	Q2	Q3	Q4

	Organization Wide:
	
	- *An Impossible Juggling Act*: Article distributed electronically – Discusses populations that have been disproportionally effected by the pandemic, specifically women
	- Communications about the meaning of Pride Month 2021; Community Pride Events and resources; meaning of 2SLGBTQ+ acronym
		Organization Wide:
		
		- Whitepaper on *"microaggressions and the impact on inclusion and diversity"* distributed electronically, discusses how subtle acts of exclusion can poison your workplace culture
		- Article, "What does it take to build a culture of belonging" – electronically distributed to Managers and Senior Leaders
			Organization Wide:
			
			- Communication and helpful resources re: National Day for Truth and Reconciliation, which also falls on Orange Shirt Day
			  o Staff is encouraged to wear an orange shirt and join Pathways in educating ourselves and others through personal reflection, education and awareness activities.
				Organization Wide:
				
				- Communication to all Management: We aren't all the same: How to be a Psychologically Safe Leader and ensure that everyone feels heard and included
				  o Communication to all Management on Mental Health Awareness: the challenge of taking a step back to assess

CARF Standard	Program/Area of Focus	Issue Identified/Objective			Person Accountable	Time Frame (eg. mm/yyyy)		
						Year Initiated	Target Date	Date Completed
	- Communication on "Being an LGBTQ+ Ally" - Activity Guide distributed across the organization in honour of National Indigenous Peoples Day - Communication about coping, following the Family Attack on Muslim Family in London, Ontario - Communication about supports available in response to the tragic discovery in Kamloops	- Communication on International Self Care Day: includes topics related to diversity and inclusion such as speaking up in the face of adversity and taking care of all aspects of our lives, including how we treat others in our lives - Communication on Canadian Multiculturalism Day: discovering various cultures that bring Canadian society to life by participating in the virtual activities happening across the country and learning more about the importance of multiculturalism in Canada	o Resources on indigenous arts, culture and heritage are provided - Communication to Management on Workplace Strategies and how to make Psychologically Safe Leaders, including supporting and promoting a safe and inclusive work environment and team interactions - Communication on "Realizing Sociocultural influences on mental illness"				when we are struggling. Provided resource "Assessing your Current Situation Checklist" - New health and wellness initiative with ParticipACTION – Canada's leading physical activity organization – Team Steps Challenge April 1-15: opportunities to connect with each other, even if only virtually, to ensure staff are feeling less isolated and included	
Year End Report Back	The organization provided a variety of resources and information to all staff regarding diversity and inclusion. Communications touched upon Indigenous issues and trauma recognition, LGBTQIA+ ally-ship, racism and multiculturalism, as well as psychological and mental health supports and awareness.							

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Accessibility

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 *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.

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.

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.

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.

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.

INCLUSION

CONNECTED · RESPECTED · CONTRIBUTING · PROGRESSING

2021 Accessibility Plan

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Time Frame (eg. mm/yyyy)			Cost/Resource (FTE & $) In thousands	
					Year Initiated	Target Date	Date Completed	Estimated	Actual
Architectural / Built Enviro Barrier	Building Capacity to strengthen accessibility and suitability and planning	Housing Development Committee to continuously review our current housing (suitability/accessibility/site) to support strategic planning and ensure accessibility	Committee has not met due to COVID. Committee to reconnect in 2021 and provide direction on future meetings, goals and outcomes	BC	2019	Ongoing	Ongoing		

Quarterly Update	**Q1** Committee currently on hold, will reassess in 2022	**Q2** Committee currently on hold, will reassess in 2022	**Q3** Committee still on hold.	**Q4** Committee on hold,
Year End Report Back	Will need to revisit if this committee is required moving forward.			

