posAbilities

2024-2025 OUTCOMES MANAGEMENT REPORT

Table of Contents

1. INTRODUCTION

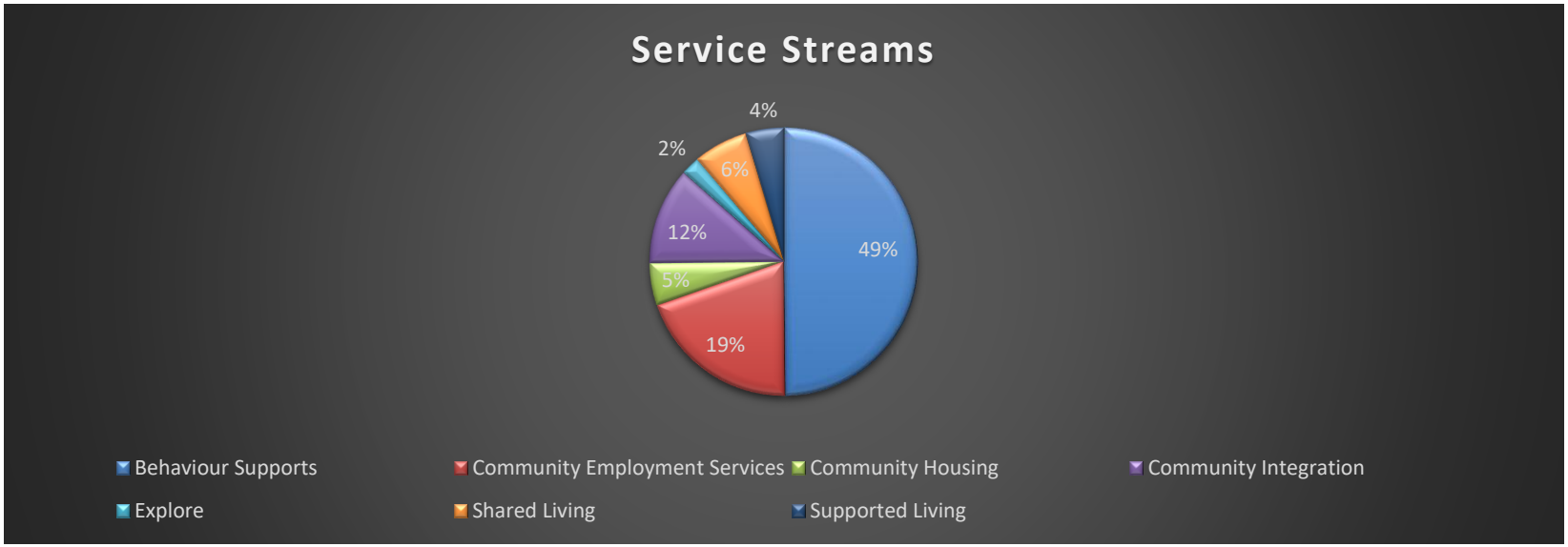
*pos***Abilities** offers a full spectrum of services to children and adults throughout British Columbia. Our services include Home Supports, Community Integration, Employment Services and Behaviour Support programs.

Our services can be found in:

Abbotsford	Fraser Valley	North Shore	Sunshine Coast
Burnaby	Maple Ridge	Port Coquitlam	Surrey
Coquitlam	New Westminster	Port Moody	Vancouver
Delta	North and South Okanagan	Richmond	Vancouver Island

The Outcomes Management Report is a tool to learn from our current practices. It provides performance information to make program improvements that lead us to continuous service quality advancements. The Outcomes Management Report is a guiding and decision-making instrument that helps our leadership team and Board of Directors in monitoring *pos***Abilities**' programs and services, and identifying the strengths of our organization as well as those areas that require improvement. The Outcomes Management Report will assist *pos***Abilities** to be more effective and efficient in achieving a high standard of overall service quality.

Between April 1, 2024 and March 31, 2025 (FYE2025), *pos***Abilities** provided services to **2063** persons served, enrolled in the following service streams (note some persons served are enrolled in multiple programs):



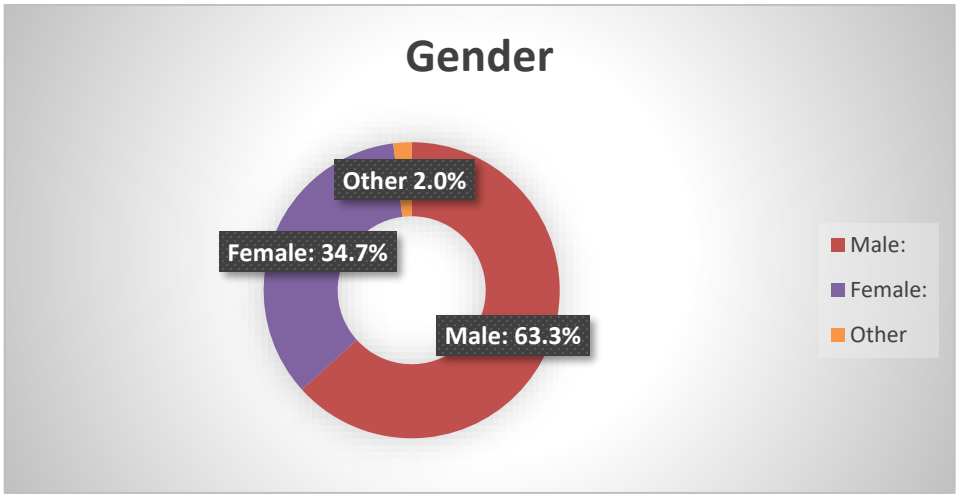
	FYE2024		FYE2025	
Service Stream	**Total**	**% of Services**	**Total**	**% of Services**
Behaviour Supports	1030	53%	**1008⇩**	**49% ⇩**
Building Caring Communities (BCC)[1]	51	3%	**41⇩**	**2%⇩**
Community Employment Services	318	16%	**401⇧**	**19% ⇧**
Community Integration	211	11%	**238⇧**	**12%⇧**
Explore	34	2%	**46⇧**	**2%**
Home Supports Total	302	16%	**329⇧**	**16%**
Community Housing	80	4%	**104⇧**	**5%⇧**
Shared Living Services	126	6%	**133⇧**	**6%**
Supported Living	96	5%	**92⇩**	**4%⇩**

[1] This service stream is no longer operational.

Below is additional information about the people we served during FYE2025:

Gender

Male	**63.3**%
Female	**34.7**%
Other	**2.0**%



Age

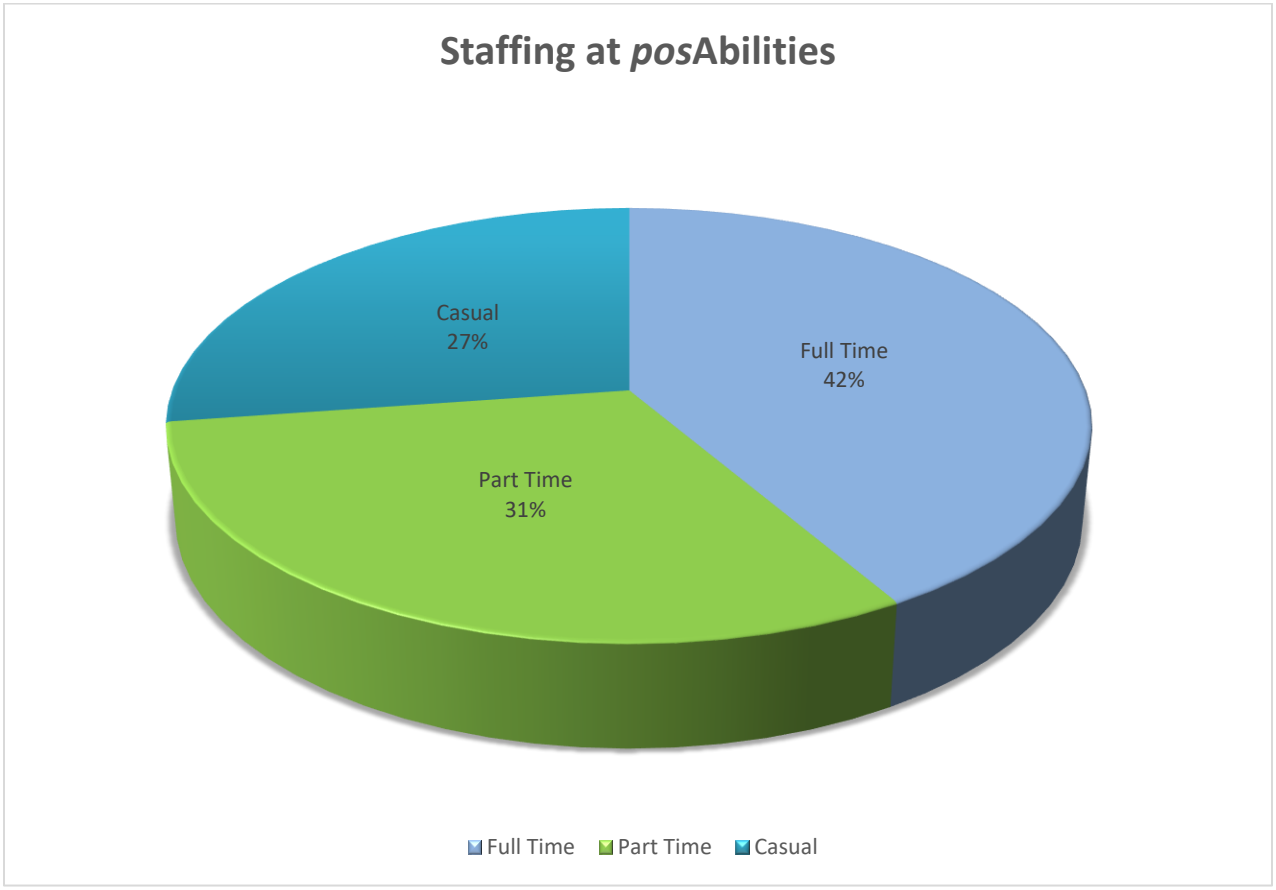
Under 6	0.9%
6 – 18	29.3%
19 – 20	6.7%
21 – 30	24.3%
31 – 40	13.7%
41 – 50	9.5%
51 – 60	6.8%
61 – 70	5.7%
71 – 80	2.0%
Over 80	0.4%
Unknown:	0.7%

Diagnosis[2]

Autism/Asperger Syndrome: **19.4%**
Intellectual/Cognitive Disability: **12.3%**
ADD/ADHD: **11.1%**
Developmental Delay: **9.2%**
Anxiety Disorders: **6.2%**
Epilepsy/Seizure Disorder: **4.4%**
FAS/FASD: **2.7%**
Obsessive Compulsive Disorder: **2.5 %**
Down Syndrome: **2.4%**
Other diagnoses: **29.8%**

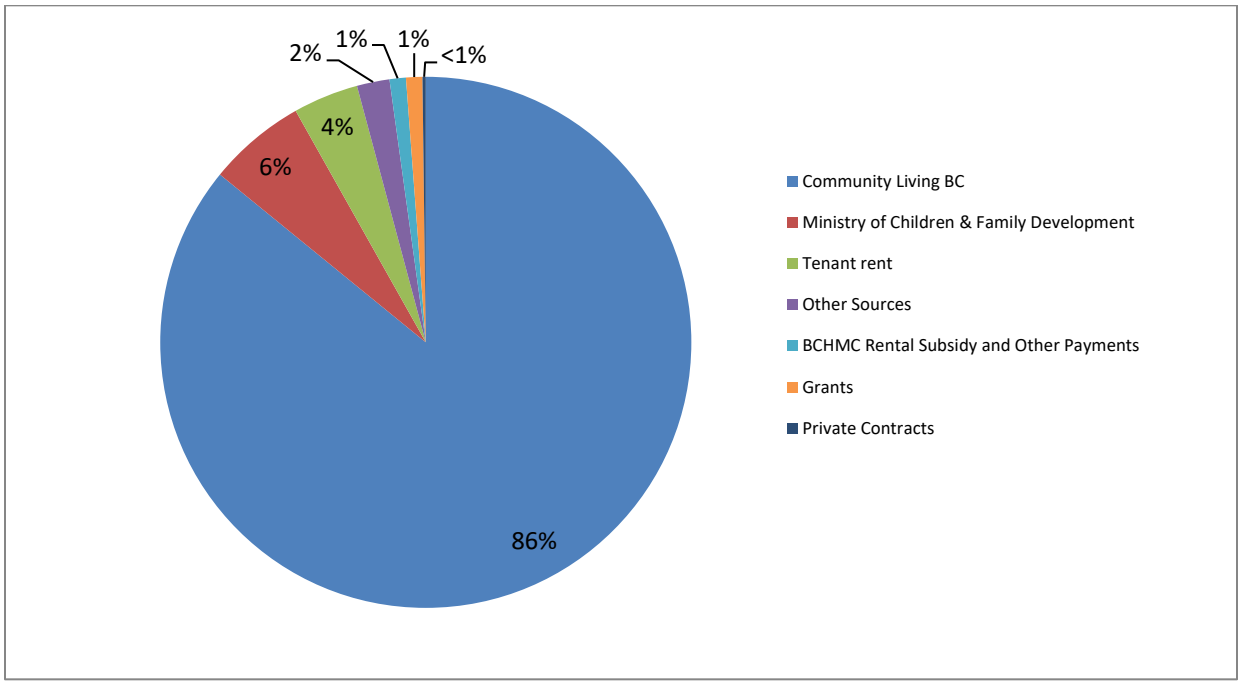
[2] includes persons served with multiple diagnosis

On March 31, 2025, we had a total of **637** team members delivering our services: 251 full time, 205 part time, and 181 casual. Staffing levels increased by 11% from last year.



Where the Money Came from in FYE 2025

Community Living BC	86%	$ 38,115,124
Ministry of Children & Family Development	6%	$ 2,501,951
Tenant rent	4%	$ 1,639,409
Other Sources	2%	$ 707,302
BCHMC Rental Subsidy and other payments	1%	$ 600,590
Grants	1%	$ 464,488
Private contracts	<1%	$ 95,897
Total Revenue	100%	**$44,124,761**



2. ABOUT THIS REPORT

Our performance measurement system contains Effectiveness, Efficiency, Accessibility, as well as satisfaction measures and targets combining the requirements of the Commission on Accreditation of Rehabilitation Facilities (CARF) and Community Living British Columbia (CLBC) Quality of Life Domains (i.e. Interpersonal Relationships, Emotional Well-Being, Physical Well Being, Personal Development, Self-Determination, Social Inclusion, Material Well-Being and Rights).

This Outcomes Management Report is based on outcome data collected for the period April 1, 2024 to March 31, 2025. Report presents the results obtained from the review of organizational files as well as satisfaction surveys conducted to persons served, stakeholders, and employees. To collect input from persons served and stakeholders, we distributed surveys to persons served, family members, *pos***Abilities**' employees, shared living providers, as well as community employers served by *pos***Abilities**' Employment Service.

For this report, we collected information in seven service streams:

- **Building Community Connections (BCC)**
- **Community Employment Services**
- **Community Housing**
- **Community Integration**
- **Explore**
- **Shared Living**
- **Supported Living Network (SLN)**

For each of these service areas, we set targets and collect data about:

- **Key monitoring items** – items we consider relevant but do not fit into in the categories below
- **Effectiveness** – the results of services for the person served
- **Efficiency** – the maximization of time and resources
- **Service Access** – access to services/programs
- **Input** – person served and family member's satisfaction with services

This Report also identifies two key business functions at the organization level: **staff utilization** and **work days lost**. The outcome information provided in this Report is intended to assess the success of our services, identify where challenges exist, and set a course for continuous service improvement.

In section 3, the aggregated results of the persons served and family members' satisfaction surveys are presented at the organization level. In section 4, employee climate survey results and 3-year comparative data is presented. In section 5, key business functions are analyzed at the organization level. Finally, in the Appendix, the outcome data and results for each specific service area are reviewed.

A note about response rates: In the Appendix of this Report, we have indicated outcomes in terms of a number and a percentage. The number indicates the number of *positive* responses (i.e.: "agree" or "strongly agree") to a survey item and the percentage indicates the number as a percentage of *all* responses (both positive and negative). In some cases, where the number of survey responses is very low, the percentage should be interpreted with care because a single response can skew a score dramatically. For example, if there were only two respondents, both of them giving a positive response would result in a 100% positive rating but just one respondent giving a negative response would drop the percent positive to 50%.

3. SATISFACTION SURVEYS

3.1 Survey Results: *pos*Abilities' Persons Served

For the Survey period of March 3, 2025 to March 31, 2025, ***pos*Abilities** engaged uSPEQ® to survey consumers in the following service streams: BCC, Community Employment Services, Community Housing, Community Integration, Explore, Shared Living, and Supported Living Network.

For the sixth year, we used the uSPEQ® Consumer Experience *IDD* (intellectual or developmental disability) Survey for persons served. In addition to helping providers improve services through feedback, the purpose-designed IDD survey instrument is tailored specifically to respondents with intellectual or developmental disabilities. The survey is, as always, anonymous and confidential, and captures multiple snapshots of the persons served's experience with ***pos*Abilities**, measuring satisfaction in five areas:

- Service responsiveness
- Respect
- Informed choice
- Participation
- Overall value

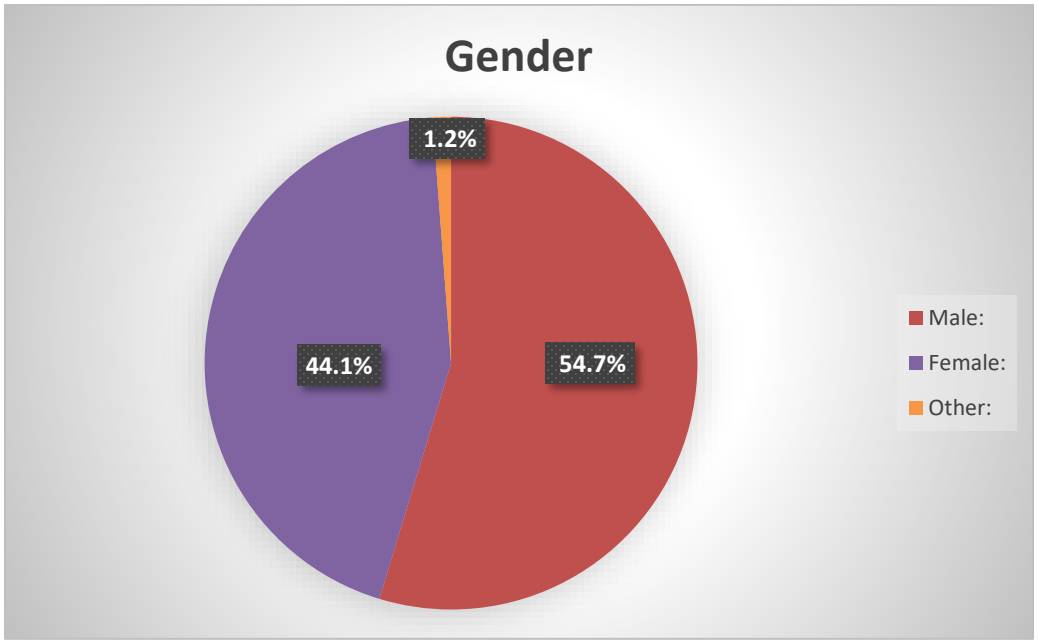
uSPEQ® does not yet have the benchmarking data for the IDD survey as they do for the standard Consumer Experience Survey used prior to FYE2019. Benchmarking data for the IDD Survey is being collected and will be available in future years. Benchmarking data has value as a comparator as it allows us to measure how we compare to peer organizations in the Community Living/Social Service sector. For FYE2025, where possible, we are using FYE2024 and FYE2023 survey data as comparators and to show trends.

A total of 384 surveys were distributed to persons served. Surveys were distributed by email, conducted via telephone and administered in-person. 262 of 384 persons served completed the survey for a 68% response rate; an increase of 9% from the previous year.

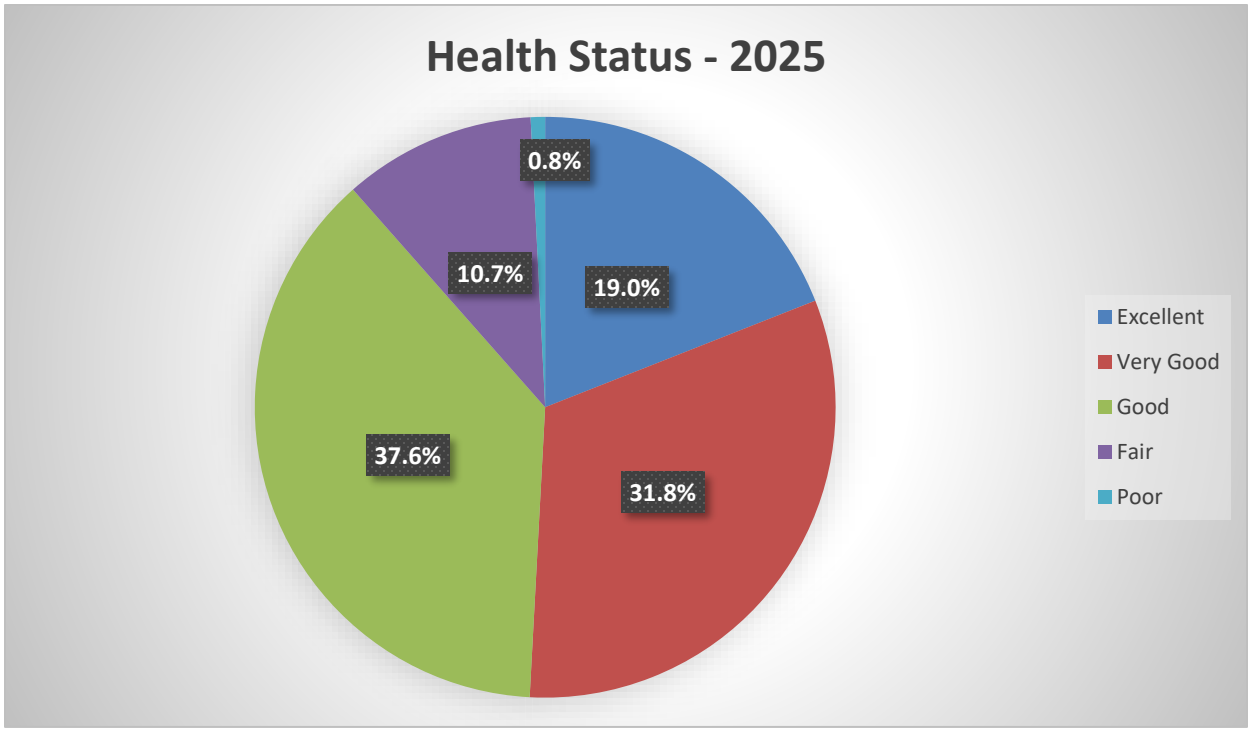
Of the respondents who answered the survey item “Who Answered this Survey”, some were able to complete the survey on their own and some needed assistance:

Who Answered	2023	2024	2025
Myself (no one helped)	12.8%	27.9%	27.9%
Myself (someone helped me read and/or write answers on the form)	79.8%	64.9%	64.9%
Somone else on behalf of person served	7.4%	7.2%	7.2%

Gender: Of the survey respondents, 44.1% identified as female, 54.7% identified as male, and 1.2% identified as other.



252 survey respondents answered the survey question on Health Status in 2025.



