

ICAN  **CERD**
INDEPENDENCE CENTRE AND NETWORK CENTRE ET RÉSEAU D'INDEPENDANCE

ANNUAL REPORT

2020-2021



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About ICAN

ICAN is a non-profit organization that provides a variety of services, resources, and support systems in both French and English for people with physical disabilities, adults, and seniors.

Mission

We provide assistance to live independently and inclusively in the community through individualized support and rehabilitation services.

Vision

Individuals have the optimal support to live independently within their community.

Values

We value:

- » Full participation in community life
- » Respect for individuals
- » Responsibility and partnerships
- » Our employees
- » Service excellence
- » Innovation

Code of Ethics

Our Code of Ethics and our Statement of Values provide us with specific ethical principles to address situations that we may encounter, and to guide us in our relationships with clients.

We are committed to:

- » Our clients
- » Professional competence
- » The protection of confidential information
- » Our employer, colleagues, and community
- » Keeping accurate client records

Ethical Guiding Principles

- » Autonomy
- » Do no harm
- » Do good
- » Ensure justice

Opening Message

In March 2020, the COVID-19 pandemic struck. ICAN, like other organizations, had to adjust its focus to deal with the pandemic.

Our attention for the last year has been on ensuring our clients and employees are safe, that we are up to date and following all guidelines coming from the Ministry of Health and Public Health.

We spent a great deal of time adjusting our services where feasible, ensuring the personal protective equipment was available and that our infection prevention and control measures were in place.



Board Strategic Planning

The ICAN Board of Directors mapped out new Strategic Directions for the agency.

The work on our new Strategic Plan started about a year ago, and the plan was finalized in early 2021.

The road map to our future consists of four strategies to build governance and operational work plans for three to five years. These strategies will be phased in over the next five years.

Building a Solid Understanding of ICAN in the Community.

Our CEO and Senior Staff will strengthen our relationships with agencies, community members and individuals to develop a shared understanding of ICAN. **Our actions will consist of the following:**

- » Creating a framework to share information with the community
- » Engaging clients, families and the community to listen and learn about their emerging needs
- » Expanding services to support clients in the community

Our work in this strategy will address our immediate obstacle of awareness in the community.

Diversifying and Strengthen our Base of Support.

Our Board Chair and CEO will diversify and build a strong base of support to assist in the organization's growth to support clients.

The actions will consist of the following:

- » Increasing our base funding to support clients
- » Diversifying our stakeholders in the work of the organization
- » Building partnerships with agencies and organizations in the community

Our work in this strategy will address the uncertainty of change, mismatch of client and staff expectations, and the community's understanding of the organization.

Board Strategic Planning

Leading Active Governance Involvement in the Community.

Our Chair and the Board of Directors will work with community leaders, health planners, and other governors to explore, develop, and support ICAN services' growth to meet clients' emerging needs.

The actions will consist of the following:

- » Building governance partnerships with a variety of organizations
- » Holding an active governance and management role in the Ontario Health Transformation to support client care
- » Exploring partnerships and opportunities in education and social programs

Our work in this strategy will address the challenge of inadequate funding and the community's understanding of the organization.

Recreating our Physical Presence in the Community.

Our Board Chair and CEO will seek out and explore the opportunity to rethink and align physical locations with adapting to the emerging needs of clients, the community, and strategic partners.

The actions will consist of the following:

- » Partnering with agencies to find a space to support our clients
- » Identifying the opportunity to support the long term needs of clients in the community
- » Exploring the opportunity for a new building to support clients, staff and the community

Our work in this strategy will address the mismatch of client and staff expectations and the current building infrastructure challenge.

Board of Directors



Andrew Olivier
Chair



Andrée Lacroix
1st Vice-Chair



Claire McChesney
2nd Vice-Chair



Allan Lamothe
Treasurer



Shelley Watson
Director



Nicole Sykes
Director



David Szczepaniak
Director



Janice Clarke
Director



Lesley Yeomans
Director



Angela Nahwegahbow
Director



David Stamp
Director

Leadership Team



Marie Leon
Chief Executive Officer



Carmen Sampson
Manager of Client Services



Kim Sliede
Manager of Corporate Services



Diane Loyer
Client Services Supervisor



Gaetanne Larocque
Client Services Supervisor



Paul McDowell
Client Services Supervisor



Ian Burcher
Client Services Supervisor



Justin Jeanveau
Client Services Supervisor



Nathalie Hall
Client Services Supervisor



Matt Gridley
Scheduling Supervisor



Johanne Ramsay
Executive Assistant

Operational Plan Update

The Leadership Team also develops its own Operational Plan which is based on several factors including the Strategic Plan, our mission, our vision, and takes into consideration our obstacles and values. The following update includes work done over the past year.

Developing Sensitivity Training

Over the past few years, a committee was struck which developed Sensitivity Training which provided some insights into what barriers persons with physical disabilities face every day. This training was rolled out internally, and the next step in this strategy was to offer this training externally. However, due to COVID-19, the plan to offer this training externally was shelved. It has since been decided that there is already great training available through e-learning (SCIO), that there is no need to move this strategy forward.

This strategy is complete.