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Year Initiated	Target Date	Date Completed	Estimated	Actual
Architectural / Built Enviro Barrier	Pathways homes renovated to accommodate accessibility	Washrooms renovations at Crofton. Adding mag locks to Dundas Street to assist in client protection.	When it is safe to do so, Crofton washroom will be completed in the spring of 2021. Dundas mag lock system to be completed in spring of 2021.	BC	2019	2020	August 2021	22000	

Quarterly Update	**Q1**	**Q2** Dundas mag lock system completed August 2021	**Q3** Washroom and mag lock system completed.	**Q4** All projects identified have been completed
Year End Report Back	All projects identified have been completed.			

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Year Initiated	Target Date	Date Completed	Estimated	Actual
Architectural / Built Enviro Barrier	Ensuring the safety of clients, staff and visitors	Properties to be assessed and necessary activities undertaken to ensure compliance	Complete workplace violence and risk assessments on all Pathways properties ensuring and areas identified will be assessed and solutions to eliminate or control risk will be implemented.	BC JM	2020	2021	February 2022		

Quarterly Update	**Q1** Ongoing completion of Workplace Violence Risk Assessments at all of Pathways worksites.	**Q2** Ongoing completion of Workplace Violence Risk Assessments at all of Pathways worksites.	**Q3** Completed assessments of all group home environments; program assessment currently underway.	**Q4** Workplace Violence Risk Assessments have been completed for all active programs as well as

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Time Frame (eg. mm/yyyy)			Cost/Resource (FTE & $) In thousands	
					Year Initiated	Target Date	Date Completed	Estimated	Actual
							Family Home, SIL, Scheduling, and Belleville Office. Ottawa office and inactive program spaces still to be completed.		

Year End Report Back	Plans are posted online and in hard copy at each location for all employees to review and refer to when needed. Remaining assessments will be completed as spaces are opened utilized by employees and clients.

Transportation	Ensuring safe and barrier free transportation of clients	Ensure all vehicles are appropriate for clients' needs. Ensure safety devices are installed	All wheelchair vans continuously inspected. Areas of enhancement/concern to be addressed accordingly	BC	2019	Ongoing	Ongoing		

Quarterly Update	Q1	Q2	Q3	Q4
			All Wheelchair vans have had six month certification. Have added protective barriers to 3 vans.	Vans are certified every 6 months Next inspection Spring 2022

Year End Report Back	All projects identified have been completed.

Architectural / Built Enviro Barrier	Ensuring the safety of clients, staff and visitors	Head Office property including perimeter are reviewed to ensure the safety and security on site at Pathways.	Continue to monitor and evaluation security and safety issues and develop solutions as required e.g., additional fencing	BC	2019	Ongoing	Ongoing		

Quarterly Update	Q1	Q2	Q3	Q4
		Have increased lighting and changed lights outside new LED units. Added fencing behind the building to ensure safety and redesigned parking lot for increased safety and accessible parking	Continue to have security outside on parking lot until March 31, 2022 Have upgraded two cameras on site.	Pathways has hired a security company to provide services at our main office. This will be reassessed as we move forward in to 2022. Upgraded the camera monitors in the SIL office to enable staff to view more cameras.

Year End Report Back	All projects complete. Monitor and change as required moving forward.

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Time Frame (eg. mm/yyyy)			Cost/Resource (FTE & $) In thousands	
					Year Initiated	Target Date	Date Completed	Estimated	Actual
Information / Communication 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 AODA training in all new hire orientation	Mandatory orientations held every hiring cycle – ongoing throughout the year.	JM	Ongoing	2021	Ongoing	N/A	N/A

	Q1	Q2	Q3	Q4
Quarterly Update	Ongoing and completed regularly through orientation	Ongoing and completed regularly through orientation	Ongoing and completed regularly through orientation	Ongoing and completed regularly through orientation

Year End Report Back	As part of new hire orientation, employees spend time discussing AODA compliance.