The chart below shows the 3-year trend in self-reported health status:

Health Status	2023	2024	2025
Excellent	14.4%	20.2%	19.0%
Very Good	28.4%	22.6%	31.8%
Good	43.8%	44.8%	37.6%
Fair	12.5%	9.3%	10.7%

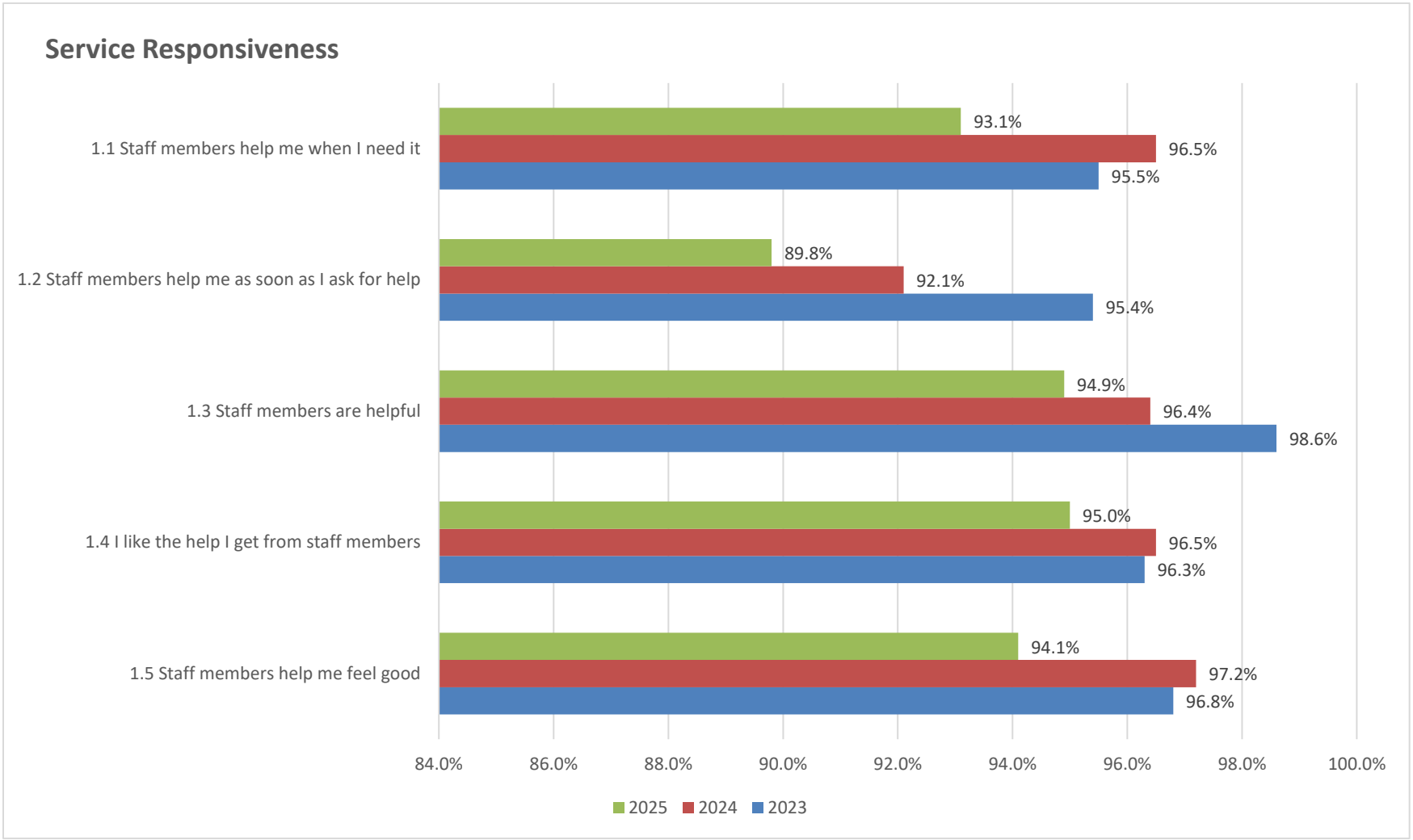
The top five survey items with positive responses were:

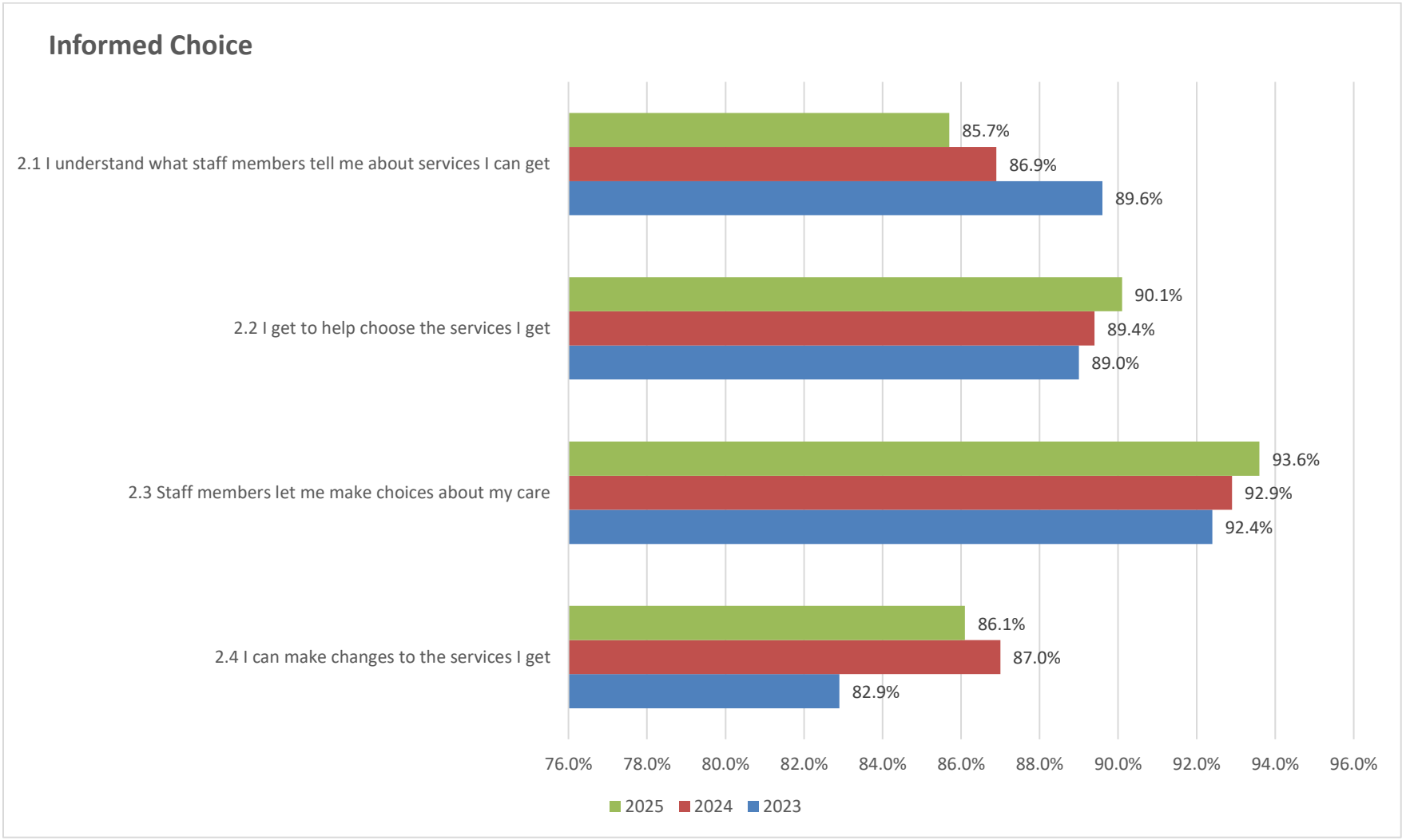
Survey Item	2023 Response (agree + strongly agree)	2024 Response (agree + strongly agree)	2025 Response (agree + strongly agree)
5.4 I feel safe here	99.1%	98.4%	96.0%
3.1 Staff members are nice to me	97.2%	97.6%	95.7%
3.3 Staff members listen to me	93.0%	96.8%	95.6%
1.4 I like the help I get from staff members	96.3%	96.5%	95.0%
1.3 Staff members are helpful	98.6%	96.4%	94.9%

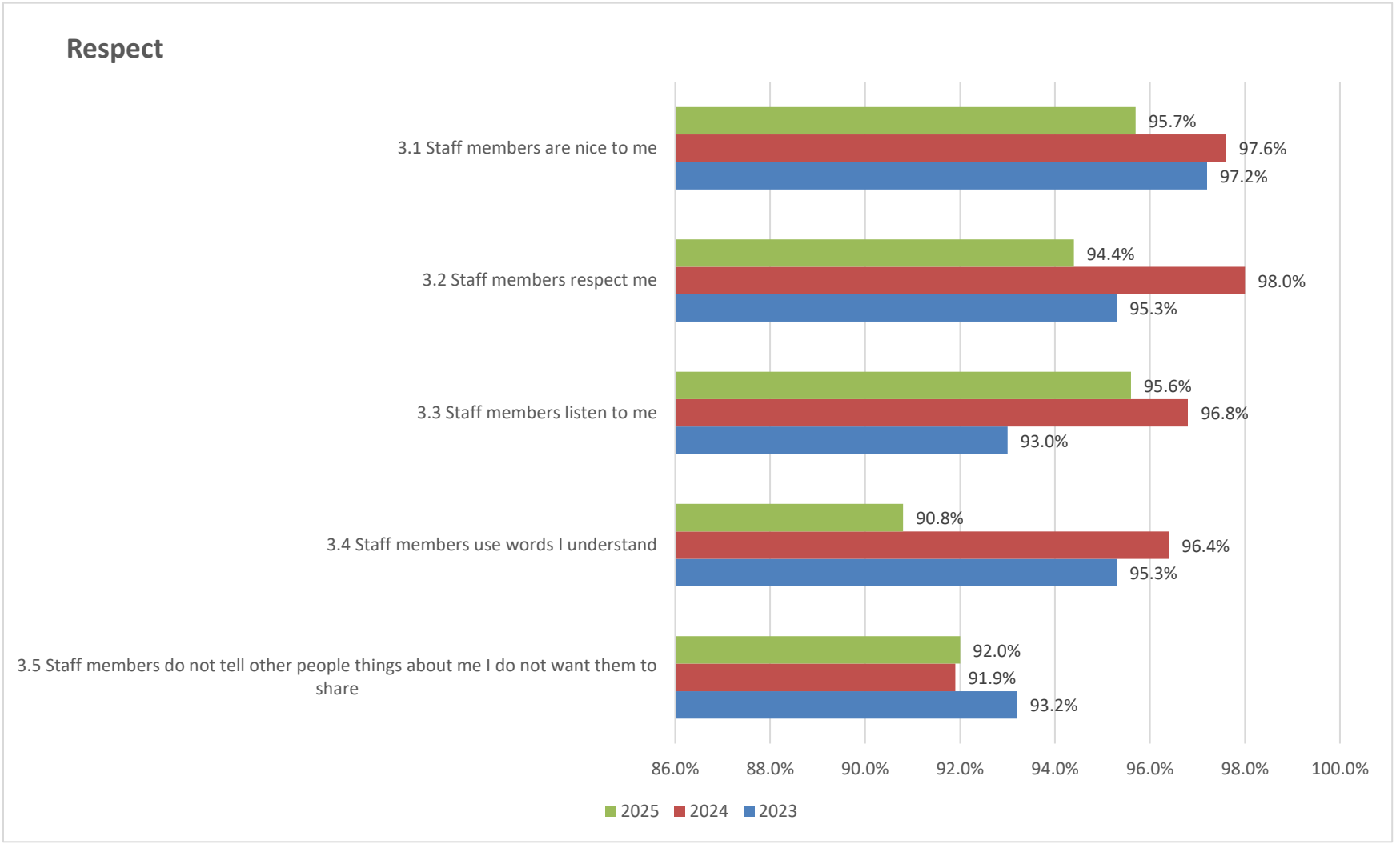
The five survey items with the lowest positive response rating were:

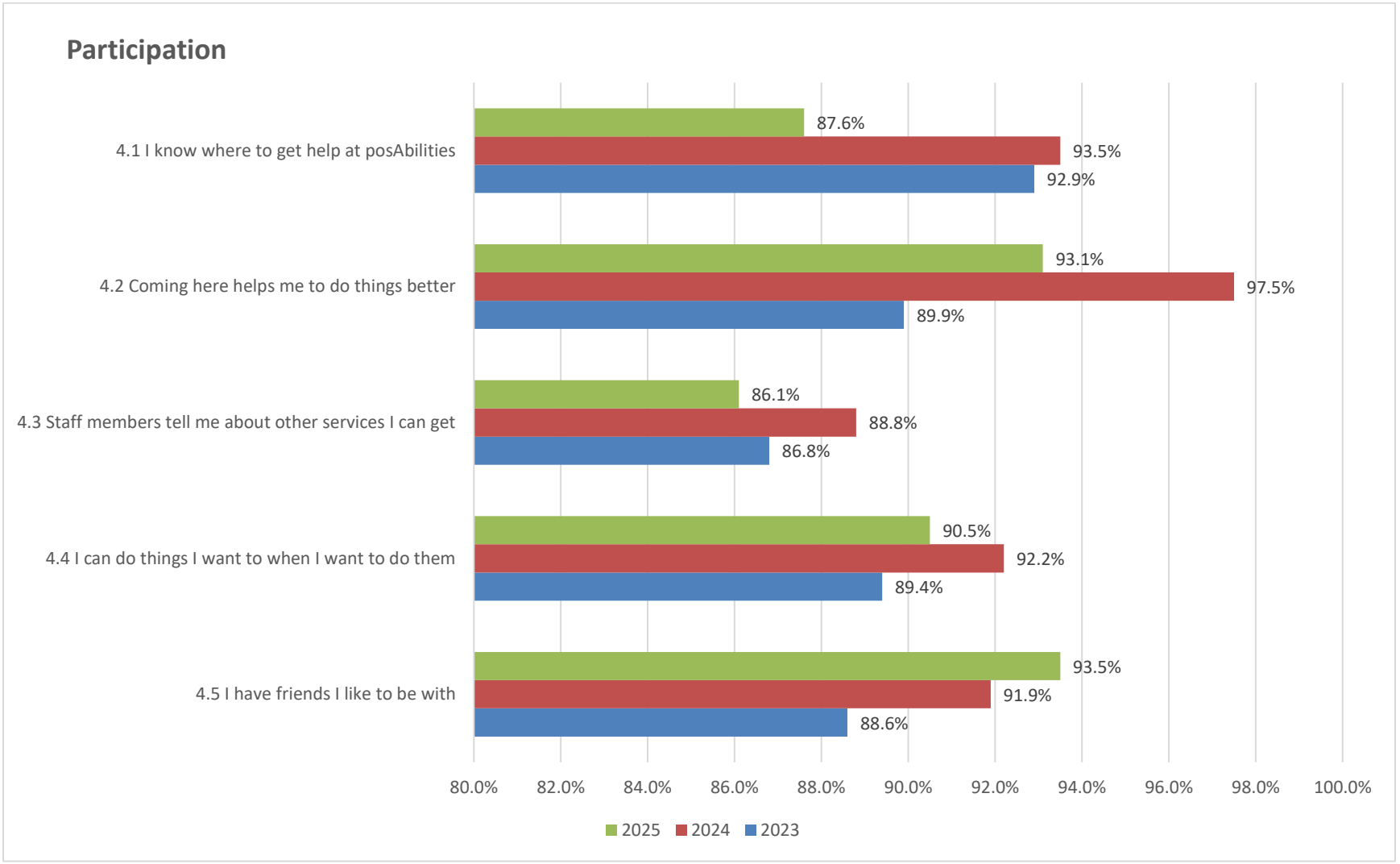
Survey Item	2023 Response (agree + strongly agree)	2024 Response (agree + strongly agree)	2025 Response (agree + strongly agree)
1.2 Staff members help me as soon as I ask for help	95.4%	92.1%	89.8%
5.1 I would tell friends and family this is a good place to get services	96.1%	94.6%	89.0%
4.1 I know how to get help at posAbilities	92.9%	93.5%	87.6%
2.4 I can make changes to the services I get	82.9%	87.0%	86.1%
4.3 Staff members tell me about other services I can get	86.8%	88.8%	86.1%

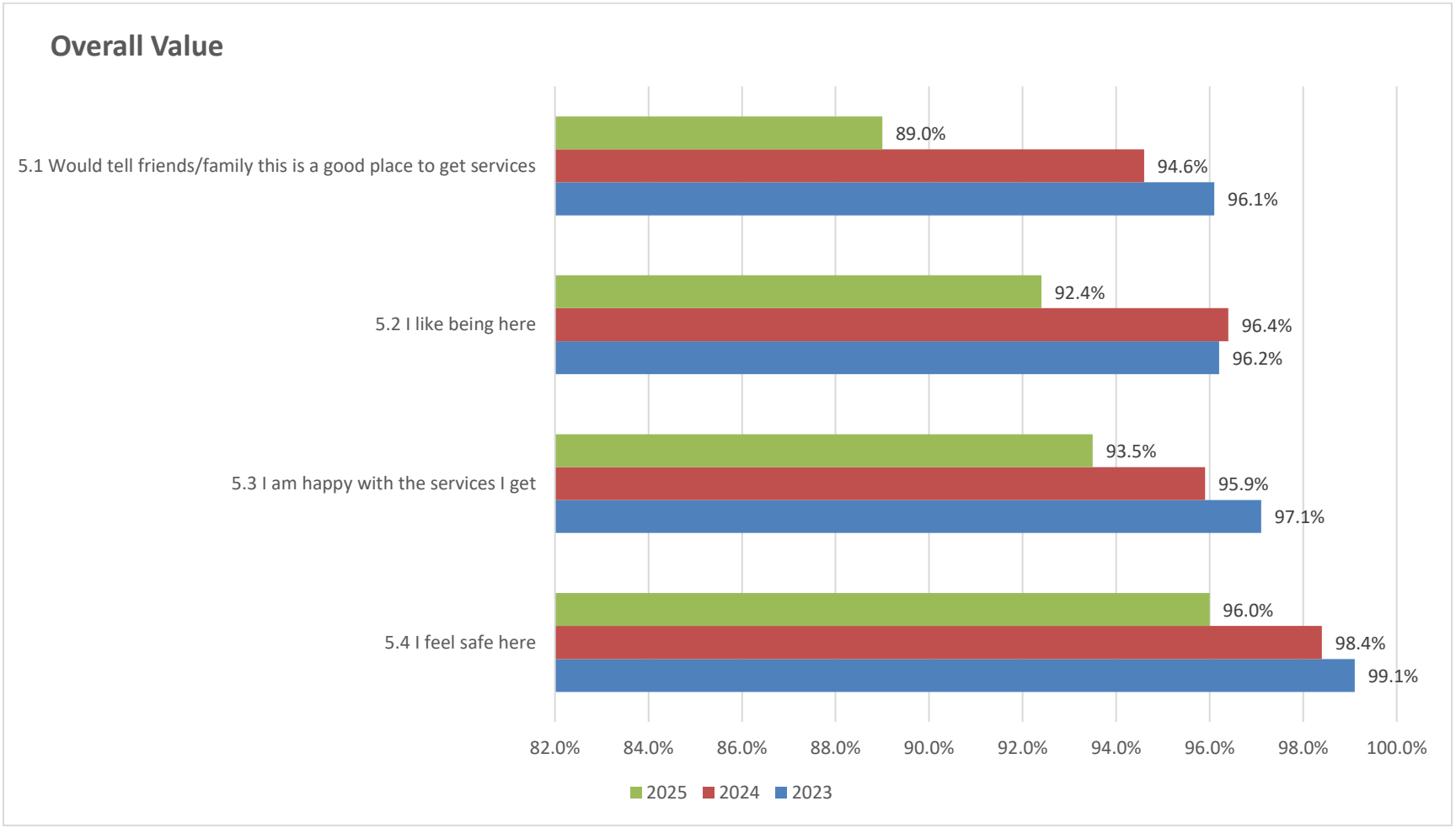
Positive responses (agree and strongly agree) by category were as follows:

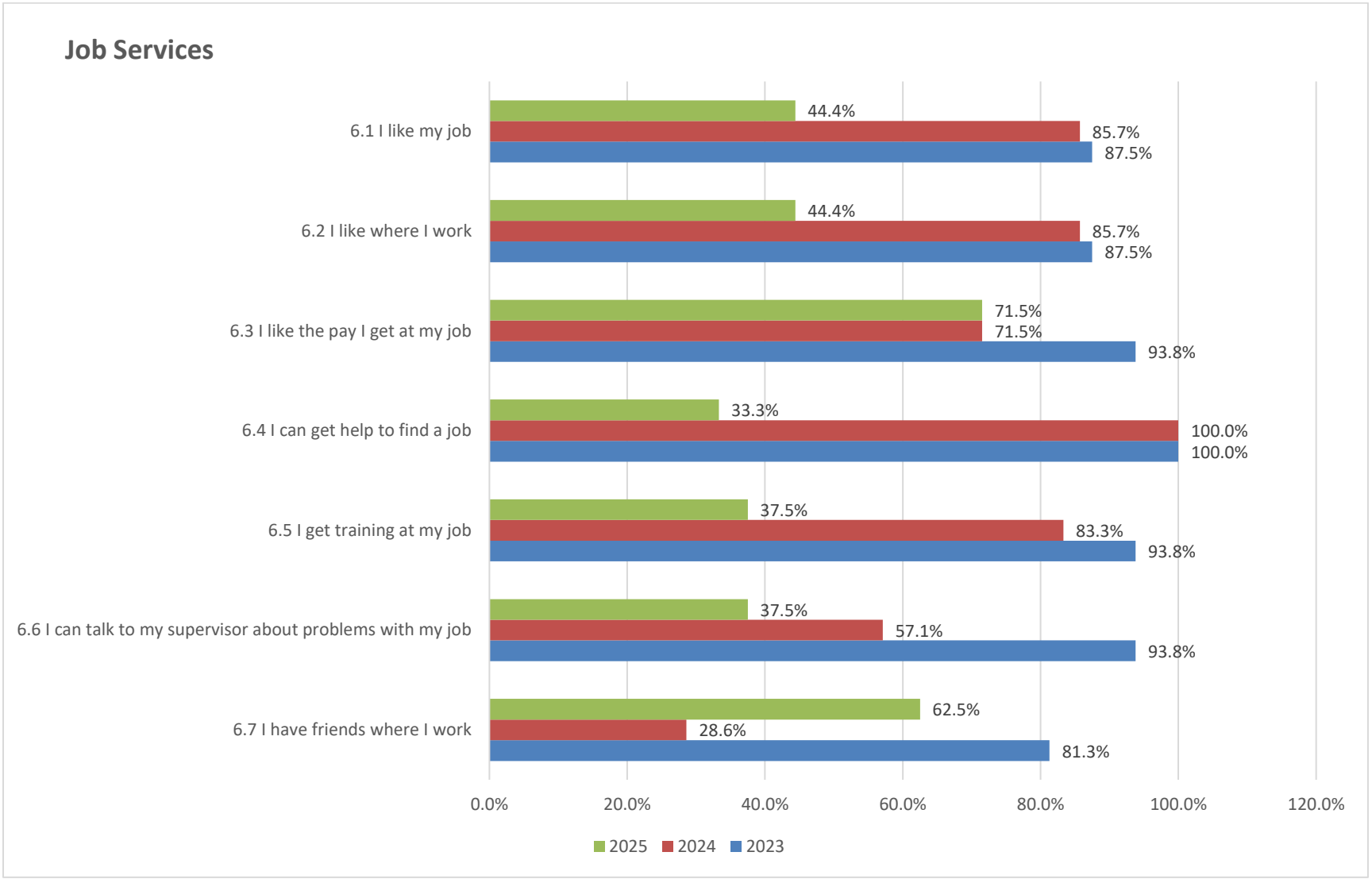


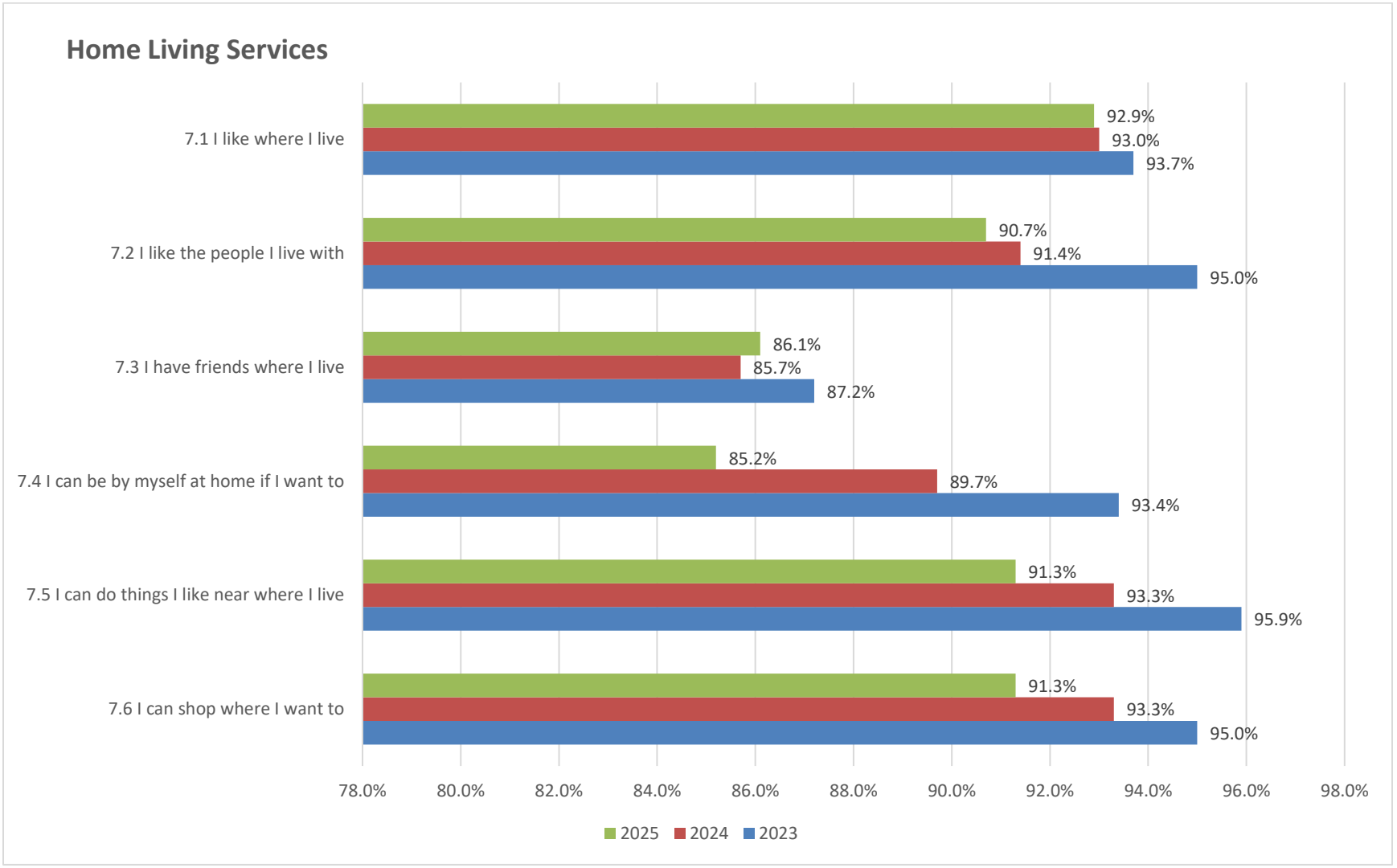

Informed Choice
2.1 I understand what staff members tell me about services I can get
85.7%
86.9%
89.6%
2.2 I get to help choose the services I get
90.1%
89.4%
89.0%
2.3 Staff members let me make choices about my care
93.6%
92.9%
92.4%
2.4 I can make changes to the services I get
86.1%
87.0%
82.9%
76.0% 78.0% 80.0% 82.0% 84.0% 86.0% 88.0% 90.0% 92.0% 94.0% 96.0%
2025 2024 2023


