2022

Performance Improvement Report

The H.O.M.E Society

HR/Quality Improvement Director
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Welcome to H.O.M.E.S 2022 Performance Improvement Report.

The H.O.M.E Society has produced an annual Performance Improvement Report since 2007. The information collected and its analysis through the outcome's management process highlights the strengths of our organization and the areas that need improvement. The Performance Improvement report is part of the H.O.M.E Society's commitment to Continuous Quality Improvement.

Facing Challenges

2022 was a continuation of challenges due to the COVID 19 pandemic. Recruitment of new caregivers was a sector wide struggle, with many agencies leaning on each other for ideas

Understanding the Report

The H.O.M.E. Society believes that performance improvement data can help our organization develop and continue to be effective. It also helps us find new innovative methods for improvement. It is an essential part of review and planning. Performance improvement, and particularly the emphasis on a range of outcomes developed by H.O.M.E. Society, is an ongoing process to use evaluation as a tool for learning. It is not an add-on exercise purely for accountability to funders. For performance improvement to be useful, it is essential for H.O.M.E.S to develop outcomes appropriate to the folks we support and the agency as a whole. We need to do so over time and through consultation as well as ongoing reviews. H.O.M.E. Society is dedicated to achieving ongoing positive change for the people we serve, our caregivers and all partners and stakeholders.

Data Collection Methods

H.O.M.E.S uses Sharevision to collect a wide variety of data for performance improvement. This data is crucial in evaluating outcomes and recognizing where quality improvements are needed.

ShareVision

Outcomes Tracking

The Sharevision system has a functional and accessible database that allows our organization to gather and analyze all aspects of service delivery. More importantly, it can provide immediate snapshots of organizational functioning, which, from a quality improvement lens, gives us the ability to deal with and resolve issues as they are happening using current data and knowledge. The Sharevision system allows us to track our outcomes efficiently.

In addition to the Sharevision system, H.O.M.E.S has a number of processes in place for gathering information:

- Annual Satisfaction Surveys,
- In-person meetings/interviews,
- Employee statistics, including WorkSafe and Com Vida,
- Goal Tracking and ISP's,
- Training evaluations,
- Incident reports,
- H&S committee feedback

Human Resources/Work Force data.

One thing to note is that formal feedback tools like satisfaction/experience surveys cannot – and will not – replace the impact and importance of our daily conversations or the feedback we receive from persons served, families, employees and other stakeholders on an ongoing basis.
Relationships are a key foundation of H.O.M.E.S. Building trust with all of our stakeholders through those daily conversations and interactions will only make H.O.M.E.S stronger.

Data Integrity Assurance

A great deal of time and effort goes into collecting the data that is summarized in the proceeding pages. However, the collection and summarizing of the data is meaningless if the collected data lacks integrity. A strong agency uses its data in organizational decision making. Simply put, data that is not accurate or consistent means that this decision making is done with bad information. As a result, the right decisions cannot be made. Fortunately, some simple processes can ensure the integrity of the agency's data. Some of HOMES processes are noted below.

Reliability is meant to ensure that data is collected consistently and in a way that could be reproduced at another time and by other people. Because H.O.M.E.S does not use standardized tests or measures that can ensure reliability, other steps have been taken:
● Very few personnel are entrusted to tracking data. This tighter circle of employee limits misinterpretation.

● For all self-reporting measures with some amount of subjectivity, discussions and specific training with the team is ongoing to ensure that data is coded properly.

● Most data is gleaned directly from internal documents such as Medication Error Reports or Incident Reports, virtually eliminating any danger of the data not being collected the same way on another occasion. Much data is provided directly from the Sharevision site, which can run reports directly from its system.

● Unless otherwise noted, data measures all persons served, not just a sample. This means that reliability issues related to data sampling are not a factor.

Validity simply suggests that your data measures what it intends to measure.

● The organization's data is reflective of the needs of stakeholders as gathered from ISP's, surveys and plans, and is reflective of the agency's mission and values.

Completeness means that the data is as complete as possible and that obtainable data is not missing, be it intentionally or unintentionally. Incomplete data has little value, as it may exclude entire groups of persons served or may be missing data that will greatly influence success towards missing a target.

● The number of individual records in all spreadsheets is routinely checked against the overall list of persons served to ensure that data is complete.

All programs/service areas have an indicator and no groups are missing from data collection or analysis.

● All attempts are made to find any missing data. For data accessed from the Sharevision system, reports are run that allow the Quality Improvement Lead to identify persons served for whom data is missing.

Accuracy simply means that all data is recorded properly and that any errors are caught and corrected.

● Spot checks are completed by the Quality Improvement Director/Delegate to ensure accuracy.

● Data reports are double checked against actual documents on a quarterly basis. This ensures that potential errors are corrected in a timely fashion.

For this report, we collected data in the following service areas:

- Residential Services/Community Housing
- Health and Safety
- Human Resources/Workforce
- Shared Living
- Respite Services
- Community Inclusion/Integration Services

For each of these service areas, we set targets and collected information about:

1. **Experience of Services (previously Satisfaction)**- stakeholder surveys
2. **Effectiveness**- the results of services/supports for the person receiving services
3. **Efficiency**- the responsiveness of time and resources
4. **Business Functions**- Functional objectives to support the achievement of agency business; finance etc.
5. **Service Access**- Accessibility to services.