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Year Initiated	Target Date	Date Completed	Estimated	Actual
Information / Communication Barrier	Strengthening the access to services and information that is convenient, clear and understandable.	Pathways written materials are easy to understand and interpret.	Documents/forms and their content are continuously reviewed and updated to ensure that they were simplified and easily understood	DP CR	2018	2021	Ongoing	N/A	N/A

	Q1	Q2	Q3	Q4
Quarterly Update	Nothing to report.	Health and Safety materials for supported individuals were reviewed and updated. Guides to DS and ABI Services and Client Handbook were reviewed and updated in preparation for CARF.	Nothing to report.	Supported Employment Partnership with BPS documentation reviewed and explained with successful candidate for position. Recruitment and interview process modified to support inclusive practices.

Year End Report Back	Limited opportunities were available within Pathways due to the pandemic and restricted access to the building. When required, re-orientation materials were revised and delivered. Simplified recruitment application and interviewing process created for BPS program for one supported individual.

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Time Frame (eg. mm/yyyy)			Cost/Resource (FTE & $) In thousands	
					Year Initiated	Target Date	Date Completed	Estimated	Actual
Information / Communication Barrier	Strengthening the access to services and information that is convenient, clear and understandable	Review of the Accessibility for Ontarians with a Disability Act's requirement to ensure all employees who have an identified disability have access to the agency's emergency measures information in a format that is accessible to them.	Continue to identify and work directly with Identified employees who require accessible information and ensure that they fully understand the policies and procedures of the agency. Provide accommodations in the interview process for employee with learning disabilities	DP JM	2018	2021	Ongoing	N/A	N/A

	Q1	**Q2**	**Q3**	**Q4**
Quarterly Update	Job postings identify that anyone requiring accommodations through the recruitment/hiring process can reach out to Human Resources. Employees that connected with Human Resources received the necessary strategies to accommodate their needs.	Ongoing accommodations implemented as identified by employees as needed.	Ongoing accommodation process and documentation reviewed and approved by CARF surveyor.	Ongoing accommodations implemented as identified by employees as needed.

Year End Report Back	Throughout the year we accommodated employees in a variety of ways in order to ensure they were able to safely and effectively complete their job duties, ensuring the needs of the people we support were met at all times. Emergency procedures are reviewed in both print and verbally with all new employees to ensure understanding and compliance.

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Year Initiated	Target Date	Date Completed	Estimated	Actual
Information / Communication Barrier	Strengthening the access to services and information that is convenient, clear and understandable	Re train supported individuals in the supported employment program, new orientation materials provided when safe to resume employment.	Expansion of the program brought about the implementation of tools for managers to use throughout the recruitment process that are streamlined and easy to understand Increase in the successful employment of individuals: Front desk; maintenance crew.	DP CR	2018	2021	Ongoing	N/A	N/A

	Q1	**Q2**	**Q3**	**Q4**
Quarterly Update	Supported individuals continued to not work due to COVID restrictions	Some supported individuals were brought back into employment with Pathways. Updated orientation materials were delivered.	Nothing to report- supported individuals continue to work with Pathways on a limited basis due to Covid restrictions.	Supported Employment Partnership with BPS documentation reviewed and explained with successful candidate for position. Recruitment

