

The Community Outreach Program provides collaborative, one-to-one skills support to developmentally disabled and mentally challenged adults referred by Community Living British Columbia (CLBC) whom are living in a community setting of their own (an apartment, affordable housing, home share or hotel, et cetera). The skill development focuses on personal routines, community awareness and social maturity. The individual, their facilitator, and the Outreach Worker jointly negotiate the goals to be worked on. When appropriate, the input of family members and other community stakeholders is incorporated as much as possible.

The Community Outreach Program provides service to CLBC tenants living in the community and in a John Howard Society of the Lower Mainland apartment building, Miller Block, which has 12 suites for individuals who are developmentally disabled and living independently. Miller Block was developed as a response to the need for safe, affordable housing for developmentally disabled individuals at risk of homelessness, and was opened on December 1st, 2005. Tenants at Miller Block are referred by CLBC and develop an individualized plan of care in collaboration with their facilitator and Outreach Worker. Miller Block tenants do not have a contract for goals or time-specific services as other Community outreach individuals do. Support is instead provided on an as-needed basis. Outreach support is available to tenants eight hours per day, seven days a week. The building is staffed with one full-time outreach worker and one 2/5 worker.

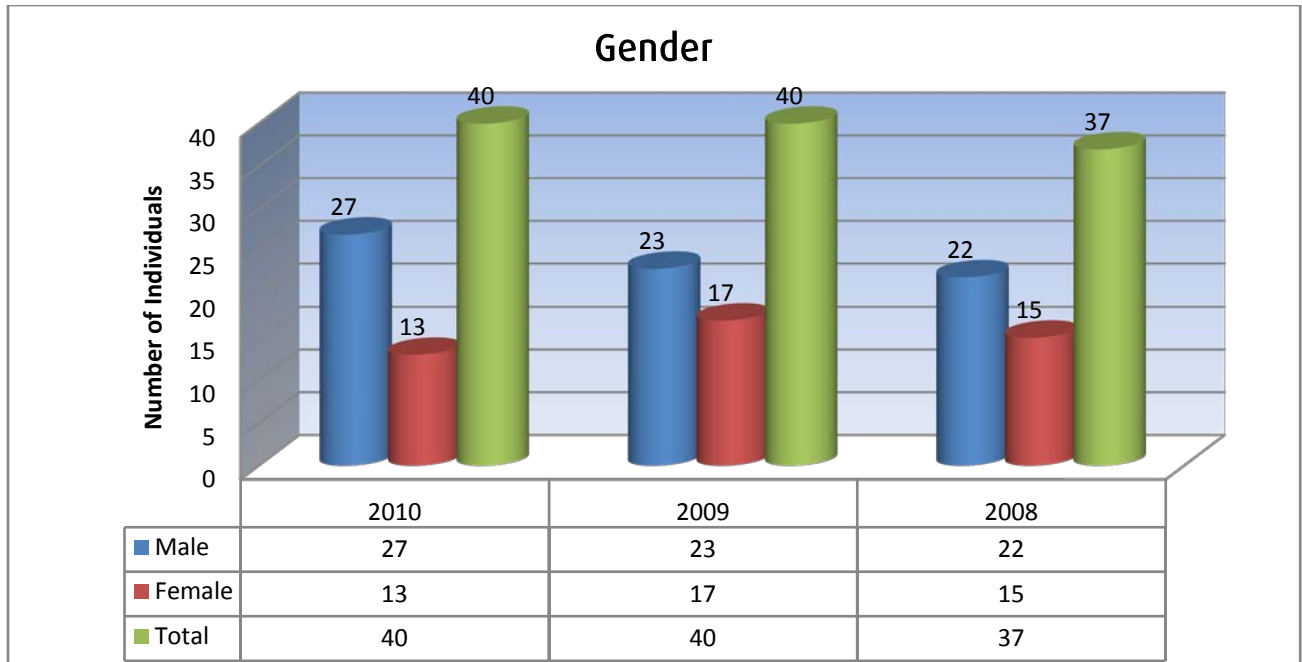
Admission Criteria

The Community Outreach Program contract, with Community Living British Columbia (CLBC), sets out the following admission criteria:

