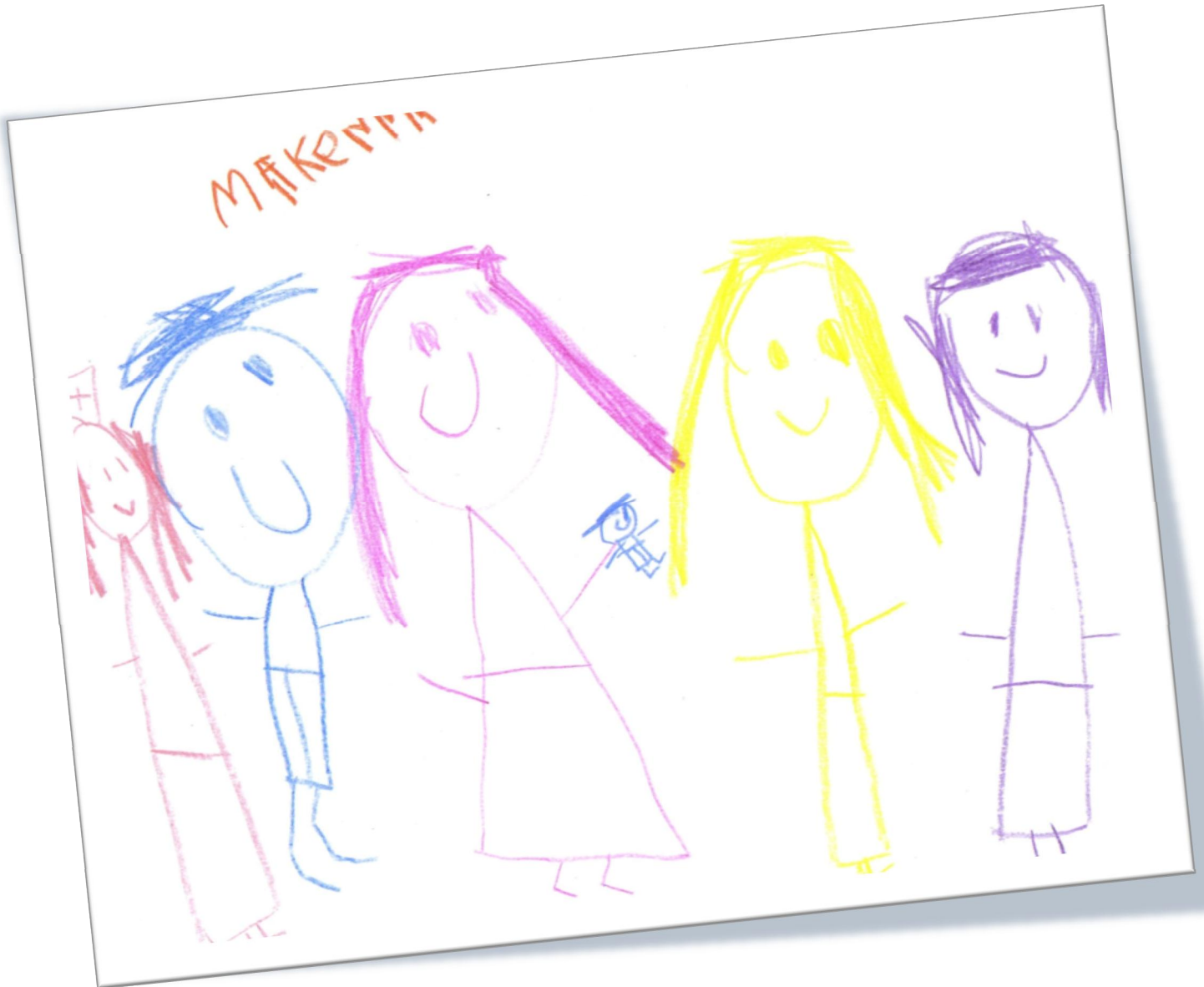




KITIMAT
Child Development
CENTRE
A Family Resource Centre



2009 - 2010
Annual General Meeting



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Board President's Report April 2009 - March 2010

Unlike many who mark milestones with pomp and ceremony, the Kitimat Child Development Centre quietly celebrated 35 years of service to the children and families of Kitimat and surrounding area. The staff and employees of the Centre continued on as they have always done with the task of providing quality family-centred programs and services to clients of all ages.

In July of last year, the Centre at a small gathering bid 'good-bye' to Mary Bernt, a long time employee and wished her all the best as she entered the world of retirees. Her contributions to the growth and development of the Centre, and her strong belief and commitment to children and youth will long be remembered.

Staffing has remained stable. The Centre has been actively recruiting to hire a Speech-Language Therapist position but unfortunately the position remains vacant at this time.

The Centre was actively involved with the planning and operations of the community's annual Aluminum City Telethon in October 2009. Board members worked with staff and others in the community assisting on the day of the Telethon to help raise money to support many of the non-profit organizations in town, including the Kitimat Child Development Centre.

In March, Centre staff manned an information booth at the Nechako Literacy Fair to promote the services of the Kitimat Child Development Centre.

The Board retains its membership in the British Columbia Association of Child Development and Rehabilitation (BCACDI), a provincial organization of agencies offering a broad range of services to children and youth including infant development, early intervention and other family-related services. This provincial organization meets with government to advocate for services for children, youth and their families.

Accessibility continues to be one of the Board's goals. We have been fortunate to obtain a commitment of dollars from the Rotary Club of Kitimat and are working towards obtaining the remainder of the dollars needed through the grant process. The Board recognizes that due to present economic conditions, this goal may take longer to achieve than originally anticipated.

The Centre has been and continues to be has a very active player in the community. It is a member of the Kitimat Interagency committee. With the announcement of the Eurocan Mill closure, the Centre joined with others forming the Kitimat Community Sustainability Committee, a group established to look at the socio-economic impact the loss this mill would have on our community. The direct impact on the Centre was the loss of two board members who left to seek other pursuits due to the mill closure.

Board members are astutely aware that there will be changes to our community and recognize that the Kitimat Child Development Centre needs to be able to support families during these challenging times. The Board is confident that the Centre will continue to provide the high quality programs and services that Kitimat has come to expect.

Respectfully submitted,



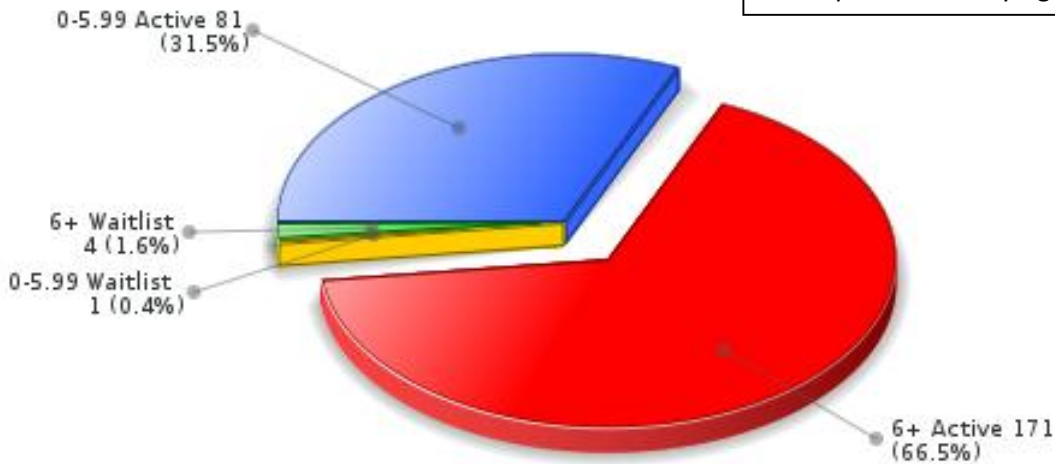
Jo Ann Hildebrandt
Board President

Who we have served?

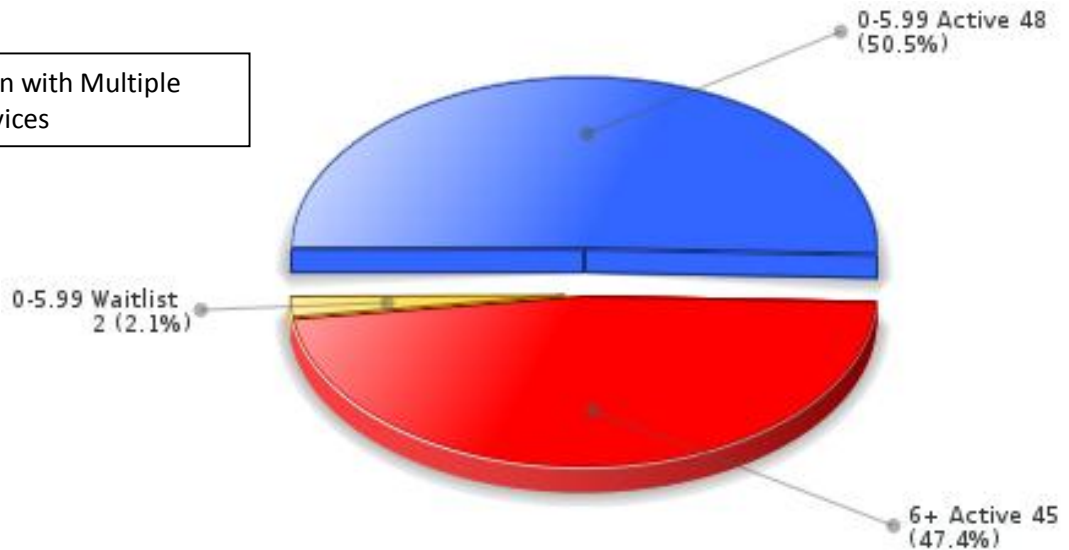
The average per month of unique clients that we serve is 409 persons served. For children in March 2009 we were serving 257 children and of those children 95 were receiving more than one service.

The following shows how unique children with multiple services are about 50/50 under and over 6 years of age. For Unique children by agency overall we are serving more children over six than under six.

Unique Children by Agency Overall



Unique Children with Multiple Services



These numbers do not include our day care, pre-school and family resource centre drop in programs.

Executive Directors Annual Report 2009- 2010

Our annual general meeting is held in June of each year and each year all programs and services summarize their year in an annual outcomes report that also serves as our annual general meeting report. This report covers the 2009-2010 year and when one re-reads previous years reports it is honouring to see how the services of the Centre continue to strive for continual improvements and provides such a range of services.

The purpose of our annual report is to outline our achievements and identify areas of further growth or improvements. Each year that we write our reports we learn something. We keep modifying how we write the report as we learn more about outcome reporting and linking our outcome reports to other parts of how we do business such as our strategic planning, our business improvement plan, our risk management plan, our technology and accessibility plans.

Yes, the report is long and has lots of details but by doing our report this way it is used to guide our services along with our sustainability analysis and work plans for each service we provide. We do wish our persons served, our funders and our community partners to know about our services and the outcomes we achieve so we also summarize this report on our web site- www.kitimatcdc.ca

What is an outcomes report?

It is a report that describes satisfaction, effectiveness, efficiency and access to our services both for individual programs/services and for the organization as a whole. Operationally the report is used for improving services, for setting our annual goals. We are striving to always ask if our services are making a difference. The outcome components we look at are- **SATISFACTION**- the opinion of persons served and other key stakeholders regarding access, process and outcome of the services received. **EFFECTIVENESS** is defined as the results achieved and the outcome for the person served. **EFFICIENCY** is the relationship between resources used and results of outcomes obtained. **ACCESS** is identifying any barriers to obtaining services.

Other key sources of information that helps us improve is looking at our concerns and complaints, our health and safety incidents and our staff satisfaction results so these reports are also included in this annual summary report, are on our web site and summarized into reports for our board of directors and others.

Another means that we use for looking at how we provide services is our commitment to CARF accreditation. CARF is a non-profit international organization whose mission is to promote quality, value and optimal outcomes of services through a consultative accreditation process that centers on enhancing the lives of persons served. By striving to meet the standards of CARF accreditation we also are continually improving. Our next CARF survey will be October/November 2010. We have had two previous three year survey awards of accreditation which is the highest accreditation an organization can obtain.