Engaging and Responding to Staff and Clients

This strategy included five themes:

- » **Ensuring that there were service agreements for each ICAN program.** This was completed in late 2020. This also included ensuring that all service agreements were available in French and English. *This strategy is complete.*

- » **Employee Wellness.** This strategy was about reinventing our Wellness Committee, and included surveying employees to see what they would be interested in, re-forming the committee and developing an action plan based on survey results. The survey was created, distributed and results tabulated. *This strategy was then put on hold because of the pandemic and the inability to have a committee meeting on a regular basis.*
- » **Violence in the Workplace.** Changes were made to the OHSA and ICAN had to ensure compliance to these legislative updates. This strategy included developing and circulating a survey to employees, reviewing the results, conducting a risk assessment, reviewing outcomes, and reviewing and updating policies. *This strategy is complete.*
- » **HR Recruitment and Retention.** An action plan was made in 2019-2020 which involved reinstating a regular recruitment cycle, and ensuring all new employees received a thorough orientation. The orientation process was completely redone and implemented and the regular recruitment cycle was put back into place. During COVID, on-going recruitment and orientation was limited to 5 persons per month. *The 2019 strategy is complete.*

Operational Plan Update

Engaging and Responding to Staff and Clients (Continued)

» **Staff and Client Satisfaction Surveys.** After the 2019 Staff Satisfaction survey results were analyzed, a detailed action plan for staff was created. CEO Coffee Talk meetings were held in February 2020, and results were shared with the Leadership Team. Staff meeting agendas were developed based on the CEO Coffee Talk meetings and Survey results. FISH training was also done in January and February 2020. When COVID struck, the entire action plan was put on hold because staff meetings could not be held.

The 2019 strategy is complete.

A new Staff Satisfaction Survey was done in November 2020. Results were analyzed and a new action plan was developed. Because of the pandemic, the action plan was limited. It included answering some of the staff comments in a memo, implementing a “Joy” campaign to boost morale, offering training, and addressing staff expectations.

After the 2019 Client Satisfaction Survey results were analyzed, an action plan was developed. This included interviewing all Supportive Housing clients (who did not participate in the survey), sending a memo to clients regarding ICAN statistics, the client mailing list was updated, and an introduction to the Transitional Unit was built into checklists. *The 2019 strategy is complete.*

A new Client Satisfaction Survey was done in November 2020. Results were analyzed and a new action plan was developed. It included: more training for employees regarding disabilities, creating more full-time positions to provide more stability to client schedules and managing client expectations.

Implementing GoldCare Software

This strategy has been in place for a few years. Outstanding actions which have been addressed in the last year include: testing the use of “telephony”, full implementation of the payroll module, fixing label issues and collapsing any excel spreadsheets into GoldCare. In addition, a “How to GoldCare” step by step manual was created.

This strategy is complete.

Implement Accessibility Plan

In the last year, ICAN put out an accessibility survey, compiled data and then updated the plan. Most of the previous plan tasks had been accomplished. The plan was updated in the fall of 2020.

The new plan will be implemented in 2021-2022.

Operational Plan Update

Implement Cultural Competency & Diversity Plan

In the last year, the plan was reviewed to see what had been accomplished and to update the plan. This was done in the fall of 2020. Ongoing training to our staff on cultural diversity is occurring, and ICAN is reaching out to the community to see if training may be available for our clients.

Implementation of our CARF QIP Plan

After our last re-accreditation, ICAN submitted a Quality Improvement Plan to address any short comings we had in the last assessment. All of the QIP had been addressed in the previous year, except for having 100% of Criminal Reference Checks on file. Although ICAN had asked all employees to submit a current CPIC, some were misplaced. This was corrected, the policy was re-enforced and this strategy is resolved. *This strategy is complete.*

Embrace Technology

This strategy included condensing duplicative spreadsheets into GoldCare, increasing the use of Teams and Zoom, increasing the use of e-learning for staff, cleaning up ICAN Statistics on GoldCare, governmental reporting being generated automatically from GoldCare and Accounting Software, and using the new Caredove

Platform. Everything is completed except for the governmental reporting being generated from the accounting Software.

That piece of work is about 70% complete.

Implementing Home Help Program

ICAN received funding for this program, which was new to ICAN. This strategy included ensuring that policies, procedures, documents and forms were developed and implemented for this program. This strategy was completed in early 2020. *This strategy is complete.*

CARF Changes to Section J (Technology) of CARF Manual

This strategy was developed to ensure our compliance to the significant changes. A full review and comparison of the 2019 and 2020 standards was done, a technology survey was developed with staff and clients and was completed in 2020; a risk assessment with all identified risks addressed; a technology binder was compiled which includes insurance coverage, updated Technology Plan, confirmation of CARF requirements with our IT service provider, copies of licenses, and acquired upgrades to our Operating System; copies of master schedules and payroll information collected quarterly and stored in fire proof cabinets, collection of IT inventory, disaster recovery document was created, and scenario paper tests completed. *This strategy is complete.*

Operational Plan Update

Changes to Assisted Living Policies

The Regional Assisted Living Workgroup developed Standard Operating Guidelines (SOG) a few years ago. ICAN was in full compliance with the SOGs. The Workgroup made one change in 2020 which affected any Assisted Living policy regarding Rai Cha Assessments. The policies were reviewed and updated. *This strategy is complete.*

Full Review of ICAN Process Maps

This strategy was developed to ensure our existing process maps were up to date and that process maps were developed for any new program which ICAN had become involved in. Over the course of 7 meetings and a full year, all process maps were reviewed and updated. This included the development of service-oriented process maps for Low Acuity, Respite and Home Help Programs.

This strategy is complete.

2020 CARF Update

This strategy was developed to ensure that all changes noted in the 2020 CARF Manual were fully reviewed and made by March 31, 2021. The Leadership Team divided up the tasks by section. The team ensured that all necessary changes were done and that ICAN remains in full compliance of the CARF standards.

This strategy is complete.

Review of Supportive Housing Pages

This strategy was developed in relation to the Quality Improvement Plan Health Index. A full audit of the number of pages was done and a Measurable Accomplishment Worksheet and action plan was developed. The key action identified was to meet with the clients who paged the most to determine the root causes and address them. *This strategy is complete.*

Senior Leadership 5-year Succession Plan

This strategy was developed to address the possibility of Senior Leadership members retiring in the next 5 years. Senior Leadership wanted to ensure that ICAN is left in good hands, and that knowledge is transferred. Senior Leadership developed an action plan which was shared with the Leadership Team. Memos and a survey were distributed to employees to see who aspire of moving up in the organization. Staff expressing interest were encouraged to set goals. A Supervisor expectation document was developed. A meeting was held with some senior staff who the Leadership Team had identified as future leaders. That group was given the opportunity to take additional training. *This strategy is complete.*

Quality Improvement Plan

In 2018-2019, the ICAN Leadership Team worked extensively on rebuilding our Quality Improvement Manual and Model. Part of the rebuild was the creation of “Health Indexes” and development of key indicators for all programs. Key indicators were based on Efficiency, Effectiveness, Service Access and Satisfaction.