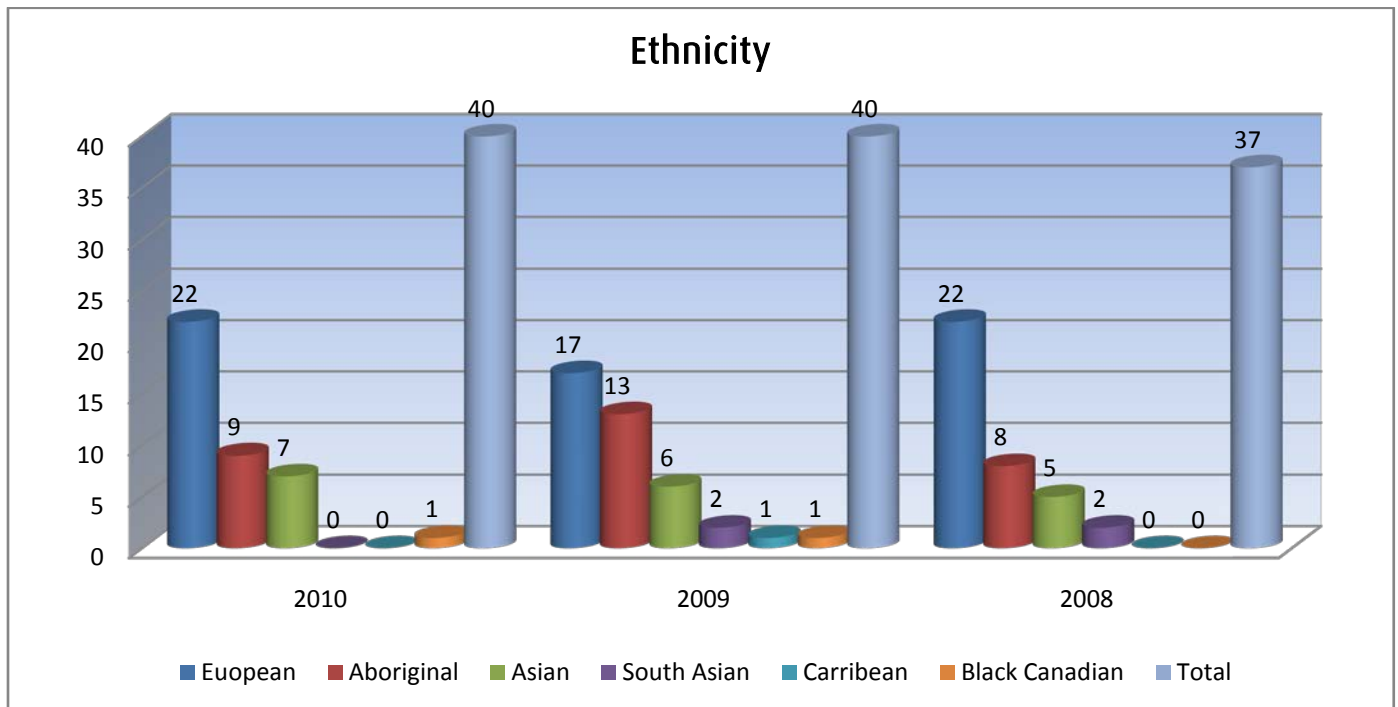
- Tenants may have mental health concerns.
- The adult is 19 years of age or older.
- Tenants are involved in or are at risk of involvement with the Criminal justice system.
- Tenants may have health concerns.
- Tenants may have addictions issues.
- Tenants need assistance in learning life skills.
- Priority is given to the individuals in most need as determined by
- Community Living British Columbia (CLBC).
- Tenants living at the Miller Block must be from the Vancouver Office of Community Living BC.
- Tenants must be suitable for living independently, and must be willing to accept some outreach support, even if minimal.

Population Served

This year, our Outreach team served 40 individuals, no increase from 2009. The following graphs show the breakdowns of the gender, ethnicity and disability type:



The number of males served increased by 4 and the number of females served has decreased by 4 from the previous year.



The above graph shows that 55% of the persons served in 2010 were Caucasian in compared to 43% the previous year. The graph also shows a decline of 20% of Aboriginal clients in 2010 from 2009.