As you read the reports the definitions used in our outcome reporting are:

Some administrative highlights of this past year include:

- The Centre takes a leadership role with our interagency and social planning committees in community development and ensuring services are available and coordinated in our community. This has been especially important with the transition that our community is going through with the changing economy, the closure of Eurocan and other changes occurring in our community.
- We continue to work provincially with our membership with the BC Association of Child Development and Intervention, participation on the provincial oversight committee for SIRF, our statistic collection system and other provincial committees as needed. We also work closely in the north with Child Development Centre's of the north working collaboratively using both phone calls and face to face meetings.
- We continue to seek out any grants that will help our services. We have tried for both an accessibility and an out of school care grant but unfortunately have not successfully been funded. To help with accessing grants we are joining with Terrace and the Prince George Centres to access a grant data base.
- We continue to work closely with the school district and other community partners with our commitment to collaboration in the services we provide. This partnering with the school district continues to be important as the Boards of Education take an increasing role in providing services for children under six. We accessed Children's First funding that is being used to facilitate dialogues and planning for these services.

- We continue to move forward with the use of technology and the move to using Nucleus Labs for our data base program and our new computer technology support is going very well.

Staffing has had some changes this year that are reflected in individual program reports. Mary Bernt retired from the child and youth care coordinators position and this prompted a path of changes. We struggled to have a full time speech language pathologist but have been able to cover these services with short term contracts for a speech language pathologist and a speech language assistant. We have a commitment for next year where we will be fully staffed.

At the time of writing this report we are in the midst of re-doing our strategic plan. The centre is a strategic organization and the previous five year plan has many of the goals set accomplished. Once this plan is done it will be posted on our web site and at the Centre. Predicting the future is hard to do so one of the strong focuses of our planning is sustainability of our services. We have implemented a sustainability analysis tool that each program is using to analyze their services. This tool is reported out to the Board of Directors on a regular schedule so the Board is aware of program needs and challenges as well as successes.

In closing I would like to thank our dedicated Board of Directors for their leadership and guidance and express appreciation for our dedicated staff.

Respectfully submitted,



Margaret Warcup
Executive Director/Physiotherapist

Building Blocks Annual Report April 2009 to March 2010

INTRODUCTION:

As of March 31st, 2010, the Building Blocks Program had served nineteen children and their families in the community. Building Blocks is a program for families with children from birth to five years old. The goals of the Building Blocks program are to promote healthy growth and development of children by supporting families and to strengthen community supports for families.

Building Blocks practices from a family-centered approach which means the program is supporting and including more than just the child, but the children's family as well. Family includes parents, siblings over the age of five, partners, grandparents, caregivers, etc. There are currently fifteen children on the BB caseload. Typically, the families on the Building Blocks program are vulnerable families who have been referred to the program, or have identified themselves that they may need extra parenting support. The demographics of these families include: single parents, young parents, married or common law parents, low income families, families at risk for addictions, violence etc.

There were some staffing changes towards the end of the year. Lori Fitzpatrick was the Building Blocks Family Support Worker until September 2009. Melissa Pacheco was hired at the end of September and Cheryl Lippert became our new program coordinator.

The Building Blocks Program collaborated with a range of community agencies to deliver our services to families. Some of those agencies included Ministry of Children and Families, Public Health Unit, Mental Health Unit, Northern Health, Tamitik Status of Women etc. The Building Block Program has also worked very closely with many programs within the Child Development Centre.

ACCESS:

On the most part, Building Blocks provided supports to families through weekly/bi-weekly home visits. However, the service delivery of this program is quite flexible, and one on one support sessions were also offered at the Child Development Centre or at various locations throughout the community, depending on the needs and preferences of the families served. The goals of the visits were to promote overall

child development, positive parent/child interaction and parent education. The support worker is also available to all families through phone support to answer any questions or address any parental concerns that may arise.

EFFICIENCY:

In 2009-2010, an attempt to contact a family was made within one week of the referral to the Building Blocks Program 100% of the time. There are often obstacles to this process; such as phone accessibility, un-returned phone calls, trust issues etc. An in-person visit, whether in the home or at the centre would then occur within a week of the initial contact. There are currently no waitlists for the program. Earlier this year the Building Blocks Program completed a sustainability analysis. This identified that the program originated from a community need to support at-risk/vulnerable families whose needs were not being met by other community programs. Building Blocks continues to meet this need.

EFFECTIVENESS:

Building Blocks acknowledges that parenting issues and challenges are unique to each family and addresses these unique needs individually with each family through Individual and Family Goal Planning. Parents choose the goals for their children and for their family when they join the Building Blocks Program and these goals are reviewed every six months. The clients' goals are in their Individual/Family Support Plan. As the goals are met, new ones are then developed. Goal reviews and progress notes demonstrate that children and families are working towards achieving their goals. The goal for next year is to track and record how many children and families reach their goals in the 2010-2011 year.

SATISFACTION:

100% of clients that completed their Building Blocks Client Family Satisfaction Survey stated that they feel the Building Blocks program is a positive experience for their family.

Some comments from clients when asked "What is different in your life and the way you parent because of your involvement in Building Blocks?" are listed below:

- "I have more patience towards my kids due to the Building Blocks involvement not only towards my kids, but myself too".
- "I play more with my child".

- "The Building Blocks Program has taught me a lot about parenting that I never knew before".

GOALS FOR 2010-2011:

- Track of the number of support sessions and home visits provided by the Building Blocks Program.
- Track the number of community agencies Building Blocks collaborates with to deliver our services to families.
- Track and record how many children and families reach their goals in the 2010-2011 year.

Being a family support worker in the Building Blocks Program has been a rewarding and positive experience for me. It has been a real privilege being able to advocate for, empower, and support many families in the community. I am truly thankful for the support of the Ministry for Children and Families to provide funding for this program as well as the on-going community support.

"Raising a child is too big a job to do alone. Wise communities support families in launching children for success." - Success by Six



Respectfully submitted,

M Pacheco

Melissa Pacheco
Building Blocks Family Support Worker

Community LINK Program September 2009 - May 2010

INTRODUCTION:

The Community LINK Program provides a LINK Worker at each public elementary school in Kitimat, and at Kitimat City High (KCH), to support students that are identified as "vulnerable". Using evidence-based strategies, students are provided support in order to increase their social responsibility and academic achievement. Along with providing one to one support and group programming for students, the program works in partnership with student's families, the school system, and community agencies to provide integrated services. Performance indicators for the 2009/2010 school year continue to show positive results for students in the areas of social responsibility and academic achievement.

This school year marked the sixth year that the Community LINK Program has received funding from the Coast Mountain School District (CMSD) in Kitimat. Onetime only additional funding was also received in March 2010 from the CMSD, in response to the transition our community is facing with the loss of a major community employer. With these additional funds we were able increase all LINK hours worked in the schools, by five hours each week. These extra hours allowed us to increase programming through the spring, and will also allow us to establish programming prior to returning in school in September. Schools, families and community agencies will now be able to benefit from our services immediately in the 2010 - 2011 school year. Additionally with this funding we were able to offer a part-time, LINK position at Mount Elizabeth Secondary School (MESS), making the Community LINK program available in every Kitimat public school. We believe that this connection to MESS is essential in providing comprehensive, consistent support to vulnerable children in our community.

That being said, we have continued to develop as a program this year adding new programming that reflects the current culture in our schools. We have also initiated more evening resources for families by offering parenting groups with on-site childcare, along with coordinating family school events a couple of evenings a month. We continue to consider our program to be very responsive to client, family and school needs. We also continue to incorporate evidenced based programs and strategies into our work with students, families, school staff and community partners. We truly see our biggest success this year as our day to day

connection with vulnerable children over the past six years. According to Grumet (1996),

"Our relationships to the world are rooted in our relationships to the people who care for us. Their interest in us is necessary to our capacity to be interested in the world that interests them"

EFFICIENCY:

The Community LINK Program was in place for the 2009-2010 school year at all three public elementary schools in our community and KCH. Each school program was staffed with one resource worker. Each resource worker worked six hours, each day school was in session with the exception of Roy Wilcox Elementary school where the worker shared the hours between resource work at the school, and program coordination. Mount Elizabeth Secondary School (MESS) was also staff with part-time LINK Worker for 12 hours a week as of March 2010.

Funding received for the 2009-2010 school year:

- 147, 000.00 received from the CMSD. This was a 16% increase in funding over the previous school year funding amount of 126, 654.00
- Onetime only additional funding was also received from the CMSD in March 2010 in the amount of 22, 000.00

Partnership benefits received for the 2009-2010 school year:

- Kitimat Child Development Centre - \$3, 650.00 "in kind" cost of administration support
- Nechako Elementary, Roy Wilcox Elementary, Kildala Elementary, Kitimat City High - \$12,500.00 "in kind" cost of rent for operating space within all five schools

Statistical Highlights from the 2009-2010 school year:

Open client files: 73 open client files. In addition to this caseload, 159 students were supported in addition to vulnerable students through various group programs or school events

One to one support: 755 scheduled sessions with students (414.75 hours)

Group programming: 582 scheduled group sessions (391 hours)

Accompaniments/transportation: 77 (53 were provided at KCH)

Brief contact with parents/guardians: 409

Meetings/consultations with parents/guardians: 72 (58.5 hours)

Brief contact with school staff: 2412

Meetings/consultations with school staff: 674 (298.5 hours)

Brief contact with community agencies: 440

Meetings with community agencies: 185 (89.25 hours)

Referrals to other programs/agencies: 32

Our goal for the new school year is to maintain these efficiency measures and consider reviewing referrals to other program agencies as a way to manage our increasing caseloads. With this goal we can ensure that an increased number of children identified as vulnerable are able to access services.

EFFECTIVENESS:

To measure our program outcomes we used the following measures; Attendance Records (Absences and Lates), Report Card Grades (Language Arts & Mathematics), and the quick-scale assessment from the Ministry of Education's Social Responsibility Performance Standards.

Attendance Records - Elementary School-Based Community LINK Program Clients

There are two consecutive data tables below. The first table contains student's absence records while the following table displays student's late records. From both of these tables we are able to see that 41% of students involved with the Community LINK Program this year have seen an increase in their attendance to school and 32% have had a decrease in the quantity of late arrivals to school. For the upcoming 2010-2011 school year we would like to see 60% of our clients show an increase in their number of days in attendance and 50% have a decrease in their late arrivals to school.

Attendance Records

Baseline: Sept 2008 - May 2009 Attendance Records

Progress: Sept 2009 - May 2010 Attendance Records

	Decrease in Attendance	Same Level Maintained	Increase in Attendance	Data Not Available *
KILDALA – 27 students	10	1	11	5
ROYWILCOX – 10 students	3	0	7	0
NECHAKO – 26 students	18	0	8	1
TOTAL – 63 students	31 = 49%	1 = 2%	26 = 41 %	6 = 9%

* due to school move/transfer

Late Records

Baseline: Sept 2008 - May 2009 Late Records

Progress: Sept 2009 - May 2010 Late Records

	Increase in Lates	Same Level Maintained	Decrease in Lates	Data Not Available *
KILDALA – 27 students	14	2	6	5
ROYWILCOX – 10 students	3	3	4	0
NECHAKO – 26 students	15	0	10	1
TOTAL – 63 students	32 =51%	5 = 8%	20 = 32%	6 = 9%

* Due to school move/transfer

Report Card Grades - Elementary School-Based Community LINK Program Clients

The two consecutive data table below look at report card grades in the areas of Language Arts and Mathematics. From an academic standpoint, looking at both tables the majority of clients have improved or maintained their performance. 43% of clients have maintained or improved their performance in the area of Language Arts and 50% of students have maintained or improved their performance in the area of Math. We can also see that in both tables below that between 31% - 35% of data for clients was not available. This limited availability happens because many LINK clients have Individualized Education Plans (IEPs) in place and are not part of the regular grading system. For the 2010-2011 school year we would like to use a separate outcome measurement tool for students that have IEPs. Using this tool, we would like to set a goal of collecting 80% of all client academic data.