Part of the initial work of implementing the new model, was establishing base line data for our indicators. In 2019-2020, we began doing that work. Quarterly meetings were planned. At the meetings, we reviewed the key indicators and the baselines and began our measurements. At the end of March 2021, senior leadership met to review results and the targets were readjusted.

Outreach

Category/Measure	Indicator	Target	Results
Efficiency – Service Utilization	Instances of clients using less time than allotted	250	493 quarterly (over 2 quarters)
Effectiveness – Client Goal	Client goal identified at service agreement	90% of clients meet their goal	100% (over 2 quarters)
Service Access – Staffing Levels	Instances where bookings are cancelled by ICAN	29	40 quarterly (over 3 quarters)
Satisfaction – Quality Spot Checks	Instances where clients note level of dissatisfaction	80% client satisfaction	99.3% (over 3 quarters)

 Needs immediate attention

 Close to meeting target

 Target met

Quality Improvement Plan

Reintegration Unit

Category/Measure	Indicator	Target	Results
Efficiency – Exceeding Length of Stay	# of clients staying over the 42 day stay	0	11 clients over 5 quarters (average 2 per quarter)
Effectiveness – Community Integration	# of clients being repatriated back into hospital	0	1 client over 5 quarters
Service Access – Time taken from referral to admission	# of clients coming in past 5pm	0	0 (over 4 quarters)
Satisfaction – RIU Questionnaire	# of clients saying good to very good	80%	Average 76% over 5 quarters

Assisted Living

Category/Measure	Indicator	Target	Results
Efficiency – Service Utilization	Instances of clients using less time than allotted	450 per quarter	Average 951 times (average over 2 quarters)
Effectiveness – Client Goal	Client goal identified at service agreement	100%	100% (over two quarters)
Service Access – Staffing Levels	Instances where bookings are cancelled by ICAN	20	Average of 57 per quarter (over 3 quarters)
Satisfaction – Quality Spot Checks	Instances where clients note level of dissatisfaction	80% client satisfaction	Average 98% (over three quarters)

 Needs immediate attention
  Close to meeting target
  Target met

Quality Improvement Plan

Supportive Housing

Category/Measure	Indicator	Target	Results
Efficiency – Service Utilization	Number of times pager is used	200 per quarter	Average 498 pages per quarter (Average over 5 quarters)
Effectiveness – Client Goal	Client goal identified at service agreement	95%	Average 95.6% (Average over 5 quarters)
Service Access – Staffing Levels	Instances of use of contracted staff	Reduce use by 75%	Reduced 100% by end of Q2 (2020-2021)
Satisfaction – Staff Schedule	Number of times we are on Plan B	Reduce by 50% per quarter	Reduced by 88% over 3 quarters

Enhanced Congregate Care

Category/Measure	Indicator	Target	Results
Efficiency – Med Errors	# of med errors per staff	0	Average 1.4 errors per staff per quarter (average over 4 quarters)
Effectiveness – Med Errors	# of total errors	0	Average of 15 errors per quarter (average over 4 quarters)
Service Access – Orientation/Training	Staff completing training within 2 weeks of hire	100%	Average of 4 employees completing orientation (average over 2 quarters)
Satisfaction – Client Satisfaction Survey	Client Satisfaction Survey	90%	Overall result in 2020 was 93%

Needs immediate attention
 Close to meeting target
 Target met

Quality Improvement Plan

Independence Training Centre

Category/Measure	Indicator	Target	Results
Efficiency – Service Utilization	Instances of sessions/clients absent	50	Average of 101 client absences per quarter (average over 3 quarters)
Effectiveness – Client Goal	Client goal identified at service agreement	95%	Average 97.5% per quarter (average over 2 quarters)
Service Access – Staffing Levels	Instances where programs are cancelled by ICAN	Less than 7 days per year	3.5 days (over 2 quarters)
Satisfaction – Quality Spot Checks	Instances where clients note dissatisfaction	80% satisfaction	98% satisfaction (average over 2 quarters)

Post Stroke Transitional Care Program

Category/Measure	Indicator	Target	Results
Efficiency – Service Utilization	Instances of sessions/clients absent	50	Average of 62 client absences per quarter (average over 3 quarters)
Effectiveness – Client Goal	Client goal identified at service agreement	95%	Average 96.5% per quarter (average over 2 quarters)
Service Access – Staffing Levels	Instances where programs are cancelled by ICAN	Less than 7 days per year	4 days (over 2 quarters)
Satisfaction – Quality Spot Checks	Instances where clients note dissatisfaction	80% satisfaction	97% satisfaction (average over 2 quarters)

 Needs immediate attention
  Close to meeting target
  Target met

Quality Improvement Plan

Home Help

Category/Measure	Indicator	Target	Results
Efficiency – Invoices	Instances of clients paying when services were not provided	0	No data
Satisfaction – Quality Spot Checks	Instances where clients note dissatisfaction	80% satisfaction	90% satisfaction (average over 2 quarters)

Low Acuity

Category/Measure	Indicator	Target	Results
Efficiency – Service Utilization	Instances of clients using less time than allotted	250 per quarter	Average 332 times per quarter (over 2 quarters)
Effectiveness – Client Goal	Client goal identified at service agreement	95%	Average 98% per quarter (average over 2 quarters)
Service Access – Staffing Levels	Instances where bookings are cancelled by ICAN	20 per quarter	Average of 147.5 days (over 2 quarters)
Satisfaction – Quality Spot Checks	Instances where clients note dissatisfaction	80% satisfaction	100% satisfaction (average over 3 quarters)