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Time Frame (eg. mm/yyyy)			Cost/Resource (FTE & $) In thousands	
					Year Initiated	Target Date	Date Completed	Estimated	Actual
					and interview process modified to support inclusive practices.				
Year End Report Back	Limited opportunities were available within Pathways due to the pandemic and restricted access to the building. When required, re-orientation materials were revised and delivered. Simplified recruitment application and interviewing process created for BPS program for one supported individual.								
Information / Communication Barrier	Strengthening the access to services and information that is convenient, clear and understandable	Ensure Pathways website content is compliant with AODA regulations. Under new AODA requirements, organizations must ensure the accessibility of any web content that they own. In addition, any content that they do not own, but have control over as a third party, must also be accessible	To meet the deadline WCAG 2.0 standards, Pathways will launch new compliant website Q1 2021-2022	DP AM	2021	2021	2022	N/A	N/A
Quarterly Update	**Q1** Content developed with WCAG 2.0 with web developer.		**Q2** Final content edits for preparations to launch in Q3.		**Q3** Finalizing mobile version of AODA compliant site in preparation for launch.			**Q4** Website launched and AODA compliant.	
Year End Report Back	New website is launched and accessible. Website is reviewed for compliance and any new information or images added are assessed and made AODA complaint.								
Attitudinal Barrier	Perceptions of persons with developmental disabilities, acquired brain injury and those with dual diagnosis in the broader community	Highlighting and showcasing the accomplishments of people with disabilities at all public Pathways events and meetings.	Client art is promoted and showcased throughout the year. Insertion of client art into the Pathways calendar to be distributed to clients, families and stakeholders annually. When it is safe to do so the following activities will resume: Art shows held throughout the year, such as: • Art show held in local Belleville library for people with ABI as part of the OBIA's *Brain Injury awareness month* event schedule	DP MR	Ongoing	2021	Ongoing		

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Time Frame (eg. mm/yyyy)			Cost/Resource (FTE & $) In thousands	
					Year Initiated	Target Date	Date Completed	Estimated	Actual
Quarterly Update	**Q1** Unable to participate in OBIA's *Brian Injury Awareness Month* due to ongoing COVID restrictions	**Q2** Artwork done through virtual programs to be collected and ready for 2022-23 calendar.	**Q3** Artwork collected and distributed in 2022 calendar.		**Q4** 2022 calendar distributed to stakeholders, external partners and homes.				
Year End Report Back	Limited opportunities to showcase artwork in community settings. Artwork was put into calendar, and update created in The Advocate to share other virtual programs.								
Financial Barrier	Increased access to funds to support community engagement	Promote community access funds to provide supported individuals with financial resources to attend events and activities in the community that they may not be able to afford	Pathways Foundation Community Access Plan budgets $5,000 for a variety of events and activities for supported individuals This fund has not been accessed during COVID.	SH PM	2020	2021	2022	$5000	$0
Quarterly Update	**Q1**	**Q2**	**Q3**		**Q4** This fund has not been accessed during COVID.				
Year End Report Back	Pathways Foundation was dissolved in 2022. Funding access for many supported individuals is available through Passport program. This objective will be removed from the Accessibility plan.								
Community Integration	Perceptions of persons with developmental disabilities, acquired brain injury and those with dual diagnosis in the broader community	Build and develop greater relationships to promote the employability of people with disabilities Engage Individuals in a virtual format in order to continue social interaction.	1. Provide equipment necessary for individuals to participate in all programming virtually 2. To provide training to staff and individuals on privacy issue relating to virtual programming 3. Continue to expand virtual programming in social activities 4. To further develop virtual programming in the area of social inclusion and in the area of learning and development.	DB SDM	Ongoing	2021	2022		
Quarterly Update	**Q1**	**Q2**	**Q3**		**Q4**				

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Time Frame (eg. mm/yyyy)			Cost/Resource (FTE & $) In thousands	
					Year Initiated	Target Date	Date Completed	Estimated	Actual
	All required equipment for virtual programming provided to participants. Training on privacy issues relating to virtual programing completed.	Virtual programs continues to run and add new innovative programming to keep the clients engaged.	Virtual programs continues to run and development of new innovative programming to keep the clients engaged. Finding more community partners for diverse programming due to ongoing COVID restrictions.		Expanding and developing virtual programs is ongoing.				

Year End Report Back	Continue scaled back version of virtual programming. Once regular programming has reopened the focus will be on in person with a focus on community integration and participation.