Language Arts Report Card Grades

Baseline Data: 2nd Term 2009 **Progress Data:** 2nd Term 2010

	Decreased Performance	Maintained Performance	Improved Performance	Data Not Available*
KILDALA – 27 students	5	5	3	14
ROYWILCOX – 10 students	2	3	3	2
NECHAKO – 26 students	7	9	4	6
TOTAL – 63 students	14 = 22%	17 = 27%	10 = 16%	22 = 35%

* May be due to change in Report Card format, IEP, moved/transferred schools

Math Report Card Grades
Baseline Data: 2nd Term 2009 Progress Data: 2nd Term 2010

	Decreased Performance	Maintained Performance	Improved Performance	Data Not Available*
KILDALA – 27 students	2	2	10	13
ROYWILCOX – 10 students	0	3	5	2
NECHAKO – 26 students	8	11	1	6
TOTAL – 63 students	10 = 16%	16 = 25%	16 = 25%	21 = 33%

* May be due to change in Report Card format, IEP, moved/transferred schools

Social Responsibility Performance Standards (SRPS) - Elementary School-Based Community LINK Program Clients

From the data below, we are able to see significant indicators of success in our elementary school data, with the use of the Social Responsibility Performance Standards (SRPS). The SRPS were created so that BC schools have a framework to assess their efforts to enhance social responsibility and improve the social climates within their schools. The Community LINK Program uses this performance indicator to assess whether the program is meeting its outcome goal of improving students social functioning. With the data collected from the SRPS for students on the Community LINK Program caseload for this year, we are able to see from pre and post data that 38% of the students have maintained or improved in the area of social responsibility and 43% have maintained their performance level. For the upcoming school year we would like to see 60 % of clients improve their performance in the area of Social Responsibility. Improvement in this area has steadily increased as the LINK program has evolved and become more integrated as part of the school team over the past six years.

SRPS Quick Scale Assessment 2009-2010

Baseline Data - SRPS Quick Scale assessment of students, October 2009

Progress Data - SRPS Quick Scale assessment of students, May 2010

	Decreased Performance	Maintained Performance	Improved Performance	Data Not Available*
KILDALA – 27 students	5	19	3	0
ROYWILCOX – 10 students	0	2	6	2
NECHAKO – 26 students	4	6	15	2
TOTAL – 63 students	9 = 14%	27 = 43%	24 = 38%	4 = 6%

* may be due to late referral in the school year to LINK Program, school move/transfer

ACCESS:

Principals and/or the School-Based Team identify vulnerable students for referral to the Community LINK Program. Consent from the Parents/Guardians is then obtained by the school for Community LINK to work with their child. Students referred to Community LINK at the high school level are permitted to consent to their own service within the program. Students also interact with the Community LINK Program through classroom groups, like Roots of Empathy, FRIENDS For Life etc. Programming outside of teaching time is also available through Homework Groups at lunch and Rainbow programming after school. Parents are able to connect with Community LINK on an as needed basis. They may also participate in the various parenting program like Kids Have Stress Too! and My Tween and Me.

Some of the barriers to access that we have identified within the program this year are:

- Client case loads for the year being established primarily in September.
- No wait listing policy in place
- Identification of vulnerable students is accessed by the school only

In the upcoming 2010-2011 school year it is our goal to establish a wait listing policy that addresses clients being taken on primarily in September and establish a caseload management tool that ensures that all vulnerable children have access to LINK services. We will also request that connection is made early in the school year between the schools and the Ministry of Children and Families to identify vulnerable children from a community perspective who may be considered for referral to the program.

SATISFACTION:

Feedback surveys are conducted annually for the Community LINK Program. Students, families and school staff are asked to complete this survey. This year the family and school staff surveys were again administered by the Kitimat Child Development Centre, in order to increase the anonymity of the individual completing the survey. Family surveys continue to have a low return rate with 10% of surveys returned this year. This is a marginal increase over last year's returns, but for the 2010 - 2011 school year we would like to reach the goal of having 50% of families providing feedback on our services. We will achieve this by not only doing a survey mail out, but by also providing an electronic survey via email to our client's families and

by posting this survey on our school websites. Our return rates with School Staff surveys also declined, from 68% return in 2008-2009 to 46% this school year. Our goal for next year with the staff surveys is to increase our return rate to 70%. We will do this by creating a new electronic survey that is administered on-line through the school system's BCeSIS email, which connects all school staff.

The following is a summary of feedback received the school 2009-2010 year:

Student Feedback

When students involved with the Community LINK Program at their elementary school were asked who they could go to if they "needed help or someone to talk to", 64 % identified the Community LINK Worker in their school.

79% of students working with Community LINK at their elementary school believed they have learnt a lot, or more than a lot, during their time with the program.

Seven out of 10 students at Kitimat City High agreed, or strongly agreed, that they felt more connected to school and their community since working with the Community LINK program. The same number reported that they felt more connected to their family.

"I really liked talking to the LINK Worker because she has helped me through a lot in my life, even through my hardcore, difficult times she was there whenever I needed to talk to some the most"

KCH Student

"The Community LINK Worker is on those people you can go talk to when you're getting frustrated with your work. She will help you calm down than send you back to your work."

KCH Student

Parent/Guardian Feedback

One overall trend was clear from those families that responded to the feedback survey; When asked, "Since your child was referred to the Community LINK Program has there been any change for better or worse in your child's (or children's) functioning at school or at home?" 100% of Parent/Guardians responded that their

child(ren)'s functioning was "better", or "some what better". Parent'/Guardians also reported 100%, either "agreeing" or "strongly agreeing" that they found the Community LINK Worker "to be a caring professional that our child or our family was able to contact for emotional support, assistance with problem solving, advocacy, and resources."

"I love the LINK Program being in the school. It has helped my son a lot. And we have seen great improvement. He also enjoy shaving it too"

Parent

"The Community LINK Worker has been a great help to my child's performance at school. "

Parent

"As a parent of 3 children under 11, I attended the last session of My Tween and Me, and I highly recommend this set of sessions to every parent! It's full of insights to how your child is/is not communicating, and to make conversations count. The sessions are very informal; you grab a coffee, take a seat and the sessions fly by. You'll really be surprised at how the Community LINK Worker can share her knowledge and help steer your family into becoming a tighter, more receptive unit!"

Parent

"Available when we need her"

Parent

SCHOOL STAFF (Teachers, Counsellors, Resource Workers) Feedback

This year, as with last year, the school feedback survey were very positive, with 100% of staff "Strongly Agreeing" or "Agreeing" that the Community LINK Program compliments or enhances the service provided in their school.

When ask the question, "Has the Community LINK Program at your school provided individual and group opportunities for development and enhancement of student's social skills and personal growth?" 83% of school staff "strongly agreed".

"Through group work such as Girl Talk and the Drug and Alcohol sessions, the LINK program is giving students skills that they need for life"

KCH Staff

"The changing family has detrimental effects on students. Without the Community LINK Worker's work, numerous students and families would continue living stressful lives, which have an incredible negative impact on students' emotional and academic growth"

Kildala Elementary Staff

"Our Community LINK Worker is a vital part of our school....Most of our students have received assistance from her regarding counselling appointments, court dates, and guidance with working with (Ministry of Children and Families)"

KCH Staff

"The LINK Worker has a good rapport with other agencies. She also is able to approach parents in different ways. She is part of our school team"

Kildala Elementary Staff

" I think the Community LINK Worker is ESSENTIAL to our school. The work that she has done this year has been incredibly valuable and is critical to the success of many of the students at our school."

Nechako Elementary Staff

"Our Community LINK Worker does an excellent job providing support to the teachers, students and their families. I hope the program is not cut back in any way!"

Roy Wilcox Staff

Looking to the Future

It has been yet another exceptional year of growth and change for the Community LINK Program. With additional funding received in the spring we were able to expand the Community LINK Program to MESS (please see additional report from this pilot project). We were also able to increase our regular programming with these additional funds and incorporate new programming such as the Rainbows Program, Salvaging Sisterhood: Small Group Curriculum for Relationally Aggressive Girls, and the Centre for Addiction and Mental Health's Girl Talk. We are hopeful that this increased level of funding will be sustained for the upcoming 2010 - 2011 school year. We look forward to the opportunities this upcoming year will bring also. Our community is in the process of transition and we know LINK will continue to be a

valuable resource in the schools as families and students adjust to these new circumstances in the fall. We will also be facing the difficult challenge saying good-bye to one of our LINK workers, Crystal Redden, who has become an invaluable addition to our LINK team and the team at Nechako School. We will have our work cut out to find a suitable replacement.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read 'Jocelyn'.

Jocelyn Iannarelli, BA
Community LINK Program Coordinator

**Community LINK Program
Mount Elizabeth Secondary School
September 2009 - May 2010**

After the closure of Eurocan in Kitimat and other economic and social impacts experienced in our community we were fortunate the School District could assist us with a LINK worker being placed in the High School. This decision was based on community feedback on increasing and/or changing needs for youth that were now presenting as vulnerable.

The MESS LINK worker followed the same program policies and procedures as the LINK workers in the Elementary schools and Kitimat City High.

ACCESS:

Access to services was increased for youth by the implementation of a lunch group for any students. This safe place for interaction provided a drop in area for 47 students and on average 20 per day. From these discussions individual referrals of 7 were initiated for other services such as the Youth Empowerment Group and individual LINK worker contact. Access to service in the high school was increased as well as the program goal of linking youth to other services occurred.

Of note the Chamber of Commerce has interviewed students for the Chamber youth awards and one of the consistent messages heard from those interviewed is the need for drop in opportunities where social interactions are safe or if a need is identified some guidance is available. The youth also identified the desire for activities that are not organized sports or teams. Link can provide this as the goal of LINK is to connect students with the community.

EFFICIENCY:

As a new program the receptiveness of the school counsellors to assist the LINK worker into the school environment part way through the year was very helpful. The collaborative working of a LINK worker with the school team and the need for a consistent known person providing the service is an important part of the best practices in implementing this service.

SATISFACTION:

Feedback has been received by the CDC from the School Staff reporting high satisfaction with the service and a strong request to continue the service.

EFFECTIVENESS:

The program was implemented in reaction to a changing need in our community. If successful in funding for next year the program will measure the same variables as the other LINK program of social responsibility, attendance and report card grades.

Respectfully submitted

Gillian Barber

Gillian Barber

Community Link - Mount Elizabeth Secondary School

Community Resource Worker Annual Report 2009-2010

The Community Resource Worker position was initially started with a contract through the University of Northern British Columbia. We have maintained this position by accessing a number of grants such as National Crime Prevention Strategy, Early Learning Grant through Coast Mountains School District 82, Success By 6, and a CIRM (Critical Incident Response Model) grant through Ministry of Attorney General and Minister of Multiculturalism. The support of the CDC administration has been a monumental component to the ongoing work and support of this position. The overall goal of this position continues to be to increase the resilience of children/youth and to coordinating social planning process in Kitimat. The following is a report outlining the work completed during April 2009 to March 2010.

The Kitimat Interagency Committee has been a vital part of the work and success of our accomplishments over the past year. The interagency email list continues to play a fundamental part in the dissemination of local, regional, provincial and national information. With approximately 100 contacts, information can be distributed in an efficient manner. The sharing of information has allowed us the ability for constant monitoring of the pulse of the community to see where we are and where we can go next.

The social planning committee, a sub-committee of interagency committee continued to support the work of community agencies. The plan is inclusive of social, health and education factors to consider in decision making. This has been an important year as West Fraser's Eurocan Pulp and Paper Mill announced the permanent closure of its Kitimat mill. This prompted the committee to facilitate dialogues with key community members to discuss the potential impacts to their services. Dialogues with principals, counsellors, front-line social service providers allowed us to prepare for the eventual decline in population as people look for work elsewhere. A key partnership for our committee has been with Lori Henderson of the Provincial Office of the Secretariat. By sharing local information with her regarding service pressures, funding issues etc with her she has the ability to share this information with key ministers who make the critical decisions regarding services to our community.

We have actively communicated with other communities in the province as well. We were fortunate to connect with the Mayor and key representatives from Mackenzie. Their invaluable assistance has allowed us to move forward in the most positive ways. We have also connected with other communities such as Port Alberni who are also facing tough times.