Respect
3.1 Staff members are nice to me
95.7%
97.6%
97.2%
3.2 Staff members respect me
94.4%
98.0%
95.3%
3.3 Staff members listen to me
95.6%
96.8%
93.0%
3.4 Staff members use words I understand
90.8%
96.4%
95.3%
3.5 Staff members do not tell other people things about me I do not want them to share
92.0%
91.9%
93.2%
86.0%
88.0%
90.0%
92.0%
94.0%
96.0%
98.0%
100.0%
2025
2024
2023


Participation
4.1 I know where to get help at posAbilities
87.6%
93.5%
92.9%
4.2 Coming here helps me to do things better
93.1%
97.5%
89.9%
4.3 Staff members tell me about other services I can get
86.1%
88.8%
86.8%
4.4 I can do things I want to when I want to do them
90.5%
92.2%
89.4%
4.5 I have friends I like to be with
93.5%
91.9%
88.6%
80.0%
82.0%
84.0%
86.0%
88.0%
90.0%
92.0%
94.0%
96.0%
98.0%
100.0%
2025
2024
2023


Overall Value
5.1 Would tell friends/family this is a good place to get services
89.0%
94.6%
96.1%
5.2 I like being here
92.4%
96.4%
96.2%
5.3 I am happy with the services I get
93.5%
95.9%
97.1%
5.4 I feel safe here
96.0%
98.4%
99.1%
82.0%
84.0%
86.0%
88.0%
90.0%
92.0%
94.0%
96.0%
98.0%
100.0%
2025
2024
2023


Job Services
6.1 I like my job
6.2 I like where I work
6.3 I like the pay I get at my job
6.4 I can get help to find a job
6.5 I get training at my job
6.6 I can talk to my supervisor about problems with my job
6.7 I have friends where I work
44.4%
85.7%
87.5%
44.4%
85.7%
87.5%
71.5%
71.5%
93.8%
33.3%
100.0%
100.0%
37.5%
83.3%
93.8%
37.5%
57.1%
93.8%
62.5%
28.6%
81.3%
0.0%
20.0%
40.0%
60.0%
80.0%
100.0%
120.0%
2025
2024
2023


Home Living Services
7.1 I like where I live
92.9%
93.0%
93.7%
7.2 I like the people I live with
90.7%
91.4%
95.0%
7.3 I have friends where I live
86.1%
85.7%
87.2%
7.4 I can be by myself at home if I want to
85.2%
89.7%
93.4%
7.5 I can do things I like near where I live
91.3%
93.3%
95.9%
7.6 I can shop where I want to
91.3%
93.3%
95.0%
78.0%
80.0%
82.0%
84.0%
86.0%
88.0%
90.0%
92.0%
94.0%
96.0%
98.0%
2025
2024
2023

Key Findings:

- The response rate in 2025 for the *pos***Abilities**' IDD Consumer Survey was 68%, showing an upward trend from 59% in 2024 and 54% in 2023.
- Overall, *pos***Abilities**' Agree + Strongly Agree scores remain high, with only 7 items from the main portion of the survey scoring below 90% and none scoring below 80%.
- We did observe a decrease in score on 20 out of 23 items; although scores remain high and the maximum decrease was 5.9%. We will continue to monitor all categories for trends.
- Self-reported health status continues to be stable since the 2020-2022 pandemic period dip with persons served reporting 'excellent' health dipping slightly from 20.2% to 19.0% but those reporting 'very good' health increasing from 22.6% to 31.8%.
- In line with that trend, and those reporting 'fair' health increased slightly from 9.3% to 10.7% but those reporting 'poor' health decreased dramatically from 3.2% to 0.8%.
- Beyond the main Consumer IDD Survey, we also had items specific to Job Services and Home Living. The questions in these sections were asked to respondents receiving respectively Employment or Housing services only.
- In the Job Services section, scores were relatively low and follow a 3-year downward trend. Due to a very low response rate amongst recipients of Employment services, we cannot draw conclusions about overall satisfaction from the results or prescribe actions in response.
- In the Home Living Services section, scores are relatively high with only two out of six items scoring below 80%. We did see a small decrease on five of the six items; although none more than 5%.

3.2 Survey Results: Families of *pos*Abilities' Persons Served

For the eighth year, ***pos*Abilities** again engaged uSPEQ® to survey families of persons served services in the following service streams: Communities, Community Housing, Community Integration, Community Employment Services, Explore, Shared Living, and Supported Living Network.

The **uSPEQ® Family Member Survey** is designed to help providers improve services through feedback. Anonymous and confidential, the survey captures multiple snapshots of the experience of families of persons served with ***pos*Abilities**, measuring satisfaction in the areas of **communication, autonomy, staff/care, respect/privacy, and overall satisfaction.**

With 2018 being the pilot year for the uSPEQ® Family Survey, benchmarking data is still being collected and will be available in future years. Family Survey Benchmarking data will provide comparators for satisfaction with other community services organizations so we can measure how we compare to peer organizations. The benchmarking data will be incorporated into future year's reporting. For the current year, we have provided previous years' scores as comparators.

A total of 286 surveys were distributed by email to family members of persons served. 40 family members returned completed surveys for a 14% response rate; 2% higher than what we achieved last year. The low family survey response rate remains a challenge and we continue to seek strategies to improve in this area.

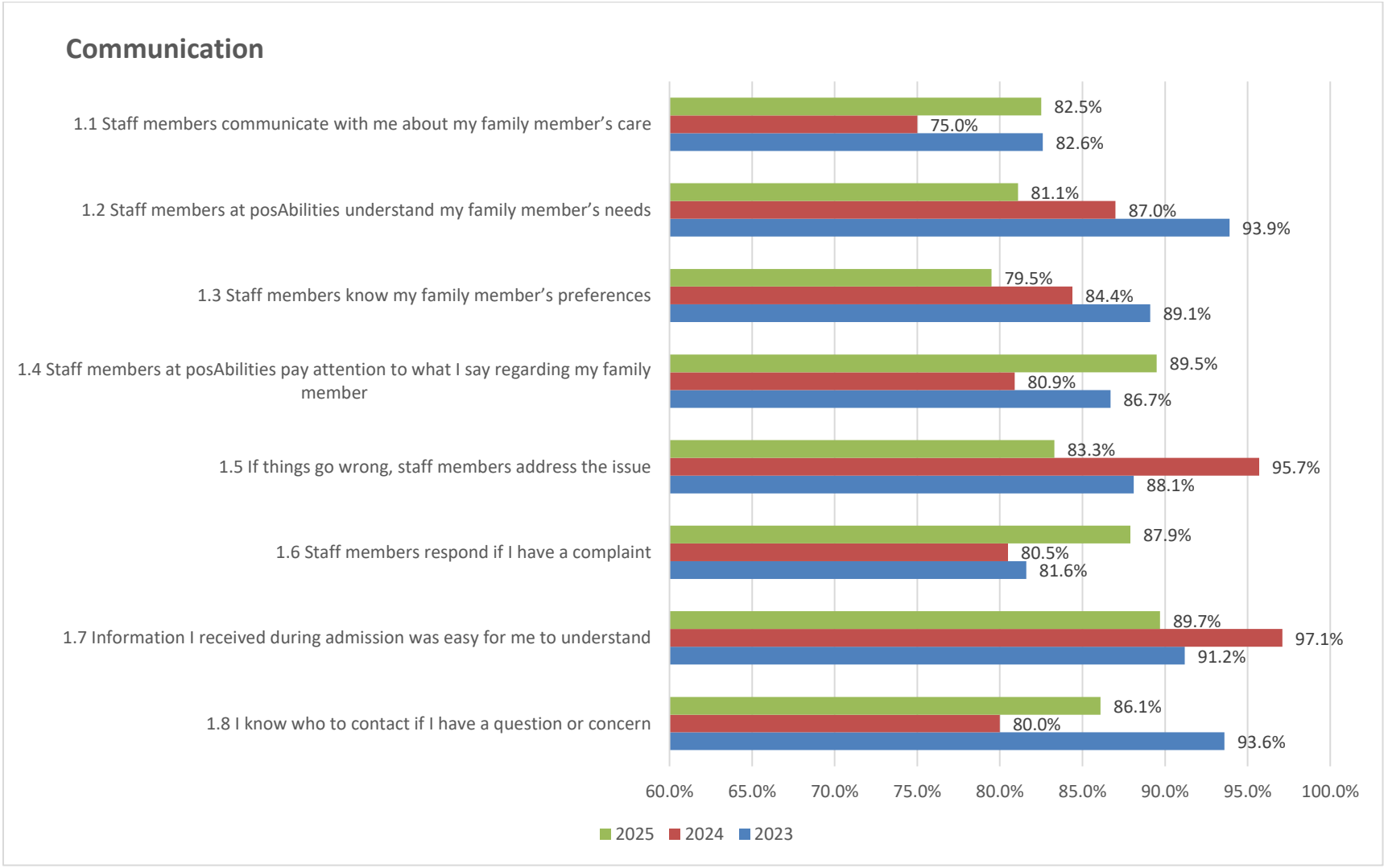
The top five survey items with positive responses were:

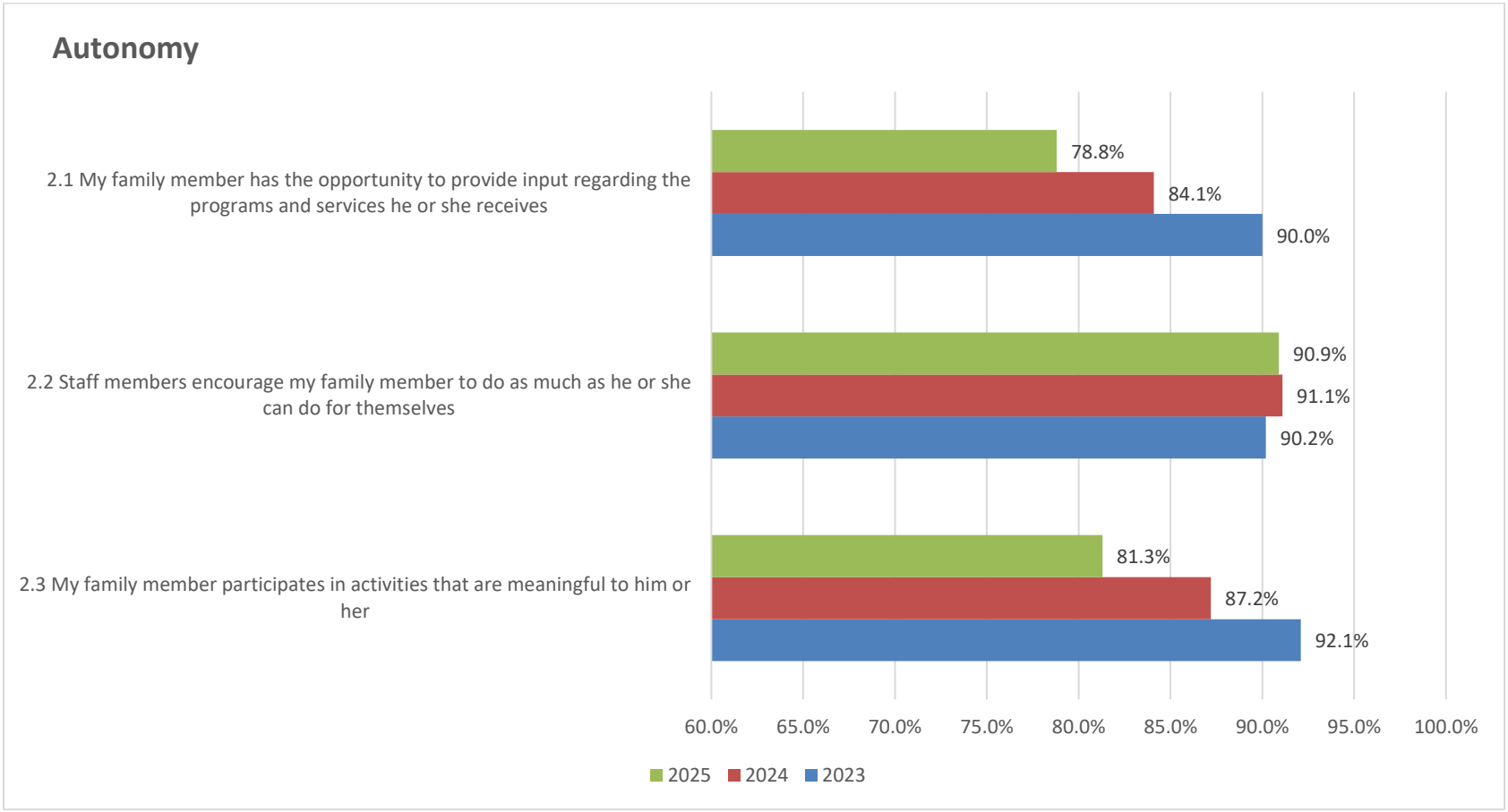
Survey Item	2023 Response (agree + strongly agree)	2024 Response (agree + strongly agree)	2025 Response (agree + strongly agree)
3.5 Relative is safe	93.5%	91.3%	94.3%
4.4 I am treated with respect	93.2%	95.6%	94.1%
4.3 Relative treated with respect	95.7%	95.7%	94.1%
4.5 Staff respects privacy	97.6%	100.0%	93.9%

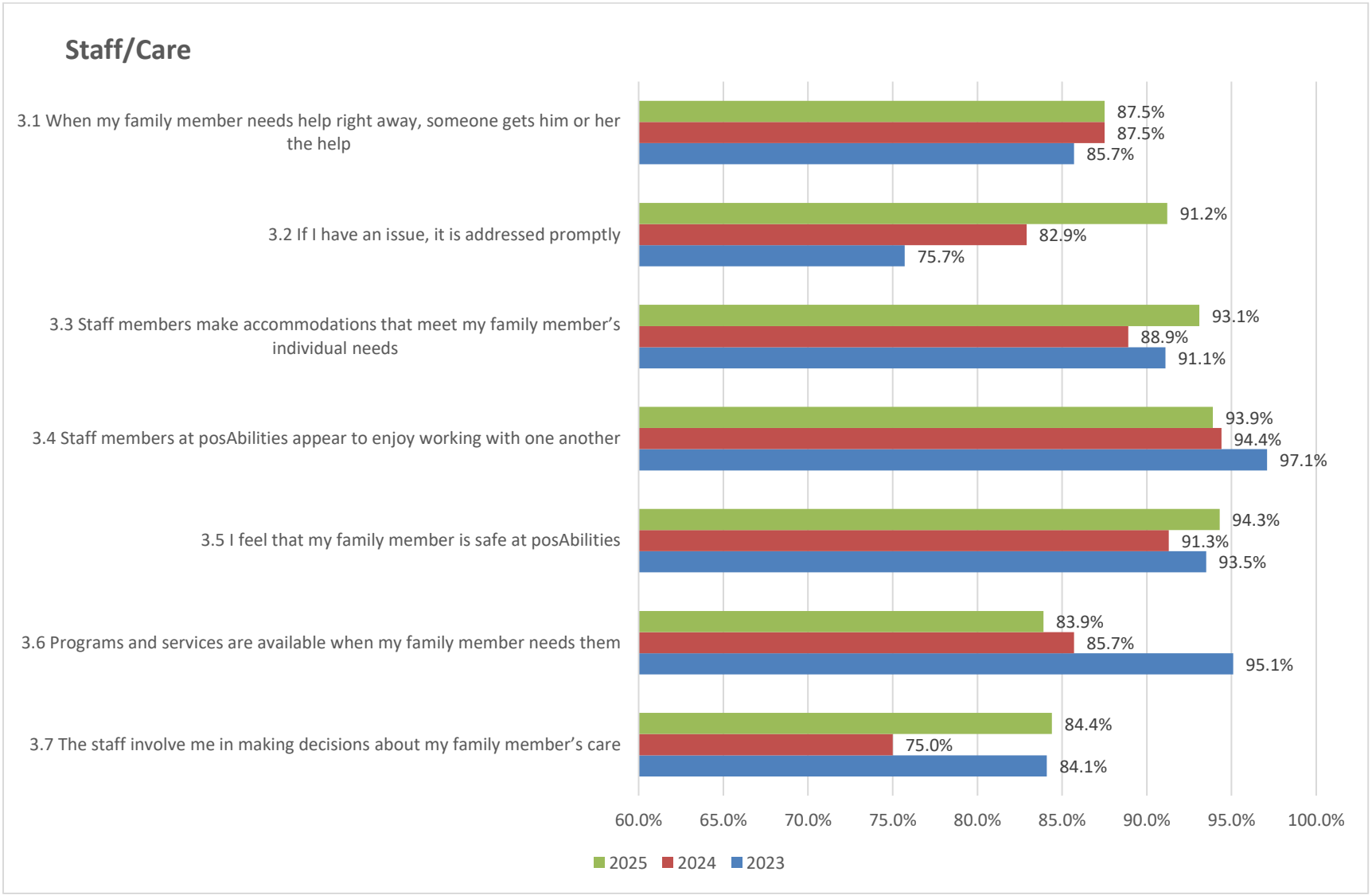
The five survey items with the lowest positive response rating were (2.3 and 6.10 were tied):

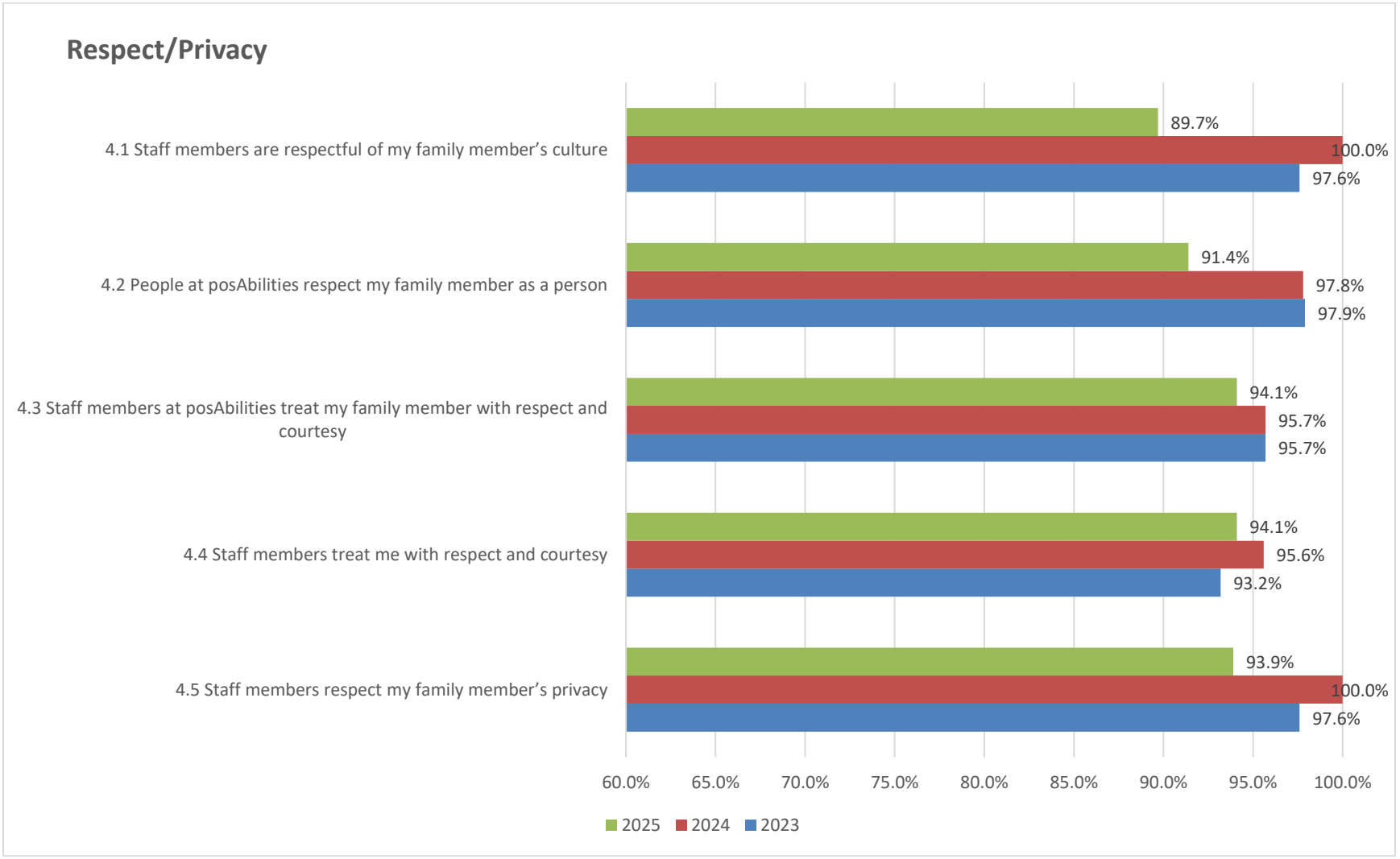
Survey Item	2023 Response (agree + strongly agree)	2024 Response (agree + strongly agree)	2025 Response (agree + strongly agree)
6.1 Know complaint process	54.1%	43.6%	57.5%
2.1 Relative can provide input	90.0%	84.4%	78.8%
1.3 Staff knows preferences	89.1%	84.4%	79.5%
1.2 Staff understands needs	93.9%	87.0%	81.1%
2.3 Relative participates in activities	92.1%	87.2%	81.3%
6.10 Employment setting is healthy	92.0%	75.0%	81.3%