CARF or AODA Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action completed	Person Accountable	Year Initiated	Target Date	Date Completed	Estimated	Actual
Community Integration	Perceptions of persons with developmental disabilities, acquired brain injury and those with dual diagnosis in the broader community	Promote and assist supported individuals to return to employment and volunteer opportunities	Once it is safe to do so pathways will support individuals to return to their work and volunteer placement opportunities	DB AW	Ongoing	Pre 2013	Ongoing		

Quarterly Update	**Q1** Employment and volunteer supports continue to be on hold due to current restrictions and recommendations, clients have yet to start their community placements.	**Q2** Program reopening plan in progress for September 6. Employment department returning to work at Pathways (cleaning crew) on August 9.	**Q3** Program reopening plan postponed due to COVID spike and increased restrictions. In current talks with new community partners (e.g. BPS).	**Q4** In process of reinitiating community reintegration supports.

Year End Report Back	Contract established with Belleville Police Services for part time supported individual. Employment Facilitator vacancies (2) recruited for and filled.

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2021 Technology & Systems Plan

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Time Frame (e.g. MM/YYYY) Year Initiated	Time Frame (e.g. MM/YYYY) Target Date	Time Frame (e.g. MM/YYYY) Date Completed	Cost/Resource (FTE and/or $)
Communication Technologies	SharePoint	Finance, HR, IMT, Management, Operations & Executive logical architecture units (LAUs) are fully functional. Employees access and use the new LAUs in SharePoint (SP). Add links to additional forms on SharePoint	Employ Brazen Bytes to Construct additional logical architecture units. Address Common Drive migration/ streamlining. Perform migration to SharePoint (SP). Add 6 New forms in SharePoint via Form tool	Sr. Mgr. IMT	2021	Sept 2021		$0

Quarterly Update	Q1	Q2	Q3	Q4
	Prepare implementation plan with timelines.	Construct "mock up" of SP structure on common, emulate transition and common folder cleanup at dept. level. Complete Executive logical architecture units and begin Management. Provide direction to Finance, HR, IMT, Operations.	SP training (Super Users) Common Drive cleanup (Pictures) Data Migration Complete Management LAU and continue working on or complete remaining LAUs.	SP training (Super Users) SP LAU training remaining office/staff Migration training Video IMT and Executive LAU ready to migrate to SharePoint in May 2022. Common Drive clean up meeting (Senior CSMs and IMT) on 31-Mar-22, to review clean-up efforts in support of process mapping and future migration to SharePoint.

Year End Report Back	The LAU's will migrate next fiscal, including common drive clean up and prepare mock structure for next LAUs.

Software	Learning Management System	Investigate Moodle and possible integration with SharePoint.	Download/Install, test for viability Use recycle/old ACCPAC server	Sr. Mgr. IMT	2021	Oct 2021		$0

Quarterly Update	Q1	Q2	Q3	Q4
	Demo to executive	Demo on 30-Jun-21 of Moodle Exec Decision: defer implementation *implementation deferred indefinitely*	*implementation deferred indefinitely*	*implementation deferred indefinitely*

Year End Report Back	LMS deferred. Requires integrated solution.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Time Frame (e.g. MM/YYYY)			Cost/Resource (FTE and/or $)
					Year Initiated	Target Date	Date Completed	
Hardware	Secure IT Services	Cyber-Security priorities this fiscal:	Publish three new IMT policies Staff education reg. new/updated policies (complete) Acquisition, installation of improved Antivirus solution for laptops (complete) Resolution of all critical 20/21 Pen test items (complete) Staff training regarding Phishing, cybersecurity (completed for office staff)	Sr. Mgr. IMT, Zycom	2021	2022	Ongoing	

Quarterly Update	Q1	Q2	Q3	Q4
	Password Policy published, in place. Policy update impacted several security updates simultaneously. Other draft Policies: Acceptable Use Policy Software Installation Policy	MS-Bit defender for laptops under purchase review, to be deployed by Data Specialist, with assist from Zycom. Purchase review of cyber-security training from learning horizons	Purchase review of Hosted Biz backup Update Disaster recovery/ Backup Policy – deferred Purchase review of duo/MFA-deferred till next fiscal Purchase review of ISA phishing testing, VDI upgrades-complete	Review Common drive / Email policy) – Done, does not appear to require changes Develop Disaster Recovery/Backup policy – Currently backup processes employ BAAS (back up as service via Hosted Biz) IMT will review Office 365/email back up process with Zycom & Hosted Biz/BAAS to ensure recovery plan is in place. Policy to follow.