 Needs immediate attention
  Close to meeting target
  Target met

Quality Improvement Plan

Respite

Category/Measure	Indicator	Target	Results
Effectiveness – Caregiver Zarit Burden Interview	Scale #	50% caregivers show improvement	No data
Service Access – Staffing Levels	Instances where bookings are cancelled by ICAN	10 bookings per year	7 bookings (over 3 quarters)
Satisfaction – Quality Spot Checks	Instances where clients note dissatisfaction	80% satisfaction	No data

Scheduling

Category/Measure	Indicator	Target	Results
Efficiency – Complaints Received	# of complaints received regarding staff	5 or less per year	5 total (over 4 quarters)
Effectiveness – Complaints Received	# of complaints regarding scheduling services	25 per year	18 total (over 3 quarters)
Service Access – On Call Log	# of calls received outside of regular business hours	150 per quarter	192 calls per quarter (over 2 quarters)
Satisfaction – Quality Spot Checks	Client Satisfaction Survey	85% satisfaction	86.9% satisfaction (2020 survey results)

 Needs immediate attention
  Close to meeting target
  Target met

Quality Improvement Plan

Health and Safety

Category/Measure	Indicator	Target	Results
Efficiency – Fire Drill Evacuation Time	Time noted in Fire Drill Report	Maintain current level 4.5 minutes to evacuate a zone	Less than 4.5 minutes (every quarter for 3 quarters)
Effectiveness – Reduction in WSIB Incidents	# of WSIB reports	Reduce by 10%	Incident rate has doubled (17 in 2020-2021)
Service Access – Time Taken to Complete Incident Reports	Incident Reports	Within 1 business day	No data
Satisfaction – Annual Fire Drill Inspection	Annual Fire Drill Report receives a pass	Pass	2020 - Pass



Needs immediate attention



Close to meeting target



Target met

Accessibility Plan Update

ICAN developed its original comprehensive Accessibility Plan in 2016. ICAN is considered an authority on accessibility in the community because of the people we serve. However, there is always room for improvement and to use our knowledge to influence our community.

The following is a brief summary of ICAN's actions taken over the past number of years.

- » Provided a temporary smoking shelter for clients and ensured its accessibility (the shelter was removed due to ongoing complaints from clients)
- » Advocated with the City to have the entrance to the Delki Dozzi bike track repaired for accessibility
- » Built an accessible walkway to the Donato House
- » Contacted GoVa regarding blocking the entrances to our buildings
- » Wrote a letter to the City Accessibility Committee regarding winter sidewalk clearing and lack of accessibility
- » CEO was interviewed regarding winter sidewalk clearing by CBC radio
- » Advocated with the City to have Raiffeisen location added to the Bus Transit route, which was done
- » Added related training to our orientation, including AODA and Disability Awareness
- » As part of yearly training plans, included topics such as diabetes, dementia, aphasia, intermittent catheterization
- » Developed Sensitivity Training for our employees



Accessibility Plan Update

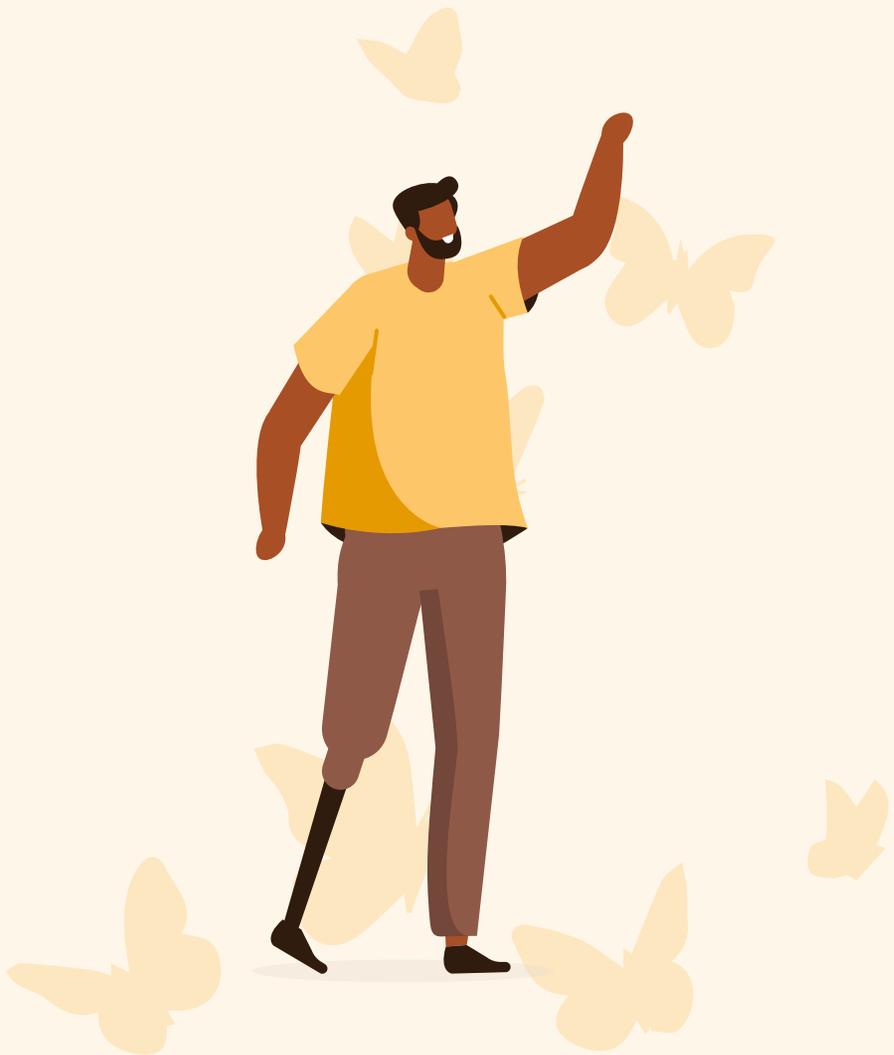
The following is a brief summary of ICAN's actions taken over the past number of years.