An outcomes approach involves:

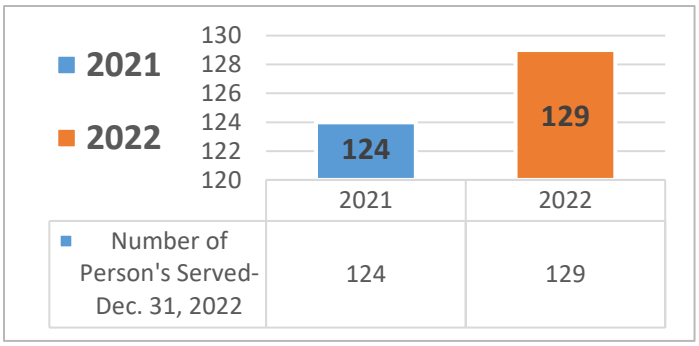
- Identifying the changes you hope for,
- Assessing what changes happen,
- Using the information about the results of your work to plan and deliver services so as to make the changes for persons served more likely.

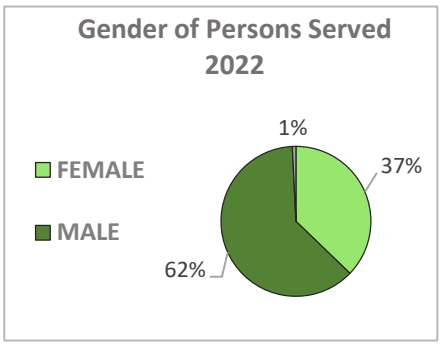
H.O.M.E.S Performance Improvement Report is an integral part of an overall quality management system. Some of the components of that system include the following:

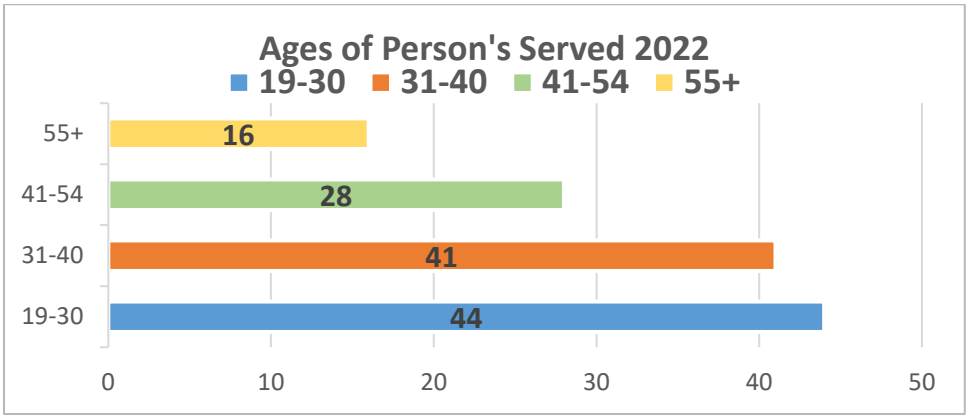
- Strategic Planning
- Compliance Reporting
- Risk Management Planning
- Accessibility Planning
- Information Technology Planning
- Human Resources Reporting
- Service Delivery Reporting/Critical Incident Reporting
- Health & Safety Reporting
- Financial Reporting