Disability Type

Medical Issues	2010	2009	2008
No medical issues	22	25	22
Drug and alcohol addiction	6	2	4
Diabetes	6	1	2
Heart disease	3	2	1
Asthma	2	1	2
Hearing impairment	2	1	1
Memory loss	2	2	1
Seizure disorder	2	1	1
Brain injury	1	2	1
Cerebral palsy	1	1	1
Dyslexia	1	1	1
Kalman Syndrome	1	0	0
Lipoprotein lipase deficiency	1	0	0
Lupus of the brain	1	1	0

As the above chart shows, 55% of the consumers had medical related needs in 2010 compared to 37% in 2009.

Mental Health Issues	2010	2009	2008
No mental health issues	13	8	9
Fetal alcohol spectrum disorder (FASD)	6	6	6
Autism spectrum disorder	4	3	1
Depression	4	1	3
Post-traumatic stress disorder (PTSD)	4	3	3
Anxiety disorder	3	2	0
Psychotic Disorder not otherwise specified	3	1	1
Attention deficit hyperactivity disorder (ADHD)	2	3	3
Obsessive-Compulsive disorder	2	1	0
Schizoid-affective disorder	2	1	1
Attachment disorder	1	1	1
Asperger's syndrome	1	1	0
Bipolar disorder	1	1	1
Down syndrome	1	1	2
Myotonic dystrophy	1	1	1
Paranoid schizophrenia	1	1	1
Selective Mutism	1	1	1
Tourette's syndrome	1	1	1
Schizophrenia	0	1	1

68% of the consumers had mental health issues in 2010 compared to 80% 2009.

Changes in Service

In the summer of 2010, JHSLM established a program called **Project Helping Hand**, the idea of which was to provide employment readiness skills for persons with developmental disabilities and/or persistent multiple barriers to employment. It was also an opportunity to build on relationships in the community and to serve as an enterprising program. The program hired four individuals living at Miller Block and a 3/5th vocational worker. The program inspired self-esteem, basic employment readiness skills and employment rights and responsibilities through landscaping and maintenance work with JHSLM properties and other projects in the community. The goals of this project for participants include:

- To demonstrate employment readiness, conflict resolution, patience, promptness, ability to complete tasks with supervision, maintain hygiene
- Develop employment skills
- Complete skills and abilities assessment and set personal goals
- Complete barriers checklist and set personal goals

The project demonstrated that individuals with developmental disabilities and multiple barriers are reliable workers, are able to complete resumes, understand the need for a reference letter, learn new work skills like flowing through on steps to complete a task, and learn to deal with conflict with a co-worker and/or supervisor and to be on time for work and back on time from breaks. Their self-esteem improved (one worker stated he felt “normal” again), and they all developed a sense of teamwork. They enjoyed the experience and looked forward to working in the community. We look forward to continuing this program again.

This year we supported two individuals involved in the criminal justice system (federal and provincial). We assisted them while they were in custody with pre-release planning and continued to assist them in the community. This consists of working very closely with probation and parole officers, social workers, mental health team and others who are part of the individuals’ support teams.

This year we received three additional contracts from CLBC, individuals that required more intensive supervision and support than most of our clients. Each contract required 10 or more hours of support a week for each individual, permitting us to increase our staffing levels.

This year, we received a grant from Service Canada to hire a summer student from May to August to provide additional outreach support to assist individuals work towards their goals. This was invaluable, allowing the program to respond quickly to immediate needs of all the individuals living in the building. It also allowed for more one-to-one as well as group outings in the community.

This year our agency adopted a new computer based case management system called Case Administration Management System (CAMS) to record information. This has improved our ability to monitor outcomes, record service delivery, share information between programs, and make it easier to reactivate closed files. CAMS has been fully operational since July, 2011.

Community Needs Assessment

This year we have assisted individuals who needed housing because they were either homeless or at risk of being homeless. There appeared to be an emergent need for supportive housing outside of Vancouver's Downtown Eastside that was not a Single Room Occupancy hotel (SRO) or a shelter. It was a challenge to find housing for individuals with limited finances, multiple barriers, drug and alcohol addictions and developmental disability in the community. These challenges included long wait lists, low vacancy rates, safe areas for housing options, and affordability. We were successful this year in housing an individual in the basement of Vancouver Apartments who had been homeless, living in a shelter in the Downtown Eastside for over a year. We also successfully housed five individuals in different housing models to accommodate their needs. For example, one Miller Block tenant was evicted in 2010. He continued to receive community support from the outreach team while he was shelter-hopping. His community outreach worker assisted him in finding long term housing in the community and he is no longer living in a shelter.