- » Purchased new snow blower and tractor for quick removal of snow for safe building evacuation
- » Maintenance staff now rotate on call for snow removal after hours
- » Snow removal policy drafted
- » Renovated stroke office space
- » Advocated with the City Accessibility Committee for transportation resources
- » Applied for funding for major washroom renovation in ITC; unsuccessful
- » Added accessibility related questions to annual survey to clients and staff
- » Updated website to ensure accessibility by purchasing a widget
- » Updated telephone system to ensure accessibility for those who cannot access the key pad
- » Posted AODA and accessibility plan on our website
- » Reminded clients that they can receive information from ICAN in the format of their choosing
- » Purchased e-learning from SCIO to ensure each ICAN employee receives training on Disability Awareness
- » Purchased training from Lance Cryderman to present to clients on Effective Communication (with staff)
- » Converted one washroom at our Haig Street location from a bath to a roll in shower
- » Began to offer virtual Stroke programs during the pandemic
- » Reorganized our inventory or donated equipment to be better able to give this equipment to clients in need
- » When funding allowed, purchased new equipment for our Physical Activities Area
- » Offered advice and feedback to the City on the new playground equipment which was installed on the property adjacent to ours, some equipment was installed for our clients to use
- » Arranged for mobile COVID testing for our clients with physical disabilities
- » Arranged for mobile vaccines for our clients with physical disabilities

Please refer to our Accessibility Plan 2020-2022 on our website to see what our strategies are for the next few years.

Cultural Diversity Plan Update

ICAN created its first plan in 2015 and has updated this plan yearly. Although we have a long way to go in addressing cultural diversity at ICAN, the Leadership Team has made huge strides in making improvements. This summary includes all that ICAN has put into place over the past few of years.



Policies and Forms

- » Pieces of my Personhood Form was implemented in most ICAN programs; this form provides information on an individual's background and culture which can be used to inform individual service plans and service agreements
- » ICAN policies are reviewed to ensure that we recognize cultural diversity, acceptance and inclusion, i.e. Harassment and Discrimination
- » Marketing material, and client forms are all available in both official languages
- » Staff Satisfaction Survey updated with new questions about culture
- » ICAN created a basic cooking and cleaning manual for clients to use when directing staff with a different cultural background
- » Complaints tracked and followed up on in regard to cultural differences

Cultural Diversity Plan Update

Inclusion

- » ICAN's By-Laws reflect the need to have representatives from the francophone community and persons with disabilities
- » ICAN is designated as a French Language Service provider
- » Culture is embedded in our Client Bills of Rights and our Statement of Values

Training

- » ICAN has embedded AODA standards into our orientation program
- » Communication Matters is also done in our orientation, on an as needed basis
- » Active Offer Training for French Language Services
- » Indigenous Training offered when available
- » ICAN developed Cultural Sensitivity Training for staff
- » ICAN developed English as a Second Language Training for ICAN staff
- » Disability Awareness Training e-learning modules purchased, which will be incorporated into orientation
- » E-learning modules purchased which includes culture, human rights

Promoting Cultural Diversity

- » Newsletters
- » Diversity Posters
- » Charter of Rights posted on walls
- » Bill of Rights posted on walls
- » World Map with stickers, so that staff would identify where they are from, posted in hallway

French Language Services

- » Committee formed
- » Annual Report submitted to funder which is audited, with improvement targets
- » Active Offer training given to employees
- » Members of Leadership test employees for French proficiency

Please refer to our Cultural Competency and Diversity Plan which was updated in the fall of 2020, for what ICAN will be working on over the next few years.

Technology Plan Update

In 2020, ICAN circulated a Technology Survey to all clients. Feedback from that survey has been incorporated into ICAN's Technology Plan. This is a brief report on some of the work being done or completed.

Website not updated regularly

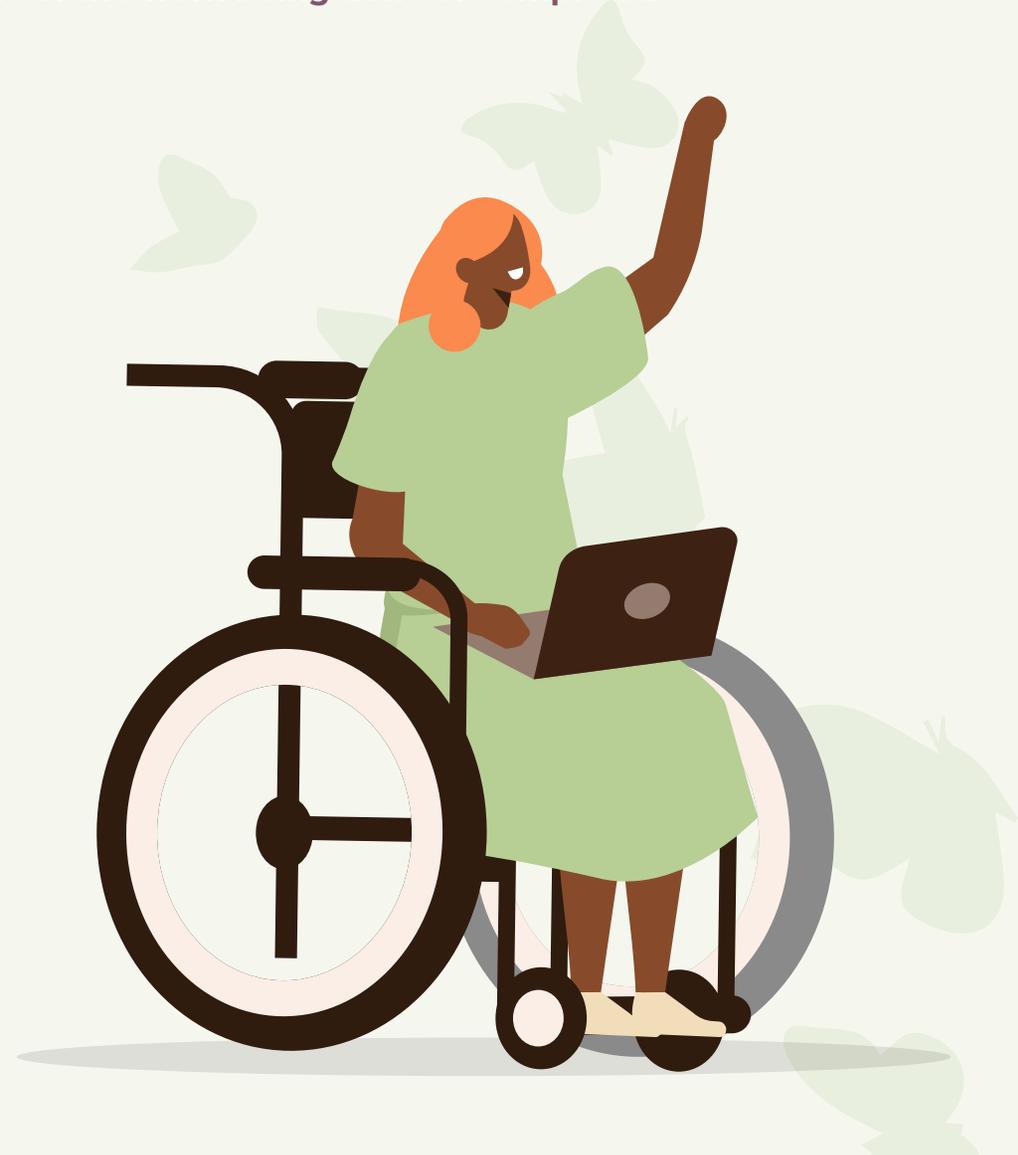
Our website is considered a “static” website, which means that we only update it when there have been changes to the information on the site. However, in light of COVID and client feedback, ICAN has made numerous updates in the last year.