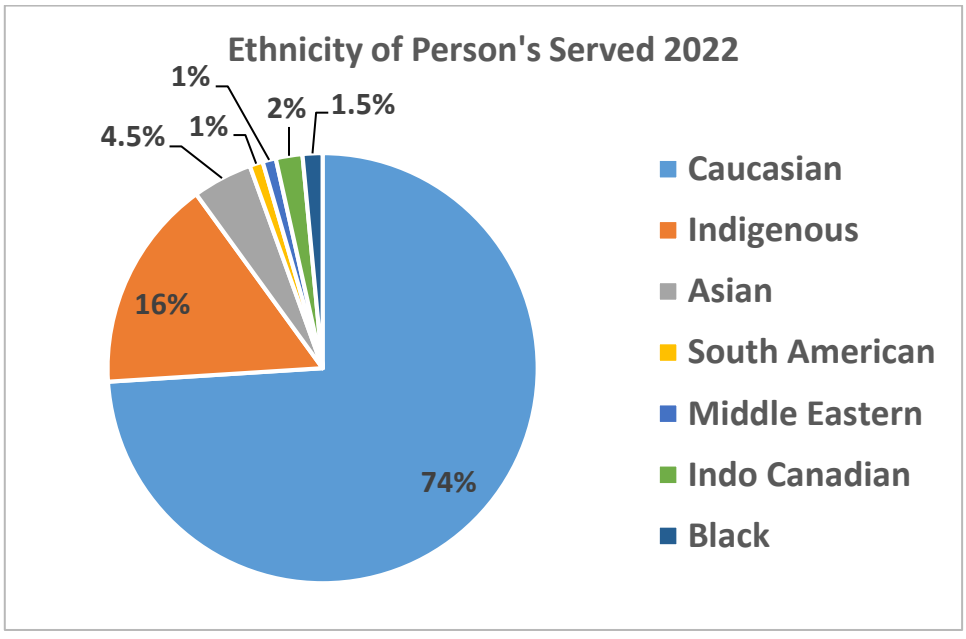
Overview of Services Provided in 2022

Demographics



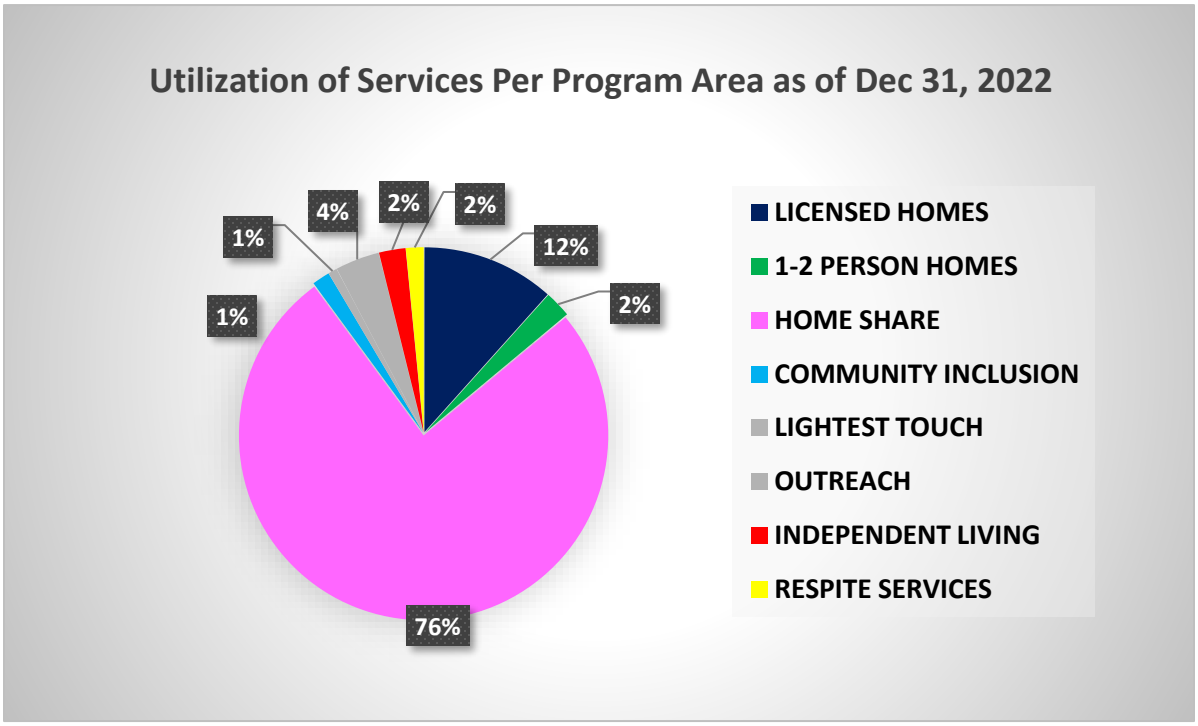






Services

In 2022, the H.O.M.E Society supported a total of 129 people in a variety of services and supports. The following outlines the number of persons served who utilize services:



Licensed Homes	15	Work Experience	27
1-2 Person Homes	3	Counselling Services	1
Independent Living	3	Community Inclusion	2
Home Share	98	Psychiatric Services	53
Respite Services	2	Lightest Touch	1
Outreach Services	5		

Experience (Satisfaction)

On an annual basis, we send out a survey to families, individuals served, employees, volunteers, community partners and other stakeholders, asking for feedback on H.O.M.E's services. We use this feedback as one way of ensuring that we are continuing to provide a consistent quality of service, and to ensure we are aligned with our strategic planning for the following year.

We use an "online survey", which offers a quick, anonymous and easy method of getting the input we require. This seems to be successful, especially for employees and contractors. Families and persons served seem to continue to prefer the paper copy but many are beginning to feel comfortable with the online option.

In addition to our Satisfaction Surveys, we have various other processes in place for gathering input:

- Team Meetings
- Board Meetings (virtual)
- H&S Committee Meetings (virtual)
- Quarterly meetings with funders (virtual)
- Online "suggestion" box
- Exit Interviews with individuals and employees who leave H.O.M.E.S.
- Employee Evaluations
- Communication with families and friends.
- ISP's
- Informal one to one virtual meetings.

H.O.M.E.S received no formal concerns or complaints in 2022.

COLLECT

TEAM

INPUT

Experience (Satisfaction)

Persons Served Survey

Comparisons 2021-2022

The Persons Served Satisfaction survey is based on the eight Quality of Life domains.

The eight domains are:

1. **Emotional well-being** – contentment, self-concept, lack of stress
2. **Interpersonal relations** – interactions, relationships, supports
3. **Material well-being** – financial status, employment, housing
4. **Personal development** – education, personal competence, performance
5. **Physical well-being** – health and health care, activities of daily living, leisure
6. **Self-determination** – autonomy / personal control, personal goals, choices
7. **Social inclusion** – community integration and participation, roles, supports
8. **Rights** – legal, human (respect, dignity, equality)

Domain/Category	*Satisfied most of the Time*		
	2021	**2022**	**Change**
Emotional well-being	84%	91%	+7%
Interpersonal relations	46%	55%	+9%
Material well-being	95%	88%	-7%
Personal development	61%	63%	+2%
Physical well-being	65%	45%	-20%
Self-determination	84%	95%	+11%
Social inclusion	64%	60%	-4%
Rights	87%	86%	-1%
Overall Average	**73%**	**73%**	**0**

Response Rate:

2021: 33%
2022: 22%

(Less 11%)

Outcomes of the 2022 Action Plans

- To continue to promote physical activities.
  Done

- To look at creating a part time exempt Activity Planner role.
  Done

- To increase social events and send reminders the day before the event.
  Done, weekly reminders and updates are emailed as needed.