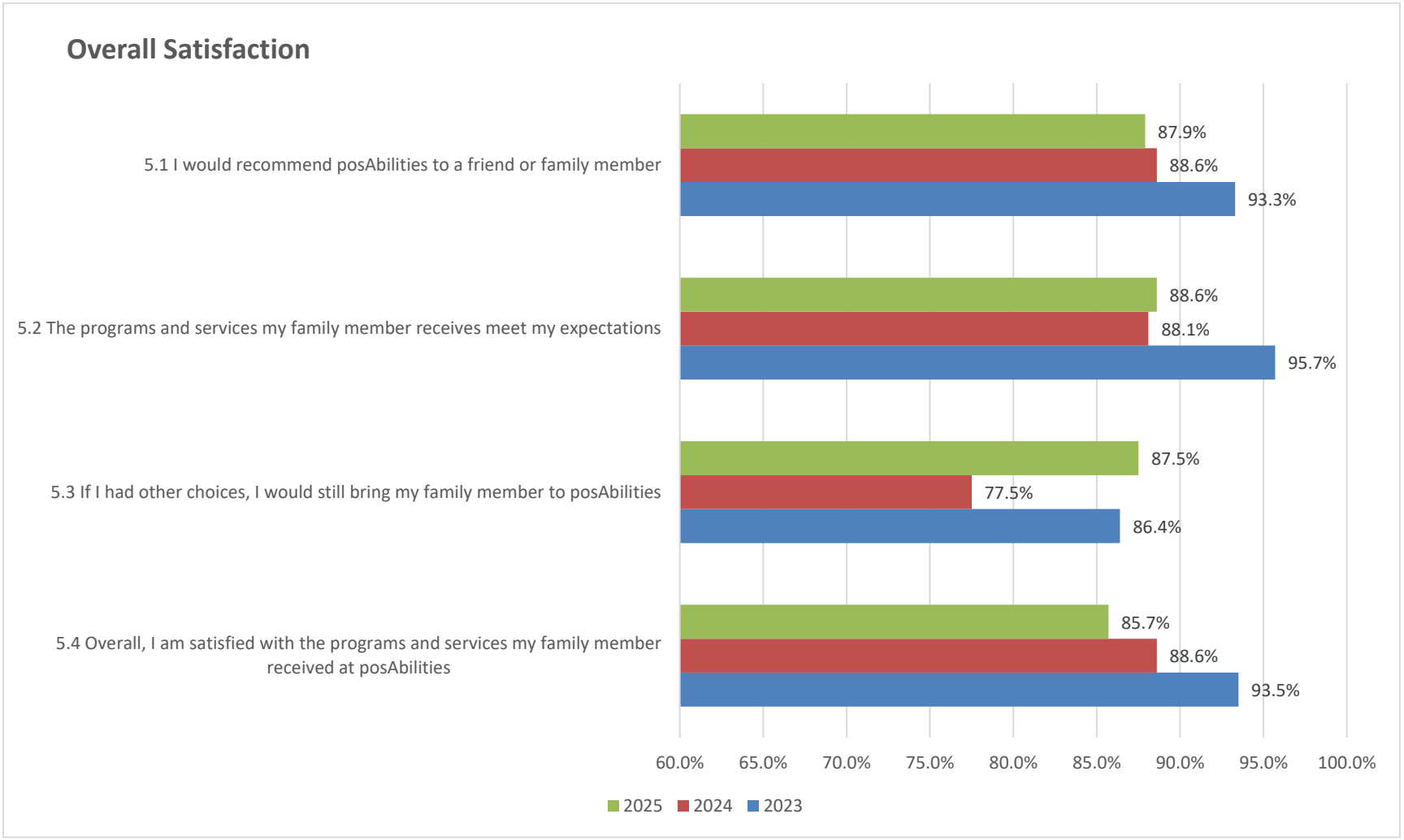
Positive responses (agree and strongly agree) by category were as follows:



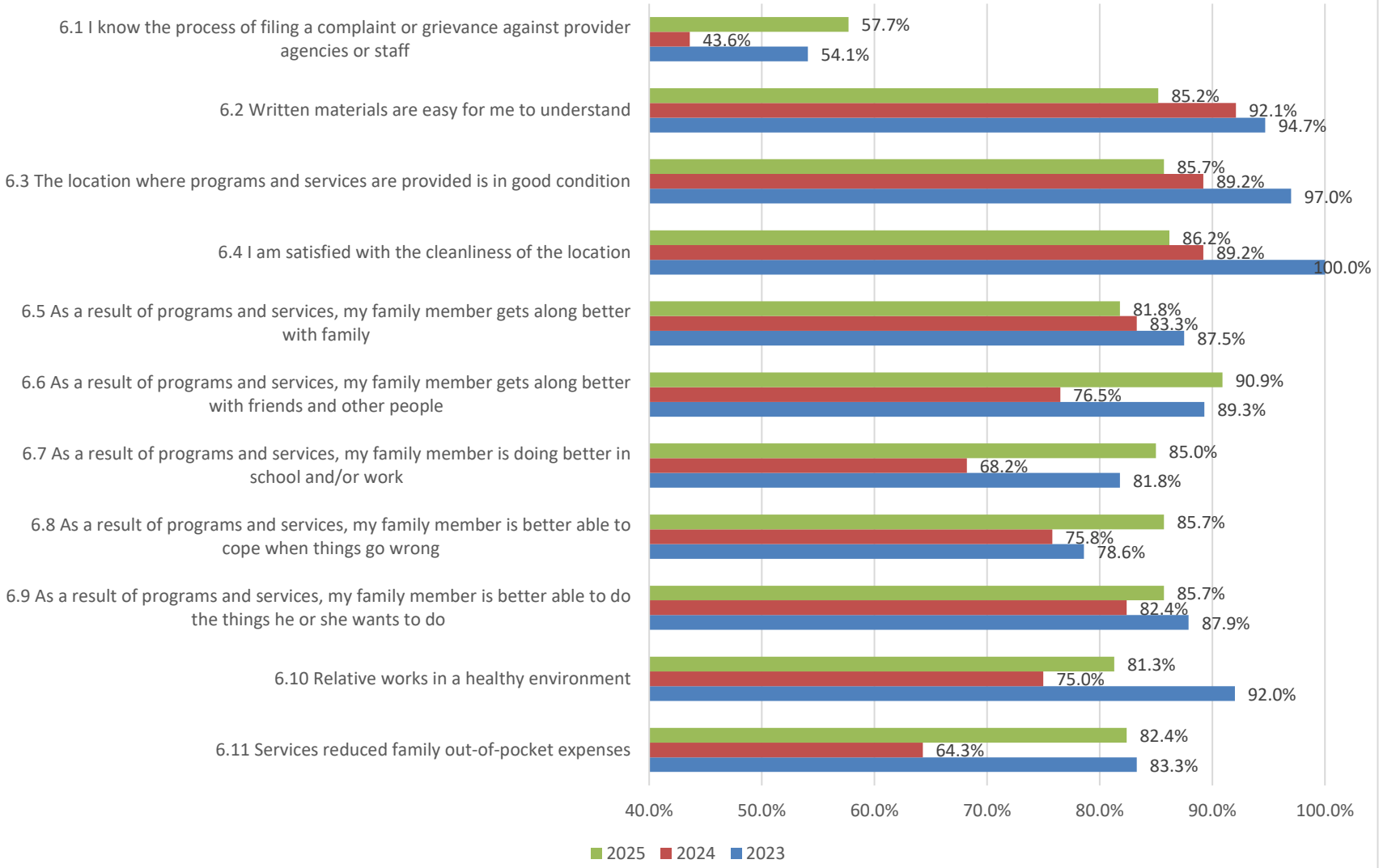

Autonomy
2.1 My family member has the opportunity to provide input regarding the programs and services he or she receives
78.8%
84.1%
90.0%
2.2 Staff members encourage my family member to do as much as he or she can do for themselves
90.9%
91.1%
90.2%
2.3 My family member participates in activities that are meaningful to him or her
81.3%
87.2%
92.1%
60.0%
65.0%
70.0%
75.0%
80.0%
85.0%
90.0%
95.0%
100.0%
2025
2024
2023


Staff/Care
3.1 When my family member needs help right away, someone gets him or her the help
87.5%
87.5%
85.7%
3.2 If I have an issue, it is addressed promptly
91.2%
82.9%
75.7%
3.3 Staff members make accommodations that meet my family member's individual needs
93.1%
88.9%
91.1%
3.4 Staff members at posAbilities appear to enjoy working with one another
93.9%
94.4%
97.1%
3.5 I feel that my family member is safe at posAbilities
94.3%
91.3%
93.5%
3.6 Programs and services are available when my family member needs them
83.9%
85.7%
95.1%
3.7 The staff involve me in making decisions about my family member's care
84.4%
75.0%
84.1%
60.0%
65.0%
70.0%
75.0%
80.0%
85.0%
90.0%
95.0%
100.0%
2025
2024
2023


Respect/Privacy
4.1 Staff members are respectful of my family member's culture
89.7%
100.0%
97.6%
4.2 People at posAbilities respect my family member as a person
91.4%
97.8%
97.9%
4.3 Staff members at posAbilities treat my family member with respect and courtesy
94.1%
95.7%
95.7%
4.4 Staff members treat me with respect and courtesy
94.1%
95.6%
93.2%
4.5 Staff members respect my family member's privacy
93.9%
100.0%
97.6%
60.0%
65.0%
70.0%
75.0%
80.0%
85.0%
90.0%
95.0%
100.0%
2025
2024
2023


Overall Satisfaction
5.1 I would recommend posAbilities to a friend or family member
87.9%
88.6%
93.3%
5.2 The programs and services my family member receives meet my expectations
88.6%
88.1%
95.7%
5.3 If I had other choices, I would still bring my family member to posAbilities
87.5%
77.5%
86.4%
5.4 Overall, I am satisfied with the programs and services my family member received at posAbilities
85.7%
88.6%
93.5%
60.0%
65.0%
70.0%
75.0%
80.0%
85.0%
90.0%
95.0%
100.0%
2025
2024
2023

General and Program Specific Items



Key Findings:

- For the Family Member survey, as with all the surveys we conduct, we seek to have a minimum 25% response rate. Historically, this has been a challenge for us so the scores on the Family Member survey should be considered within the context of a very low response rate; 14% in FYE2025. Given the low number of survey responses, the results obtained may not be an accurate appraisal of family satisfaction with *pos***Abilities** services.
- For FYE2025, 25 of the 27 items from the main section of the Family Member Survey scored 80% or above.
- Although scores on the Family Member survey are generally high, we continue to see a downward trend across items:
    - in FYE2025, we saw a decrease in scores on 16 of 27 items in the main section.
    - in FYE2024, we saw a decrease in scores on 18 of 27 items in FYE2024; and
    - In FYE2023, we saw a decrease on 19 of 27 items.
- We did see a reversal of the downward trend on some items this year however, with 10 items increasing from last year's score and 7 of those surpassing both FYE2024 and FYE2023 scores.
- As in previous years, section 4, Respect/Privacy, showed the highest overall scores with all items above 89%.
- The items on the main survey that showed the greatest declines were:
    - 1.5 'If things go wrong, staff members address the issue', which dropped by 12.4%, and
    - 4.1 'Staff members are respectful of my family member's culture', which dropped by 10.3%.
- There were ten items on the Family Member survey that showed an increased score. Most increases were modest, but two showed an increase of more than 5%:
    - 1.1 'Staff members communicate with me about my family member's care', increased 8.6% to 89.5%,
    - 1.6 'Staff members respond if I have a complaint' increased 7.4% to 87.9%,
    - 1.8 'I know who to contact if I have a question or concern', increased 6.1% to 86.1%,
    - 3.2 'If I have an issue, it is addressed promptly', increased 8.3% to 91.2%,
    - 3.7 'The staff involve me in making decisions about my family member's care', increased 9.4% to 84.4%, and
    - 5.3 'If I had other choices, I would still bring my family member to posAbilities', increased 10% to 87.5%.
- Beyond the main section of the survey, ten of eleven General and Program Specific items scored above 80%.
- This section saw an increase on seven items and a decrease on four items.
- As in previous years, item 6.1 remains a particular concern along with 1.8 and 3.7. These items relate to our communication with and support of families and continue to have low scores.
- On a positive note, we did see a significant increase of 14.1% in the score for 6.1 'I know the process for filing a complaint or grievance against provider agencies or staff', although it remains low at 57.7%. As with the other items showing decline, we will continue to explore strategies we can deploy to improve in this area.

Follow-up and Proposed Action:

- Our main focus with respect to our Family Member surveys continues to be increasing the response rate.
- We will continue to explore new strategies including potential incentives for families to complete the survey.
- We are also exploring the possibility of telephone surveys for family members.
- The two items which scored below 80% from the main portion of the survey, 1.3, 'staff members know my family member's preferences', and 2.1, 'my family member has opportunity to provide input regarding services', both speak to communication between staff teams and families. As we are reviewing and updating our system of person centred planning, there is a good opportunity to keep families informed about the process. This will ensure families are aware of our person centred focus and efforts to ensure choice for persons served.
- In order to reverse the downward trend on item 6.1 'I know the process of filing a complaint or grievance against provider agencies or staff', we will continue to explore new ways of engaging with families as well as reexamine some of the strategies we have deployed so far such as:
    - Posting the complaints resolution process in programs.
    - Emailing or mailing a copy of the complaints resolution process to all families.
    - Reminding families of the complaints resolution process in-person during Person Centred Planning update meetings with persons served.
- An update of our Person Served Orientation and Annual Rights Review was completed this year and we hope the changes in this area will have positive impacts.
- We have also created a new plain language rights document for persons served which replaces our previous Adult Rights document. This will help assure families we are taking steps to ensure all persons served are aware of their rights.

4. POSABILITIES EMPLOYEES: OUTCOMES DATA AND RESULTS

4.1 Survey Results: *pos*Abilities' Employees

Satisfaction Survey December 2024[3] Employee Climate:	
RESPONDENTS	270 of 508 surveys distributed for a response rate of 53%
SURVEY METHOD	Employee Climate Survey distributed and analyzed by uSPEQ Research and Reporting
OBJECTIVE	To increase satisfaction in each category each year

RESPONSE DISTRIBUTION

Regular Direct Support Staff:	46.1%	Behaviour Consultant:	6.5%
Senior Support Worker:	15.1%	Manager/Director:	5.7%
Casual Direct Support Staff:	13.9%	Team Leader/Coordinator/Clinical Supervisor/Assistant Clinical Manager:	4.1%
Admin/HR/Accounting Staff:	8.6%		

For this year's report, in addition to previous years' data, we are also able to present sector benchmark data as a comparison to other organizations like *pos***Abilities**. Note that benchmark data was not available for every item on the survey.

The top five employee climate survey items with positive responses were:

Question #	Question	Benchmark	2022	2023	2024
G.4	Understand job responsibilities	97.0%	98.8%	98.5%	99.2%
A.2	Support organization's overall direction	95.4%	96.7%	97.6%	98.5%
A.3	Organization values diversity	94.6%	96.0%	96.6%	97.8%
G.7	Clear about roles and responsibilities	93.8%	96.9%	98.5%	97.7%
A.1	Aware of organization's mission	97.8%	98.9%	97.6%	97.4%
A.4	Organization is focused on customer service/satisfaction	92.3%	96.0%	96.5%	97.4%

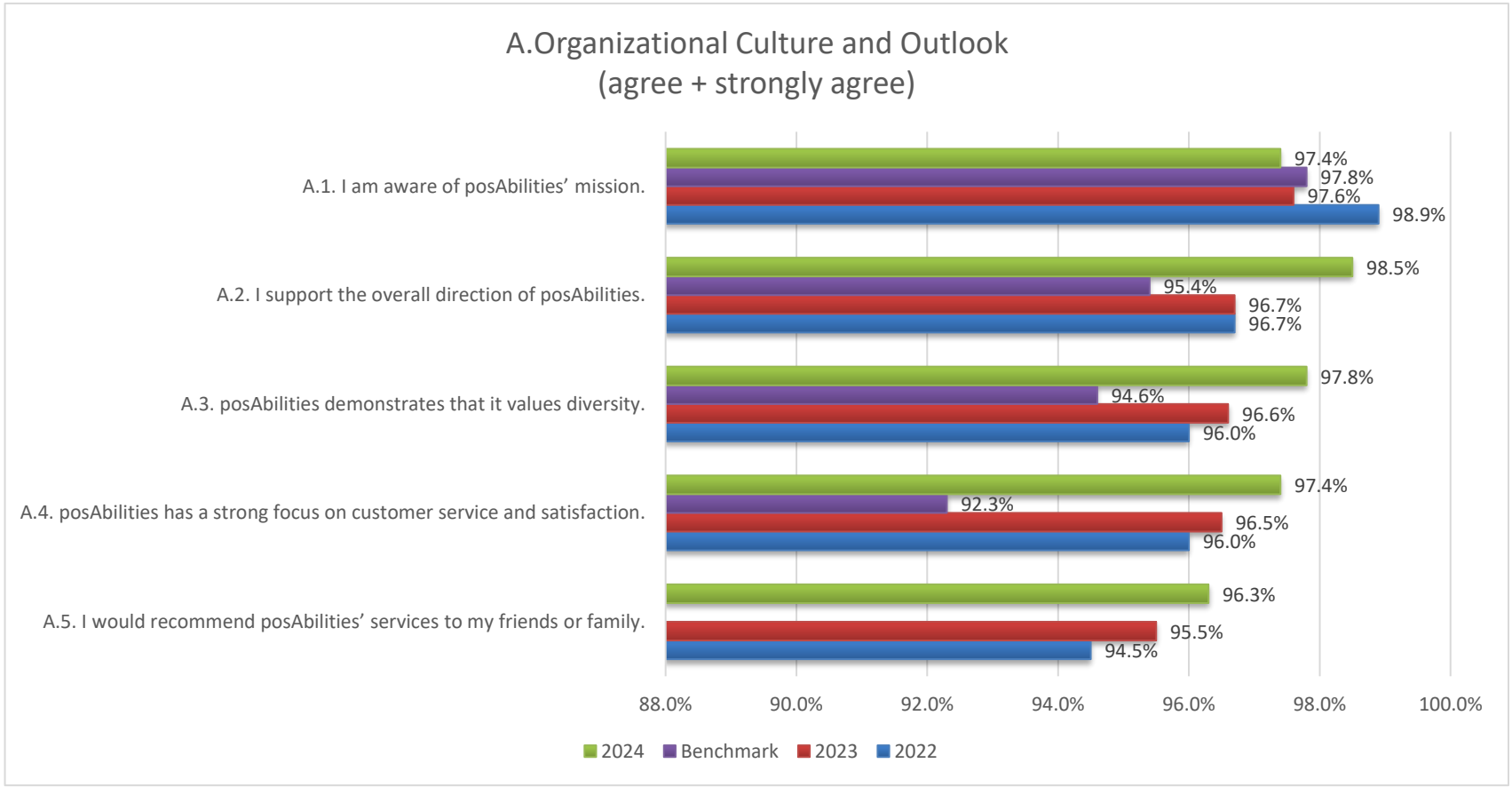
The five survey items with the lowest positive response rating were:

[3] Note that the Employee Climate Survey is administered in November of each year. Thus, the survey data for FYE2025 comes from the survey administered in November 2024.

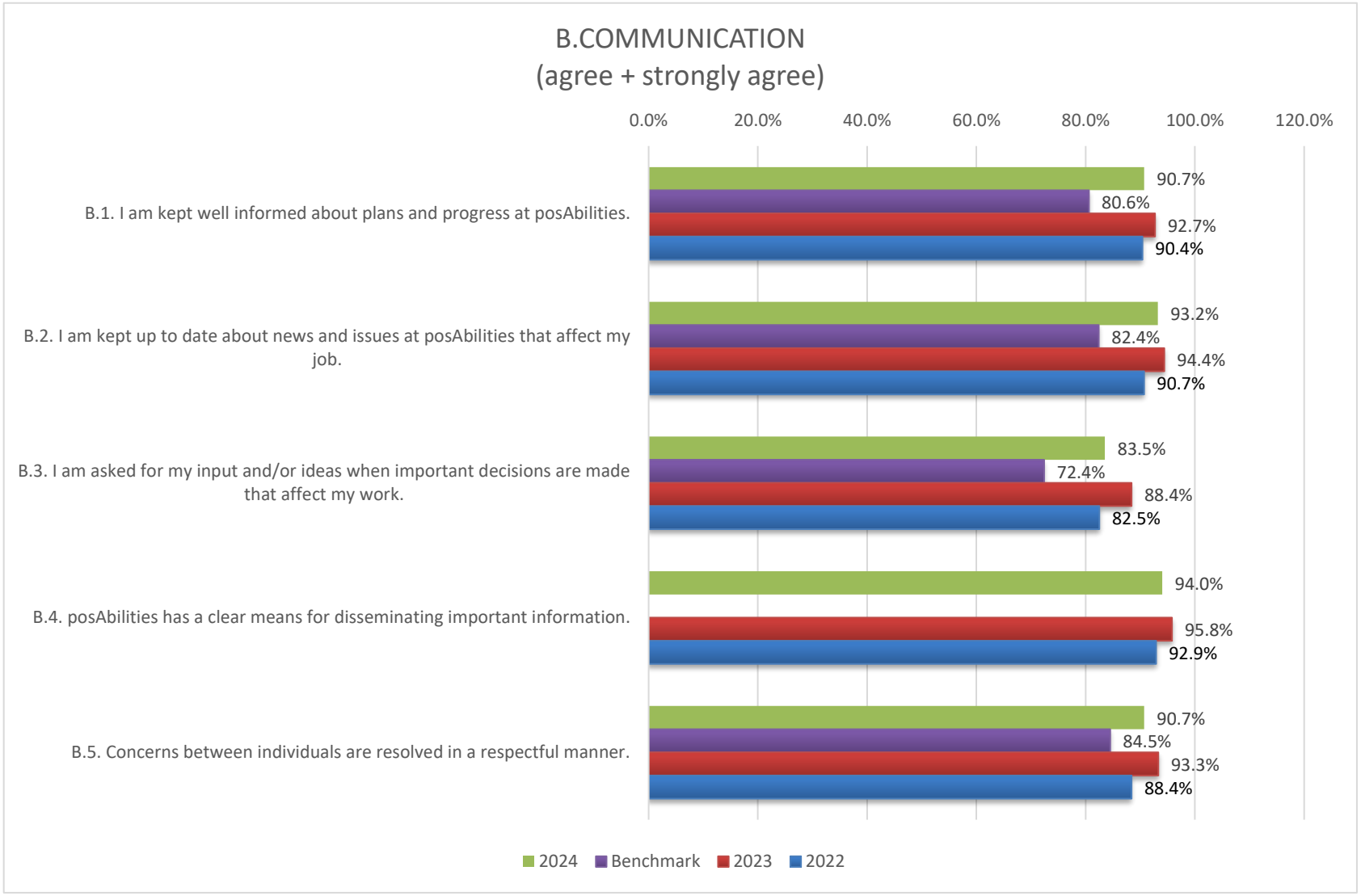
Question #	Question	Benchmark	2022	2023	2024
H.2	Satisfied with benefit package	82.4%	63.6%	75.4%	68.1%
H.1	Paid fairly for work	60.9%	62.5%	78.3%	74.6%
H.5	Staff promoted on merits	73.4%	81.0%	82.1%	78.0%
H.6	Recognition of high performing staff	76.1%	79.2%	82.8%	80.7%
B.3	Asked for input on job decisions	72.4%	82.5%	88.4%	83.5%