Year End Report Back	All critical items reviewed by 07-Jul-21, new 12 complex character password/passphrase policy implemented. The two draft policies to be finalized and publish next fiscal.

Services purchased or contracted	ADP-WFN &/or Go Easy replacement	An outsourced project review of replacement options for ADP/WFN and/or Go Easy	Internal review of issues Team assigned PM role posted developed, posted Products evaluated Options reviewed Recommendations made	Sr. Mgr. IMT	Mar 2021	2022	Ongoing	

Quarterly Update	Q1	Q2	Q3	Q4
	Project description submitted	Schedule needs analysis	Needs analysis delayed due to COVID and scheduling conflicts.	Needs Analysis – source potential solutions/RFP

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CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Time Frame (e.g. MM/YYYY)			Cost/Resource (FTE and/or $)
					Year Initiated	Target Date	Date Completed	
Year End Report Back	Need Analysis inputs, assembled, seeking stakeholder input. Project delayed due to Pandemic. Carried forward to next fiscal.							
Software	Microsoft Office Suite Upgrade	Update Microsoft Office Suite from version 2013 to version 2019.	Determine licensing options (Office 365 or on premise installation).	Sr. Mgr. IMT Zycom	Jun 2021	Jul 2021	Ongoing	
Quarterly Update	**Q1** Premise costs received from Zycom. Significant investment required.		**Q2** Premise licensing costs end Jan 2022. Establish: On Premise vs Office365 costs Establish: Feature differences?		**Q3** Established not-for-profit costs.		**Q4** Acquire Office365 from tech soup Update images. Costs are prohibitive and ongoing.	
Year End Report Back	Licensing issues are becoming a larger proportion of IMT budget. IMT will investigate a hybrid licensing models (ex. Libre office for front line, MS office for main office (or similar)) to reduce costs. Solution to be identified next fiscal.							
Hardware	Asset inventory, planning	Update/refine asset listing with site visits	Use asset database to create, manage and implement a 5-7 year technology replacement plan.	Sr. Mgr. IMT	Feb 2020	2022	Ongoing	0$ -Open source solution used
Quarterly Update	**Q1**		**Q2** Export Snipe-IT asset list, add product manufacture date, forecast/map to replacement schedule [5-7 year replacement]		**Q3** Review and submit device replacement plan - deferred		**Q4** Completed device replacement plan for budgeting purposes. Asset register is in place and maintained. All devices assigned and monitored by user or location.	
Year End Report Back	Device replacements identified and submitted as part of budget.							
Assistive technology	Virtual Programming	Facilitate technical requirements to support virtualized program offerings		Sr. Mgr. IMT	Feb 2021	Mar 2021	2022	Various
Quarterly Update	**Q1** Devices acquired, processed, delivered as directed.		**Q2**		**Q3**		**Q4**	
Year End Report Back	Devices in place as needed/directed. Completed.							

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Time Frame (e.g. MM/YYYY)			Cost/Resource (FTE and/or $)
					Year Initiated	Target Date	Date Completed	
Software	Electronic Forms	Develop 6 New Forms in Formtool for availability/linkage in SharePoint	Client side priority list provided/established	Sr. Mgr. IMT	2021	Oct 2021	Ongoing	$0

Quarterly Update	**Q1** Workplace Violence Risk Assessment – Draft Quality Assurance / Risk Management Data Intake Forms – Draft	**Q2** Workplace Violence Risk Assessment – Testing Maintenance Request – Launched V2	**Q3** Rapid Testing (Employer Submitted) Rapid Testing (Employee Submitted) Tables and Forms related to Client Transition and Assessment Checklist – Draft Expense Submission Form – Draft	**Q4** Hiring Process processes mapped Orientation, New Hire and Change / Add / Move forms – Development, Drafted or Under Review Maintenance Request Form – Changes Requested Travel form and report completed – Testing