EFFICIENCY:

By having a paid coordinator for the production of minutes, coordination and networking this has become an invaluable service for our community. This is one of the most effective ways of passing information through many contacts within our community as well as linking to the community of Terrace and others. Traditionally, the coordinating had been done off the sides of many people's desks.

EFFECTIVENESS:

The coordination and dissemination of information would not have been as effective had this position been a volunteer position. Many committee members have reported the increase to service use, service recognition due to the distribution of information in a quick and low-cost way.

ACCESS:

Anyone can join the distribution list for both interagency and social planning. The committee is open to anyone from Kitimat or Terrace and includes non-profit, profit, union and non union, social, health, education, business and government and other community members. The distribution list grew once again this past year.

SATISFACTION:

We have received countless positive reactions from people in our community, surrounding communities as well as provincially about our ability to work together and about our commitment to collaboratively working together. Our partnership is responsive to needs and by our effective communications we have been able to react to opportunities quickly.

Our committee has been successful in partnering with Rio Tinto Alcan as well as the Transition Coordinator from Eurocan. They have recognized the Social Planning

Committee, a sub- committee of interagency as valuable for our knowledge of our community and our willingness to work together in assisting them with their strategic planning and implementation. Input has also been provided to other potential projects that may come to our community.

GOALS FOR NEXT YEAR:

- Continue the interagency and social planning processes
- Search and obtain funding to continue this work
- MCFD is funding community tables for Make Children First and implementation of the Children and Youth with Special Needs - Framework for Action. We will continue to evolve our interagency framework to incorporate this and other upcoming initiatives.

In summary, the main focus of this position has been attaining the funding for the Community Resource worker position to continue work in social planning, as well as developing work plans and budgets for this process. The success of the social planning and Interagency committees has been the ability to have a paid position to facilitate collaborations within the community to ensure the process continues. For example, distribution of meeting minutes, organizing meetings, email correspondence etc. As this process continues, questions have arisen regarding the furthering of our success and the need for sustained funding. Most foundations offer only project funding with a maximum time frame of a year. The social planning oversight committee as well as our Executive Director and Social Planning Oversight Committee Chair, Margaret Warcup, continues to strive for the sustainability of this project.

A driver for many involved in the interagency committee is the value we have of working together to ensure we have a healthy community.

Respectfully submitted,



Lori Ferreira, BA (CYC), ECE
Community Resource Worker

Family Drop In and Resource Program Annual Report April 2009 to March 2010

The Family Fun Spot is a drop-in for children ages 0-5. The Family Fun Spot operates three days a week. The Funspot hours were changed from three mornings a week to two afternoons and one morning a week to accommodate families different schedules. Susie Barbosa was the FunSpot facilitator until June 2009. For the fall of 2009 various CDC staff facilitated the FunSpot until Melissa Pacheco was hired in January 2010. Cheryl Lippert is the program coordinator.

Family
Fun
Spot



ACCESS: The drop-in is open to children who are between the ages of 0 to 5. There is also a \$2.00 drop-in fee, however this fee is waived if finances are an issue for a caregiver.

The goal for 2010-2011 is to increase community awareness about the Family Fun Spot. This can be done by distributing flyers to the mall, doctors' offices, aquatic centre, arena, and recreation centre. Allocating some of the budget into advertising in the various newspapers will be looked into as will advertising on Facebook.

EFFICIENCY:

Between April 1, 2009 and March 31, 2010, the Family Fun Spot operated 93 two-hour sessions. Calculations made from a daily sign-in indicate that 482 children dropped in to the Family Fun Spot. In addition to our upstairs space, we continue to utilize the downstairs gym to accommodate the growing number of families we serve. Children attend the Fun Spot with mothers, fathers, grandparents, and community caregivers (e.g. foster parents, support workers).

The Family Fun Spot outcomes as indicated in the contract are:

1. Provide an environment that promotes healthy and positive family and child interaction.
2. Increase the opportunity for the use of toys and creative play in a group setting.
3. Strengthen knowledge of effective parenting strategies.

4. Promote resources within the Kitimat Child Development Centre and increase awareness of additional community resources.
5. Promote early literacy, healthy nutrition, and children's health as it relates to their overall well-being.

EFFECTIVENESS AND SATISFACTION:

Comments from these parents attending the drop-in include the following:

"My child enjoys playing with the other kids and playing with the different variety of toys."

"Family Fun Spot teaches my child to play cooperatively and share the toys with the other children."

"My children get to meet new friends".

"Family Fun Spot gives my children the opportunity to interact socially with the other children".

GOALS FOR 2010-2011

- To increase the awareness of the Family Fun Spot by advertising, and giving information to community agencies. Advertising will be in community newspapers at least once per month for the year. Family FunSpot brochures will be given to community organizations once per year and the Family FunSpot facilitator will attend one community fair per year to promote the FunSpot.
- To have more guest speakers involved in the Fun Spot by coming in to speak to caregivers about various child development topics (potty training, nutrition, fine and gross motor skills etc.). There will be 10 guest speakers providing information to caregivers for the 2010-2011 year.

Respectfully submitted,



Melissa Pacheco
Family Fun Spot

Family Support Worker Annual Report 2009 - 2010

After years of lobbying for increased funding for this program, the Family Support Worker position has finally been funded as a full-time position. The Centre is able to continue to staff this position on a part-time basis and infuse additional hours into the Therapy Assistant's work with the children. The Family Support Worker primarily provides service to families of 3-6 year olds, who are accessing Early Intervention and/or Early Education services. Service delivery may involve: facilitating access to services; providing ongoing support to a family through service co-ordination and case-management; and at times, offering direct support to families experiencing crisis, particularly in advocating for the choices and priorities that parents have identified for their children. It is essential to the position that the Family Support Worker be flexible and readily available to assist families in navigating through service systems, as well as be resourceful in ensuring that families have the information they need to make decisions for their family and their children.

As of March 31, 2010, the Family Support Worker had served 60 children and families in Kitimat. There are currently 33 children on the caseload. However, caseload numbers do not reflect the random contact with families who contact the Centre for information regarding how to access resources, or for support in being referred to appropriate agencies...such inquiries are often directed to the Family Support Worker.

The Family Support Worker has been instrumental in organizing a number of outreach visits from a visiting Speech and Language Therapist, as well as in continuing to manage the speech caseload. When services are limited, it can be a challenge to balance the priorities of CDC intervention staff, Early Education, and of families whose children may be less known to the Centre, but have significant speech-related needs nonetheless. Input gathered from families to date has indicated a high level of satisfaction with this process.

ACCESS:

Our new contract has included an increase from 910 hrs to 1820hrs for the FSW position. The additional hours allows for greater flexibility for our part-time FSW

to meet workload demand, as well creates an opportunity for the CDC to offer a broader range of support to the families we serve, as in therapy intervention.

EFFICIENCY:

- As a Centre, we continue to strive to ensure that we are integrated in our approach to providing service to families, and further, that we are documenting our collaboration through family service planning. The Family Support Worker plays an integral role in this process for children on the Early Intervention caseload. We continue to work towards improving our efficiency at completing service plans that are representative of families' priorities and that include suggested therapy outcomes.
- Typically twice a year, we are visited by a psychologist from Sunny Hill Health Centre for Children. The Family Support Worker ensures that the referral process is complete, facilitates family and staff needs during the assessment, and offers support to the family following their child's visit. An ongoing concern has been the time lapse in receiving the finalized developmental assessments from the psychologist. The long wait time does stall service planning, particularly for those children heading into the school system. Despite much of this process being beyond our control, we continue to advocate that families in Kitimat receive prompt and reliable service, and that consultation with our community remains a priority for the psychology department at Sunny Hill.

EFFECTIVENESS:

- We have identified a need to put greater effort into completing exit summaries with parents upon the discharge of their children from caseload. Although during the referral process, the FSW thoroughly reviews with families their rights and responsibilities in their service relationship, it is equally important that upon discharge we follow-up with families as to whether or not they felt satisfied that the terms of the agreement were met.
- The Family Support Worker has attempted to provide a greater presence in our community preschool and daycares in effort to facilitate communication between childcare staff and the Early Intervention Team. She was able to provide peer support and feedback to childcare staff in completing care plans

for those children appearing to require some extra attention to make their preschool/daycare experience successful. We must continue to acknowledge how central a child's early educational experience is to their development and ensure we support the staff of these centres and their relationships with families.

It is expected that 2010/2011 will be another busy year for the Family Support Worker, particularly due to the administrative role she plays in meeting standards for accreditation. Program goals remain primarily focused on facilitating greater communication between service providers and families to ensure that we remain transparent and collaborative in our service delivery approach.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'S. Ferguson', with a long horizontal flourish extending to the right.

Shannon Ferguson
Family Support Worker

Grandparents Who Care Annual Report April 2009 – March 2010

The Grandparents Who Care Support Group provides one program facilitator three hours per week to grandparents raising their grandchildren. Grandparents Who Care operates one afternoon a week from September through June.

Cheri Gordon is the Grandparents Who Care facilitator and Cheryl Lippert is the program coordinator.



ACCESS: The sessions are open but not limited to individuals that are "skipped generation" care giving. These sessions take place Wednesdays from 1pm to 3pm in the Family Fun Spot room at the Kitimat Child Development Centre.

The goal for 2009-2010 was to increase community awareness about the Grandparents Who Care. This was done by distributing flyers to the mall, library, senior's centre, health unit and advertising in the local paper and channel 10.

EFFICIENCY:

Between April 1, 2009 and March 31, 2010, the Grandparents Who Care operated weekly excluding holidays and school breaks with an average of 6 families attending.

The Family Grandparents Who Care outcomes are:

1. Provide support for Grandparents caring for children.
2. Establish peer support between Grandparents.
3. Provision of education and resources that assist grandparent care giving for children.

EFFECTIVENESS and SATISFACTION:

The Grandparents complete a survey annually and report their capacity for care giving has increase significantly over the course of their attendance in the support group through the support of their peers and the information and resources provided to them. Grandparents comment that it is very difficult for those not in

their situation to understand their unique needs and when they come to the support group, the other grandparents "just get it".

Goal for 2010-2011:

- To network Grandparents Who Care Support Group in Kitimat with other grandparent support groups in British Columbia.

Respectfully Submitted,



Cheri Gordon
Grandparents Who Care Facilitator

Healthy Babies Annual Report April 2009 to March 2010

INTRODUCTION:

As of March 31st, 2010, the Healthy Babies program served 42 women and their babies through the pre and post natal support services available in the program. The demographics of these women included: ages 14 to 35, first to fourth pregnancies, single mothers, common law families and married. These statistics do not include women who have accessed the program for breastfeeding support, prenatal questions or attendance at the weekly drop in.

We did have some staffing changes during the later part of the year. Cheryl Lippert became our new Program Coordinator. Darlene Schmid stepped down from her position of program nurse. Nancyjane Harness became our new Child Birth Educator for our public prenatal classes. Susie Barbosa continues as Pregnancy Outreach Worker.

Healthy Babies collaborated with a total of 18 community agencies to deliver our services to families. Some of these included programs at the Kitimat Child Development Centre, Public Health Unit, Ministry for Children and Families, and Tamitik Status of Women.

ACCESS:

Healthy Babies provided support to families through drop-ins, and one to one support sessions. There are no waitlists. There is a weekly drop in open to all families in the community. Families who are not on the caseload have access to pre and post natal support by attending this weekly drop-in. The Outreach Worker is also available to all families through phone support to ask questions regarding pregnancy, breastfeeding, etc.

Healthy Babies provided support to families through group activities, drop-ins, one to one support sessions, and through Overwaitea and Super Valu vouchers and sponsorship of Good Food Boxes (Food Security)

Support Sessions - 1:1 Site appointments, phone calls, food security - 354
Home Visits - 66

Group and Drop In - 51 sessions with a total of 798 caregivers and children attending. There were fewer drop- ins due to drop in falling on holidays and H1N1 outbreak.

EFFICIENCY:

In 2009-2010, one hundred percent of the women referred to the Healthy Babies program were seen. The Healthy Babies Program completed a sustainability analysis. This identified that the program is meeting the increased referral demands within budget funding, however, if the numbers of families continues to increase, this can become difficult and place more strain on staff. Surveys are done during the year, and these identify what those being served would like out of the program.

