



**McMan**

# **Annual Outcomes Report 2018-2019**

June 2019

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## Table of Contents

EXECUTIVE SUMMARY .....	3
Introduction .....	3
Data Collection .....	3
Performance Highlights .....	4
Continual Improvement.....	6
PROGRAM PERFORMANCE – CALGARY REGION – MINISTRY OF CHILDREN’S SERVICES .....	7
Foster Care .....	7
Respite Care Connection.....	16
Kinnections .....	18
Family Development Program (FDP) .....	28
High Fidelity Wraparound .....	36
Youth Transitions to Adulthood (YTA) .....	43
Manhattan Place.....	49
Skills Groups .....	54
Parent-Child Assistant Program (P-CAP) .....	58
Protection of Sexually Exploited Children Act (PSECA) .....	63
Fetal Alcohol Spectrum Disorder (FASD) Maps.....	69
PROGRAM PERFORMANCE – FAMILY SUPPORTS FOR CHILDREN WITH DISABILITIES (FSCD).....	73
Milestones .....	73
Milestones Counselling .....	82
PROGRAM PERFORMANCE – Homeless, PCAP and Community Programs .....	85
Hope Homes/Aboriginal Hope Homes.....	85
Rapid Rehousing.....	90
Parent-Child Assistance Program – Expanded Enrollment (P-CAP-EE) (CFAN Funded programs)....	94
Parent-Child Assistance Program Rural and Urban (P-CAP Rural and Urban).....	98
Youth Alternative Program (YAP) Caseworker .....	104
Youth Alternative Program (YAP) Kick-Start/Restart Groups.....	108
Youth and Adult Action Club (YAAC) .....	112
Dialectical Behavior Therapy (DBT) Groups .....	113
Youth Clinician.....	114
ASSESSMENT TOOL SUMMARY .....	116



PERSONS SERVED SUCCESS STORIES..... 118

Foster Care ..... 118

Kinnections ..... 118

Family Development Program (FDP) ..... 121

High Fidelity Wraparound ..... 122

Youth Transitions to Adulthood (YTA) ..... 124

Manhattan Place..... 125

Parent-Child Assistance Program (P-CAP) ..... 126

Protection of Sexually Exploited Children’s Act (PSECA) ..... 127

Fetal Alcohol Spectrum Disorder Maps (FASD Maps)..... 127

Milestones ..... 128

Hope Homes..... 128

Hope Homes for Aboriginal Youth ..... 130

Rapid Rehousing ..... 130

Parent-Child Assistance Program – Expanded Enrollment (P-CAP EE)..... 130

Youth Alternative Program (YAP) Caseworker ..... 131



# Annual Outcomes Report 2018 - 2019

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## EXECUTIVE SUMMARY

### Introduction

Over 35 years of improving the quality of life in our community, McMan Calgary & Area has impacted the lives of over 25,000 children, youth and families. McMan Calgary & Area offers more than 20 innovative programs and support services that help youth and families with complex needs cope with multiple social issues, strengthen connections with family and natural supports, build resilience and transition successfully to independence. Responsive and collaborative programs and individualized supports that meet the communities' changing needs are at the heart of McMan Calgary's vision; "Together we transform lives of children, youth and families through sustainable supports and connections, leading to healthy and fulfilling lives".

McMan Calgary & Area applies an evidence-informed approach to its programs in order to offer effective services that empower children, youth, adults and families in the community. An evidence-informed practice employs sector expertise, best practices and a strong organizational culture to internal processes in order to consistently ensure positive outcomes for stakeholders. McMan's commitment over the past year has been incorporating our "Building Connections" project which has been a significant organizational change strategy aimed at supporting an intentional and strategic shift in both practice and philosophy. This approach prioritizes natural supports as integral to the work we do and recognizes the value and long-term impact for the children, youth and families we serve.

The organization has developed an evaluation framework, referred to as McMan Service Areas, that will help guide its data collection and support development of evidence-based practice across all McMan Calgary & Area programming. The framework is grounded within theoretical and practice frameworks, adapted from the Child Welfare National Outcomes Measures (NOM).

In this report, McMan Service Areas used for tracking outcomes for children and families who receive child intervention services, are based on three priority domains:

- Safety
- Well-being and Development
- Connection and Belonging

Program success stories have been added to provide more contexts to persons served outcomes and accomplishments. For the purpose of this report, all names have been changed to protect confidentiality.

### Data Collection

McMan utilizes an electronic case management database (Sharevision), various agency reports, as well as several data collection and outcomes processes, which include research and evidenced-based tools, which allows the organization to:

- Maintain and improve data collection processes



- Improve the Person’s Served outcomes
- Ensure high reliability and validity of data and outcomes

## Performance Highlights

During this reporting period, McMan Calgary and Area provided services to 1,428 individuals, a 7% increase over last year. Of this total, 762 children, youth, adults and families received support through Calgary Region – Ministry of Children’s Services (CS) and 162 families supported through Family Supports for Children with Disabilities (FSCD) funded programs. This number represents a 10% increase from the previous year. The overall average occupancy rate for our Children Services (CS) programs was 85% - a slight increase from the previous year. The three largest ethnic groups served through McMan’s CS funded program were; Caucasian (60%), Aboriginal (20%) and African (4%). All other ethnic groups accounted for 16% of our total persons served. Females represented 60%, and males represented 39% of our persons served. Five individuals self-identified as transgendered. The overall age distribution breakdown was 0-11 years (26%), 12-17 years (24%), 18-24 years (13%) and 25+ years (37%). The average length of stay of active persons served in CS programs was 405 days and 386 for discharged persons served. There were no significant changes in our demographics and length of stay from the previous year.