Year End Report Back	New instance of revised new hire and orientation form should be available for testing, validation by Mar 31st 2022.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Year Initiated	Target Date	Date Completed	Cost/Resource
Software	Network	Currently, client programs reside on same network as corporate – directly impacting business operations when load is applied – these should be separated physically or virtually. Network segmentation suggested for HR and Finance.	A separate internet connection, and virtual-LAN or separate 20 port switch for programs may be put in place to reduce load on business systems. All network drops associated with program activities such as entertainment (TV, gaming, etc.) with significant impacts on network bandwidth may be migrated to separate sub-network and devices.	Sr. Mgr. IMT Zycom	2021	Fall 2021	Ongoing	1 Bell/Cogeco connection

Quarterly Update	**Q1**	**Q2** Data Specialist will map all network drops (date and phone) connections prior to office reopening.	**Q3** Monitor Program vs Business load/balance Determine need based on new configurations – Deferred	**Q4** Migrate programs to separate switch and internet connection if needed – Deferred

Year End Report Back	A separate Pathways-Guest Wi-Fi was established and password set. Specific managers have access to the Guest Wi-Fi password to facilitate setting up staff. Activity and bandwidth will be monitored to ensure no negative impact on corporate network. To date, no significant bandwidth issues, but building still mostly closed.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Time Frame (e.g. MM/YYYY)			Cost/Resource (FTE and/or $)
					Year Initiated	Target Date	Date Completed	
Services purchased or contracted	Service Level Agreement	Review SLA infrastructure options and issue RFQ.	Examine SLA and determine new service modalities. Prepare RFQ.	Sr. Mgr. IMT Zycom	2021	Winter 2021	Ongoing	

Quarterly Update	Q1	Q2	Q3	Q4
				Review SLA and identify service/ support issues.

Year End Report Back	Most significant service/support issues are related to ongoing printer issues in VDI. A pilot using Chromebooks to resolve printing issues. Carry forward to next fiscal.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Year Initiated	Target Date	Date Completed	Cost/Resource
Software	Photo Library	Implement on premise photo library to store and manage photos.	Piwigo installed on recycled ComVida server Demo for exec, train staff, launch, migrate images	Sr. Mgr. IMT	2021	Fall 2021	Ongoing	$0

Quarterly Update	Q1	Q2	Q3	Q4
		Demo provided, deferred.	Structure for agency photos place and migration started.	Refer to common drive cleanup as this impacts images.

Year End Report Back	Will continue as part of the common drive clean up.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Year Initiated	Target Date	Date Completed	Cost/Resource
Software	SPSS data analysis software training for Data Specialist.	Train Data Specialist in SPSS syntax and code management, to facilitate annual report, QLP reporting.		Sr. Mgr. IMT	2021	Summer 2021		

Quarterly Update	Q1	Q2	Q3	Q4
			Delayed due to COVID	Test conducted of Nucleus – metabase via web scraping tool based on reports (delayed due to COVID)

Year End Report Back	This task has been deferred to facilitate Formtool/process mapping (hiring) changes (Signority related). This is no longer required as the admin team have taken control of the QLP review process. Draft forms developed to facilitate data gathering and reporting related to QARM items.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Time Frame (e.g. MM/YYYY)			Cost/Resource (FTE and/or $)
					Year Initiated	Target Date	Date Completed	
Software	Focus Group Meetings	Work plan items require input from stakeholders: Digital Signatures, Electronic Medical File Transfer, List of Data / Information Systems, Active Directory, NAVEX	Focused group meetings to gather input for key items on work plan. *Details related to each item noted separately below.*	Sr. Mgr. IMT	2021	Spring 2021		