GOALS:

The goal for next year is to continue to maintain no waitlists and ensure that all pregnant mothers in the community, who require additional support, have the opportunity to participate in Healthy Babies.

EFFECTIVENESS:

The Healthy Babies Programs provides parents with a feedback form that is compiled by the Northwest BC CAP-C Coalition to measure the effectiveness of our program delivery.

What parents have learned while being a part of the program is the data that is being used to measure our effectiveness. The results are listed below:

As a result of coming to this program, I have learned (check as many as you'd like):

- More Information about the prenatal and post natal care of my baby - 100%
- How to make lifestyle choices regarding drugs, alcohol or tobacco use that will keep my baby healthy - 45%
- How to breastfeed my baby - 45%
- How to keep my baby safe - 73%
- How to establish care routines for my infant (examples: feeding sleeping, bathing) - 36%
- How to obtain sufficient food to ensure my child's health - 28%
- More information about healthy birthing practices - 73%

The goal for 2009-2010 was to have 80% of caregivers stating they learned how to make lifestyle choices regarding drugs, alcohol or tobacco use that will keep my baby healthy. This number decreased, however, as of March 2010, only 18% of mothers in the program used tobacco.

The second goal was to have more mothers say they learned more information about healthy birthing practices. This number increased from 71% to 73%.

The number of clients that stated the program taught them how to breastfeed their baby also decreased from 86% to 45%. However, as of March 2010, 70% of the moms involved in the program exclusively breastfed their babies.

SATISFACTION:

100% of clients that completed the Healthy Babies Satisfaction surveys stated they liked and felt comfortable with program staff.

Some comments from clients when asked how "How has the Healthy Babies program made a difference in your life?" are listed below:

- "I learn so many good things from there. It's good for gaining knowledge."
- "It was nice for my daughter to interact with other babies and good for me to have someone to ask questions and talk to as a mother."
- "Yes!! My children are guaranteed fresh milk every week, we can afford extra activities with the swim tickets, we are more involved and connected as a family! Thank you!"
- "Helps me out during pregnancy and afterwards, and gives me more support and help that is needed and appreciated."
- "Information on labour and delivery helped me with my own labour and delivery."
- "More prepared for baby in all ways."
- "It made me feel much more confident about becoming a mom."
- "How to give my son the best, healthiest life."

When asked if clients had any suggestions that would help us improve our services they stated:

- "A group for young moms."
- "Be open longer. Everything is open basically from 8:00am to 4:00pm and then after that everything is closed. When you have a busy day and couldn't make

it to the CDC, but would be nice if opened until 5:30pm different times, one at 10:30am and one at 2pm or 3pm.

- "No, it's all good."



Being an Outreach Worker for the Healthy Babies program has been a wonderful and positive experience for me. Meeting new families, empowering women to make good choices for their babies and being able to provide them with support during one of the most important times of their lives is a real privilege. When I see mothers struggle, and continue to love their babies and give it their all, it really proves that being a mom is the hardest job in the world!

Respectively Submitted,

Susie Barbosa
Healthy Babies Outreach Worker
Lamaze Certified Child birth Educator

Infant Development Program Annual Report April 2009 to March 2010

INTRODUCTION:

As of March, 31st, 2010 there were 31 children and their families on the Infant Development Program caseload. The program serves families with infants and toddlers from birth to three years of age, who are at risk for, or who already have a delay in development. Programs are available throughout British Columbia. Each program brings parents and professionals together to help overcome developmental difficulties.

Cheryl Lippert served as the Infant Development Consultant until September 2009. She took a new position as the Youth, Child and Families Program Coordinator in September 2009, and in this role currently acts as my supervisor and mentor.

The Infant Development Program collaborated with excess of 20 community agencies to deliver services to families since September 2009. Some of the services are at the Kitimat Child Development Centre including, but not limited to, occupation and physiotherapy programs, along with the Healthy Babies, Building Blocks, and Supported Child Development programs. In the community the Infant Development Program has worked with Public Health Unit, Ministry of Children and Families, local physicians, dentists and pediatricians (Terrace), along with Cimoca Child Care Centre, as some examples. The Infant Development Program also refers and collaborates with provincial wide services and organizations such as Sunnyhill Health Centre for Children, and various organizations who serve families with children who have been identified with delays and/or special needs.

ACCESS:

All programs in the Infant Development Program are 'family centered'. This means that the parents or caregivers decide on what kind of support they need, and focuses on the strength of the children and families.

The Infant Development Program provides support to families primarily through a home visiting program, but also can meet with families at the CDC or any other location the family prefers. The Infant Development Program participates in Family and Individual Goal Planning, and information and activities for future visits are

designed around this plan. The Infant Development Program provides developmental screeners and assessments, along with reports and referrals to various services deemed appropriate and approved by the family.

The Infant Development Program also facilitates three group intervention programs:

1. A weekly IDP Playgroup, co-facilitated by Carolyn Watt, Physiotherapist. This playgroup is available exclusively to families with children who are on the Infant Development Program caseload, and provides activities in all major areas of child development; including gross and fine motor skills, language and communication, problem-solving, and sensory activities, along with an opportunity for peer play and interaction and for parents and care-givers to connect with each other.
2. The Infant Development Program also facilitates a weekly "Toddler Time Drop-In". At this drop-in infants and toddlers are given an opportunity to interact with peers, and parents and caregivers have an opportunity to connect with each other and professionals. This group is open to all families with children three years and under. At these sessions the Infant Development Program supplies general developmental and parental information.
3. The Infant Development Program also facilitates, in partnership with Cimoca Child Care Centre at the Kitamaat Village, a parent-child group. This group is open to all families with children from birth to three years old. The Infant Development Program meets with parents in a group setting and presents information on early brain development and general information relating to all areas of development. The Infant Development Program will then attend an informal play and social time, as an opportunity to talk with parents if they have questions, or to provide general screeners.

The Infant Development Program will provide referrals to various services deemed needed by the family and/or IDP and can provide coordination and consulting services upon request from the family. The goal is to work collaboratively with other services to insure that the family's needs are being met, and supporting the goals of the various services (as decided with the family).

Various parental and child support through parent workshop coordination and/or invitation, toy lending library. An example in 2009/10 of a parent workshop is an invite to Flo Sheperd, Nutritionist at Northern Heath to discuss with professionals and then families the new Infant Nutrition Guidelines. The Infant Development Program can lend educational toys and books to families, along with safety equipment (when available).

The Infant Development Program Worker is the intake worker for all new referrals for children under the age of three. At this time an informal needs assessment with the family is discussed and IDP will refer the new client onto other services or do an intake for the IDP program.

Client Visits (since October 2009): Lori Fitzpatrick = 159

Group and Drop In - 50 sessions. (Number of participants was not tracked).

EFFICIENCY:

In 2009-2010, 100% of the children referred to the Infant Development Program were seen. 100% of all these new referrals were contacted within the first week of their referral date, to arrange an intake visit. There is currently no wait list for the Infant Development Program. Because there are a wide spectrum of needs with children referred to IDP, the children are prioritized in how often they are seen based on needs of the family, other services involved, and families input. If numbers on the IDP caseload continue to increase, IDP will implement a waitlist and a waitlist tool. This likely will not happen, as some children 'age out' of the program.

Efficiency with families can be measured according to Individual and Family Service Plans. Most family, except for casual contact clients, are provided a home visiting schedule. Usually this schedule is planned for one year in advance, but can be done in three or six month increments. Likewise, families also participate in individual goal planning for the child (but can also include family goals). These goals are reviewed every six months.

GOALS:

The goals for the Infant Development Program for this approaching year are to:
- Continue to support families according to the program's mandate.

- Continue to build connections with various community services, in Kitimat and the Kitamaat Village
- Continue to increase awareness of the program to community providers.
- To more closely track referrals and contact with other services.

EFFECTIVENESS:

The Infant Development Program provided parents with a survey in order to help us determine the effectiveness of the program. Approximately 1/3 of all surveys mailed to clients were returned.

The results are listed below:

- 100% of surveys returned indicated a 100% satisfaction in that they receive enough visits from the IDP program.
- 100% of the respondents indicated that all family members who want to be involved are included in the program.
- 100% of respondents said that IDP brings relevant information on child development.
- 100% of surveys returned indicated the IDP worker is emotionally supportive.
- 100% of the respondents shared that they receive all reports from the IDP program.
- 100% of the surveys returned the respondents feel they have learned information pertaining to child development and parenting.
- 100% of surveyed caregivers felt the IDP consultant provides information and resources that they ask for.
- 100% of surveyed respondents felt the consultant treats and visits as confidential and that being a part of the IDP program is a positive experience for their family.
- 100% of the respondents feel they have an opportunity to attend playgroup and drop-ins.

SATISFACTION:

100% of clients that completed the Infant Development Program Satisfaction surveys stated they liked and felt comfortable with program staff.

Some comments from clients:

- "(The IDP Consultant) is a very approachable, easy-going person which makes it very easy to ask questions. This also made it simple for me to be comfortable with her from the start. She clearly loves working with babies

and tries hard to include my toddler during our sessions as well. This takes the stress off of meetings and definitely makes them enjoyable for our whole family."

- " I think it was great to be able to have a program like this for my children, and myself"
- "(The IDP Consultant) is so supportive and good. I like the program and learning about brain development in children."
- "Wonderful program and atmosphere. (The Infant Development Consultant) makes my daughter feel special and comfortable. I have definitely seen how the program has helped my family "

When asked if clients had any additional comments that would help us improve our services they stated:

- "I would like more visits. Every week."

PERSONAL SUMMARY:

As the Infant Development Consultant, I feel privileged to be a part of the lives of so many wonderful children and families. I enjoy the opportunity to bring information to families about early infant and child development and to facilitate services that can help benefit the family, but equally, feel it has been a gift to be able to learn from these visits. I am reminded everyday about the importance of the rich, yet complex, lives of families. I am honoured to be able to witness the process of growing children and families and their very significant role in our communities. Working as an Infant Development Program consultant also affords me the opportunity to share my expertise, in consultation and in working collaboratively, with a variety of services that benefit children. Additionally, it has given me access and opportunity to learn, via training and professional mentors, the latest and most current studies about a variety of child development information and parenting issues and strategies .These opportunities have enhanced my knowledge base, encouraged a commitment to further studies, and served to reinforce my belief in the process of life-long learning. The biggest benefit in working with infants and toddlers: the little ones make me smile everyday!

Respectfully submitted,



Lori Fitzpatrick

Infant Development Consultant

Kid's Place Preschool Year End Outcomes Report 2009 – 2010

ACCESS:

Kid's Place Preschool is currently 86% full (43 of 50 spaces taken as of March 31st 2010). This year we have provided preschool services to up to 50 children. Eleven of our families have been directly affected by the closure of Eurocan Pulp and Paper. The preschool operates four separate classes of children per week. We have two classes of 15 children running Monday, Wednesday and Friday (9:00 to 11:30 and 1:00 to 3:30); and two classes of 10 children Tuesday and Thursday (9:00 to 11:30 and 1:00 to 3:30).

There are currently 71 children (24 four year olds; 31 three year olds; 16 children under 3) on Kid's Place waitlist for September 2010. This does not include any returning children. As of this writing I am unsure of how many families on the list are former Eurocan families. This may have an impact on the actual class sizes and number of classes we can offer in September 2010.

GOALS:

- Actively seek out children to fill empty spaces.
- Maintain an up to date waitlist.

EFFICIENCY:

The staffing levels in the preschool are currently 1 preschool teacher to 10 children. In September 2009 we welcomed Chigusa Dodd as our second preschool teacher in the Monday, Wednesday and Friday classes (these classes have 15 children in each class). We also have children in our program who require extra support to be fully included, and as a result there are also two Supported Child Development workers in each Monday, Wednesday and Friday class and one in each of the Tuesday and Thursday classes. We have also mentored early childhood education students from various colleges since September 2009.

Thanks to the surplus from previous years, we were able to operate with our budget.

Kid's Place has followed the Coast Mountain School Districts school calendar for holidays and breaks for the 2009-10 preschool year.