2023 Action Plans

- To consider increasing the Activity Planners hours post pandemic.

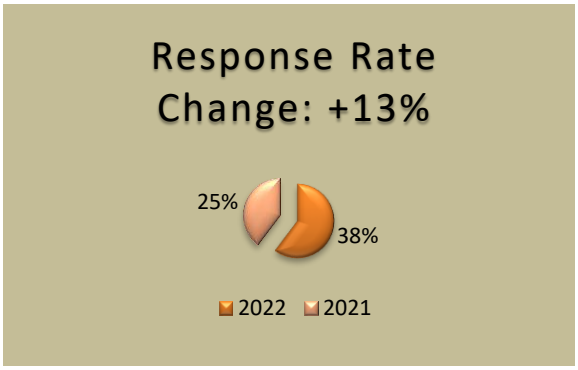
- Increased promotion of activities within the licensed homes.

- To coordinate the survey timelines to be in sync with the Person-Centered Monitoring in hopes of increasing the response rate.

Experience (Satisfaction)

Caregiver/Employee Survey

Comparisons 2021-2022



Category	Satisfied		Increase and/or decrease Please see notes below **
	2021	2022	
Job Satisfaction	95%	97%	+2%
Ethics and Values	95%	98%	+3%
Inclusiveness	88%	100%	+12%
Health and Safety	80%	98%	-18%
Leadership	93%	96%	+3%
Overall Average	90% (+1%)	98% (+8%)	

Outcomes for the 2022 Action Plan(s)

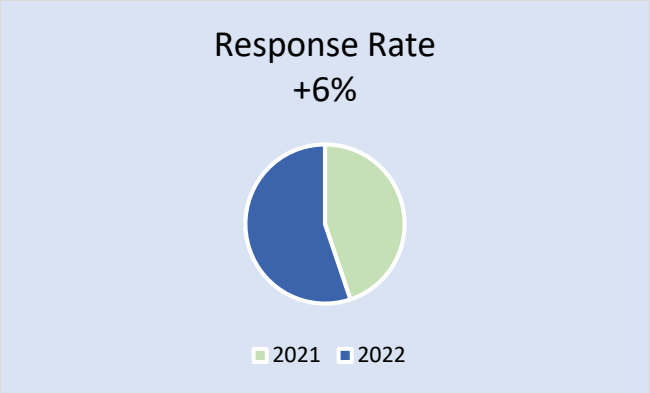
- *To provide concrete and concise information to all employees on the steps to take if they have a H&S concern.*
  Emails and H&S Concern brochures are sent out. The Concern brochure is included in the employee onboarding package.
- *Continue to provide appreciation events to all employees.*
  We were finally able to host an employee appreciation event on June 23, 2022. It was a wonderful evening at the local casino with lots of laughs, door prizes and 50/50 draws.
- *To distribute H.O.M.E.S Cultural Plan to all homes and ask that it be discussed at monthly team meetings.*
  This was not done, carried forward.

2023Action Plan(s)

- To distribute H.O.M.E.S Cultural Plan to all homes and ask that it be discussed at monthly team meetings.
- To attend a minimum of two job/career fairs to increase recruitment.
- To explore options of mental health training for employees
- To explore options of training a Program Coordinator to provide age related training to co workers.

Contractor Survey 2022

Comparisons 2021-2022



Outcomes of Action Plans for 2022

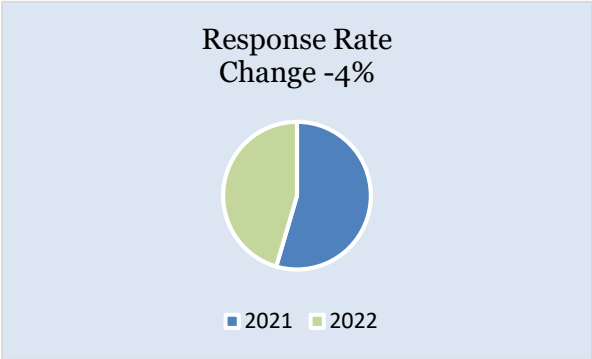
- To host in person/virtual Home Share Contractor meetings a minimum of twice per year.
  Done
- To schedule and provide in person/virtual computer training, focused on Sharevision.
  This was put on hold until Sharevision V4 is in place.

Action Plans for 2023

- Once V4 is up and running, Sanjiv will provide ongoing, personalized Sharevision training to Contractors.
- Sanjiv will offer beginner computer classes.