Employee Climate Survey Results by Category:

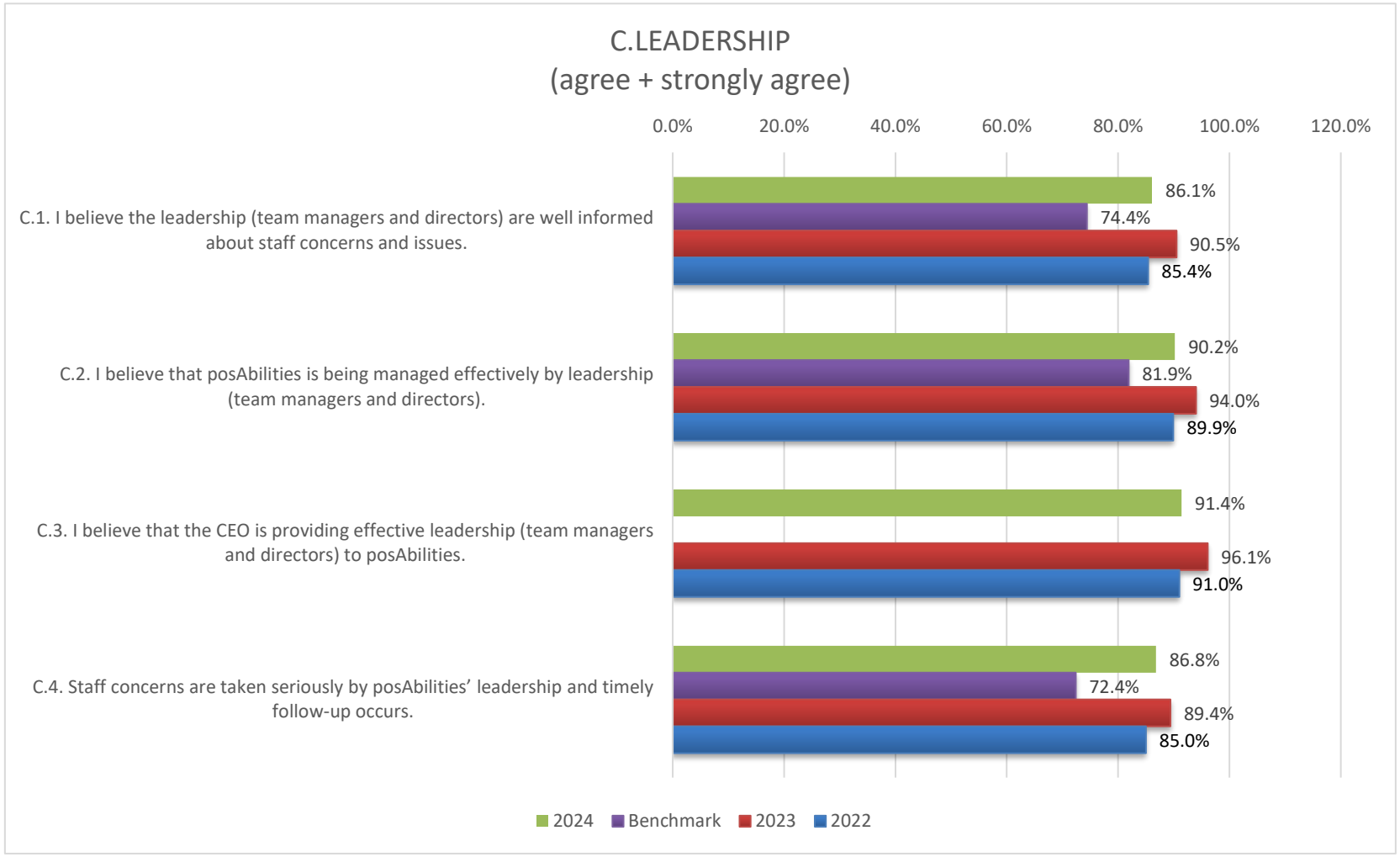
A. Organizational Climate



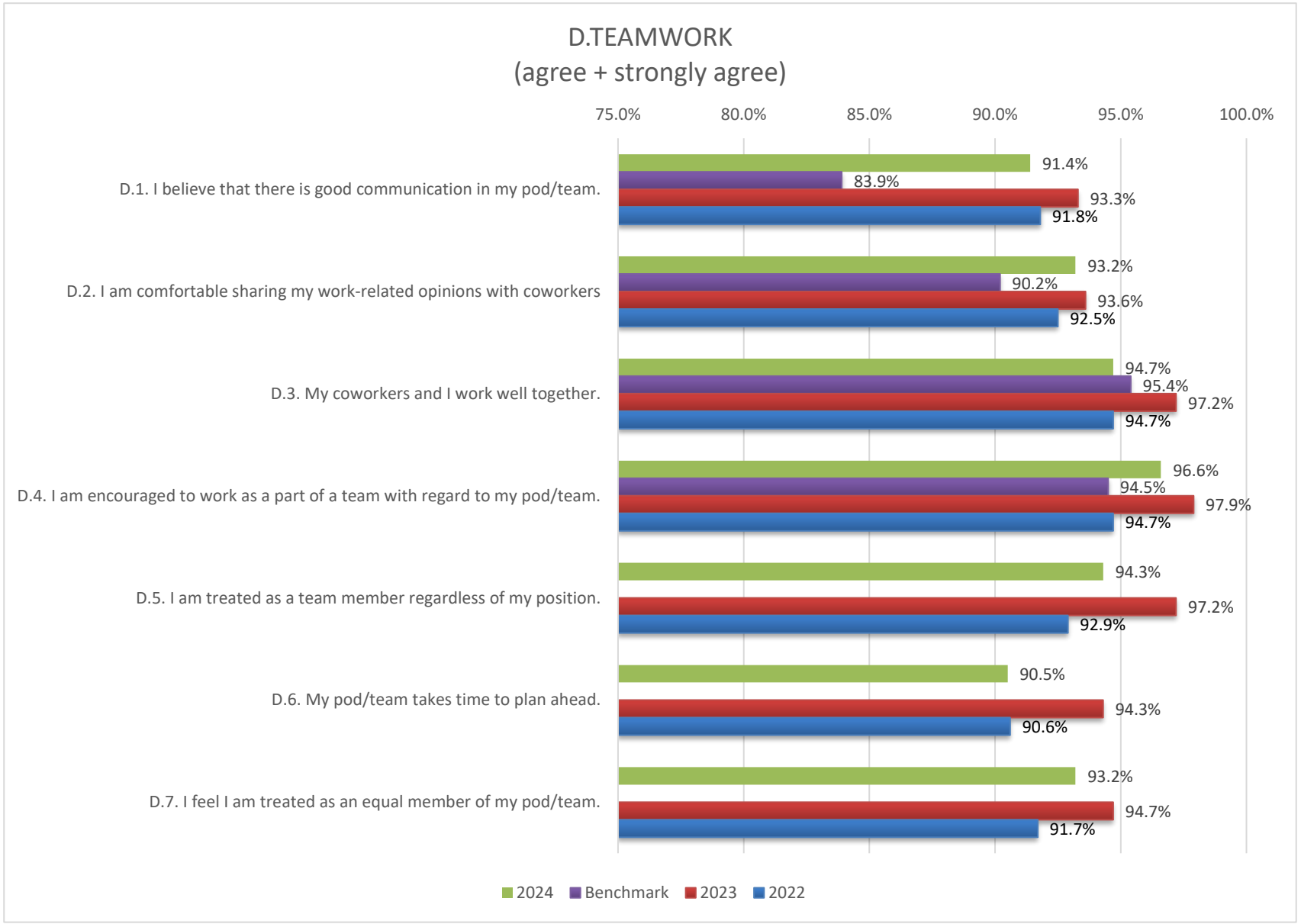
B. Communication



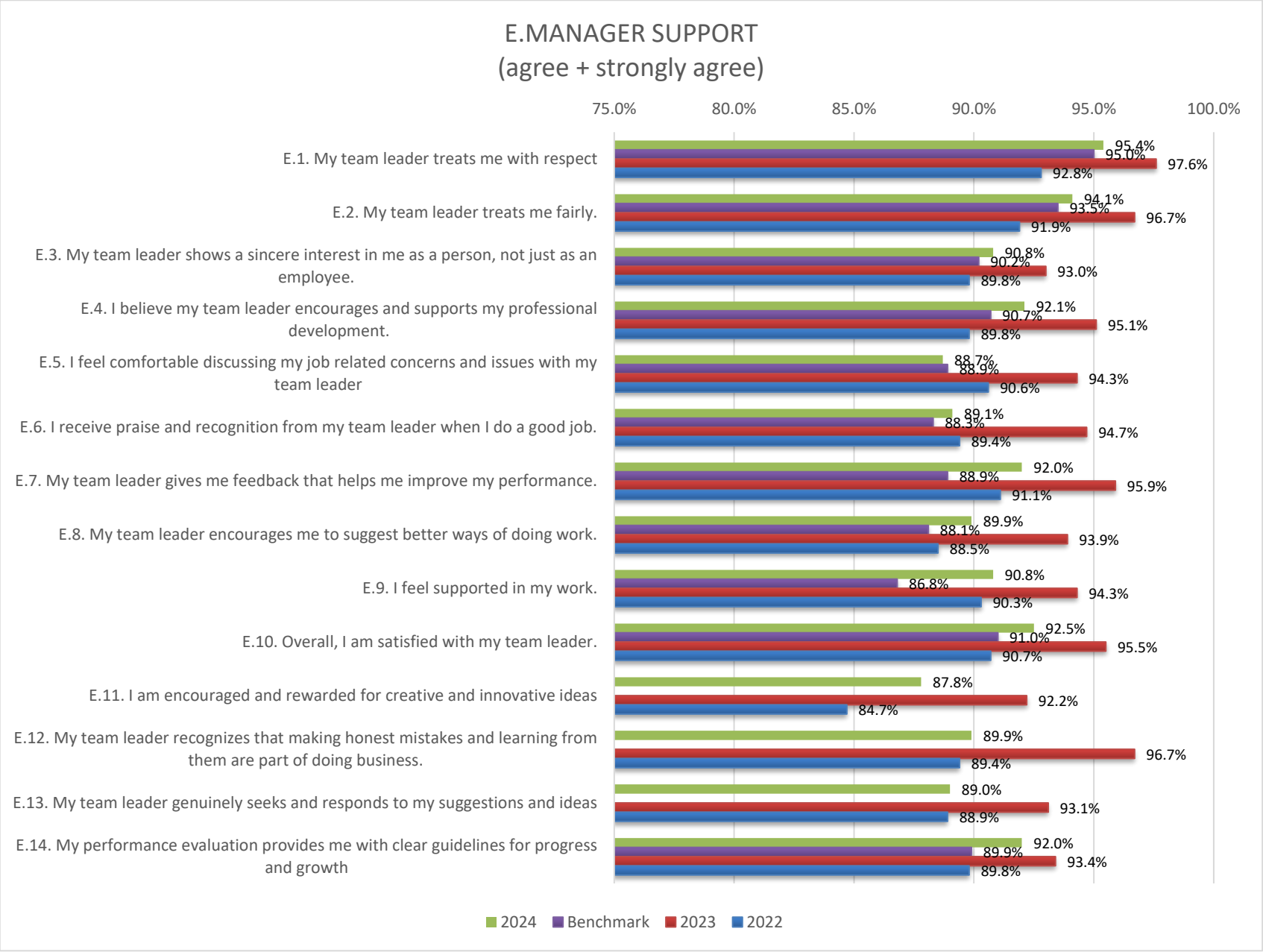
C. Leadership



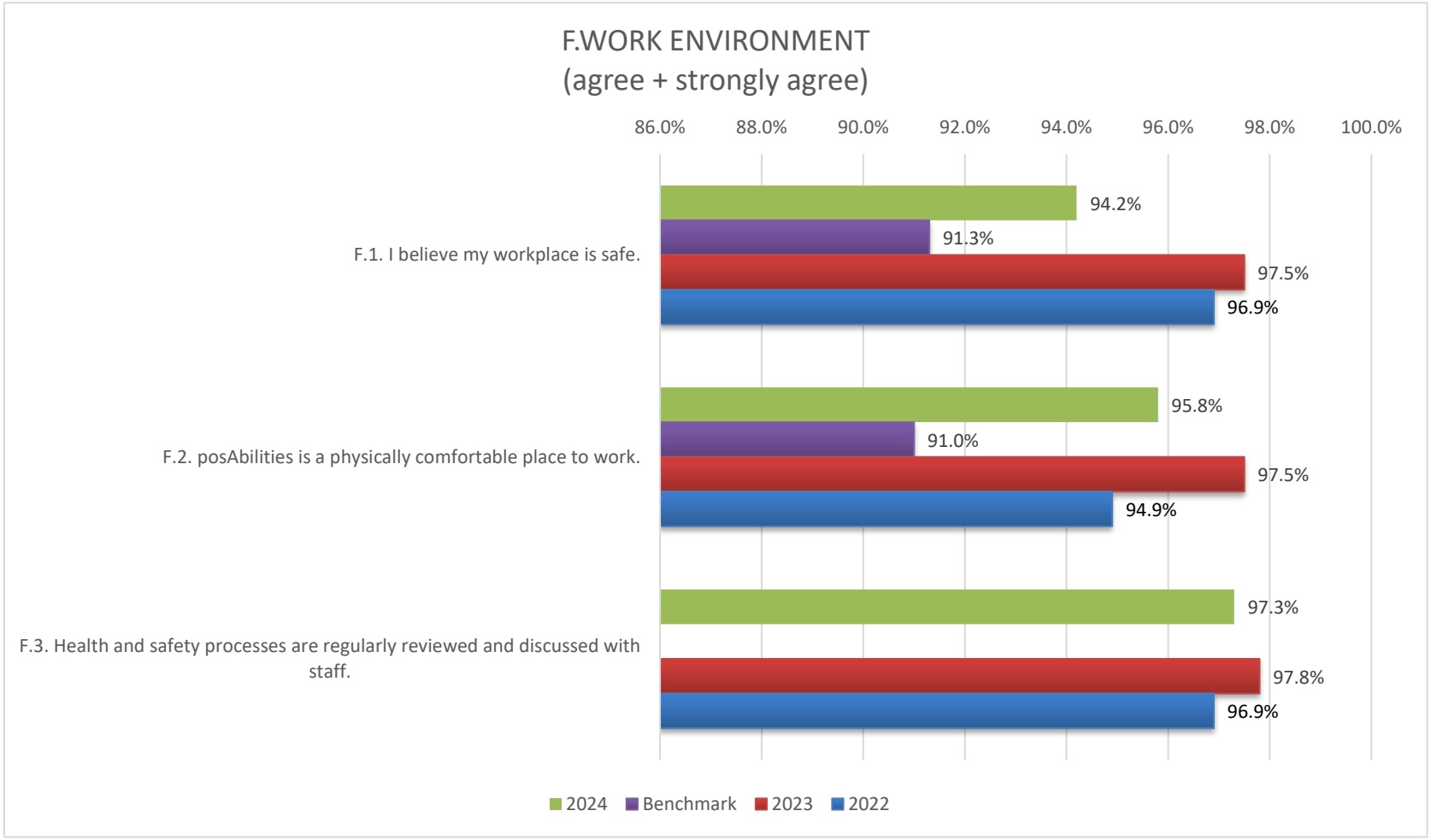
D. Workgroup


D.TEAMWORK
(agree + strongly agree)
75.0%
80.0%
85.0%
90.0%
95.0%
100.0%
D.1. I believe that there is good communication in my pod/team.
91.4%
83.9%
93.3%
91.8%
D.2. I am comfortable sharing my work-related opinions with coworkers
93.2%
90.2%
93.6%
92.5%
D.3. My coworkers and I work well together.
94.7%
95.4%
97.2%
94.7%
D.4. I am encouraged to work as a part of a team with regard to my pod/team.
96.6%
94.5%
97.9%
94.7%
D.5. I am treated as a team member regardless of my position.
94.3%
97.2%
92.9%
D.6. My pod/team takes time to plan ahead.
90.5%
94.3%
90.6%
D.7. I feel I am treated as an equal member of my pod/team.
93.2%
94.7%
91.7%
2024
Benchmark
2023
2022