GOALS:

- Continue to look for ways to streamline spending to stay on budget.
- Maintain communication with the finance department to stay current with accounts.
- Continue to have two staff persons with the three sessions per week classes. Possibly expand this to the two sessions per week if there are enough children for all spaces and the costs will fall within our budget.
- Continue to mentor early childhood education students.

SATISFACTION:

Kid's Place Preschool program looks for quality improvement opportunities on an on-going basis. Family feedback happens in two ways: informal feedback through daily discussion with families and a Preschool Services Evaluation at the end of each preschool year. Feedback is then incorporated into our program. This year we surveyed the families in April; of the 43 surveys distributed, we received 11 returns. Generally, families have expressed satisfaction with their child's preschool experience.

GOAL:

Survey parents twice per year, mid-year and at the end of the preschool year.

EFFECTIVENESS:

We have tried to use the Early Learning Framework as a guide for our practice. The staff has looked at the framework and we have discussed the principles behind the framework. We have continued to use the emergent curriculum model to plan for the preschool.

We have been successful at including all children in the program. We have been able to do this through regular staff meetings, development and implementation of care plans (including behaviours plans).

Parent-teacher interviews were offered in June (for end of the year), September (for new families) and again in January/February (to inform parents of progress).

Goals:

- Provide written documentation of children's learning using pedagogical narration/learning stories.

- Review the care plans every three months with parents and staff.
- Continue to offer parent-teacher interviews to families; extend to offer home visits.
- Offer at least one family meeting per class over the course of the year.

Respectfully submitted,

A handwritten signature in cursive script that reads "Christine E. Doherty-Maggs".

Christine E. Doherty-Maggs
Kid's Place Preschool Manager/Supervisor

Kildala Preschool Program Year End Outcomes Report 2009 – 2010

The Kildala Preschool Program operates from 12:30 pm to 3:00 pm Monday to Friday. The Monday, Wednesday, Friday program has 9 students enrolled at present but has had 10 at times for those aged 4-5 years. The Tuesday, Thursday program has 10 students enrolled with several turnovers during the year for those 3-4 years. The Child Development Centre continued the operation of Kildala Preschool because of demand for Preschool spaces and our community.

EFFICIENCY:

The ongoing operation of the program is dependent on full registration as this is a cost recovery program from parent fees.

EFFECTIVENESS:

The program is licensed and has a qualified Early Childhood Educator leading the program. The program follows a philosophy of providing hands on experiences. There have been several field trips to local businesses and places of interest such as the library, police station, fire hall, and thrift store as well as providing a healthy environment for learning. The program has benefited from the services offered through the Child Development Centre, through Support Workers and professional input by the Occupational Therapist who have worked closely with the staff.

SATISFACTION:

Parents have been asked regularly for feedback using parent surveys and satisfaction for the service has been reviewed.

ACCESS:

Our centre operates in a community school - Kildala Elementary School. By operating in one of the neighbourhoods of our community, this assists parents with accessing the Preschool service.

Respectfully submitted,

Debra Canil

Debra Canil
Preschool Manager

Kindercare and Out of School Care Program Annual Report 2009 - 2010

INTRODUCTION:

The Kindercare and Out of School care program is a service held in Kildala School starting at 7:00 am before school until start of class at 8:35 am. Kindergarten students return at 11:15 am for lunch and the remainder of the day. Older students up to grade 4 enter the program at school dismissal at 3:00 pm and we are available until 6:00 pm for parent pickup. We have had 14 students registered in the program this year. Parents feel secure in knowing that staff caring for their children have Food Safe and First Aid Training with certification posted.

ACCESS:

There are available spaces in this program for full time care and we are now offering part time hourly rates for parents who will be a little late picking their children up at school dismissal.

EFFECTIVENESS:

Workers and supervisors in this program appreciate the need for this service as it provides a safe, social and learning environment for children needing before and after school care. A schedule of planned themes, crafts and snacks is posted weekly for parents to see. Homework time is encouraged and help provided. "Snack & Chat" has proven to be an effective social development exercise as we discuss topics like bullying and peer pressure. The students share real events in their school day involving these issues. We have reviewed the results of the recent parent/student satisfaction survey and it shows that parents and children are pleased with the care and creative programming provided.

SATISFACTION:

Parents are asked regularly for feedback and are surveyed twice a year for their satisfaction. Survey results all express high regard and appreciation for the program. The children were also asked and all circled their happy face. Some of the comments received from parents were:

- "The flexibility of your service was an invaluable help. You have been very reliable and accommodating. Thank you."
- "We appreciate the quality of your service."

Respectfully submitted,



Diane Thiessen



Michelle Gardiner

Stepping Stones Cormorant Childcare Centre Annual Report 2009 - 2010

Stepping Stones Cormorant Childcare Centre provides daycare for Infant and Toddlers (newborn to 3 years old) and Group Daycare (3 to 5 years old). The centre is located at Kitimat City High. The centre operates 5 days a week. Hours of operation are 7:00 am to 6:00 pm. We are closed statutory holidays.

ACCESS:

Throughout the year we have had a steady enrolment of children in both programs. As times one program may be doing better than the other. At this time we do have 40 children enrolled at the centre. We do currently have spaces on the Infant and Toddler side, but the Group side is full. Both programs have shown to be very successful.

EFFICIENCY:

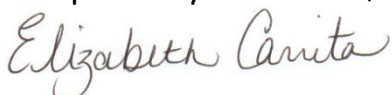
The staffing ratio on the Infant and Toddler side is 1 adult to 4 children, and the Group side is 1 adult to 8 children. We currently have 3 qualified staff with their Early Childhood Education and 3 staff working towards completing their ECE. However, as we have children in our program who require extra support there are also 6 Supported Child Development Workers who work on specific days. The cost of qualified staff in ratio to what parents can afford to pay and the minimal subsidy for daycare available for some programs is an ongoing challenge for our service to break even.

We are so thrilled about recently installing our new fence and playground equipment. Parents and children are very delighted with us.

SATISFACTION & EFFECTIVENESS:

Parent surveys were provided to all parents of children who attend the centre. Parents are satisfied with the program and have given back positive feedback and suggestions that we have implemented.

Respectfully submitted,



Elizabeth Carrita

Life Skills Annual Report April 2009 to March 2010

INTRODUCTION:

As of March 31, 2010, the Life Skills Program provided service to 20 families. The demographics of the families include single parents and 2 parent families and children in the family units range from prenatal to 19 years. This contract is funded by the Ministry for Children and Families Development and the Life Skills workers are in close contact with the MCFD social workers to collaborate on the services they are providing for the families. The Life Skill Program collaborates with all Kitimat Community Agencies and a number of Terrace Services to meet the needs of the families. Glenda Cameron and Gillian Barber are the two life skills workers.

ACCESS:

In 2009-2010 all clients were seen within one week of receipt of the referral. Families were seen in Kitimat and the Kitimat Village. Individual family goals were established by the family members, MCFD social worker and Life Skills worker. Service is provided during the day, in the evenings and on weekends to suit the needs of the families and the Life Skills workers.

EFFICIENCY:

Between April 1, 2009 - March 31, 2010, 1320 hours of service were provided to families throughout the year. The goal for next year is to work with the Ministry of Children Family Development on the Family Development Response Program.

EFFECTIVENESS:

Information regarding goals for individual families is reviewed every three or six months by the families, MCFD staff and Life Skill Staff to continue with goals, set new goals or discontinue services to the families. The goal for next year is to send out individual satisfaction surveys to all families accessing the Life Skills program.

SATISFACTION:

Every Life Skills contract started was continued until the end date stated on the contract. One client using the Life Skills program stated "this program lets me know everything will be okay. I am learning how to manage my life;" Another client whose contract ended referred another family member to the program and stated "This service was so helpful. Can my sister get Life Skills too"? There was positive feedback from the families accessing the service, the social workers who provided the referrals and the community professionals who work with the families as well.

Respectfully submitted,

Cheryl Lippert

Cheryl Lippert
Life Skills Coordinator

Acquired Brain Injury Program Annual Report

INTRODUCTION:

The Acquired Brain Injury Program of BC provides services to 2 adults who are living in our community. Staff consists of three workers working 13 hours per week with one client, one staff working 2 hours per week with the other client and one coordinator who is available for consultation and support.

There is collaboration with a number of community professionals who the workers and clients are in contact with on a regular basis.

ACCESS:

At times during the year the clients were unavailable for service due to being out of town but there was no disruption in service when the clients were available for service. The clients were picked up from home, spent time with the worker and then dropped off at home after each session.

EFFICIENCY:

The efficiency goal for one client was for the client to attend her Mental Health appointments every two weeks and learn how to make her money last until her next cheque. This client was successful in attending all of her Mental Health appointments (when she was in town) and her money was sufficient to buy enough food to last until her next cheque with the support of her worker.

The other client's goal was to learn how to use appropriate language in public and to practice his memory skills through different games. As reported by this client's parent and the workers, this client greets members of the public politely and appropriately 100% of the time when he is with the worker. This client continues to work on memory games 5 days per week with his worker.

EFFECTIVENESS:

The individual goal plans were reviewed twice during the year by the clients, their family and Kitimat Child Development staff as set out in the effectiveness goal.

Reports related to the goals are completed quarterly by the worker. The goal for next year is to have a satisfaction survey given to the clients and/or parents when doing the goal planning.

SATISFACTION:

One of the clients stated "I love my worker. She helps me get to my appointments on time and helps me out with lots of important things". The other client's parent stated that "the service provided by the workers has been so helpful to my adult child and to her whole family" and also stated "You are my support system. I know I can call whenever I need help".

Respectfully submitted,



Cheryl Lippert

Child, Youth and Family Programs Coordinator

Community Living Services Annual Report 2009 - 2010

INTRODUCTION:

The Community Living of BC Program provides services to 1 adult who is living in the community. Staff consists of one worker working 6 hours per day with the client and one coordinator who is available for consultation and support.

This contract collaborates with a number of Centre Programs, Kitimat Recreation Centre's, Outdoor Recreation Facilities, Business and Agencies for volunteer opportunities for the client.

ACCESS:

In 2009-2010 the client receiving the service was seen 50 out of the 52 weeks for a total of 1500 hours of service. The two weeks the client was not seen was due to the worker having a holiday and the parent made alternate arrangements for her adult child.

EFFICIENCY:

The efficiency goal was for the client to volunteer at two different businesses in the community. Currently the client and her worker are volunteering at 4 different businesses and the plan is to continue to volunteer at these locations.

EFFECTIVENESS:

The individual goal plan was reviewed twice during the year by parents and Kitimat Child Development staff as set out in the effectiveness goal. Reports related to the goals are completed quarterly by the worker. The goal for next year is to have a parent satisfaction survey given to the parent when doing the goal planning.

SATISFACTION:

The parent of the client receiving the service stated that the service is "extremely helpful to her and her adult child". She also stated that "the goals are very

appropriate and that her adult child is continuing to learn and grow through the experiences with her worker”.

Respectfully submitted,

Cheryl Lippert

Cheryl Lippert
Child, Youth and Family Programs Coordinator

Occupational Therapy Annual Report April 2009 to March 2010

INTRODUCTION:

As of March 31, 2010, the OT department was serving 81 children and their families. Sadly, one of the children we served for many years, Jacob Jones, passed away in the summer of 2009. I am grateful that I had the opportunity to know Jacob. He was a special person. I miss him a great deal.

Vesna Thompson, part-time therapy assistant left the CDC to pursue her studies in July 2009. We welcomed Michelle Moore to the centre and one of Michelle's many roles is as part-time therapy assistant.

Cheryl Lippert, Child and Youth Care Coordinator, and I met with Arnold Mulder, Child and Youth Mental Health, a number of times during the spring of 2009 to discuss Infant Mental Health services for our community.

I presented a poster regarding Work-Life Balance for Parents with Low Incomes at the Canadian Association of Occupational Therapists annual conference in Ottawa in June 2009.

Carolyn Watt, physiotherapist and I were invited again this year to present information about the impact of motor development on school success at the Nechako Elementary School PALS (Parents as Literacy Supporters) (December 2009).

Please see below for information on four occupational therapy program outcome measures.