Community Partner Survey 2022

Comparisons 2021-2022



A few of the wonderful comments we received:

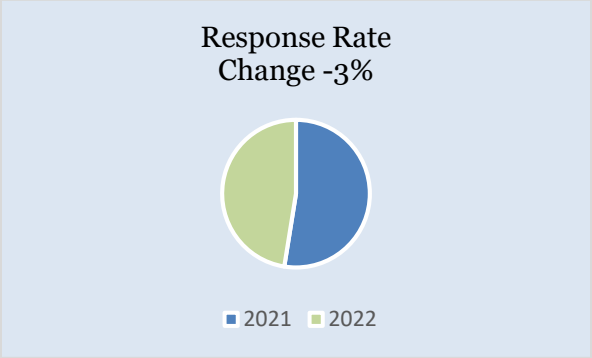
- Our Campuses have had an excellent relationship based upon integrity and communication for many years. I can reach out and always get a response back and in a timely manner.
- From an educational and employment side they have been fantastic to work with. Our students have had excellent practicum training and employment opportunities.
- Dave is readily available to partner organizations in the community. He is quick to offer support and seek collective solutions where possible.

Action Plan (ongoing)

- To change the questions to change the input.
- To update our Community Partner database to ensure we have the most up to date list of email addresses.

Family Survey 2022

Comparisons 2021-2022



A few of the comments we received:

- Keep providing the services and supports you do. Great people all around!
- H.O.M.E.S treats me with dignity and respect at all times.
- Please don't ever change!

Outcomes of 2022 Action Plan(s)

- Send families all special event notifications, Newsletters etc. To be done by Community Activity Coordinator.
  This was done. Families get a copy of H.O.M.E.S Newsletter and the Program Coordinators share info with the families. We need to ensure the activity coordinator has the most up to date family email list.
- Ensure the family email addresses are current and up to date. HR/QI to send a notice on a bi-annual basis for updates.
  This was done.

Actions Plan(s) for 2023

- Brainstorm about creative methods to increase family participation in the survey…paper with a self-addressed envelope?

EFFECTIVENESS

Aggressive Critical Incident Reports 2022 *(with a comparison to 2021)*

Objective	Indicator	Measure	Target	Outcome		Target reached	
				2021	2022	2021	2022
To lower the % of individuals involved in aggressive critical incidents on an annual basis.	Critical Incident Reports	The % of persons served involved in "aggressive" critical incidents annually	Less than 10% of persons served involved in aggressive critical incidents annually.	16%	17%	No	No

Total Critical incidents per service area.	2021	2022	Change
Licensed Homes	5	5	0
Single/Two Person Homes	1	3	+2
Shared Living	41	35	-6
Total	47	43	-4

Discussion on significant increases/decreases:

- Of the 4 critical incidents in licensed homes, 3/4 were aggression between room-mates.
- There were 17 individuals involved in the 35 incidents in the Shared Living department. One individual had 6 (17%) incidents. 9/17 individuals have substance abuse issues and the remaining 8 individuals experienced mental health challenges and various degrees of change.
- 29% of incidents in Shared Living were from Individuals less than 30 years of age.

Outcomes of Action Plan(s) for 2022

- To provide SL Contractors education on completing reports on Sharevision. This could be done by creating a 'How to Guide' that would be sent to all Contractors, as well as being included in the orientation package.
  Sanjiv is currently being trained on the updated version 4 (Sharevision) and will provide training to contractors when he is able to do so.
- To offer in-house computer training to contractors.
  SL Coordinators were able to offer 'situational' computer training to some contractors.
- Ensure that all contractors have Gentle Teaching Training Levels 1 & 2.
  Ongoing.

Action Plan(s) for 2023

- To continue to provide education on how to complete incident reports correctly.
- Ongoing Mandt training

EFFECTIVENESS

Aggressive Internal Incident Reports 2022

Objective	Indicator	Measure	Target	Outcome		Target Achieved	
To lower the % of individuals involved in aggressive internal incidents on an annual basis	Internal Incident Reports	The % of individuals involved in aggressive internal incidents annually	Less than 20% of individuals involved in aggressive internal incidents annually.	2021	2022	2021	2022
				24%	%	NO	

Total internal incidents per service area.	2021	2022	Change
Licensed Homes	276	93	-183
Single/Two Person	4	2	-2
Shared Living	26	16	-10
Total	**306**	**111**	**-195**

Discussion

- Internal incidents decreased by 66% in the residential homes. A few reasons for the reduction are thought to be the results of two individuals moving. D.C moved into a single home Jan 2022 and D.P moved to the interior in September 2021.
- The number of internal incidents from the licensed homes was quite an even split. 61% of these incidents involved 4 individuals.
- Home Share Internal Incidents had a decrease in 2022.

Outcomes of Action Plan(s) for 2022

- Pending the pandemic situation, H.O.M.E.S will increase social events.
  H.O.M.E.S greatly increased the number of in person social activities.
- To provide age related training to help caregivers understand and better support folks who are aging.
  Carried forward, no virtual training found that was suitable.

Action Plan(s) for 2023

- To provide age related training to help caregivers understand and better support folks who are aging.

EFFECTIVENESS

Service Delivery Outcomes

The H.O.M.E. Society is required to provide all persons served with an Individual Support Plan (ISP) on an annual basis. Not only does H.O.M.E.S provide an extensive ISP annually, but we also provide each individual with the opportunity to have a PATH done as well. The ISP/PATH process starts with a gathering of folks, including the person served, along with folks who know them best- family, friends, advocates, companions, etc. Knowing what's important to the person, their hopes and dreams for the future, is the first step in the planning process. We want to focus our time and energy on what's most important to the person and help recognize the things that will help them achieve their desired goals. Goals need to be "SMART"- specific, measurable, achievable, realistic and time limited. The more precise the goals, the clearer and more focused the whole team's efforts are, and the more likely people are to be successful.