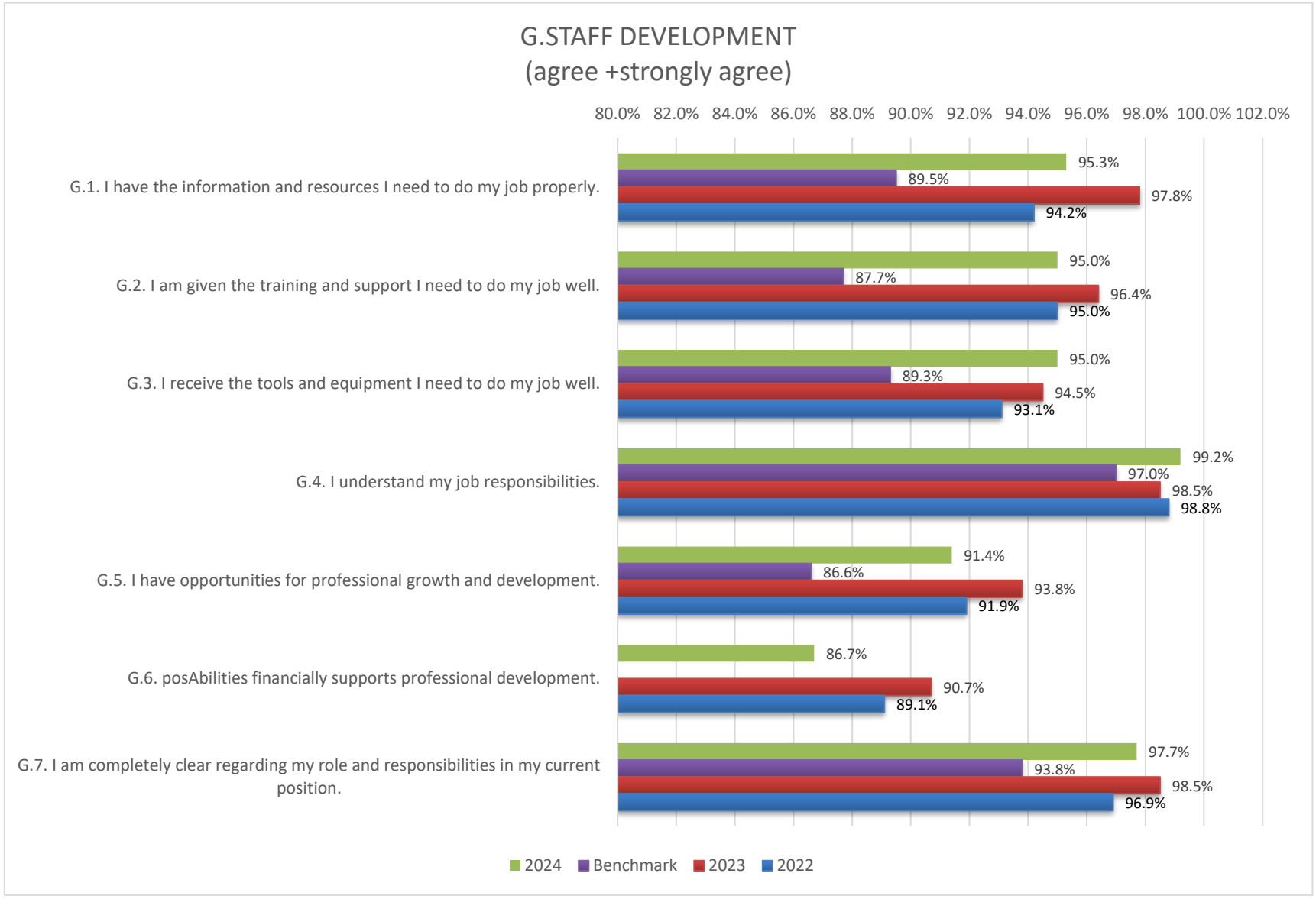
E. Manager Support



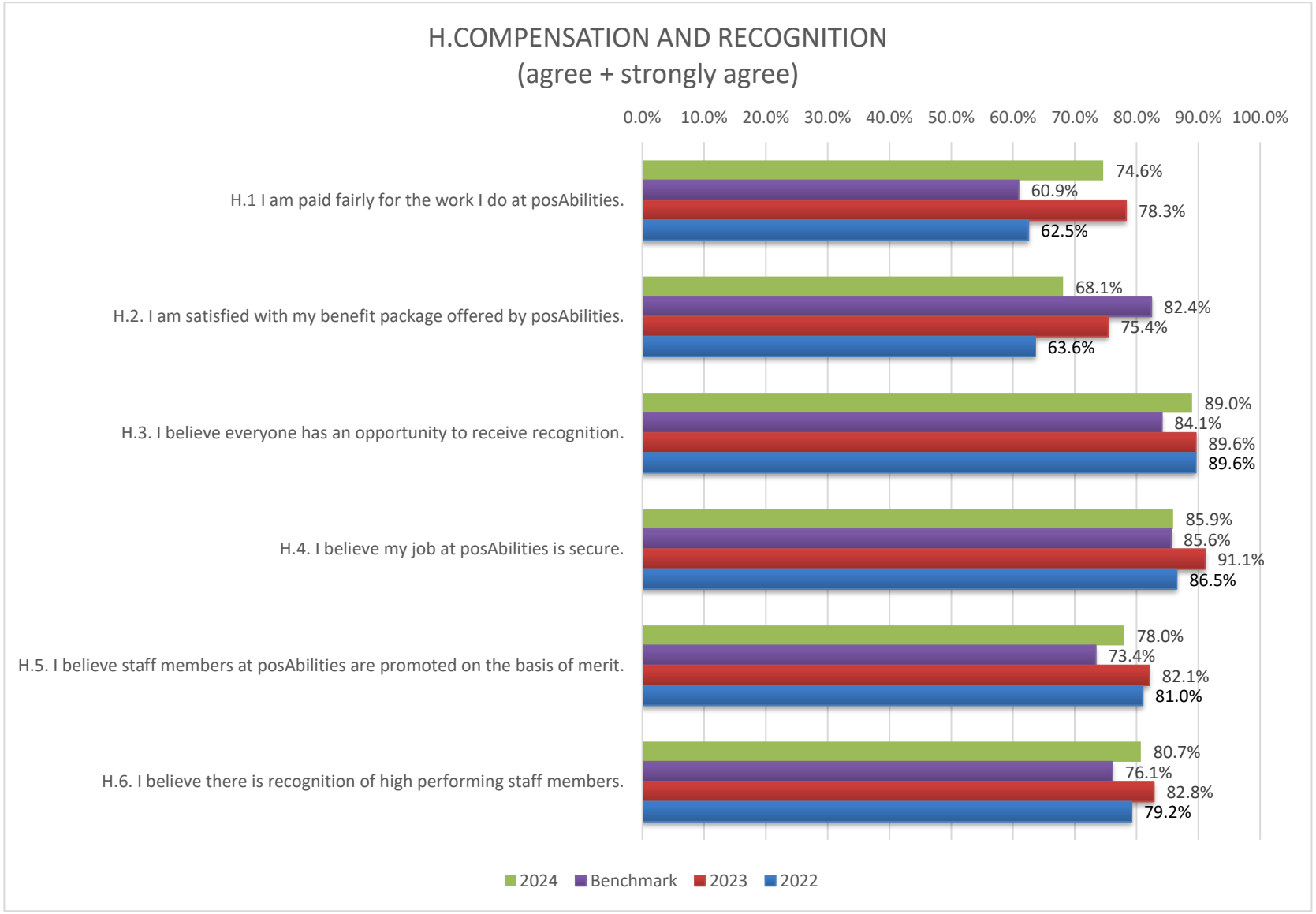
F. Staff Support/Environment



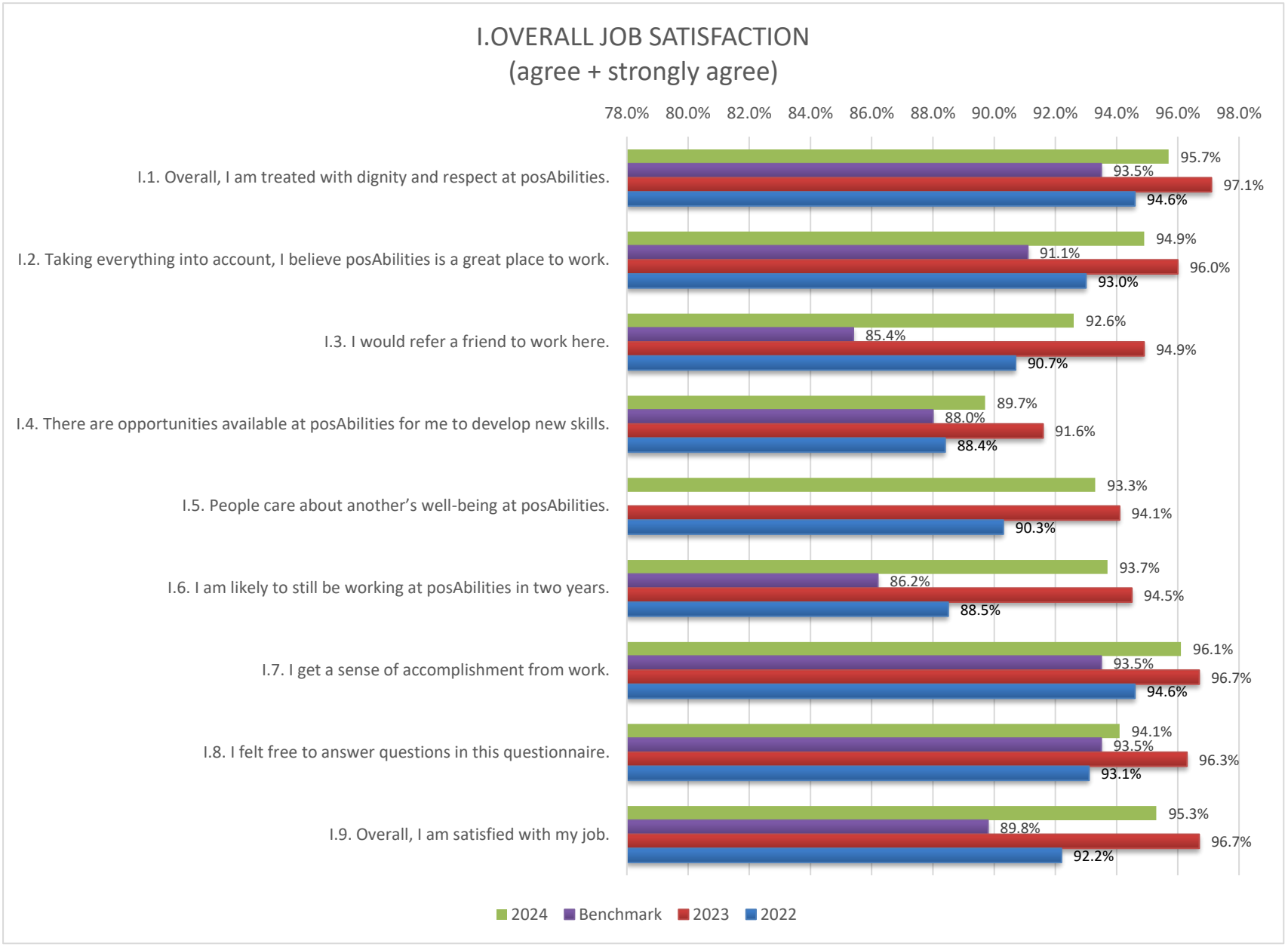
G. Staff Development



H. Compensation and Recognition



I. **Overall Job Satisfaction**



CUSTOM ITEMS – GENERAL - Agree + Strongly Agree	2022	2023	2024
1. My senior support worker treats me with respect.	94.6%	96.1%	95.2%
2. My senior support worker treats me fairly.	94.1%	93.5%	93.7%
3. My senior support worker shows a sincere interest in me as a person, not just as a team member.	91.6%	93.7%	92.6%
4. I believe my senior support worker encourages and supports my professional development.	92.1%	92.8%	91.2%
5. I feel comfortable discussing my job-related concerns and issues with my senior support worker.	91.0%	94.2%	91.7%
6. I receive praise and recognition from my senior support worker when I do a good job.	91.4%	93.2%	86.9%
7. My senior support worker gives me feedback that helps me improve my performance.	89.9%	90.9%	88.8%
8. My senior support worker encourages me to suggest better ways of doing work.	89.9%	92.7%	86.8%
9. I feel supported by my senior support worker.	91.4%	92.2%	90.2%
10. Overall, I am satisfied with my senior support worker or assistant supervisor.	90.4%	93.1%	90.3%
11. My senior support worker/assistant supervisor recognizes that making mistakes is part of doing business.	92.5%	92.6%	92.2%
12. My senior support worker or assistant supervisor genuinely seeks and responds to my suggestions and ideas.	91.2%	91.6%	87.3%
13. I find the weekly staff e-news informative.	86.9%	89.1%	86.1%
14. I regularly read the *pos***Abilities** blog in the weekly e-news or on the website.	58.0%	66.9%	62.1%
15. I regularly read *pos***Abilities**' quarterly newsletter "Imagine!"	68.3%	71.1%	69.0%
16. I regularly visit *pos***Abilities**.ca for news and resources.	55.2%	62.5%	58.4%
17. I regularly visit *pos***Abilities**' social media sites.	46.7%	53.6%	51.2%
18. I know how to use the family support inquiry form on Sharevision to make a referral to *pos***Abilities**' Community Engagement Department.	63.1%	69.1%	67.7%
19. I regularly read the People of *pos***Abilities** (POP) newsletter.	60.7%	64.9%	62.0%
20. I know where to find information about *pos***Abilities**' Diversity and Inclusion initiatives.	84.1%	87.1%	84.3%
21. I know where to find free resources to support my learning about diversity and inclusion.	85.0%	85.9%	85.1%
22. One or more of *pos***Abilities**' Diversity and Inclusion initiatives has been beneficial to me or my team.	72.8%	83.0%	71.8%
23. I have had the opportunity to participate in at least one team building experience this year.	75.6%	79.8%	72.5%
24. I know where to find *pos***Abilities**' Quality Improvement Plans.	74.1%	78.3%	72.1%

CUSTOM ITEMS – GENERAL - Agree + Strongly Agree	2022	2023	2024
25. I am familiar with *pos***Abilities**' Quality Improvement Plans.	69.3%	72.2%	67.9%
26. The Person-Centered Training is beneficial to the work I do.	90.2%	95.4%	93.2%
27. The Positive Behaviour Support Training has been beneficial to the work I do.	90.1%	94.6%	90.7%
28. One or more of *pos***Abilities**' employee wellness initiatives have been beneficial to me.	78.7%	79.7%	77.2%
29. I am familiar with the Wellness Initiative "Lifespeak".	81.4%	88.7%	85.6%
30. I am familiar with the Wellness initiative "Telus Health" (previously "Lifeworks").	90.0%	82.4%	82.9%
31. I am familiar with the Wellness initiative "iGrow".	85.3%	87.3%	86.5%

CUSTOM ITEMS – BENEFITS - Satisfied + Very Satisfied	2022	2023	2024
1. Please rate your satisfaction with *pos***Abilities**' dental care plan.	75.2%	79.5%	80.0%
2. Please rate your satisfaction with *pos***Abilities**' vision care plan.	67.1%	71.9%	71.0%
3. Please rate your satisfaction with *pos***Abilities**' paramedical practitioner coverage.	66.8%	72.7%	74.3%
4. Please rate your satisfaction with *pos***Abilities**' drug plan coverage.	66.2%	71.4%	73.6%

CUSTOM ITEMS – THE 12 STRETCHES[4]- "YES" responses	2022	2023	2024
1. I know where to find information on the 12 Stretches in Sharevision.	79.5%	86.6%	85.8%
2. know a few of the 12 Stretches without having to look them up.	63.7%	66.5%	66.4%
3. I have been involved in a conversation where one or more of the 12 Stretches were discussed/explored.	59.8%	66.5%	66.0%
4. I have been part of a situation where the 12 Stretches were part of the decision-making process.	45.9%	50.2%	50.0%

CUSTOM ITEMS – VALUES[5]	RESPONSE OPTIONS	2022	2023	2024
1. I knew *pos***Abilities**' values without having to read them above.	None/Some/All	Some: 50.8% All: 46.9%	Some: 51.1% All: 46.2%	Some: 53.9% All: 43.3%
2. *pos***Abilities** lives its values.	Almost never/Rarely/Sometimes/Mostly	Sometimes: 17.6% Mostly: 80.0%	Sometimes: 15.7% Mostly: 82.4%	Sometimes: 20.2% Mostly: 77.5%

[4] This custom item category was introduced in 2022.
[5] This custom item category was introduced in 2022.

CUSTOM ITEMS – VALUES[5]	RESPONSE OPTIONS	2022	2023	2024
3. I have been part of a situation where *pos***Abilities**' values were used to help with decision-making.	Yes/No	Yes: 75.8%	Yes: 80.1%	Yes: 80.1%
4. My personal values align with *pos***Abilities**' values.	Not at all/Not really/Somewhat /Completely	Somewhat: 31.6% Completely: 63.7%	Somewhat: 28.7% Completely: 69.7%	Somewhat: 32.7% Completely: 65.0%
5. I encounter beauty at work.	Almost never/Rarely/Sometimes/Often	Sometimes: 45.5% Often: 42.4%	Sometimes: 48.7% Often: 45.6%	Sometimes: 48.0% Often: 47.2%
6. I have profound moments of connection at work.	Almost never/Rarely/Sometimes/Often	Sometimes: 39.6% Often: 52.9%	Sometimes: 47.1% Often: 47.9%	Sometimes: 44.4% Often: 50.4%
7. I laugh at work every day.	Almost never/Rarely/Sometimes/Often	Sometimes: 37.6% Often: 51.0%	Sometimes: 35.8% Often: 57.3%	Sometimes: 34.5% Often: 59.9%
8. I think I am making a difference at work.	Almost never/Rarely/Sometimes/Often	Sometimes: 31.9% Often: 63.4%	Sometimes: 28.8% Often: 68.1%	Sometimes: 33.7% Often: 63.5%
9. My work is joyful.	Almost never/Rarely/Sometimes/Often	Sometimes: 43.9% Often: 49.4%	Sometimes: 42.0% Often: 51.9%	Sometimes: 42.2% Often: 52.6%
10. This work allows me to bring my whole self to work.	Almost never/Rarely/Sometimes/Often	Sometimes: 36.7% Often: 55.1%	Sometimes: 35.2% Often: 60.2%	Sometimes: 36.5% Often: 57.9%
11. This work feeds my need to bring value to the world.	Almost never/Rarely/Sometimes/Often	Sometimes: 31.0% Often: 62.0%	Sometimes: 31.2% Often: 66.2%	Sometimes: 30.2% Often: 66.3%
12. This work has made me a better person.	Almost never/Rarely/Sometimes/Often	Sometimes: 29.9% Often: 65.4%	Sometimes: 26.7% Often: 68.6%	Sometimes: 30.6% Often: 66.3%

CUSTOM ITEMS - Curiko[6]

Do you access Curiko?	2023	2024
Yes, for myself.	6.9%	9.2%
Yes, with someone I support.	31.4%	39.2%
No, I don't know what it is.	20.3%	8.4%
No, I know what it is but haven't yet.	25.3%	26.0%
I have, but not in a long time.	16.1%	17.2%

If you are not involved with Curiko, why? (check all that apply)	2023	2024
Never heard of it.	26.8%	8.9%
Don't have access to a device or reliable internet.	5.7%	4.5%
It's too confusing or complicated.	8.0%	5.1%
The experiences don't look interesting.	13.7%	9.6%
I don't have time.	38.2%	45.9%
We have a routine and want to stick with it.	18.3%	26.1%

If you are not involved, how do you see yourself participating in Curiko? (check all that apply)	2023	2024
Hosting an experience.	8.8%	6.9%
Co-hosting an experience with someone I support.	4.6%	6.3%

[6] This custom category was introduced in 2023

If you are not involved, how do you see yourself participating in Curiko? (check all that apply)	2023	2024
Attending an experience myself.	20.2%	19.6%
Attending an experience with people I support.	46.6%	32.8%
Moderating an experience.	12.9%	4.8%
I don't see myself participating at all.	32.1%	29.6%

If you do use Curiko, what is the benefit of participating in Curiko? (check all that apply)	2023	2024
Building relationships.	68.6%	62.1%
Building capacity.	31.3%	4.6%
Having time to engage in passions or interests.	62.7%	18.4%
Moments of novelty or breaking up the daily routine.	41.4%	12.6%
Changing power structures.	19.5%	2.3%

*pos*Abilities 2024 uSPEQ® Employee Climate Survey: Quality Improvement Response

Updates on the 2023 uSPEQ® Quality Improvement Plan:

Before we present the review of Custom Question responses and the Quality Improvement Plan for the 2024 survey year, we would like to share an update on the two outstanding action items from 2023:

Theme I. Access to Information Technology (IT) and Internet Connectivity (1)

Action: ShareVision version 4 implementation completed.

Update: ShareVision Version 4 will be fully launched by April 1, 2025.

Theme II. Professional Development and Training Opportunities (1)

Action: Diversity and Inclusion Committee table a Plan to guide the organization's role in reconciliation with Indigenous Peoples and to identify education opportunities for front- line staff.

Update: The I.D.E.A. Committee has established a subcommittee to develop this plan, and is currently researching options that are responsive to learners at all stages of awareness/knowledge regarding Indigenous Peoples in Canada. Some employee groups have already received training (e.g., Explore, LBSS) and more opportunities for individual and small group learning are planned for 2025. Since 2021, posAbilities has provided access to articles, webinars and opportunities for community engagement during cultural days of significance (June 21, September 30) using tools provided through the Canadian Centre for Diversity and Inclusion's Knowledge Repository.

Employees can follow our progress towards implementing our action items on ShareVision at any time.

Custom Item Analysis

Please see the 2024 USPEQ® Employee Climate Survey Standard Report for details.

We do not have benchmark data for our custom questions. However, we ask each question for at least three years to assess progress, barriers and trends. As with the main portion of the survey, we may consider setting targets and determining QIP action items where we scored below those targets.

Relationships between employees and their supervisors

The first 12 questions measure the relationship between employees and their **Senior Support Worker/Supervisor/Community Inclusion**

Coordinator/Community Housing Coordinator. Casuals may have more than one supervisor. The trend is a very slight decline in satisfaction, however it is not yet statistically significant. All trends are monitored, and actions will be taken as needed.

Communications, Diversity and Inclusion, Wellness and Quality Improvement

The same slight downward trend applies to questions about Communications, posAbilities' Diversity and Inclusion Committee and knowledge of Quality Improvement Plans and Processes. Familiarity with Wellness initiatives remains high.

The Community Engagement team will continue to strive towards greater satisfaction with its communications and engagement initiatives over the coming year. The team began several projects in 2023-24 that span more than one fiscal year, and which it believes will make a positive difference.

Their projects are centred on:

- increased access to online information about posAbilities and its services;
- increased engagement within our organization; and
- continued, meaningful engagement with community partners.

Examples of this work include: websites refreshed to better support neurodiversity, more targeted promotions of the work of our committees (e.g. I.D.E.A, Inclusion Art Show, Wellness/iGrow), and the promotion of our community partnerships. Please see the next page for new action items.

Recommendations for the 2024 Quality Improvement Plan

Compensation: H. 1, H. 2, H.5, H. 6

Action 1: Share and review the *posAbilities Compensation Frequently Asked Questions* document with all employees. Post the FAQ on ShareVision, using each program's required reading communication book, and review/discuss at Pod Meetings in by June, 2025.

Action 2: Add a new set of custom questions to the 2025 uSPEQ® Employee Climate Survey to probe the reasons behind the lower satisfaction in indicators H.5, and H.6.

Rationale: We recognize that the indicators H.5, staff promoted on merits and H 6. recognition of high-performing staff, are subject to interpretation. The terms *merit* and *high-performing* can mean different things to different people. This makes it difficult to identify a clear path to making improvements.

Communications: B. 3

Action 3: Add new custom question(s) to the 2025 uSPEQ® Employee Climate Survey to probe the reasons behind the lower satisfaction reported in B.3, asked for input on job decisions.

Rationale: Leadership need to identify the kinds of decisions employees are seeking more input into so that they can better address this concern.

Custom Questions Communications and Engagement

Action 4: Refresh three of posAbilities' primary websites to attain high standards of accessibility by September, 2025.

Action 5: Deliver employee and participant training in the safe and joyful use of social media by March 31, 2026.

Action 6: Pilot the creation of short-form video newscasts (led by the Social Media Fellowship) and other storytelling to enhance employee engagement.

Research, Development, and the 12 Stretches

More than half of respondents in 2024 have been part of discussions around the Stretches (66%), or part of decision-making that involved them (50%). This hasn't changed much from 2023 (67% and 50%, respectively). The Stretches are currently part of orientation, and the book from which they come—*The Trampoline Effect: Redesigning our Social Safety Nets*—is available to order for free through Sharevision.

There are also facilitated conversations on the Stretches that occur throughout the year, but more could be done. posAbilities has engaged InWithForward to develop and test a learning platform with our agency, in which all of our collective learning—whether ideas, methods or tools, or the Stretches—can be shared, applied and reflected upon by employees. We also hope to grow a community of practice through it. The information will be delivered in a variety of formats such as articles, videos, and touchpoints from a decade of social research and development.

Action 7: posAbilities will invite employees to join the learning platform (through Substack), to receive its newsletters, and to join the related community of practice events beginning in April 2025.

Personal and organizational values

The survey demonstrated significant alignment between personal and professional values, including a passion for learning and inclusion. This alignment is desirable because it means we're all on the same page when it comes to what's important to us. Having shared values make it easier to achieve the purposes we set out for ourselves and to overcome difficulties along the way.

Meaning at Work

The custom questions around meaning at work reveal the extent to which people find a sense of beauty, joy, and connection in their everyday. The results are gratifying because they affirm that there is something important and life-affirming about this work we do, and this community we belong to.

Curiko

The final set of questions related to the **Curiko** platform. 2023 was the first year we asked questions about it, and we will continue to collect data around our uptake of Curiko and our ability to effectively communicate about it.

Although awareness and use of Curiko has increased between 2023 and 2024, a quarter of respondents each year indicate that they haven't gotten around to trying it. The two biggest reasons seem to be that employees don't feel they have time to incorporate Curiko experiences into their schedules, or that they have routines that are working for them/persons served, and don't feel the need to augment it with Curiko. Also, from the comments in 2024, it appears that the time and location of experiences could be a barrier to participation.

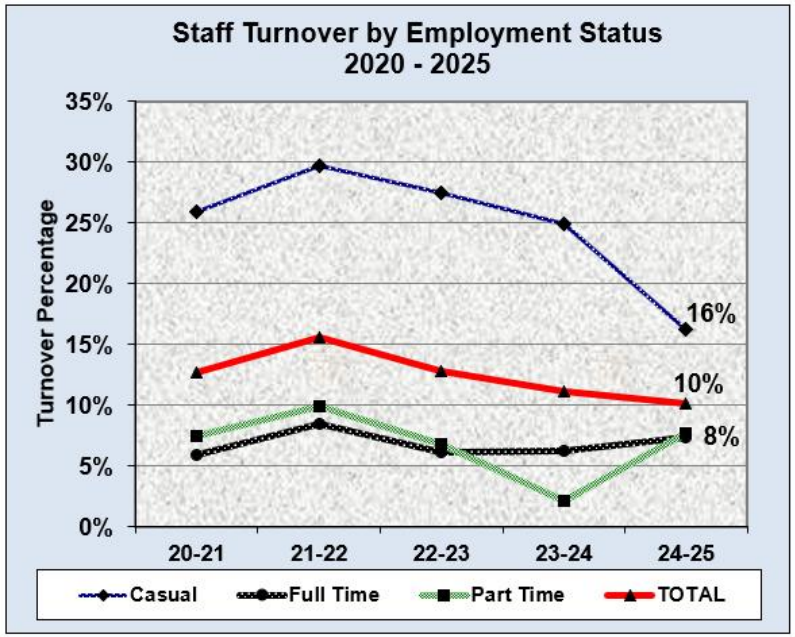
Action 8: This feedback will go directly to the Curiko team for action.

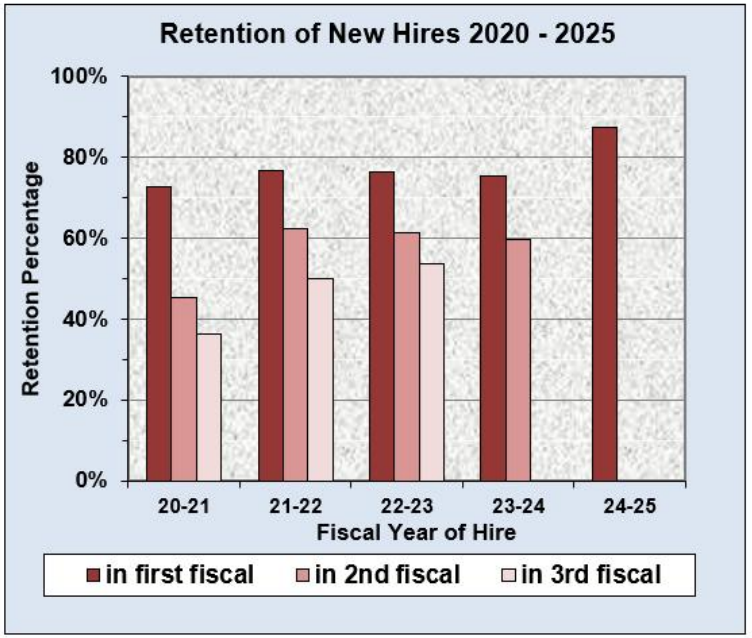
5. KEY BUSINESS FUNCTIONS

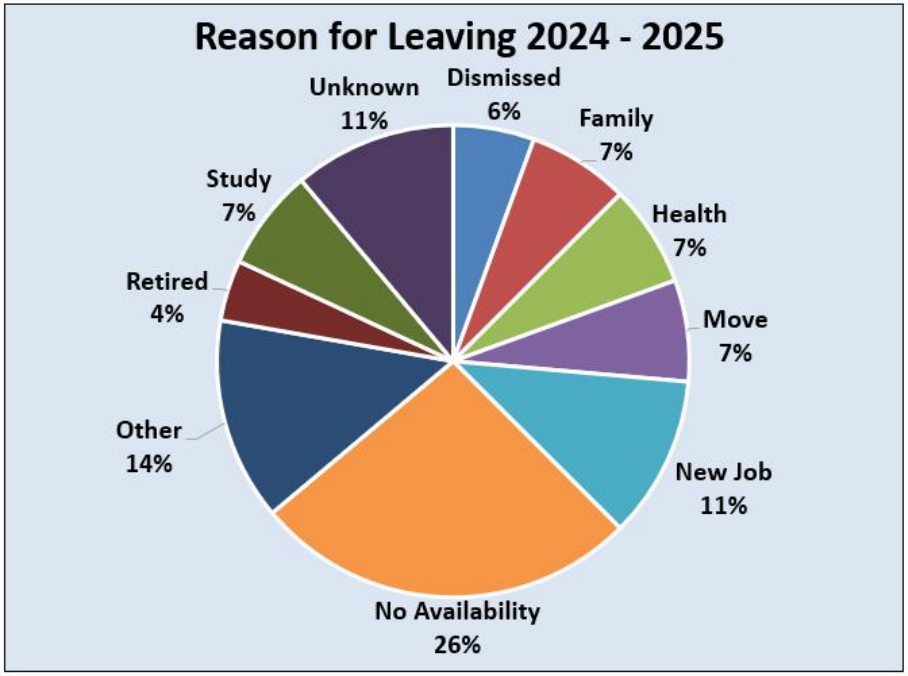
5.1 Staff Utilization

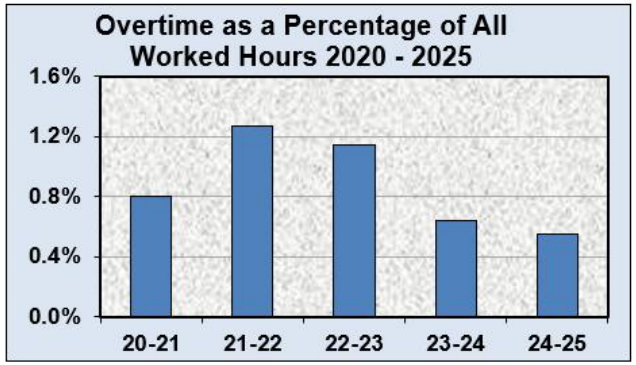
OBJECTIVE: To increase the efficient utilization of our staff
TIME OF MEASUREMENT: April 2025
OBTAINED BY: Human Resources