Website needs audio

ICAN did look into this and we are unable to make this change for a number of reasons. Firstly, it is cost prohibitive. Secondly, we have been advised that generally, persons who may need this feature may already have adaptive equipment themselves. Lastly, some of the upgrades planned to make the website more accessible clash with the audio feature.

Bigger Bolder Fonts on Website

ICAN has incorporated an accessibility menu which allows users to adjust contrast, highlight website links, increase the text size, increase the text spacing, pause animations, adjust to dyslexia-friendly text, adjust the line height between text and increase the cursor size.



Technology Plan Update

No feedback about ICAN allowed on website

As mentioned, ICAN's website is considered "static" and we do not collect information like this through that means. However, all clients are encouraged and welcomed to provide feedback through other methods. For example, clients can provide feedback directly to his/her Care Coordinator or Program Supervisor either in person, via email, regular mail, or by phone call; he/she can complete an incident report, a complaint report, or a work order; clients are encouraged to complete annual client surveys including our Client Satisfaction Survey, and Quality Spot Checks; and feedback is always sought at Tenant meetings.

Staff voicemail does not indicate when person is away; staff are not using email auto-response to advise of absences

ICAN has reminded all staff to use these tools.

Phone System should have voice activation

ICAN has purchased an upgrade to our phone system to allow for voice activation. The system has not yet been activated, but should be within the next year.

Information should be sent to client in the client's choice of format

If a client would like to receive information in any other format besides paper, i.e. email, client should let her/his Care Coordinator know. As per the AODA Customer Service Standard, clients have the right to request any information in the format of his/her choosing.

Haig Street Tenants should have access to the Landlord after hours and on weekends

ICAN's practice has always been that a tenant having an issue involving the building can report the concern to the front-line staff, who will contact the on-call supervisor. Depending on the severity of the issue, the landlord may be contacted. Front line employees can assist clients with completion of a work order, if the issue is not serious.

Human Resources Updates

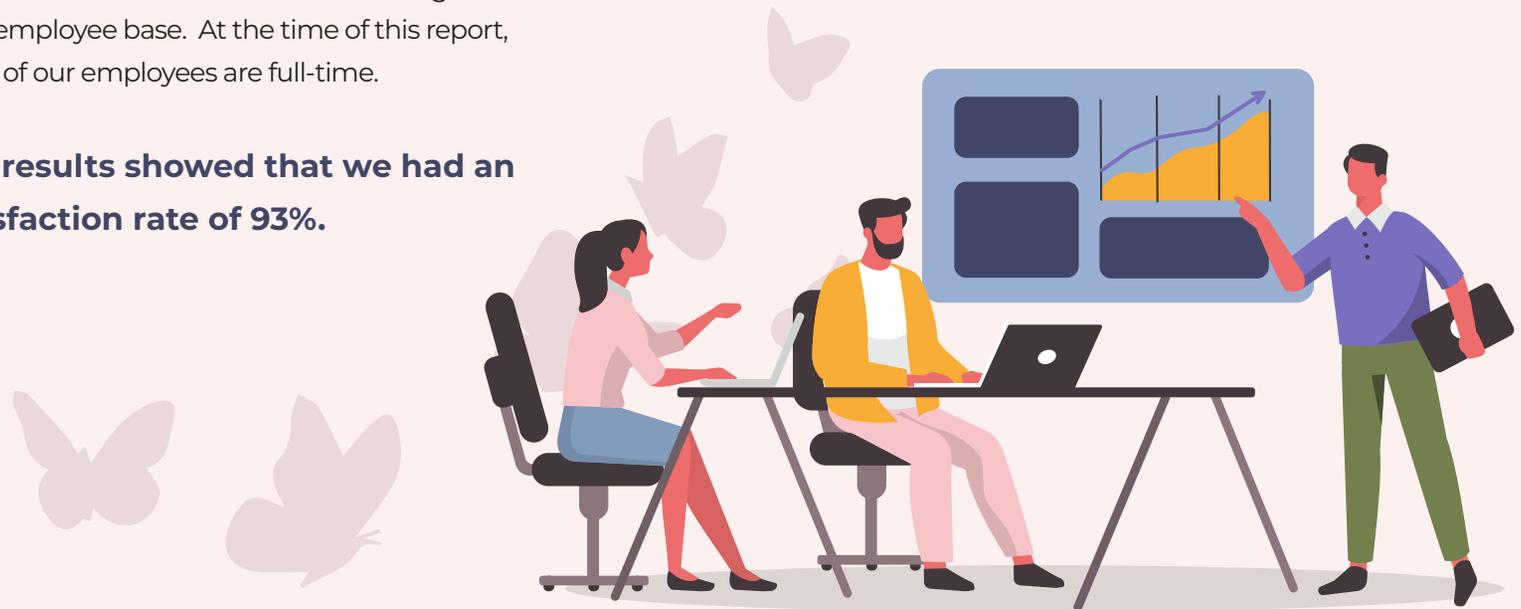
Human Resource Recruitment and Retention continues to be a challenge. ICAN is certainly not unique in this challenge, as front-line workers are scarce. The Provincial Government has taken steps to provide education for potential PSWs, and has provided temporary wage enhancements during the pandemic.