The following outlines the ISP's completed for 2022: *(with a comparison to 2021)*

ISP's completed per service area				
Shared Living 2021	**Shared Living 2022**	**Change**	**Supported Living 2021**	**Supported Living 2022**
75/88 85%	59/94 63%	Shared Living: -22%%	18/18	18/18
100% Target Met	100% Target Met		100% Target Met	100% Target Met
No	No	Residential: No Change	YES	YES

** *Eligible individuals are folks who have used H.O.M.E.S services/supports for at least 6 months.*
** *Home Share does not include Outreach, Community Inclusion or Respite services.*

Outcomes of Action plans for 2022

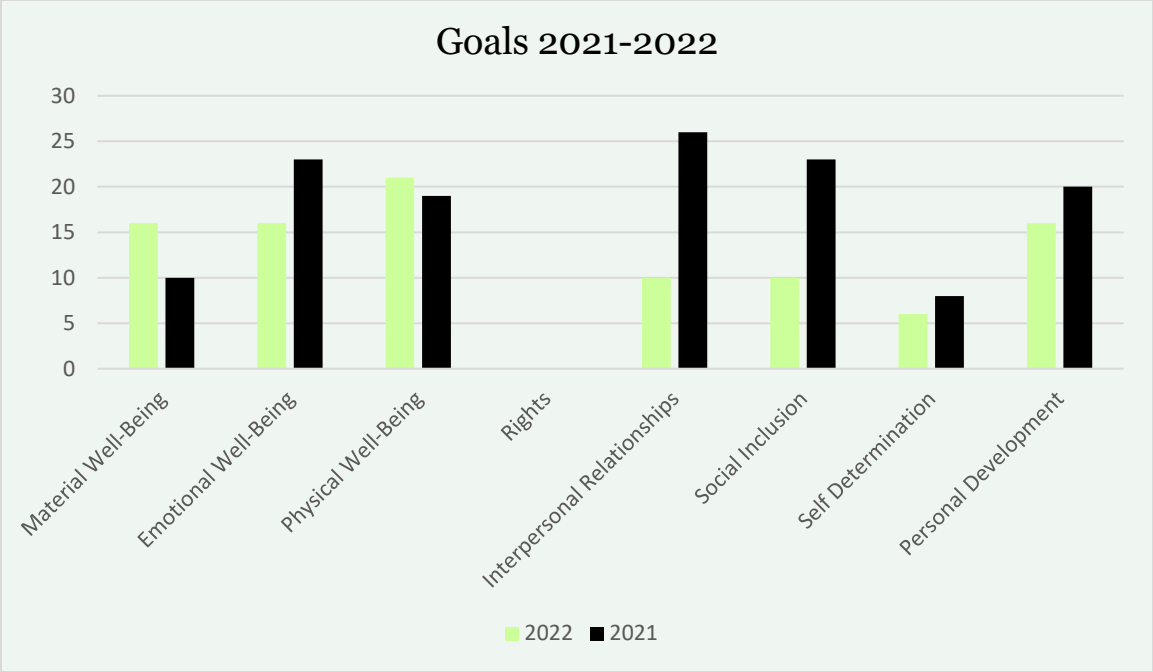
- To offer the option of a PATH or regular ISP.
- To send email reminders focused on the newer folks who become eligible.

Individual Outcomes

Individual quality of life is fundamental to the work H.O.M.E.S provides. It is important that the Quality of Life Framework set the foundation for all of H.O.M.E.S services and supports. Individual outcomes are statements about how a person's quality of life will look in the future- always hopefully for the better. For planning purposes, we categorize the outcomes into the eight Quality of Life Domains.

1. **Emotional Well-Being**
   Individuals feel safe in their home and community. They have a positive sense of self and trust the people in their lives.
2. **Physical Well-Being**
   Individuals are physically healthy and active. They have access to the health care they require.
3. **Material Well-Being**
   Individuals have the financial resources to do the things that are important to them.
4. **Interpersonal Relationships**
   Individuals have meaningful relationships with family and friends.
5. **Social Inclusion**
   Individuals participate in community life in roles they and society value.
6. **Rights**
   Individuals have autonomy and their decisions are respected.
7. **Personal Development**
   Individuals pursue their interests, have opportunities for personal growth and skill development, and have access to necessary information and support.
8. **Self-Determination**
   Individuals make decisions in their lives about things that matter to them.

2022 Goals



Total Goals Started	Total Goals Started	Difference	Goals Per service area	
2021	2022		2021	2022
129	99	-30	Shared Living:88 Supported Living: 41	Shared Living:73 Supported Living: 26

The following outlines the Goal Status as of Dec 2022:

11 were discontinued	37 were achieved
2 have no status	49 were renewed/in progress

Discussion

- Many of the goals for 2022 continued to be put on hold/renewed because of the lingering effects of the pandemic.
- Physical Well Being goals increased slightly.
- It is possible that because of the lack of social interactions with friends etc, that many goals were put on hold.
- There seems to be a lack of understanding on the definition of goals that are measurable and meaningful.