There continues to be a need for supportive independent housing to enhance personal choice and autonomy for those persons ready to transition from 24-hour support to supported independent living.

The needs of outreach individuals are diverse and are becoming more complex. Staff members assist individuals to secure appropriate housing; manage finances; develop skills such as cooking, cleaning, and maintaining personal hygiene; create community connections and supports; model appropriate social behavior; develop personal boundary setting skills; and manage health care. For many of our clients, the challenge of having a developmental disability is compounded by other obstacles such as mental health issues and/or addiction/substance misuse issues. It is an ongoing goal for staff to improve their ability to assist individuals through appropriate training opportunities in areas of mental health, the aging population, substance use, mediation and cultural sensitivity whenever possible.

Program Goals

- Enhance and support the quality of life for the individuals.
- Promote independence by providing life skills training through individualized care plans developed by the consumer, facilitator, and outreach worker.
- Increased inclusion in the community, neighbourhood and age affiliated activities.
- Provide individuals who are at risk for homelessness with stable, affordable housing.

Effectiveness

The focus of this program continues to be assisting individuals to acquire the life skills needed to continue living in their own home in a community setting. The individual, the facilitator and the community outreach worker determine goals at intake (although these goals are somewhat more flexible and less structured for the majority of Miller Block tenants). These goals are specific to each individual and success is determined by his or her own progress. Personal goals may change throughout the year and are reviewed with their worker on a quarterly basis.

This year, every individual completed a needs assessment form to evaluate their current abilities and areas of improvement, which is an opportunity to review each person’s individualized plan of care to make any changes necessary to focus on their current and emergent needs. This assessment tool, used with CAMS, automatically identifies areas of improvement based on how the individual rated themselves.

Some of the incidents that were reported this year involved intoxication and assault, police incidents, medical issues, disturbances, paranoid behaviors, eviction notices, disclosure of inappropriate behavior with care provider, a client was assaulted, and a client moved out of home share and got married. Each incident was investigated, reported to CLBC and reviewed by case management team. The outcome for some of these incidents resulted in hospitalization, more supportive housing, additional outreach hours, and eviction notices.

Efficiency

- This year the community outreach program served 40 individuals.
- Statistics shows that Community Outreach maintained a 95-100% utilization rate.
- Since its opening in December of 2005, Miller Block has maintained an average occupancy rate of 92% with some turnover. The turnover in tenants this year were as follows:
 - One tenant transitioned from Miller Block to Vancouver Apartments for more support.
 - One tenant moved to New Westminister to be closer to his girlfriend.

Consumer Satisfaction

A total of 19 consumers completed our consumer satisfaction survey, rating their satisfaction with various aspects of the program on a scale of one (lowest) to seven (highest). Our clients were generally satisfied with our services, adding the following comments:

“You guys are awesome.”

“You look for us when we are homeless on the streets.”

“You help us with stuff like go out in the community, go to a program, and anything fun. I enjoy having an outreach worker and hanging out with all the staff and see clients and go on an outing.”

“More hours with my outreach worker”

	2010	2009	2008
Today, how serious is your disability that brought you to the outreach program?	4.2	4.2	4.7
What is your level of hope for the future?	6.03	4.8	6.1
Your level of trust with the staff is?	5.74	5.6	6.7
How satisfied are you with staff’s ability to address your concerns?	6.11	6.1	5.5
Are you satisfied with the supports that are provided with your outreach program?	5.63	5.8	6.4
Your ability to live independently is?	5.68	5.6	6.3
Are you satisfied with the life skills you are learning to be more independent?	5.97	5.6	6.4

The past year the Miller Block had regular tenant meetings to address any issues or concerns tenants had with each other and the building, allowing individuals to express their opinions, recommendations, and concerns with each other and the Agency.

Stakeholder Satisfaction

Eleven (out of 20, or 55%, compared to 91% of those sent in 2009) stakeholder surveys were returned expressing overall satisfaction with our programs, giving us a average rating of 6.45 out of 7 (compared to 6.25 last year).

Some comments and additional feedback included: “Staff extremely dedicated to their clients and are able to establish a trusting relationship.”; “[outreach worker] does a wonderful job with a very challenging client of ours.”; “[outreach worker] has been great with his client at [our program]. Couldn’t ask for a better worker.” Stakeholders also expressed the need for more supportive housing models like Miller Block.