This is still not enough. Along with our provincial association OCSA, ICAN continues to advocate for funding increases, and changes to funding formulas. Unfortunately, the government has turned its attention to long term care homes. While this attention is necessary, there is a real concern that if the government only focuses on long term home funding, our sector will be left even further behind.

In spite of the above, ICAN continues to be successful in recruiting and retaining our very dedicated employee base. At the time of this report, ICAN had 151 employees, 50% of our employees are full-time.

Our Staff Satisfaction results showed that we had an overall employee satisfaction rate of 93%.

We have developed several e-learning modules for our employees which include Medication Administration, Back Care, Stroke, Documentation, Bowel and Bladder, Workplace Gossip and Drama, Reporting Critical Incidents, Diabetes, Cultural Diversity, and Professional Boundaries. We also have in-house trainers for First Aid, CPI and Mental Health First Aid. In addition, we have subscribed to two e-learning platforms and can offer our employees a wide range of training.



Human Resources Updates

Program Updates

All ICAN programs and services continue to run at 100% capacity with high numbers of persons on our waitlists.

Some of ICAN's programs were affected by the pandemic. Our Independence Training Centre programs were suspended during part of the last year. When we were able to re-open, it was done with limited capacity and no group programs. We are hopeful that we will be able to fully reopen in the fall of 2021.

Some of the Stroke Programs were also put on hold. But, we were able to offer some of our programs virtually. The virtual delivery model has been successful and will continue to be offered in this way.

For a very short period, ICAN also had to suspend some PSS Low Acuity and Homemaking services.

Many of our clients voluntarily gave up some of their services when ICAN was struggling with human resource issues due to the pandemic.

As of April 1, 2021, ICAN took over providing services in the Hwy 144 Corridor from Red Cross. Services are Assisted Living, Low Acuity and Home Help. A lot of work was done by ICAN Supervisors, Coordinators and Schedulers to ensure a smooth transition for our new clients.

With this expansion we added:

- » 1 supervisor
- » 1 coordinator
- » 3 full-time front-line employees
- » 1 full-time Home Help worker
- » 11 Assisted Living Clients (605 hours of service)
- » 5 Low Acuity Clients (53 hours of service)
- » 5 Home Help Clients (22 hours of service)

ICAN is pleased to report that our 2020 Client Satisfaction rate is 93%.

Program Updates



United Way Grant

ICAN applied for a United Way Grant in the fall of 2020. ICAN was successful in its grant application. Funding is being used to purchase iPads for senior clients who are experiencing social isolation, and to provide food baskets to our clients. Our grant time limit has been extended until the end of June, so ICAN will be able to provide food baskets to some of our clients for the next few months.



Peer Support

ICAN was successful at pitching an idea for a pilot project with our funder. The idea was a Peer Support Program. Dan L. (one of our Supportive Housing clients), is doing Peer Support for our Supportive Housing clients. He is providing one-to-one support to any of these clients, he is holding social activities (when allowed), and will be assisting in interviews, training etc. Dan was a natural choice for this role, as he has experience in Peer Support at both ICAN and for SCIO. The pilot program is doing so well, that it has been extended until the end of June. One of our NILA partners (other agencies in the North East which provides services to adults with physical disabilities), has also started the same program.



COVID-19 Pandemic

It has been a little over a year since COVID-19 took hold in Canada. It has been an extremely stressful, anxiety driven time for all ICAN employees and clients. I am extremely proud of our employees who continue to come to work during these times. Our clients have continued to receive quality services because of their efforts.

Our front-line employees have been given the opportunity to be vaccinated. ICAN advocated to PHSD to have our clients at Haig Street, Mont Adam and Walden vaccinated via mobile clinics. I am very proud to report that we were successful in our efforts.

ICAN is hoping that all ICAN clients and employees are able to be vaccinated in the next few months, if they wish to do so.

French Language Services Report

ICAN submitted its French Language Services report to the NE LHIN on September 24, 2020. This report is a summary of how ICAN takes into consideration its Francophone clients needs as set out in our accountability agreement with the NE LHIN.

The Board of Directors passed a resolution in February 2021, attesting that ICAN has remained compliant with the criteria for its French Language Services designation.

ICAN continues to demonstrate its commitment to provide French language health services in the following ways:

- » We engage in the active offer of French services with clients during the yearly service agreement review
- » Staff are trained on the importance and the need to identify clients' mother tongue and linguistic identity at registration
- » A French language services script has been added to the orientation schedule to ensure all new staff are trained on active offers
- » The French Language Services Committee meets quarterly to ensure continued availability of quality FLS services
- » Proficiency evaluations are completed by all employees who self-identify as French

Percentage of francophone clients: 8.7%

Percentage of francophone staff: 25%

Percentage of francophone board members: 45%

ICAN continues its work as it is essential that we continue to offer fair and effective services that can be adapted to each individual need.