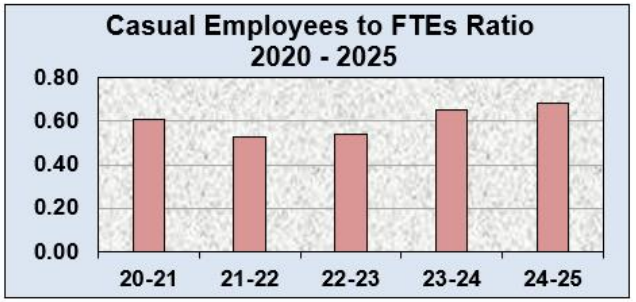
Measure	Applied To	Data Source	Target FYE 2025	Outcome FYE 2025	Target FYE 2026
% of staff exits	All staff in reporting period	HRIS	11%	10%	10%
% of new hires retained after two years	All staff in reporting period	HRIS	65%	60%	65%
Casual Employees to Full Time Equivalent (FTE) ratio	All casual staff in reporting period	HRIS	0.67	0.69	0.66
Overtime as a % of total hours worked	All staff in reporting period	Staff Scheduling System	0.5%	0.6%	0.5%


Staff Turnover by Employment Status
2020 - 2025
Turnover Percentage
35%
30%
25%
20%
15%
10%
5%
0%
20-21
21-22
22-23
23-24
24-25
16%
10%
8%
Casual
Full Time
Part Time
TOTAL


Retention of New Hires 2020 - 2025
Retention Percentage
100%
80%
60%
40%
20%
0%
20-21
21-22
22-23
23-24
24-25
Fiscal Year of Hire
in first fiscal
in 2nd fiscal
in 3rd fiscal


Reason for Leaving 2024 - 2025
Unknown
11%
Dismissed
6%
Family
7%
Health
7%
Move
7%
New Job
11%
No Availability
26%
Other
14%
Retired
4%
Study
7%


Overtime as a Percentage of All
Worked Hours 2020 - 2025
1.6%
1.2%
0.8%
0.4%
0.0%
20-21
21-22
22-23
23-24
24-25


Casual Employees to FTEs Ratio
2020 - 2025
0.80
0.60
0.40
0.20
0.00
20-21
21-22
22-23
23-24
24-25

Key Findings/Trends

- The overall turnover rate decreased from 11% to 10% compared to the previous year, due to a significant decline in the turnover rate for casual employees. The most common reasons for people to leave our organization were a new job and no or limited availability (casual employees). Combined these make up more than 1/3 of people leaving us this past year. The percentage of people leaving us due to health reasons increased from 7% to 12%. Retirements increased from 1% to 4% of all people leaving.
- Of those hired in the last fiscal year, 87% are still with us, up from 75% last year. For staff hired in the last two years retention is at 60%, similar to the previous reporting year.
- The ratio of casual employees to Full Time Equivalent (FTEs) shows the size of our pool of casual workers relative to the size of our regular workforce. This is an indicator of our ability to have casual workers backfill shifts when regular employees are away. The ratio this year was 0.69, a slight increase from the previous year when it was 0.66.
- The total number of employees was 637, an 11% increase from the previous year. We hired 143 new employees, which is significantly more than the 104 in the previous year.
- Overtime hours remained virtually unchanged at 0.6% of all hours worked.

Interpretation of results

- The overall turnover rate has continued its downward trend. Turnover of casual employees specifically stands out at a historic low of 16%. Turnover of regular staff increased slightly compared to last year.
- The increase in the number of new hires and total employee count is mostly due to acquiring six new Programs and staffing for them, due to a Direct Service Award of the Community Housing and Community Inclusion contracts of an agency going out of business.
- The trend of people postponing retirement continues. The percentage of employees in the bargaining unit aged over 65 almost doubled over the last 5 years and now stands at 9.2% from 8.1% the previous year.

Follow-up and proposed action

- We are waiting for a software update this year, which will enable us to further automate our system for monthly shift call-outs, making it more efficient and less time-consuming. It is expected that this will improve the efficient utilization of our casual staff.
- A specific focus will be on the recruitment of casual staff for the newly acquired Programs. The ratio of casual to regular staff in these Programs needs to increase in order to efficiently backfill shifts.
- We continue to actively offer practicums and maintain partnerships with colleges. Practicums are of strategic importance to connect with and recruit a new generation of workers who can carry our organization into the future.

Monitoring

- Report quarterly on staff utilization and on the use of overtime.
- Monthly monitor the number of new casual hires and the size of the casual pool.
- Team Managers to evaluate all data quarterly.

5.2 Occupational Health and Safety Performance

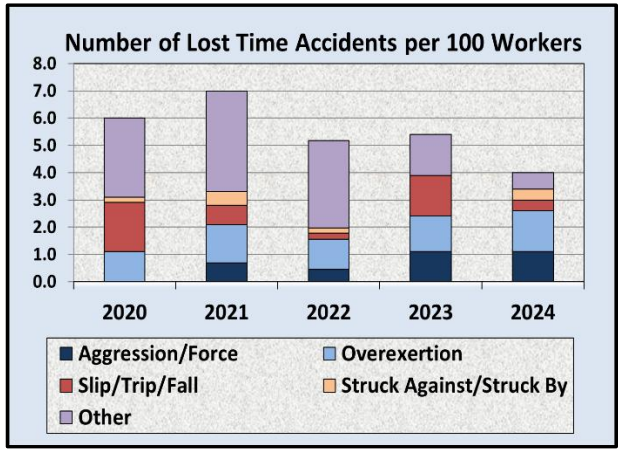
OBJECTIVE To Reduce Occupational Incidents and Associated Cost
TIME OF MEASUREMENT December 2024
OBTAINED BY Human Resources

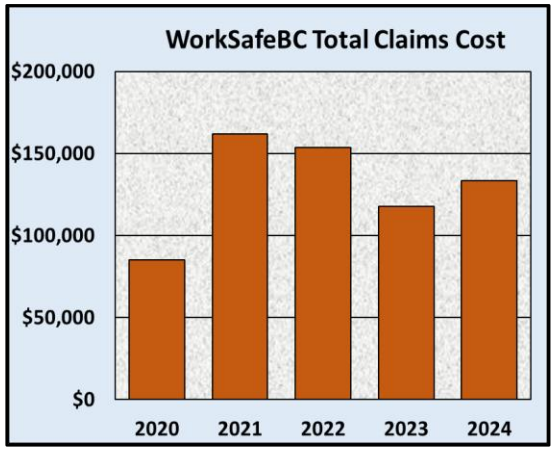
Measure	Applied To	Data Source	Target 2024	Outcome 2024	Target 2025
Number of lost time accidents resulting from "Aggression/force" per 100 employees	All staff in 2024	DMI	1.0	1.1	1.1
Number of lost time accidents resulting from "Overexertion" per 100 employees	All staff in 2024	DMI	1.5	1.5	1.0
Number of lost time accidents resulting from "Slip/Trip/Fall" per 100 employees	All staff in 2024	DMI	0.8	0.4	0.5
Number of lost time accidents resulting from "Struck By/Struck Against" per 100 employees	All staff in 2024	DMI	0.5	0.4	0.4
Number of lost time accidents resulting from "Other" per 100 employees	All staff in 2024	DMI	1.0	0.6	0.6
WorkSafeBC Claims Costs Total	All Staff in 2024	WorkSafeBC	$90,000	$133,000	$90,000

Limitations

- Lost Time Accident results are reported by the Disability Management Institute (DMI) for the calendar year, not the fiscal year.
- Claims costs at the time of reporting may not be final as claims from the reporting year may still being open and accruing costs.

Key Findings / Trends





- The total number of Lost Time Accidents (LTAs) per 100 workers was 4.0, a decrease from 5.4 the previous year.
- The largest contributor to lost time accidents was Overexertion, at 1.5, while the lowest were Slip/Trip/Fall and Struck Against/By, at 0.4.
- The number of workdays lost increased from 484 in 2023 to 305 in 2024.
- Total claims costs were $133,000. This is up from $118,000 the previous year.

Interpretation of Results

- The decrease in the number of LTAs is mainly due to the fact that 2024 was the first year without any Covid-19 claims.
- The uptick in claims costs compared to the previous year is explained by a few expensive claims where employees received wage loss benefits for an extended period of time.
- For the fourth year running we received a discount (23.8%) on the WorkSafeBC base premium rate in the community housing services category, as our claims history was better than the average amongst other organizations. Overall the discount saved us close to $150,000 in our 2024 WorkSafeBC premiums. The overall performance of our health and safety program remains stable.
- This year the COR audit of our occupational health and safety program resulted in a passing score of 94%. Continuing scores in the 90s year after year affirm our strong health and safety culture and the contributions of all our employees to make this happen.

Monitoring

- Continuous review of WSBC Injury Reports and Accident Investigations by Managers, HR, and the JOSH Committee to ensure ongoing mitigation and prevention of risks.
- Monthly review by our JOSH Committee of accident investigations, worksite safety inspections, fire and disaster drills and OSH training taken, as well as annual inspections of all of our worksites to review OSH compliance.

- Annual review of our OSH Program and practices as part of our COR audit.
- Quarterly review of lost time incident trends and results as well as claims costs by Directors, Managers and JOSH Committee.

6. CONCLUSION

The Outcomes Management Report provides an overview of the types of services we offer, the results obtained during FYE2025 and the steps we take to ensure that these services are beneficial and rewarding to the people we serve.

In line with our commitment to continuous quality improvement, the results and recommendations throughout this Report will be reviewed by the leadership team and the Board of Directors.

The information presented in this Report will help us:

- focus our efforts to continue to achieve the best possible outcomes for persons served
- provide ongoing information about the organization's performance
- continually enhance service delivery and the organization
- provide proof of continuous service improvement

APPENDIX: PROGRAMS AND SERVICES: OUTCOMES DATA AND RESULTS

The following section provides detailed outcomes data and results for our services by service stream. For items where fewer than ten responses were received, results are not reported. We strive for at least a 25% survey response rate. A low number of responses for an item does not allow us to draw reliable conclusions about overall consumer/family satisfaction. The following table provides response rates by service stream for the Person Served (Consumer) and Family Member Surveys in FYE2025.

Service Stream	Consumer Surveys Distributed	Consumer Surveys Received	Consumer Response Rate	Family Surveys Distributed	Family Surveys Received	Family Response Rate
BCC	41	0	0%	35	0	0%
Community Employment Services	77	11	14%	83	11	13%
Community Housing Program	80	73	91%	70	8	11%
Community Integration	96	87	91%	101	9	9%
Explore	13	1	8%	9	1	11%
Shared Living	63	56	89%	50	7	14%
Supported Living	55	37	67%	46	4	9%

A.1 Home Living Services

All of our Home Living services focus on inclusion. Persons served receive assistance and coaching in the areas of health and safety, community access, money management, nutrition, problem solving, relationship building and other aspects of daily living. We provide three distinct Home Living services: Shared Living Services, Supported Living Network, and Community Housing.

A.1.1 Shared Living Services

Program Overview:

Shared Living Services offers a Community Living alternative in its inclusiveness, normal, daily living routines, providing family, friends, job training, recreational opportunity and privacy and comfort of a family home. This arrangement can offer richer opportunities for developing natural relationships and social circles. It also increases the likelihood of having a more genuine and meaningful experience of community life.

In response to the need for Home Living options for persons served with developmental disabilities, *pos***Abilities** developed Shared Living Services to:

- Provide warm supportive environments to persons with disabilities.
- Enhance the lives of persons served to achieve greater independence with assistance, nurturing and inclusion by the shared living host family.
- Provide environments where our persons served thrive in an atmosphere that is encouraging and consistent.
- Provide, a means to a lifestyle which supplies stimulation, activity and identification and assistance in achievement of personal goals for our persons served.

Stakeholder Survey Results:

FYE2025: Shared Living Providers Survey

RESPONDENTS 47 of 73 = **64%**

SURVEY METHOD Satisfaction Surveys were emailed to Shared Living Providers[7]

OBJECTIVE To increase positive responses in each domain each year.

Survey Item	2023 Response (agree + strongly agree)	2024 Response (agree + strongly agree)	2025 Response (agree + strongly agree)
1. I am treated with respect by my Coordinator.	100.0%	100.0%	93.6%
2. My Coordinator has knowledge to support me with problem solving.	94.4%	96.4%	93.6%
3. I get the support I need from my Coordinator when questions or concerns arise.	91.7%	96.4%	93.6%
4. My Coordinator communicates with me consistently.	97.2%	96.4%	91.5%
5. My Coordinator offers beneficial information about upcoming events and workshops/information sessions.	94.6%	100.0%	91.5%
6. The Shared Living Contractor Agreement is easy to understand.	94.6%	85.7%	85.1%
7. I am provided with sufficient information to support the matching and transition of a person into my home.	80.6%	75.0%	78.3%
8. My Coordinator facilitates meetings to support the person served to identify goals.	91.4%	96.4%	85.1%
9. My Coordinator provides guidance to the Shared Living provider to assist persons served to pursue their goals.	88.9%	89.3%	85.1%
10. My Coordinator provides me with information about opportunities for myself and the person I support.	75.7%	92.6%	85.1%
11. I have found Open Future Learning to be a helpful tool for me to do my job.	N/A	N/A	60.9%
12. I know how to apply for POP insurance.	N/A	N/A	73.9%
13. I know when I need to re-apply for POP insurance.	N/A	N/A	63.0%
14. I know how to apply for the CLBC Home Sharing Property Support Program	N/A	N/A	54.3%

[7]Note items 11-14 were new for 2025.

Key Findings:

- In FYE2025, our Shared Living Contractor Survey response rate of 64% was one of the highest ever, a 30% increase from last year's response rate of 34% and following an upward trend from 2023 when we achieved a 27% response rate.
- We continue to engage the Shared Living Team in supporting the distribution of surveys and we have also deployed multiple distribution methods including phone, in-person, and emailed surveys. These efforts have contributed to the increased response rate.

Combined "agree" and "strongly agree" scores were above 90% for five of fourteen items on the survey and above 85% for nine of fourteen items.

Follow-up and Proposed Action:

- Four new items were added this year and those items showed much lower scores; all below 80%. We obtained valuable information from the result and it will inform actions going forward to provide more support to Home Share Providers on use of Open Future Learning, POP insurance, and the CLBC Property Support Program. Shared Living Coordinators will continue to work with Shared Living Contractors to ensure they are enrolled in WorkSafe POP, Open Future Learning and understand the CLBC Property Support Program.
- Item 7 'I am provided with sufficient information to support the matching and transition of a person into my home', also scored below 80%. This item did however show a slight increase from 75.0% last year to 78.3% this year. The Shared Living Team continues to refine the matching process to provide strong matches, resulting in successful, long-term placements.

Outcomes Data and Results:

The following outcome results were obtained from *pos***Abilities**' records and from surveys completed by persons receiving Shared Living Services and their family members. These outcome results apply to persons participating in Shared Living services and their families.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Minimize the number of incidents involving verbal and physical aggression	Ratio of # of aggressive incidents involving verbal and physical aggression to # of persons served	0.1	0.0	0.1	✓
Minimize the number of validated complaints that are processed through the formal complaint resolution process	# of validated complaints that are processed through the formal complaint resolution process	1	0	0	✓
Minimize the number of medical/treatment errors	# of medical/treatment errors to # of persons served	0.02	0.00	0.01	✓

Key Findings

- The file review revealed that we have met our expected targets regarding the minimization of incidents involving verbal and physical aggression, the reduction of medical/ treatment errors, as well as the minimization of validated complaints.

Effectiveness					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Have the ability to do the things that are important to the person served	# and % of persons served who report that they are generally able to do things they want to do when they want to do them[7]	90%	48 86%	44 83%	✗
Provide an individualized model of Home Living support which meets the needs, wants, and desires of the persons served	# of persons receiving Shared Living Services who report they like where they live	85%	53 95%	51 91%	✓
Encourage friendships, recreational opportunities, and privacy and comfort of a family home through service utilization	Number of persons receiving Shared Living Services	90[8]	126	135	✓

[7] We assume the lack of financial resources is a barrier to achieve certain outcomes such as engagement in community activities (either due to the cost of participating in the activities, or the cost of transportation to get to those activities).The lack of financial resources can also be a barrier to access employment and volunteer opportunities mainly due to the cost of transportation to get to the sites.We will track this indicator to analyze its relationship with SL22, and also to see if the number of persons served who report they would like to find work opportunities (Q6) is correlated to the number of persons served who report they lack financial resources to do the things that are important to them.

[8] The total number of persons served is not entirely up to the organization and it can vary depending on external factors. We use this target as a projection, however it is subject to change. This indicator is not specifically intended to meet a target, but to indicate how many persons received the service during the reporting period.

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maintain the length of time from referral to service initiation	% of referred persons for whom services were initiated within 30 working days of referral	85%	83%	69%	✗

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Promote overall safety	# and % of persons served who report feeling safe at *pos***Abilities**	95%	55 98%	52 95%	✓
Treat persons served and families with respect	# and % of persons served who report that people at *pos***Abilities** respect them	95%	54 96%	52 95%	✓
Value and acknowledge each person's individuality	# and % of persons served who report that staff members at *pos***Abilities** listen to them	90%	54 96%	52 95%	✓
Enhance relationships and social circles	# and % of persons served who report that they are more connected to people in their community since they started working with *pos***Abilities**	90%	48 86%	38 72%	✗

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Enhance community-based resilience	# and % of persons served who report that staff members tell them about other services they can get	80%	51 91%	40 82%	✓
Promote self-determination and abilities to make their own decisions	# and % of persons served who report they are able to make choices about their care	90%	50 89%	49 91%	✗
Provide Education on rights and responsibilities	# and % of persons served who report staff have reviewed rights and responsibilities with them in the past year	95%	54 96%	46 85%	✗
Maximize overall satisfaction with service	# and % of persons served who report they are happy with the services they get	95%	52 93%	50 91%	✗

Key Findings:

- This year's survey results for Shared Living show we met two of three effectiveness targets for persons served. Although we fell slightly short on one of the targets, the score was above 80%.
- Our score for service access fell to 69% this year, well below our target of 80%.
- In the area of input, we met five of eight targets. Of the three scores below target, only one fell below 80%.
- Note that this year, due to extremely low response rate, scores on items from the family member survey are not reported.

Follow-up and Proposed Action:

- Regarding the time frame between referral and service initiation, we continue to work to make placements as soon as possible after a referral is made and a family/person served has confirmed their choice. Certain factors that are out of our control may affect this time frame including CLBC processes, staffing, and availability of the family.

- In the coming year, another focus area for Shared Living will be setting and reviewing maintenance goals and reviewing rights with providers and persons served. Previously used videos did not work for all persons served so in the coming year, multiple formats for rights review will be made available. We will also make use of a new plain language rights document recently developed. This action will enhance knowledge of rights as well as promoted self determination and the ability to make decisions amongst person served.
- In terms of enhancing relationships and social circles, the Shared Living Team will initiate a practice of sharing the posAbilities E-News with providers as well as providing information about Curiko, Special Olympics, and Real Talk. Information about events organized by our Supported Living Team will also be shared such as Buddy Club and Camp Sasamat.
- In addition to the focus on ensuring Person Served and Families are aware of their Rights and Responsibilities, Coordinators will be reviewing the role of the Coordinator with the person served.

A.1.2 Supported Living Network

Program Overview:

The Supported Living Network (SLN) program assist persons served with developmental disabilities to live as independently as possible within our communities.

A staff person supports the person served in the areas of daily life and self-care skills, home maintenance, and social inclusion. Supported Living staff also provides a crucial monitoring service to ensure health and safety needs are met and supported.

The program provides support in the following areas:

- Assisting with medical appointments and planning.
- Support to plan meals and buy food / other necessities.
- Assistance with budgeting, personal banking and other financial issues.
- Support with BC Housing and/or landlord and building requirements.
- Providing several community-based social programs to enhance quality of life and social interaction, such as community kitchens, community coffee groups, women with disabilities support groups, supported vacations.

Outcomes Data and Results:

The following outcome results were obtained from *pos***Abilities**' records and from surveys completed by persons receiving Supported Living services and their family members. These outcome results apply to persons participating in Supported Living services and their families.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Minimize the number of incidents involving verbal and physical aggression	Ratio of # of aggressive incidents involving verbal and physical aggression to # of persons served	0.02	0.04	0.00	✓
Minimize the number of validated complaints that are processed through the formal complaint resolution process	# of validated complaints that are processed through the formal complaint resolution process	1	0	0	✓

Key Findings:

- In FYE2025, we met both Key Monitoring targets. This included a reduction in the number of aggressive incidents.

Efficiency					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Deliver support in the areas of daily life and self-care skills, home maintenance, and social inclusion through Supported Living Network service utilization	Number of persons served in SLN programs	85	96	93	✓
Maximize staff retention	# of staff who held their position for more than 2 years at the same location (reduction of turnover compared to previous reporting period)	10% increase (compared to previous reporting period)[9]	19	15	✗

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maintain the length of time between referral and service initiation	% of referred persons for whom services were initiated within 30 working days of referral	85%	100%	57%	✗

[9] Although the target for this measure is a 10% increase, we consider it a satisfactory result if there is no decrease from the previous year.

Effectiveness					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Have the ability to do the things that are important to the person served	# and % of persons served who report that they can do the things they want to when they want to do them[10]	90%	31 91%	32 94%	✓
Promote overall safety	# and % of persons served who report feeling safe at *pos***Abilities**	95%	33 97%	34 100%	✓
Promote community safety and confidence	# and % of persons served who say they know more about staying safe in their community since receiving SLN services	85%	31 91%	32 100%	✓
Enhance overall wellbeing	# and % of persons served who report that their life is generally better since they started working with *pos***Abilities**	90%	29 85%	34 100%	✓
Assist persons served in meeting or making progress toward Person Centered Planning goals	% of total goals which were reported as partially achieved, achieved, or ongoing maintenance	85%	83%	86%	✓

[10] We assume the lack of financial resources is a barrier to achieve certain outcomes such as engagement in community activities (either due to the cost of participating in the activities, or the cost of transportation to get to those activities).The lack of financial resources can also be a barrier to access employment and volunteer opportunities mainly due to the cost of transportation to get to the sites.We will track this indicator to analyze its relationship with SLN23 (overall satisfaction), and also to see if the number of persons served who report they would like to find work opportunities is correlated to the number of persons served who report they lack financial resources to do the things that are important to them.

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Treat persons served and families with respect	# and % of persons served who report that people at *pos***Abilities** respect them	95%	33 97%	34 97%	✓
Value and acknowledge each person's individuality	# and % of persons served who report that staff members at *pos***Abilities** listen to them	95%	33 97%	33 94%	✗
Enhance relationships and social circles	# and % of persons served who report that they are more connected to people in their community since they started working with *pos***Abilities**	80%	26 76%	29 97%	✓
Promote self-determination and abilities to make their own decisions	# and % of persons served who report they are able to make choices about their care	90%	28 82%	32 94%	✓
Provide education on rights and responsibilities	# and % of persons served who report that staff have reviewed rights and responsibilities with them in the last year	95%	28 82%	31 94%	✗
Maximize overall satisfaction with service	# and % of persons served who report they are happy with the services they get	95%	33 97%	33 97%	✓

Key Findings:

- We met 10 of 14 targets overall, showing an improvement in eight of those with all but one scoring above 85%.
- The only item with a score below 80% was service access, which fell back to 57%. This was a reversal of an upward trend dating back to FYE2021.
- The lowest scoring item in FYE2024, 'persons served who report that they are more connected to people in their community since they started working with *pos***Abilities**,' showed an increase of 21% in FYE2025, from 76% to 97%.