ACCESS:

The goal for 2009-2010 was for 90% of parents or teachers to be contacted by the therapist less than 90 days from date that the therapist received the referral. The therapist contacted 86% of parents or teachers less than 90 days from the date of receipt of referral. Some referred clients had already been waiting more than 90 days at the beginning of April 2009. This accounts for the fact the goal of 90% was not achieved. The ACCESS goal for 2010-2011 is the same as for 2009-2010.

In order to meet the goal for 2010-2011, I have instituted practices such as:

- sending out letters regarding the length of the waitlist
- transferring referrals to Carolyn Watt, physiotherapist when appropriate

EFFICIENCY:

The goal for 2009-2010 was to run groups for 34 of the 52 weeks in order for the therapist to provide more service to more children. The OT department ran groups for 30 of the 52 weeks from April 1, 2009 to March 31, 2010. For four weeks, two groups ran. Therefore, this goal was met.

Groups included:

- Amazing Artists (pre-printing) summer group
- KCDC pre-printing and printing group
- Kildala Elementary School cursive writing group
- Kildala Preschool group

The efficiency goal for 2010-2011 is chosen for report writing. In April, I will design a report template. In May and June, I will 'trial' the template and finalize it.

The goal is to increase report-writing efficiency (and effectiveness of OT service plans - see effectiveness section of this report). The outcome is that 95% of all OT reports written in July 2010 through March 2011 will be written using the template.

EFFECTIVENESS:

The effectiveness goal for 2009-2010 was that ninety percent of caregivers would state (in a telephone survey) that OT intervention contributed to improved child function and/or OT intervention contributed to increased caregiver confidence in meeting the needs of their child. Eighty-five percent of parents stated that OT intervention helped their child's function. It is likely that the goal of 90% was not met because OT reports have not been consistently clear regarding goals of OT service. Please see Efficiency section of this report for more information regarding this issue.

Seventy-two percent of parents stated that OT intervention contributed to increased caregiver confidence. It is likely that the goal of 90% was not met

because "increasing caregiver confidence" was not consistently addressed explicitly in reports or therapy.

The effectiveness goal for 2010-2011 is that ninety percent of progress reports will indicate that a minimum of one OT goal was achieved.

Additionally, I will explore measuring effectiveness and/or satisfaction directly with children.

SATISFACTION:

The goal for 2009-2010 was to achieve 90% satisfied or very satisfied on a modified parent MPOC. This goal was not achieved because I was unable to set aside time to modify a parent MPOC and to mail it out in time to get results before March 31, 2010. Satisfaction will be measured by centre satisfaction surveys rather than program-specific satisfaction surveys.

Additionally, I will explore measuring satisfaction and/or effectiveness directly with children.

LOOKING TO THE FUTURE:

I am proud of the services that the KCDC occupational therapy program provides to the citizens of Kitimat and Kitamaat Village. I look forward to sharing the centre's vision and practices with a University of British Columbia Occupational Therapy and Occupational Science student in May and June 2010.

Respectfully submitted,



Sheila Hamilton
Occupational Therapist

Physiotherapy Annual Report 2009 - 2010

INTRODUCTION:

The Physiotherapist functions as part of a multidisciplinary team providing physical therapy services to a pediatric special needs caseload, the target population is children aged birth to nineteen years of age. There are currently 33 children on the physiotherapy caseload, 58% being school-aged and 32% being aged 0-4.

In the past year I have:

- Performed assessments on children who have delays in motor development
- Provided treatment (individually or in groups) for children with motor difficulties
- Educated and consulted with teachers, SSAs, parents and caregivers on how best to improve a child's motor skills
- Supported parents in their dealings with orthopaedic surgery services in Vancouver
- Consulted with Kid's Place preschool staff about a motor program for the preschool children emphasizing ball skills, balance and shoulder strength
- Provided education to a prenatal class about exercise and pregnancy
- Facilitated a weekly playgroup along with the Infant Development Consultant for children on the IDP caseload
- Designed and helped facilitate a summer group for pre-teen girls emphasizing the importance of physical activity and healthy eating

Assessment, treatment and education will always be part of my job and will continue throughout the upcoming year. Injury and obesity prevention are also important, but often neglected, areas of physiotherapy practice and I hope to continue addressing these issues throughout the year.

ACCESS:

There is currently no wait to access physiotherapy services. No children are waitlisted on either school age or early intervention caseloads. Within 1-2 weeks of a referral being received I will attempt to make contact with the parents of the child to see if they are interested in the service.

EFFICIENCY:

The Physiotherapy position is funded by the Ministry of Children and Family Development and the Ministry of Education Early Intervention and School age contracts.

EFFECTIVENESS:

It is important for us to know whether or not our services are effective. This can be measured by tools called "outcome measures". For physiotherapy, outcome measures can include:

- Joint range of motion measurements
- Strength tests
- Standardized assessments
- Checklists
- Participation surveys

The objectives for the upcoming year are to:

- Have a specific goal or goals for every child on the physiotherapy caseload, including which outcome measure(s) will be used to measure progress

SATISFACTION:

While we may think our services are effective, it is ultimately the parents who can say whether or not our intervention made a difference in their child's life.

The objectives for the upcoming year are to:

- Connect with the parents of the children on my caseload every 6 months (minimum) to ensure satisfaction with the service
- Make changes in how I deliver my services based on this feedback

Respectfully submitted,



Carolyn Watt
Physiotherapist

**Reach For a Sunbeam
Community Child and Youth Mental Health Program
April 2009 to March 2010**

INTRODUCTION:

As of March 31, 2010, the Reach for a Sunbeam (RFS) program provided mental health information and support services to a total of 400 youth, parents and guardians. This was delivered through individual services and a variety of groups for children, youth and parents.

The RFS program has a full time position and a .2 position for program and group support. We are fortunate to be afforded the ability to partner with many community members such as Community LINK workers, School Counselors, Physiotherapist, Ministry of Children and Family Development Clinicians and Kitamaat Village Social Workers.

One of many program highlights is the Healthy Transitions program for grade eights at Mount Elizabeth Secondary School which is currently running in its third year. Healthy Transitions promotes good mental health and resiliency in young adolescents as they enter a challenging time in their development when mental health is often compromised. For the second year in a row we provided students in Grade Ten with the Teen Stressors/Teen Solution program. This program builds on the skills students learned in grade eight and develop them further. At the end of the 2009-2010 school year, all grade eights and tens will have received valuable information to protect their mental health. Teachers comment on how important they feel this program is for their students. Parents have also talked to us and given us positive feedback on the impact the program had on their child or to look for further resources to support their teen.

Other groups we ran again this year are the Youth Empowerment and Support (YES). YES is a support group for youth aged thirteen to eighteen who self identify as needing support and or willing to give support to other youth. Attendance fluctuates with an average of six participants per session. These youth meet weekly except for holidays and summer vacation. I partnered with Carolyn Watt, physiotherapist, to run a pre-adolescent social skills and activity group - Girl Power - for females to learn to develop relationship skills. The Girls Talk Program is the infancy of its delivery to two groups at Kitimat City High. These two groups represent 19 females.

This program has received many accolades for helping young women recognize and deal with depression and it is being delivered in partnership with Community Link worker Sandy Correia. Partnerships with Community Link has fostered the ability to do the community outreach that the program so richly enjoys.

The Connect Parent Group - a parenting program ran for several sessions. This group promotes a parent's capacity to be more effective; therefore, strengthening the family unit. This group was possible due to additional funding beyond our core funding. I also ran the "Kids Have Stress Too!" parenting program at Kildala School in conjunction with Community Link worker, Sandy Boguski. Participants reported the program being very helpful.

OUTCOME GOALS FOR 2009 -2010

EFFICIENCY:

RFS provided service to **twenty** youth and their families referred by the Ministry with **eight** presently on the caseload. We received **eleven** referrals from the Ministry and made **fifteen** referrals to the Ministry. The program also provides a continuum of on- going youth and parent education as well as support groups. We provided **one hundred and forty six** groups at the Centre, in the schools and in the community of Kitimat and Kitamaat Village. These groups served well over 400 children, youth, parents and other caregivers this year. RFS is active in partnering with community agencies and resources. Through such partnerships we successfully facilitated the Beyond the Blues event for Mental Illness Awareness week (MIAW) at Mount Elizabeth Secondary School and Kitimat City High. Youth participants received information on anxiety and depression and were able to choose to be screened for either.

ACCESS:

I work full time in the program and Lori Ferreira co-facilitates most groups with me. This .2 co-facilitator position makes groups feasible. Anyone can refer to the program; however, referrals for individual and family support are made by the Ministry of Children and Family Development's Child and Youth Mental Health Clinicians.

The goal for 2009-2010 was for 100% of families to be contacted for an intake in less than 14 days from the date that the referral was received. Community inquiries

for information or support are contacted within two days of the initial contact. The access goal for the upcoming year remains the same.

EFFECTIVENESS:

The effectiveness goal for 2009-2010 was that ninety percent of clients and their caregivers would report that program intervention contributed to improved individual and or family function and or increased caregiver confidence in meeting the needs of their child. We are measuring this by asking this question during goal setting in developing our service plans and on our satisfaction and exit from service processes. Feedback is that we are obtaining this goal. When it is not obtained often it is external factors that we do not have influence upon.

SATISFACTION:

The goal for 2009-2010 was to achieve 90% satisfied or very satisfied on a parent and/or youth survey. This goal was achieved as the program began to send out modified parent surveys to the entire caseload. Satisfaction could also be measured using centre satisfaction surveys.

THE FUTURE: My wish for the program is to promote good mental health during critical transition times for children, youth and their parents. One area of emotional well being that I would like to address is for children and youth who struggle to deal with their grief.

Respectfully submitted by,



Luiza Couto
Youth Mental Health Support Worker/Program Coordinator

**Speech Language Pathologist Annual Report
March 2009- March 2010**

This year the Centre continued to struggle with employing a full time speech language pathologist. We covered some of our needs by contracting a therapist to do assessments and then have recommendations followed through by a speech language assistant.

We have advertised extensively for a therapist and have now started to use a recruiting company to assist us.

Respectfully submitted,

A handwritten signature in blue ink that reads "Margaret Warcup". The signature is cursive and includes a long horizontal flourish at the end.

Margaret Warcup
Executive Director/Physiotherapist

Special Services to Children Contract Child and Youth Care Annual Report

INTRODUCTION:

The Special Services to Children Child and Youth Care program provided service to 25 children. The demographics of the children ranged in age 3 years to 18 years.

Staff consisted of 7 staff member working variable hours and one Child and Youth Care coordinator available for consultation and support.

The Child and Youth Care program collaborated with a number of CDC Programs, Kitimat Recreation services, Youth Centre, Health Unit and the Outdoor Recreation Facilities.

ACCESS:

In 2009-2010 all families were contacted within one week and all children were seen within two weeks of receiving the referral from Ministry of Child and Family Development. Services were provided after school and on weekend for the children. The goals for the children and youth were determined by the family, children and youth, MCFD social workers and CDC Child and Youth Care staff.

EFFICIENCY:

Between April 1, 2009-March 31, 2010 1770 hrs were used by the Child and Youth Workers. The goal for next year is to have Child and Youth Workers participate in group activities when appropriate for the children. The goal will be to run at least one group activity for children or youth of similar age and with similar goals.

EFFECTIVENESS:

Individual goal plans for each child are reviewed every six months by parents, MCFD and Kitimat Child Development staff. Monthly reports related to the goals are completed each month by the Child and Youth Workers. The goal for next year is to have a parent satisfaction survey for the Kitimat Child Development Centre component of the work provided.

SATISFACTION:

100 % of the parents and children want to continue with the program as stated during their six month review. One parent stated "my child has learned how to express his feelings in an appropriate way. He loves his worker and feels comfortable to talk to him about personal things". When asked if youth would like to continue with the CYC contract one youth stated "Of course, why would it have to end"?

Mary Bernt was the coordinator of this program from its inception in 1991 until August 2009 when she retired. At this time I was hired to coordinate the program and plan to continue this role for many years. It is a very rewarding position and the positives for children, youth and their families show through the monthly reports, comments from parents, community professionals and the community as a whole.