Outcome of Action Plans for 2022

- Pending the easing of the pandemic, the Activity Planner will schedule social and community-based events/activities to encourage individual's involvement.
  This was done and will continue to be encouraged as we make way out of the pandemic.

- To provide a few workshops focused on emotional well being for the individuals.
  This was not done. Carried forward

- To liaise with local like-minded agencies to combine/create social events.
  We have started the process. Our Activity Planner continues to look at options of connecting with local like-minded agencies.

Action Plans for 2023

- To collaborate with Sanjiv to develop and implement specific to Sharevision goal training (entering and updating goals)
- To provide in house training for goals and ISP's.
- To ensure all new & existing Coordinators have Sharevision/ISP/Goal training asap.

EFFECTIVENESS

Human Resources

Employees are one of the H.O.M.E. Society's greatest resources. It's imperative to the overall quality and level of service that there is a consistent, well-trained and positive workforce. Recruitment and Retention is a current challenge for employers in the Community Living Sector.

Training/Education/Recruitment

- Our analysis of required training shows we are at 96% of employees meeting their requirements on a consistent basis. This is a drop of 1% from 2021.
- We continued to provide online Mandt training during 2022 and because of that, we were able to maintain 99% compliance.
- Leadership was able to attend virtual and in person conferences/meetings.
- We continue to provide in house First Aid training.
- We were able to increase the class sizes for GT Level 1 and 2.
- Ongoing advertisement via Indeed.
- Volunteer program
- Restart of Practicum Students

In 2022, we hired 41 new employees and we said good-bye to 30 employees. The following outlines the reasons for leaving:

Discharged for cause: 5	Moved: 4
Personal/family issues: 3	Got another job: 3
Retirement: 6	Other (education etc.): 9

EFFICIENCY

WCB, SICK TIME, EVALUATIONS AND TURNOVER

WCB

Objective	Indicator	Measure	Target	Outcome		Target Reached	
To reduce the days lost due to WCB claims	Days lost to WCB claims	The average number of work days lost per employee due to a WCB claim.	3 days or less annually	**2021**	**2022**	**2021**	**2022**
				0.60	2.72	YES	YES

Sick Time

Objective	Indicator	Measure	Target	Outcome		Target Reached	
To reduce the amount of sick days used per employee	Sick Days Utilized	The average number of sick days utilized per permanent employee on an annual basis.	5 or fewer days per Perm EE per year.	**2021**	**2022**	**2021**	**2022**
				6.02	7.38 Includes casuals	NO	NO

Performance Evaluations

Objective	Indicator	Measure	Target	Outcome		Target Reached	
To increase annual Performance Evaluations per employee.	Performance Indicators	The percentage of FTE & PTE employees within the organization for whom a "Performance Evaluation" is completed annually.	2021= 95%	**2021**	**2022**	**2021**	**2022**
				93%	74%	NO	NO

Employee Turnover

Objective	Indicator	Measure	Target	Outcome		Target Reached	
To reduce the amount of annual employee turnover	Employee Turnover Indicators	The percentage of employee turnover on an annual basis	10% or less per year	**2021**	**2022**	**2021**	**2022**
				14%	23%	NO	NO

Discussion

WorkSafeBC

- WCB days lost per employee increased by 1.41 days annually.

Sick Time

- Our sick days used per permanent employee increased in 2022 from 6.02 to 7.38 annually. This can be attributed to the 2022 BC Government's mandatory implementation of 5 days of sick time (annually) per employee (casual and permanent). It can also be attributed to an increase in influenza and COVID illness.

Performance Evaluations

- We did not meet our target in 2022. Many Shared Living employees did not get an evaluation. We will continue to send reminders in advance of the deadline.

Employee Turnover

- Our turnover rate increased by 9% in 2022. H.O.M.E.S turnover rates continue to be amongst the lowest in the sector especially considering the struggles most agencies are facing with staffing shortages. A few reasons for the increase can be:
    - People moving and retiring, including employees no longer on LTD.
    - Educational reasons
- Another contributing factor is we have two separate seniority lists. At times, an employee may opt out of one area and work in the other. This can appear as though the employee has left (on the one side) but in reality, they are still an employee of H.O.M.E.S.

Outcomes of the 2022 Action Plans:

- To include evaluations on the Shared Living QIP's to serve as a reminder to help ensure we meet the target for 2022.
  Done
- Continue to promote and encourage self care with all employees. Have a section in our newsletter dedicated to Health and Wellness.
  Done

Action Plans for 2023

- To explore different workplace safety training opportunities (ergonomics, back health etc.)
- To come up with a workable solution to ensure Home Share employees receive an annual evaluation.
- Continue to promote employee health and wellness via the Newsletter/appreciation events, virtual and in person activities and emails

Health & Safety

Indicator	Measure	Target	Outcome		Target Achieved	
Shared Living H&S Inspections	The percentage of Health and Safety inspections conducted annually at Shared Living homes that use a unionized caregiver.	100% of Shared Living homes who use a unionized caregiver will have an annual H&S inspection.	2021	2022	2021	2022
			100%	100%	YES	YES
Indicator	Measure	Target	Outcome		Target Achieved	
Supported Living H&S Inspections	The percentage of Health & Safety site inspections conducted every 6 months at group homes, single homes, activity facilities and the main office.	100% of supported living sites will have bi- annual H&S Inspections	2021	2022	2021	2022
			100%	100%	YES	YES

Outcomes of the 2022 H&S Action Plan(s)

- To review the current H&S indicators and make suggestions for updating to new ones.
  This was done and it was decided to continue with the current indicators.
- To pursue the possibility of being audited and certified by COR (Certificate of Recognition) in 2022/2023
  Ongoing

Action Plans for 2023

- To continue to explore the possibility of being audited and certified by COR (Certificate of Recognition) in 2022/2023
- To review the H&S Terms of Reference on an annual basis.
- To have the H&S committee continue to do a self evaluation on an annual basis.
- To recruit new H&S Committee members

Thanks to everyone who participated in the H&S inspections…
You helped us reach our target once again!