Follow-up and Proposed Action:

- Staff retention remains an area of focus across all service streams and our HR department, Wellness, and Inclusion, Equity, Diversity, and Accessibility (IDEA) Committees continue to work on strategies and implement initiatives to enhance employee wellness and improve retention. Two initiatives rolling out this coming year are iShare, allowing employees to receive support to share elements of their own culture, and IDEA Leadership training, to support Leaders in creating more inclusive and culturally competent teams.
- Regarding the time frame between referral and service initiation, we will continue to work to initiate service as soon as possible after a referral is made and a family/person served has confirmed their choice. However, certain factors that are out of our control may affect this time frame including CLBC processes, staffing, and availability of the family
- The Supported Living Network will continue to engage Persons Served in diverse social opportunities such as Buddy Club, Community Kitchen, Curiko, Community Gardening, Challenger Baseball, and the Inclusion Art Show. This will support offering opportunities to persons served according to their individual areas of interest.
- An additional action with respect to valuing and acknowledging each person's individuality, a comprehensive review is underway regarding how goals are established, reviewed, and tracked. All Supported Living Network Persons Served goals will be assessed and refreshed where necessary.
- In the coming year, another focus area for Supported Living will be reviewing rights with persons served. We will make use of a new plain language rights document introduced in FYE2025.

A.1.3 Community Housing

Program Overview:

*pos***Abilities** Community Housing programs provide 24-hour care and semi-independent living. This level of service is designed to meet the unique needs of the person served who live in the home. Services may include personal care, health planning, and behaviour support. For semi-independent living, staff support is focused on assisting persons served to develop independent living skills and build on the persons served's existing strengths.

Outcomes Data and Results:

The following outcome results were obtained from *pos***Abilities**' records and from surveys completed by persons receiving Community Housing services and their family members. These outcome results apply to persons participating in Community Housing services and their families.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Move persons served to more or less independent living arrangements according to changes in their needs[11]	# of persons served that move to a more independent living arrangement	N/A[4]	1	0	N/A
	# of persons served that move to a less independent living arrangement	N/A[4]	2	5	N/A
Minimize the number of incidents involving verbal and physical aggression	# of aggressive incidents involving verbal and physical aggression to # of persons served	1.00	1.74	1.67	✗
Minimize the number of validated complaints that are processed through the formal complaint resolution process	# of validated complaints that are processed through the formal complaint resolution process	1	0	0	✓
Minimize the number of	# of medical/treatment errors to # of	0.90	1.31	1.87	✗

[11] Persons served are moved to more or less independent living arrangements according to their needs and desires. We are interested in tracking these re-arrangements and making sure placements respond to person served's needs and desires. However, this indicator is not specifically intended to meet a target. The rearrangement frequency is dependent on the changing needs of persons served.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
medical/treatment errors	persons served				

Efficiency					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Promote service utilization through provision of staffed homes	Number of persons served in CH programs	80[12]	80	83	✓
Maximize staff retention	# of staff who held their position for more than 2 years at the same location (reduction of turnover compared to previous reporting period)	10% increase (compared to previous reporting period)[13]	143	116	✗

Key Findings:

- Although the number of aggressive incidents decreased in FYE2025 and show a downward trend, they remain above our target.
- The number of medication errors unfortunately increased and continues to be above our target.

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maintain the length of time between referral and service initiation	% of referred persons for whom services were initiated within 30 working days of referral	85%	100%	40%	✗

[12] The total number of persons served is not entirely up to the organization and it can vary depending on external factors.We use this target as a projection; however, it is subject to change.This indicator is not specifically intended to meet a target, but to indicate how many persons received the service during the reporting period.We also fill vacancies based on suitability and so vacancies remain unfilled until a compatible match is found.

[13] Although the target for this measure is a 10% increase, we consider it a satisfactory result if there is no decrease from the previous year.

Effectiveness					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Have the ability to do the things that are important to the person served[14]	# and % of persons served who report that they can do the things they want to when they want to do them	90%	42 72%	52 93%	✓
Promote overall safety	# and % of persons served who report feeling safe at *pos***Abilities**	95%	53 91%	62 98%	✓
Assist persons served in meeting or making progress toward Person Centered Planning goals	% of total goals which were reported as partially achieved, achieved, or ongoing maintenance	80%	81%	82%	✓

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Treat persons served and families with respect	# and % of persons served who report that people at *pos***Abilities** respect them	95%	53 91%	56 95%	✓
Value and acknowledge each person's individuality	# and % of persons served who report that staff members at *pos***Abilities** listen to them	95%	50 86%	61 100%	✓

[14] We assume the lack of financial resources is a barrier to achieve certain outcomes such as engagement in community activities (either due to the cost of participating in the activities, or the cost of transportation to get to those activities).The lack of financial resources can also be a barrier to access employment and volunteer opportunities mainly due to the cost of transportation to get to the sites.We will track this indicator to analyze its relationship with CH23 (overall satisfaction), and also to see if the number of persons served who report they would like to find work opportunities is correlated to the number of persons served who report they lack financial resources to do the things that are important to them.

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Enhance relationships and social circles	# and % of persons served who report that they are more connected to people in their community since they started working with *pos***Abilities**	90%	36 62%	40 91%	✓
Promote self-determination and abilities to make their own decisions	# and % of persons served who report they are able to make choices about their care	90%	48 83%	61 97%	✓
Provide education on rights and responsibilities	# and % of persons served who report that staff have reviewed rights and responsibilities with them in the last year	95%	45 78%	59 97%	✓
Maximize overall satisfaction with service	# and % of persons served who report they are happy with the services they get	95%	49 84%	57 95%	✓

Key Findings:

- In FYE2025, we met all targets for effectiveness input. Note due to a low response rate, items from the Family Member survey were not reported on.
- Several scores show big increases including:
  - , 'persons served who report that they can do the things they want to when they want to do them', which rose from 72% to 93%,
  - 'persons served who report that staff members at posAbilities listen to them', which rose from 86% to 100%,
  - 'persons served who report that they are more connected to people in their community since they started working with posAbilities', which rose from 62% to 91%,
  - 'persons served who report they are able to make choices about their care', which rose from 83% to 97%,
  - 'persons served who report that staff have reviewed rights and responsibilities with them in the last year', which rose from 78% to 97%, and finally,
  - 'persons served who report they are happy with the services they get', which rose from 84% to 95%.
- Service access was below target in FYE2025 at 40%; down from the previous year's high of 100%.

Follow-up and Proposed Action:

- To address incidents of aggression, we will provide Community Housing staff with additional training regarding Person-Centered Practices, review risk assessments more frequently as program needs change
- Every 6 months when Safety Plans are reviewed and we will implement a mechanism for all staff to also review the updated plan.
- Person serveds' neurocognitive changes will be highlighted for all staff.
- Post-incident debriefing will be completed with all staff to prevent recurrences for all incidents and will be tracked by the Team Leader and Team Manager for follow up.
- With respect to medication management, the "administer all" button on the E-mar system will be removed or disabled to ensure staff check and sign each medication individually.
- The services access target will be re-examined in light of recent changes in the CLBC referral process, and other factors which impact service access.

A.2 Community Integration

Program Overview:

*pos***Abilities** Community Integration Programs offer a wide range of social, recreational and learning opportunities. Person served are encouraged to pursue their interests and explore different program options. In addition to the variety this approach offers, persons served have the opportunity to meet new people and to expand their social circles. Our programs offer a variety of opportunities including:

- Rights and Responsibilities
- Developing and Building Healthy Relationships
- Personal Safety
- Community Kitchen/Cooking
- Music/Karaoke Café
- Arts and Crafts
- Improvisation/Theatre
- Multicultural Celebrations
- Volunteering
- Exercise Classes and Outdoor Sports
- Social Events and Dances
- Day-Trips
- Camping

Outcomes Data and Results:
The following outcome results were obtained from *pos***Abilities**' records and from surveys completed by persons receiving Community Integration services and their family members. These outcome results apply to persons participating in Community Integration services and their families.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Minimize the number of incidents involving verbal and physical aggression	# of aggressive incidents involving verbal and physical aggression to # of person served	0.40	0.37	0.34	✓
Minimize the number of validated complaints that are processed through the formal complaint resolution process	# of validated complaints that are processed through the formal complaint resolution process	1	0	0	✓
Minimize the number of medical/treatment errors	# of medical/treatment errors to # of persons served	0.05	0.02	0.01	✓

Key Findings:

- The file review revealed despite an increase from the previous year, we have maintained a below target level for aggressive incidents in FYE2025. This continues to demonstrate our efforts, including regular training in relational skills, via the Mandt System, and positive behaviour support through our Behaviour Leads, as well as the focus on creating a rich and engaging quality of life for our persons served.
- We have met targets in the other areas of key monitoring; minimizing complaints and minimizing medication errors.

Efficiency					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Promote service utilization through the provision of wide range of social, recreational and learning opportunities	Number of persons participating in Community Integration programs	186	211	221	✓
Maximize staff retention	# of staff who held their position for more than 2 years at the same location (reduction of turnover compared to previous reporting period)	10% increase (compared to previous year)	63	65	✗

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maintain the length of time between referral and service initiation	% of referred persons for whom services were initiated within 30 working days of referral	85%	19%	73%	✗

Effectiveness					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Have the ability to do the things that are important to the person served[15]	# and % of persons served who report that they can do the things they want to when they want to do them	90%	95 97%	81 96%	✓
Promote overall safety	# and % of persons served who report feeling safe at *pos***Abilities**	95%	94 96%	83 99%	✓
Assist persons served in meeting or making progress toward Person Centered Planning goals	% of total goals which were reported as partially achieved, achieved, or ongoing maintenance	80%	78%	81%	✓

Key Findings:

- In FYE2025, although still below target, service access improved significantly from 19% to 73% of referred persons served having service initiated within 30 days.
- We met all three of five targets in the area of effectiveness and saw improvements over FYE2024 on two of the three.

[15] We assume the lack of financial resources is a barrier to achieve certain outcomes such as engagement in community activities (either due to the cost of participating in the activities, or the cost of transportation to get to those activities).The lack of financial resources can also be a barrier to access employment and volunteer opportunities mainly due to the cost of transportation to get to the sites.We will track this indicator to analyze its relationship with CI21 (overall satisfaction), and also to see if the number of persons served who report they would like to find work opportunities is correlated to the number of persons served who report they lack financial resources to do the things that are important to them.

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Treat persons served and families with respect	# and % of persons served who report that people at *pos***Abilities** respect them	95%	95 97%	83 98%	✓
Value and acknowledge each person's individuality	# and % of persons served who report that staff members at *pos***Abilities** listen to them	95%	93 95%	84 98%	✓
Enhance relationships and social circles	# and % of persons served who report that they are more connected to people in their community since they started working with *pos***Abilities**	90%	86 88%	72 92%	✓
Promote self-determination and abilities to make their own decisions	# and % of persons served who report they are able to make choices about their care	90%	87 89%	80 96%	✓
Provide education on rights and responsibilities	# and % of persons served who report that staff have reviewed rights and responsibilities with them in the last year	95%	91 93%	80 96%	✓
Maximize overall satisfaction with service	# and % of persons served who report they are happy with the services they get	95%	94 96%	82 99%	✓

Note: Responses of "I don't know", "N/A" and "Did Not Answer" were removed to increase statistical accuracy.

Key Findings:

- For FYE2025, we met or exceeded targets on all measures of input for persons served.
- Overall in this area, all scores were above 90% and five of six scores were above 95%.
- Items related to family members are not reported due to low response rate.

Follow-up and Proposed Actions:

- Regarding service access, we will be examining what date is the designated “Referral Date”; considering options including when referral received, date of first Program visit; or date enrollment is confirmed.
- A comment section will also be added to the referral notes box in our Sharevision database in order to indicate delays in contact, scheduling, funding confirmation, and other elements affecting access out of posAbilities’ control.
- We will continue to work as a group to examine avenues for increasing family member survey response rates.

A.3 Building Caring Communities

Program Overview:

Building Caring Communities (BCC) works with persons served who are ready to broaden their horizons and stretch towards new experiences and growth. BCC shares a strengths-based and relational approach that invites people to be active participants in shaping what they want for their future. Person served engage in a fun, interactive and reflective process that surfaces more self-knowledge, because we believe knowing who you are and what you want is the key to living a life that is meaningful to you.

Note Building Caring Communities ceased operations on October 21, 2024.

Outcomes Data and Results:

Although Building Caring Communities ceased operations during FYE2025, we did offer survey invitation to all person served and Family Members of Person Served who received BCC services during the reporting period. Due to the low response rate, we are not reporting data for the service stream.

A.4 Explore

Program Overview:

Working with a Journey Facilitator, Explore's person served are motivated to understand their identity, build autonomy, and co-design their journeys. This process includes:

- **Deep Dive Discovery** (6-8 weeks) –persons served engage in reflective activities and storytelling
- **Action Plan** -persons served are involved in shaping their journey with determining goals and have a vision of their future selves
- **Service/Platform Collaboration** – connecting persons served to supports that match their goals. A community of professionals develop around the persons served to provide very individualized supports.
    - Services/platforms offered in Explore: Building Caring Communities, Employment Services, Laurel Behaviour Support Services, Curiko.
- **Continued Check-Ins** – persons served receive the support they need when they experience meaningful life changes, roadblocks or reimagining of goals.

Outcomes Data and Results:

The following outcome results were obtained from *pos***Abilities**' records and from surveys completed by persons receiving Explore services and their family members. These outcome results apply to persons participating in Explore services and their families.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Minimize the number of validated complaints that are processed through the formal complaint resolution process	# of validated complaints that are processed through the formal complaint resolution process	0	0	0	✓

Efficiency					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Promote Explore service utilization through provision of a wide range of social, recreational, and learning opportunities	Number of persons participating in Explore[16]	40	34	48	✓
Maximize staff retention	# of staff who held their position for more than 2 years at the same location (reduction of turnover compared to previous reporting period)	10% increase (compared to previous year)[17]	3	2	✗

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maintain the length of time between referral and service initiation	% of referred persons for whom services were initiated within 30 working days of referral	85%	80%	63%	✗

Due to a very low survey response rate from both Persons Served and Families, we are not reporting effectiveness and input data for FYE2025.

Follow-up and Proposed Action:

- For Explore, our focus in the coming year will be to increase our response rates for both persons served and families.
- Regarding the time frame between referral and service initiation, we will continue to work to initiate service as soon as possible after a referral is made and a family/person served has confirmed their choice. However, certain factors that are out of our control may affect this time frame including CLBC processes, staffing, and availability of the family. We will look to adding comments to the referral notes to indicate sources of delay if any.

[16] The total number of persons served is not entirely up to the organization and it can vary depending on external factors. We use this target as a projection; however, it is subject to change.This indicator is not specifically intended to meet a target, but to indicate how many persons received the service during the reporting period.

[17] Although the target for this measure is a 10% increase, we consider it a satisfactory result if there is no decrease from the previous year.

A.5 Employment Services

Program Overview:

*pos***Abilities** Employment Services assists individuals with developmental disabilities to prepare for, secure, and maintain competitive employment. We offer job seekers:

- support to prepare a résumé and cover letter
- secure paid employment
- on-site job training
- the ability to identify and learn workplace skills
- participation in our Job Club once employed
- connection to other services as needed

Outcomes Data and Results:

Note that we are not reporting data from our Employer Survey for FYE2025 due to a very low response rate.

The following outcome results were obtained from *pos***Abilities**' records as well as from surveys completed by persons receiving Employment services and their family members. These outcome results apply to persons receiving Employment Services and their families. The file review showed that all targets set for Employments Services' key monitoring items have been met.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Minimize the number of validated complaints that are processed through the formal complaint resolution process	# of validated complaints that are processed through the formal complaint resolution process	1	0	0	✓

Efficiency					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Provide assistance to prepare for, secure, and maintain competitive	Number of persons receiving employment services	200	318	452	✓

Efficiency					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
employment					
Maintain length of time between start of job search and first job placement	Average # of months between start of job search and first job placement	3.5	2.7	2.5	✓
Maximize staff retention	# of staff who held their position for more than 2 years at the same location (reduction of turnover compared to previous reporting period)	10% increase (compared to previous year)[18]	6	5	✗

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maintain the length of time from referral to service initiation	% of referred persons for whom services were initiated within 30 working days of referral	100%	93%	95%	✗

Effectiveness					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Increase the number of persons served who are employed	# of job placements secured	90	57	69	✗
	# of job placements sustained for 6 months or more	45	26	42	✗

Note due to a low response rate to the Persons Served survey, we are not reporting Input measure for FYE2025.

[18] Although the target for this measure is a 10% increase, we consider it a satisfactory result if there is no decrease from the previous year.

Key Findings:

- In FYE2025, *pos***Abilities** Employment Service met all of our targets for key monitoring and efficiency with the exception of staff retention.
- Although we did not meet the target this year, we continue to provide excellent service access as shown by our 95% score in this area, up by 2% from FYE2024, and the ambitious target of 100%.
- Response rates from persons served and families were very low this year for *pos***Abilities** Employment Service so we cannot draw conclusions from the results.

Follow-up and Proposed Action:

- For service access, we have previously considered whether our target of 100% is unrealistic. As we continue to see positive increases as we move toward our goal of 100%, we did not adjust this target last year. We will continue to connect with referred families within five days and initiate services within a month.
- In order to increase potential for successful placements, with the support of posAbilities' Communications Team, we continue to engage with employers in the communities we operate in a number of ways:
    - We have updated our Employment Services website with content specifically geared towards potential employers including a new video.
    - We have an upcoming advertising campaign rolling out in Business in Vancouver Magazine targeting potential employers as well as a corresponding audio ad for radio.
    - We are distributing information about our services to employers via the Maple Ridge Downtown Business Improvement Association.
- Due to the current economic climate, the job placement targets may also be adjusted in the coming year
- We will continue to work with Employment Specialists to cement a front-loading process of finding employment for individuals so ensure a better fit that ensures a longer retention of employment.
- With respect to survey response, we will explore the option of alternate formats for surveying both Persons Served and Families such as telephone and paper surveys.
- For employers, we will set up a centralized system so that ES Management can administer surveys to support a better response.

A.6 Laurel Behaviour Support Services

Program Overview:

Laurel Behaviour Support Services (LBSS) aims at empowering individuals with Autism Spectrum Disorder, other developmental disabilities or behaviour challenges, through consultation, training and family support. We create individualized support programs aimed at decreasing challenging behaviour and teaching new skills across the following focus areas:

- Communication
- Cognition or academic skills
- Play and social skills
- Self-Management
- Physical development of fine and gross motor skills
- Self-Care and adaptive living skills

Outcomes Data and Results: The following outcome results were obtained from *pos***Abilities'** records.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Provide behaviour support services	Number of children (over 6 years old) served through MCFD funded services	400	402	408	✓
	Number of children (0-19 years old) served through private contracts	50	96	76	✓
	Number of adults (over 19 years old) served	350	342	406	✓
Provide Sexual Health Education	Number of individuals (all ages) provided with sexual health education through private and government contracts	10	9	7	✗
Refer families to the Director of Community Engagement for resource coordination as needed	# of families referred to the Director of Community Engagement	N/A	10	12	N/A
Minimize the number of validated complaints that are processed through the formal complaint resolution process	# of validated complaints that are processed through the formal complaint resolution process	0	0	0	✓

Efficiency					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Provide direct service	% of total hours used towards direct service	70%	69%	66%	✗
Maximize staff retention	# of staff who held their position for more than 2 years at the same location (reduction of turnover compared to previous year)[19]	10% increase	20	19	✗

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maintain the length of time between referral and service initiation	% of referred persons for whom services were initiated within 30 working days of referral	95%	94%	89%	✗

Effectiveness					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maximize meeting or making progress towards goals	% of total goals which were reported as in progress, on maintenance, or achieved/mastered	75%	67%	68%	✗
Ensure behaviour plans address priorities identified by the family/team	% of stakeholders that report consultant created programs that were straightforward, age appropriate, and addressed their priorities	80%	93%	98%	✓
Maximize behaviour plan outcomes	% of stakeholders that report that they saw an overall improvement in the person served's behaviour (reduction of challenging behaviour and increase in adaptive skills) as a result of the service	80%	84%	92%	✓

[19] Although the target for this measure is a 10% increase, we consider it a satisfactory result if there is no decrease from the previous year.

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Communication	% of stakeholders that report the consultant's communication skills (oral and written) met their needs	80%	95%	98%	✓
Reliability and accountability	% of stakeholders that report the consultant demonstrated reliability and accountability	80%	93%	97%	✓
Implementation Support	% of stakeholders that report the consultant provided sufficient training and hands-on demonstrations so that their team can successfully implement programs	80%	94%	98%	✓
Ethical and respectful behaviour	% of stakeholders that report the consultant displayed confidentiality, sound judgement, flexibility, empathy, and respect in all interactions	80%	95%	100%	✓

Key Findings:

- In FYE2025, LBSS met all but one of key monitoring targets.
- In the area of efficiency, LBSS was slightly below target on direct service provision although improved over FYE2024 by 1%.
- Our result for service access fell slightly to 89%, falling short of the target of 95%.
- In the area of effectiveness, we exceeded 2 of 3 targets, those for ensuring behaviour plans address family/team priorities and maximizing behaviour plan outcomes. We did not meet our target for maximizing or making progress towards goals; falling 3% from FYE2024 to 66%.
- LBSS continues to use a custom survey to collect stakeholder input. We continue to score well on all survey items. All scores are well above target showing stakeholder feedback on our consultants remains excellent.
- Due to staffing gaps, we fell slightly short of our target in supporting individuals seeking sexual health education.
-

Follow-up and Proposed Action:

- LBSS always prioritizes MCFD and CLBC contracts throughout the year. However, there is an effort made to expand fee for service offerings as well.
- We are also working on a new system of tracking and reviewing goals for persons served and this is projected to be rolled out in the coming year.

A.7 Laurel Behaviour Support Services - Training

Program Overview

LBSS Training offers learning opportunities for parents and other professionals involved in supporting individuals diagnosed with Autism Spectrum Disorders and other developmental disabilities. Our workshops can be modified both as a full- or half-day to groups of various sizes. We can also develop an individualized training workshop to meet the needs of the group.

Outcomes Data and Results:

The following outcome results were obtained from *pos***Abilities'** records.

Key Monitoring Items					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Obtain funding for delivery of PEERS and LINK training	Number of successful grants for PEERS and LINK training	2	1	1	✗
Provide Training	Number of group trainings (Triple P®) offered to parents	2	0	0	✗
	Number of trainings (Capacity Building) offered to professionals	12	23	24	✓
	Number of group trainings (PEERS) offered to adults	2	0	0	✗
	Number of group trainings (Connect with PEERS®) offered to children	2	1	0	✗
	Number of group trainings (LINK) offered to children or adults	4	3	0	✗

Service Access					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maximize participants per training event	Average # of participants/capacity of session X 100%	80%	71%	80%	✓

Effectiveness					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Improve PEERS training participant test scores	Average % improvement between pre and post test score	60%	N/A	N/A[20]	✗

Input					
Objective	**Measure**	**Target**	**Outcome 2024**	**Outcome 2025**	**Target Achieved**
Maximize satisfaction	% of participants reporting they were satisfied or very satisfied that the workshop met their expectations	90%	98%	97%	✓

Key Findings:

- Although LBSS provided a wide variety of professional training in FYE2025, we fell short of targets in four of five areas.
- Trainings LBSS provided were well attended and met our target of 80% capacity.

Follow-up and Proposed Action:

- PEERS, Triple, and LINK are groups we have run over the years mostly through grant funding and partial funding from *pos***Abilities**. We did not receive grants this year enabling us to deliver PEERs groups for teens. Adults do not have funding available to access these groups under the fee-for-service model and there is no government funding available for agencies either. As such, our ability to deliver these programs largely depends on successful grant applications. Given these factors, we will continue to explore funding opportunities but current targets may be revised in the coming year.

[20] Due to a low number of completed tests, sufficient data was not available for this measure.