Operational Statistics

Program Results

Program	2019-20	2020-21
Independence Training Centre (ITC)		
Number of Clients Served	178	102
Outreach Attendant Care		
Number of Clients Served	24	24
ITC & Outreach		
Hours of Service	27,104	23,852
Assisted Living Services - Seniors		
Number of Clients Served	46	44
Days of Service	13,517	11,293
Assisted Living Services - Adults with Physical Disabilities		
Number of Clients Served	52	37
Days of Service	15,424	13,023
Transitional Unit (RIU)		
Number of Clients Served	48	19
Hours of Service	N/A	5,786

Program	2019-20	2020-21
Home Help Program		
Number of Clients Served	19	19
Hours of Service	933	790
Regional Post Stroke Transition Services (ICAN Only)		
Number of Clients Served	153	132
Hours of Navigation Services	1,866	2,381
Regional Personal Support Services Low Acuity (ICAN Only)		
Number of Clients Served	41	37
Hours of Service	3,262	2,645
Regional Respite Services (ICAN Only)		
Number of Clients Served	8	5
Hours of Service	674	401

Funding & Revenue

Revenue Sources 2020-2021

	Amount
NE Local Health Integration Network	\$ 9,434,759
MOH Apartment Building	\$ 236,821
Fee for Service	\$ 112,182
Board & Donations	\$ 63,983

North East Local Health Integration Network Regular Funding Breakdown 2020-2021

	Amount
Independence Training/Outreach	\$ 1,308,549
Assisted Living Services	\$ 4,029,430
Regional Post Stroke Transitional Program	\$ 1,041,144
Low Acuity	\$ 2,255,473
Respite	\$ 303,035
RIU	\$ 356,000
Home Help	\$ 16,128
Neighbourhood Model	\$ 125,000



Financial Statements

Statement of Operations

Year ended March 31, 2021, with comparative information for 2020

	2021	2020
Revenue	\$ 10,028,645	9,874,994
Expenses	10,056,909	9,845,370
Excess (deficiency) of revenue over expenses	\$ (28,264)	29,624

Statement of Financial Position

March 31, 2021, with comparative information for 2020

Assets	2021	2020	Liabilities and Fund Balances	2021	2020
Current assets	\$ 2,122,312	1,637,307	Current liabilities	\$ 1,987,461	1,563,219
Capital assets	718,551	813,943	Deferred capital contributions	368,702	396,893
Long-term investments	158,195	158,195	Fund balances	938,956	967,220
Restricted assets	296,061	317,887		\$ 3,295,119	2,927,332
	\$ 3,295,119	2,927,332			

Thank You Supporters

(Funders, Memberships, Donors, Committees)

Committees

- » Regional Home and Community Care Network
- » Regional Low Acuity Workgroup
- » Regional Assisted Living Workgroup
- » Regional Respite Workgroup
- » Regional Home Help Workgroup
- » Regional Stroke Workgroup
- » Sudbury/Manitoulin/Parry Sound Home and Community Care Network
- » One Client One Plan (OCOP) Steering Committee
- » Équipe santé Sudbury & Districts OHT Development Table
- » Ontario Health North Community Support Services COVID-19 Workgroups
- » Sudbury COVID Outbreak Prevention and Response Workgroups
- » St. Albert's PSW Advisory Committee
- » Northeastern Stroke Network
- » Cambrian College PSW Program Advisory Committee

Donors

- » Bill Snow, Myles Property Management Inc.
- » Irene Dembek
- » Greg Rodgers
- » Guy Lefebvre
- » The Roy Family
- » Roger & Cheryl Parsons
- » The Fielding Foundation – Accessible Van Donation

Funders

- » North East Local Health Integration Network (NE LHIN) and the Government of Ontario
- » Ministry of Health – Community Health Division
- » HRSCD/RHDCC
- » United Way

Memberships

- » Ontario Non-Profit Housing Association (ONPHA)
- » Northern Independent Living Association (NILA)
- » Ontario Association of Independent Living Services Providers (OAILSP)
- » Ontario Community Support Association (OCSA)

Closing Remarks

In closing, it is of the utmost importance to thank and recognize everyone involved in ensuring ICAN continues to be an outstanding agency. Thank you to our clients who have been very patient, understanding and cooperative with ongoing challenges we have faced due to the pandemic. It is an honour to be of service to you.

Thank you to our Board of Directors, who have worked diligently on our new Strategic Plan, and have helped us weather this COVID storm. Their support has been incredible.

Thank you to the Leadership Team, who worked non-stop to ensure our clients and staff are well supported and who managed to accomplish other work priorities in spite of the pandemic.

Thank you to our incredible employees, who continued to come to work to support our clients, even though they were also facing the day-to-day stresses and concerns because of COVID. I am so incredibly proud of our staff who often put the client's needs ahead of their own.

Thank you to our funders and community partners for your support, and collaboration to ensure that all of our clients were well supported this past year.

We are starting off the 2021-2022 in the middle of a third wave of the pandemic. Our priority remains the same, ensuring that our clients and employees are safe and well supported. I am confident that as the population continues to be vaccinated, that we will be able to return to a new normal.

This year, ICAN will continue to participate fully in the development of a Sudbury Ontario Health Team to ensure that our clients have a voice at the table. We will also be monitoring ongoing changes to health care and will be involved wherever possible.

We will also be redeveloping our Operational Plan to incorporate some of the ICAN Strategic Plan.

In the fall, ICAN will also be undergoing our CARF re-accreditation. As you can see, a lot was accomplished in spite of the pandemic. There is a song that says, "When the going gets tough, the tough get going". That song must have been written with ICAN in mind.

I look forward to working with all of ICAN's stakeholders this year. I am sure that 2021-2022 will be another successful year.

Stay Healthy and Stay Safe!



Marie Leon

Chief Executive Officer



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