Medication Errors

Indicator	Measure	Target	Outcome		Target Achieved	
Medication Errors	The percentage of employee medication errors	No medication errors	2021	2022	2021	2022
			6	7	NO	NO

Service Area	2021 errors	2022 errors	Increase/Decrease
Licensed Homes	6	5	-1
Smaller Homes	0	1	+1
Shared Living	0	1	+1
Total	**6**	7	**+1**

Outcomes of the 2022 Action Plan(s)

- We will contract with an LPN/Pharmacist to provide Medication Administration training to the Licensed homes. *This was not done.* Carried forward.

2023 Action Plan(s)

- We will contract with an LPN/Pharmacist to provide Medication Administration training to the Licensed homes.

Service Access

Community Integration/Inclusion Services

At H.O.M.E.S, we offer "Individualized Community Inclusion/Integration Services" which are designed for Individuals with complex support needs. Caregivers plan personalized activities which are geared towards getting out into the community and giving back to the community. All individuals supported are able to access a variety of services with their caregivers.

H.O.M.E.S also offers all interested individuals work experience opportunities. These range from receptionist, janitorial work, lawn crew, delivery services, filing, and paper shredding and recycling. Access to these services is based on the persons served interests. Because of the pandemic, many of these opportunities had to be put on hold however, we did accommodate whenever possible.

H.O.M.E.S Social Enterprises have opened the doors to many work-related opportunities. While there is rarely a wait time for folks who would like to access these services, during the Pandemic many of our S.E's were closed or limited.

Shared Living Services (Formerly Home Share)

- Previously, many of H.O.M.E.S Shared Living homes were formed when an existing caregiver has established a healthy and meaningful relationship with an individual they support.
- Access to this service reflects the importance of having the individuals and family members involved in the selection of care providers as well as in the planning process. Any specific needs can be addressed prior to the individual moving in with a family.
- Currently, we receive all requests for Shared Living services through CLBC.
- Finding suitable homes can pose a delay at times, especially with a limited rental market. This continues to be a barrier in 2022.

Supported Living Services (Formerly Residential)

- Access to our licensed Supported Living services is usually determined by CLBC and the availability of space in the home. The time it takes to access the service depends on the person's needs and wants. Many times, CLBC will refer an individual and H.O.M.E.S has accommodated that individual by doing personalized renovations to the specific needs of the person.

Respite Services

- Access to H.O.M.E.S Respite Services is determined through CLBC. Once a referral for respite is received from CLBC, we do our best to quickly start the process of matching suitable folks from our personnel pool.
- Many of our Shared Living contracts have respite built into their contracts. This helps keep the delivery of service stable as it provides a break to not only the contractor(s) but also to the person served.

Service Access Indicator	Target	Data/Source	2022 Results	Target Met
The % of persons served who indicate their unique needs are being met and they are able to access the service they choose.	90%	Survey's/Interviews Virtual/Phone Meetings	90%	YES

Business Functions

2022 Performance Indicators Outcomes

1. To lower the cost of overtime by a minimum of 10% in 2022 by having a sufficient casual caregiver pool.

OT Cost Difference	Reg	HS	Target Met	Total	Cost Difference
OT 2019	$23,890.31	$67.95	NO	$23,958.26	+6.33%
OT 2020	$9082.31	0.00	YES	$9082.31	-62.09% from 2019
OT 2021	$38,583.07	0.00	NO	$38,583.07	+ 325% from 2020
OT 2022	$71,087.00	$75.57	NO	$71,162.57	+84.44% from 2021

2. Increase H.O.M.E.S social media profile on Facebook, Twitter and LinkedIn to increase H.O.M.E.S public profile and recruitment efforts.
   HOMES has newly formed Activity groups on Facebook which are overseen by self-advocates. This has proven to be very successful.
3. Senior leadership to explore 'incentive' options for recruitment and retention purposes.
   - *In 2021, we increased our referral rewards from 50.00 to $100.00. This is ongoing.*
   - *We also have a "Homie of the Month" award.*
4. To reduce the WorkSafe BC rates by minimum 1% annually.

Year	Rate	Target Met
2019	2.95%	NO
2020	3.10 %	NO
2021	3.90%	NO
2022	4.17%	NO

   - *H.O.M.E.S will continue to work closely with the Program Coordinators to recognize where new risk assessments may be needed as well as safety plans.*

**These business function indicators will be carried forward and reviewed as necessary.
**All information/data is collected from the payroll/accounting department. (ACCPAC/Com Vida/Sage)

Thank you to everyone for another successful year at
The H.O.M.E Society.