Review of Last Year’s Goals

Action	Outcome
Maximize caseload through referrals. Outreach will maintain a minimum caseload of 80% based on the number of hours assigned to each worker by CLBC.	The outreach worker’s maintained a 95-100% caseload in 2010. CLBC was notified immediately of any vacancies.
Increase consumer level of independence. Consumers will achieve 75% of the goals set by them and their outreach worker during intake.	We will continue to measure each individuals’ outcomes individually based on the goals they set with their workers.
Develop group activities that may include community events, cultural events, and sport activities.	This year was successful with group activities and workshops: sports day, Playland, magic shows, Vancouver Aquarium, pub night, BBQs, cultural celebrations, pancake days, Stanley Park, Christmas lights, old timer’s hockey game, Vancouver Canadians baseball game, pumpkin carving, haunted house, Vancouver Zoo, and Sound of Music. There were also craft and games day offered on Fridays at the Community Services Office.
Outreach team will interview all referrals to the program within two weeks of receipt of documentation.	All referrals received were interviewed within two weeks and service start date was immediate.
Improve staff training in areas of mediation, conflict resolution, mental health, addictions and developmental disabilities.	The staff team participated in the following training: Conflict Resolution, Access training, CAMS training, Frontline Leadership, Advanced Outcomes Training, Non-Violent Crisis Intervention, outreach training for homelessness providers, Youth gangs, Co-occurring Disorders, Motivational Interviewing, De-escalating Potentially Violent Situations, and basic counseling skills.

Improve team performance by establishing a team building exercise at staff meetings to improve team performance and morale.	Partially achieved. Due to time constraints not every staff meeting had a team building exercise.
Maintain Miller Block occupancy rate at a minimum of ten.	Achieved. Miller Block had 11 CLBC tenants the entire year.
Improve the screening guide and intake process for new referrals.	Partially achieved. There were a few minor changes to the screening guide this reporting year. The goal for the next reporting year is to formalize the referral process and update screening guide.
Hire a part time summer student to provide additional supports and programming for those in need.	We were successful in receiving a summer student grant for the summer to provide additional support in assisting individuals work towards their goals.
Meet CARF standards by 100%.	Achieved. We were rewarded another three year accreditation certificate.
CAMS to be fully operational.	Achieved. All client information has been inputted into CAMS and has been fully operational since August 2010.

Commission on Accreditation of Rehabilitation Facilities surveyors evaluated our services on January 31st and February 1st 2011 and awarded us with our third 3-year accreditation certificate. The outreach team continues to work very hard in order to ensure the services we provide are up to international quality of standards. Staff and management perform bi-annual file audits, ensure security of consumer information, maintain personnel files, complete staff evaluations, and continuously update administrative forms in accordance with CARF standards.

Effectiveness

- The program utilizes client centre programming with SMART goals (specific, measurable, attainable, realistic and time-bound).
- Goals are reviewed regularly and changes made when needed.
- The outreach team continues to support individuals in achieving their goals as set out in their care plans.
- Clients and stakeholders are satisfied with the service.
- All major Incidents were referred to the police and investigated, reported to CLBC and followed up by the case management team.

Efficiency

- Referrals were handled in a timely manner and within set time frames.
- Costs remain within budget.
- CLBC and JHSLM case management/team approach continues to improve.
- The outreach team has remained dedicated and hard-working, and continues to work enthusiastically with consumers and stakeholders.

Next Year's Goals

The following goals are similar to those established last year:

- Maximize caseload through referrals. Outreach will maintain a minimum caseload of 90% based on the number of hours assigned to each worker by CLBC.
- Increase consumer level of independence. Consumers will achieve 75% of the goals set by them and their outreach worker during intake.
- Develop group activities that may include community events, cultural events, and sport activities.
- Outreach workers will interview all referrals to the program within two weeks of receipt of documentation.
- Improve staff training – each staff member sets their training goals during their annual evaluation.
- Improve team performance by establishing a team building exercise at staff meetings to improve team performance and morale.
- Maintain Miller Block occupancy rate at a minimum of ten.
- Improve the screening guide and intake process for new referrals.
- Meet CARF standards.
- Increase our service capacity by two additional full time outreach workers.
- Hold at least three information workshops, for example on the importance of oral hygiene.
- Improve our case plans, ensuring there are smart goals and we list the supports to reach each goal and who is responsible for each step along the way.

- Jen Hirsch