Respectfully submitted,



Cheryl Lippert
Child and Youth Coordinator

Children and Youth with Special Need Contract

Child and Youth Care

Annual Report

INTRODUCTION:

The Children and Youth with Special Needs Child and Youth Care program provided service to 6 children. The demographics of the children ranged in age 3 years to 18 years. This program was contracted through Community Living of B.C. (CLBC) until October 2008 when children and youth with special needs services was transferred to the Ministry for Children and Families Development (MCFD). With the change in contractors there were a few policy changes for the program including reporting requirements and the length of time a child or youth is eligible to be receiving this service. Under CLBC children were eligible to receive support services (hours determined by the CLBC social worker) until they turned 19 and now children are eligible to receive child and youth care services for two years maximum from their eligible date until they turn 19. This was a real shift in service delivery to the families we provide child and youth care services for.

Staff consisted of 5 staff member working variable hours and one Child and Youth Care coordinator available for consultation and support.

The Child and Youth Care program collaborated with a number of CDC Programs, Kitimat Recreation services, Youth Centre, Health Unit and the Outdoor Recreation Facilities.

ACCESS:

In 2009-2010 all families were contacted within one week and all children were seen within two weeks of receiving the referral from CLBC, and later MCFD when the contract shifted to MCFD. Services were provided after school and on weekend for the children and youth. The goals for the children and youth were determined by the family, children and youth, MCFD social workers and CDC Child and Youth Care staff.

EFFICIENCY:

Between April 1, 2009-March 31, 2010 1274 hrs were used by the Child and Youth Workers.

The goal for next year is to have Child and Youth Workers participate in group activities when appropriate for the children. The goal will be to run at least one group activity for children or youth of similar age and with similar goals.

EFFECTIVENESS:

Individual goal plans for each child are reviewed every six months by parents, MCFD and Kitimat Child Development staff. Monthly reports related to the goals are completed each month by the Child and Youth Workers. The goal for next year is to have a parent satisfaction survey for the Kitimat Child Development Centre component of the work provided.

SATISFACTION:

The CLBC social worker and later the MCFD social worker expressed satisfaction with the work done by the Child and Youth Care workers and the facilitation of the program. She stated that "there has been consistent, effective communication between the contractor, the CDC and the families.

Mary Bernt was the coordinator of this program until August 2009 when she retired. At this time I was hired to coordinate the program and plan to continue this role for many years. It is a very rewarding position and the positives for children, youth and their families show through the monthly reports, comments from parents, community professionals and the community as a whole.

Respectfully submitted,



Cheryl Lippert
Child and Youth Coordinator

Autism Behaviour Services Annual Report April 2009 to March 2010

Autism Spectrum Disorder is a complex condition that impacts normal brain development and affects a person's social relationships, communication, interests and behaviour. Studies indicate that ASD affects one in every 150 children.

The Autism Behaviour Services Program provides behaviour consultation and intervention to children birth to nineteen according to the guidelines of MCFD. The children's programs are individually funded through MCFD's Autism Funds Processing Unit.

As of March 31, 2009, the ABS program was providing consultation and intervention to 22 children and their families. This year two of our youth have transitioned to adulthood and are accessing post- secondary education. Due to the closure of Eurocan two of our families (3 children) will be leaving the community.

Miriam Allen has been providing consultation since the program began in 2003. In September she began her coursework at Nova Southeastern University toward her certification as a Behaviour Analyst. Certification will ensure that we meet the increasing requirements for behaviour consulting in BC.

ACCESS:

In 2009-2010 service was provided within Kitimat, Kitamaat Village and outreach to Prince Rupert. All children requiring the service are accepted into the program immediately to help families cope with the process and emotion after the diagnosis. A volunteer made a display board that we will use to provide awareness in the elementary schools next month.

EFFICIENCY:

In developing programs for children with autism we work as part of a team with therapists and a psychologist and paediatrician. Although we often follow a verbal behaviour curriculum to give us a sequence of activities it is preferable to have the input from SLP's and OT's to give us the individual skills that children should be

working on next. In general behaviour consultants are more of the how of learning while OT and SLP give us the what.

EFFECTIVENESS:

Applied Behaviour Analysis is the only effective treatment for autism proven with research. There are many ways of using ABA in intervention such as discrete trial and natural environment teaching. An important aspect of ABA is data keeping so ongoing data for each child's program is kept daily and evaluated on an as needed basis. Monitoring outreach client workers is somewhat of a challenge so we will look for a better way to communicate online through email and video. Next year we plan to increase in service and training opportunities for behaviour interventionists and families.

SATISFACTION:

Parents were generally satisfied with their children's service. Sometimes it is difficult to get enough hours with our limited staff. Due to the large number of hours that our staff spends with families often parents as well as children become quite connected to their workers and this helps them to cope with all the changes in their lives. In this program staff consistency and availability are vital. This year we began a parent support group and have had one meeting that was well attended.

In Kitimat we are fortunate to have an autism program. This service is the only one of its kind in the northwest and our community is very inclusive and supportive of our children and youth. It would be beneficial to our community if this program could be expanded to cover service to families who have children with behaviour disorders other than autism.

Respectfully submitted,



Miriam Allen B.Sc., M.Ed.
Autism Behavioral Service Coordinator

Supported Child Development Annual Report April 2009 to March 2010

Inclusion is a wonderful word. It is about embracing humanity and figuring out how we are going to live WITH one another in the challenging years to come.

Inclusion.com

The Supported Child Development Program provides consultation and direct support to children birth to nineteen so they can be included in their families' choice of child care setting.

As of March 31, 2010, the SCDP department was providing coordination/consultation and or direct support to 42 children and their families.

Miriam Allen has been providing coordination and consultation since the program began in 1995. Lori Ferreira began consulting in December 2008. This year we have had quite a fluctuation in support workers as our staff pool was shared with the preschools and daycare at times making it a balancing act to maintain numbers of staff and licensing regulations. It remains a challenge to recruit staff with their ECE certificate.

ACCESS:

In 2009- 2010, one hundred percent of children referred to the Supported Child Development program were seen within 90 days of receipt of referral.

During the school year priority for support time was given to preschoolers and during the summer months school aged children were able to access two weeks of recreation programs with support. This year we also saw an increase in need for support in daycare. Eleven children who required extra support staff will be entering kindergarten next fall. This has made for a busy year for consultants and workers.

In late summer we provided support in a pre-K group for children entering in September and next year we plan to run two programs to help children begin to adjust to the new full day kindergarten. In summer school age children were able to access Riverlodge programs, bike and ball groups and (DOK) playgrounds.

EFFICIENCY:

Providing services as part of a team where workers can access the expertise of other professionals has made our work more efficient. By regulating the number of hours children has access to direct support dependant on age and setting we are able to provide a wider range of services such as in- own- home- care as well as school age summer recreation support that may not be available in other communities.

EFFECTIVENESS:

The effectiveness of the individual intervention was documented each month by the support workers in a monthly report that addressed each objective, the strategies used to work toward the completion of objectives and the results of these strategies.

SATISFACTION: Parents were generally satisfied with their children's service. One area of weakness was being able to provide consistent and sufficient service to children with high needs in the daycare centre. In Kitimat we are fortunate to have a variety of high quality inclusive programs for children and we look forward to continuing to be an integral part of this team.

Respectfully submitted,



Miriam Allen B.Sc., M.Ed.
Supported Child Development Coordinator

Kindercare and Out of School Care Program - Nechako Annual Report 2009 - 2010

INTRODUCTION:

The Kindercare and Out of School care program is a service held at Nechako School and serves children from both Roy Wilcox and Nechako Schools. The service is for before school care and after school care. On non instructional days the Nechako and Kildala Kindercare and out of school care programs join together often using the Nechako school site. Our staff this year was Lori Ann Campbell and Cheryl Carlson. Cheryl joined us part way through the year when Tina Readman left to provide foster care. Nechako has 15 children registered this year. Transportation between Roy Wilcox School and Nechako was done using a contract with the Handidart bus provider. Attempts to have the school district provide transportation using the school bus was not successful. We continue to work with the school district to ensure this service can continue.

ACCESS:

The transportation between schools limits the access to our program. It is not feasible to run a program in both Nechako and Roy Wilcox schools. Roy Wilcox currently does not have the classroom space for our program and we need a core number of children to attend to cover our costs. This access barrier was worked out for this year using the contracted bus service and donated funding but will be a challenge to consider when determining if the program can be offered for the next school year.

EFFECTIVENESS:

Kindercare and out of school care provides a safe, social and learning environment for children in their community school environment. The Nechako care providers use a range of activities to promote the development of the children in their care. On a regular basis parents and the children are asked what is working well for them. Feedback has been very positive and the suggestions for improvement have been implemented. Of particular note the provision of morning breakfast for the children that arrive early has been appreciated. For both Nechako and Kildala programs we did apply for the Royal Bank grant for out of school care in our desire to continue to evolve our program. We were unsuccessful with this application but will continue to apply for funding to grow the program.

SATISFACTION:

Parent and child feedback is asked for on a regular basis and annually using a satisfaction survey. The results of the survey were positive and the suggested changes are being implemented. Parents asked for more outdoor activities, increased staff skills for guiding the children and explore the opportunity to use the gym at Nechako especially when outdoor play is not possible. The children also said they like the music and the arts and crafts. Parents commented on the flexibility to the service being of incredible help. The recommendations are being worked on and will be monitored.

Respectfully submitted,

Cheryl Carlson

Cheryl Carlson

Lori-Ann Campbell

Lori- Ann Campbell

Complaints and Concerns

The Centre welcomes input from all - those served, staff and community members. This year we have updated our brochure that summarized our code of conduct and policies and included a new policy about respectful behaviour between colleagues. This booklet is available at the Centre and on our web site. The booklet is used to guide our behaviours and also OUTLINES HOW ANYONE CAN BRING FORTH A CONCERN OR COMPLAINT.

Annually we review our concerns and complaints to see if there are any trends or changes that can be made. This last year we addressed the following:

- A parent call to clarify who is one of our staff members and confirming the staff member has access to her child. Resolved once parent understood who the staff member is. Action from the concern was to acknowledge to staff it is important to introduce our selves. Further action is we are updating our name tags.
- Potential breach of confidentiality occurred in another organization that involved one of our staff. Action was to cooperate with the other agency in their inquiry and to provide our staff with guidance on their actions to be taken.
- Concern about inter- colleague responsibilities and roles and how this conversation was held. Action was to work on the respect in the workplace policy, to follow our process of individuals having a difference deal with this first before it goes to a supervisor. This occurred.
- Call to clarify the role and responsibilities of our staff in the school system. Clarification given and with common understanding no further action needed.
- Concern about wage grid for the ECE advertisements in the paper. Checked the grid and the advertisement gives a range of wages and wage determination is based on qualifications and experience. Action was to clarify this in the staff newsletter.
- Concern regarding timeliness of Speech language services - Action was to continually recruit and to use our family support worker to

communicate regularly with parents. Satisfaction surveys done after each speech therapy locum provision of services.

- Two communication concerns rose this last year. One was our responsiveness to the bussing situation for out of school care. The other was on the actual fees for day care. Both were resolved with increased communication clarity.
- Complaint regarding day care to licensing was resolved with increased staff meetings and changing of staff responsibilities. Ongoing monitoring continues.
- Snow removal complaint at the day care. Action was to work with the School District and in the winter one sidewalk is closed.
- Complaint from a neighbour regarding the outdoor playground and parking at the day care. Resolved - the parking lot was increased in size and we have now installed the fence around the play area.

Of the ten recorded concerns and complaints all were dealt with as per our policies. The areas of focus for next year is to work in inter program/service planning and communications with the implementation of electronic charting with a goal of increased communications. The second area of focus is human resources and addressing job security and employee hiring processes. This area came up on the staff satisfaction surveys.

Health and Safety

Monthly inspections are consistently done by our Janitor. Drills including fire, earthquake, natural disaster, power outage, bomb threats, and safety during a violent or other threatening situation are carried out throughout the year.

We have had two incidents of staff not reporting to work in this last year and the process of identifying the person being absent and then following our process of calling out to find the person has worked.

We had no major incidents or injuries this year. We had one client fall on the ski hill. The review of this did have us update our consent forms for "higher" risk activities and for out of town activities. There were 12 reports reviewed by the committee.