	Q1	**Q2**	**Q3**	**Q4**
Quarterly Update	Focus group meetings – Digital Signatures & Electronic File Transfers	Investigate using NAVEX to facilitate dissemination of PBSB links. Discussions regarding digitally signed document tracking with stakeholders.	NAVEX appears to be able to perform this function in a limited capacity, but requires reorganizing the underlying structures along web lines, etc. A 'test' NAVEX server was set up and can be explored if Signority is not meeting agency needs.	Implementing changes to employee hiring & employee change/ add/ move forms to address process mapping and accuracy of AD to import timely data to Signority.
Year End Report Back	Signority application in place. Active Directory (AD) needs to be accurate to use bulk signing. Process mapping discussion and updates to forms underway.			

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Year Initiated	Target Date	Date Completed	Cost/Resource
Sensitive Data	Digital Signatures	Investigate options for digitally signing documents (client related and operational).	Test usage options of sign server Assess need, acquire, launch application for digital signatures	Sr. Mgr. IMT	2020	2021	Ongoing	Subscription based ~$6-$70/user/mon

	Q1	**Q2**	**Q3**	**Q4**
Quarterly Update	Focus group meeting – needs analysis	Process map meeting on Jul 8 2021. Review products, establish option by July 16th. Install two-week trial. Complete by mid-August.	Align Active Directory (AD) and Work Force Now (WFN)	Semi-Automate WFN->AD Process mapping of HR forms/ processes to ensure data integrity in AD
Year End Report Back	Semi-automated process halted, Staff encouraged to use current electronic forms while new hiring/change forms constructed. New hire, orientation forms nearing testing/validation phase. Change add move form and revised Maintenance form are next to be reviewed			

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Year Initiated	Target Date	Date Completed	Cost/Resource
Software	Electronic Medical File Transfer	Confirm project send as appropriate business solution, or investigate options.	Demo product to Executive and Privacy Officer, Provide training	Sr. Mgr. IMT	2021	Spring 2021		

	Q1	**Q2**	**Q3**	**Q4**
Quarterly Update		Demo of project send, decision made to investigate Next cloud	Test next cloud, demo & implement.	Next Cloud available to select users, information sent to managers.

CARF Standard	Program/Area of Focus	Issue Identified/Objective	Status/Action Completed	Person Accountable	Time Frame (e.g. MM/YYYY)			Cost/Resource (FTE and/or $)
					Year Initiated	Target Date	Date Completed	
Year End Report Back	Next cloud is available for select users to securely provide recipients with files.							
Sensitive Data	List of data/ information systems	Define list of systems		Sr. Mgr. IMT	2021	Fall 2021		
Quarterly Update	**Q1**	**Q2**	**Q3**			**Q4** Partial list constructed		
Year End Report Back	List of systems still in draft.							
Sensitive Data	Active Directory	Process, roles, responsibilities		Sr. Mgr. IMT	2021	Fall 2021		
Quarterly Update	**Q1**	**Q2**	**Q3** Draft process mapping of hiring process & change add moves shared with stakeholders			**Q4** Checklists developed (which staff need access to what areas of common drive areas and to which distribution groups) vetted and confirmed. These lists are being embedded in Formtool to streamline workflow.		
Year End Report Back	New forms are still under development, as they include significant changes to facilitate staff workload. Draft versions should be available by first of May 2022.							
Sensitive Data	NAVEX	Process, roles, responsibilities		Sr. Mgr. IMT	2021	Spring 2021		
Quarterly Update	**Q1** Documentation initiated	**Q2** Completed documentation, documentation provided to Zycom to process	**Q3** Zycom resets/restores most NAVEX related inquiries.			**Q4** Zycom resets/restores most NAVEX related inquiries.		
Year End Report Back	Most NAVEX restores (reactivation of account after LOA or re-hire) are completed by Zycom. Occasionally there are problem records (2 in Q4) that require direct contact with NAVEX to address. Turnarounds on these are greatly improved from previous.							

Pathways
to Independence

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