The CS persons served outcomes across all McMan Service Areas domains were very positive. The goals relating to the Safety domain, measured by the recurrence of maltreatment and serious injuries or deaths, and critical incident reporting, reported an average of 90% successful goal attainment rating. The Well-being and Development goals, measured by persons served goals relating to school performance, child behavior, child development and health reported an average of 87% successful goal attainment rating. The goals relating to Connections and Belonging, measured by children/youth remaining at home, returning home, positive connections to kin or natural supports, successful transition to adulthood, parenting capacity and connection to community resources received an average of 85% successful goal attainment rating. As indicated by the table below, all McMan Service Area domain averages from active to completed goals increased. This strongly indicates that persons served were successful in achieving their goals through the services provided in programs.

Table 1 – Active and Complete McMan Service Area goal attainment by persons served

McMan Service Area	Active Goals	Completed Goals	Change
Safety	79%	90%	+11%
Well-being and Development	72%	87%	+15%
Connection and Belonging	74%	85%	+11%

Across all Children Services programs the survey feedback from persons served was very positive. The feedback survey results for each program is included in the individual program evaluation within this report. The stakeholder feedback survey (n = 50) also indicates a high level of satisfaction in the services provided. Ninety-six percent (96%) of Case Managers responded that they were very satisfied or satisfied with the quality of services individuals received while involved with McMan programs. Similarly, ninety-six percent (96%) of Case Managers were very satisfied or satisfied in the support individuals received in building connections and natural supports.

McMan also provides programs funded by Calgary Homeless Foundation (CHF), United Way of Calgary, Calgary Fetal Alcohol Network (CFAN), City of Calgary – Family and Community Support Services (FCSS) as well as



anonymous donors. These streams of programs provided service to 698 children, youth, adults and families. This number represents a 20% increase from the previous year. This significant increase can mostly be attributed to our group programs, which have increased the number of group sessions offered, as well as being serve a lot of clients per group.

The average occupancy rate for programs in these funding streams was 94%. The three largest ethnic groups served were Caucasian (52%), Aboriginal (15%) and African (7%). All other ethnic groups accounted for 26% of our total persons served. Females represented 39% of persons served, while males represented 60% of our persons served. Less than 1% (4 youth) identified as transgender. The age distribution of persons served was 0-11 years (31%), 12-17 years (41%), 18-24 years (19%) and 25+ years (9%). The average length of stay of active persons served is 530 days and 167 days for discharged persons served. This significant difference between average length of time in the program for active persons served versus discharged persons served can also be attributed to our group programs, as clients are in the program only for a specific amount of sessions and time. Both of these averages demonstrate a decrease from the previous year.

The persons served outcomes across all of the McMan Service Areas domains were very positive. The persons served goals relating to the Safety domain, measured by the recurrence of maltreatment and serious injuries or deaths, and critical incident reporting, reported an average of 86% successful goal attainment rating. The Well-being and development persons served goals, measured by persons served goals relating to school performance, child behavior, child development and health reported an average of 81% successful goal attainment rating. The persons served goals relating to Connections and Belonging, measured by children/youth remaining at home, returning home, positive connections to kin or natural supports, successful transition to adulthood, parenting capacity and connection to community resources received an average of 88% successful goal attainment rating. As indicated by the table below, all McMan Service Area domain averages from active to completed persons served goals increased. This strongly indicates that persons served were successful in achieving their goals through service provision in programs.

Table 2 – Active and Complete McMan Service Area goal attainment by persons served

McMan Service Area	Active Goals	Completed Goals	Change
Safety	86%	86%	0%
Well-being and development	81%	81%	0%
Connection and belonging	73%	88%	+15%

Throughout the year, we ask staff to submit success stories for persons served to highlight the courage, growth and resilience. The success stories are another source of information to help assess the performance and impact of our services. A success story has been included with each individual program evaluation to help staff reflect on the work they do as well as share the many of our persons served successes with our stakeholders. All names have been changed in the stories to protect the identity of the persons served.

Overall, we are pleased with the performance of our programs. Nevertheless, as a learning organization we are never satisfied and are always seeking out new ways to improve our support to persons served. Annually, the Quality Assurance team meets with all programs to discuss their evaluation results and explore what is working well and areas for improvement. Through this process, our teams are asked to develop a Program



Enhancement Plan (PEP) for the current fiscal year. The PEP's are reviewed throughout the year at our Leadership Team Meetings to ensure we maintain a strong focus on continual improvement.

Moving forward, we are very excited in our strategic direction. One of McMan Calgary's priorities is "Service and Employee Excellence." This priority highlights our continued efforts in developing and integrating a practice framework that focuses on connections to families & natural supports through our Building Connections initiative and trauma informed practice. We believe our commitment to this work will not only strengthen the capacity and well-being of the children, youth and families we serve but also acknowledges the needs and development of our staff and the sustainability of a healthy workforce. The practice framework will drive our service delivery and be reflected in the culture of our organization. We will strive to ensure that all persons served are connected to family, kin or other natural supports before leaving our services and feel confident that our approach will result in meaningful and lasting change.

## Continual Improvement

McMan Calgary & Area is a learning organization, using a continuous quality improvement cycle to support program development, funder accountability, improving persons served outcomes, as well as broader research in the sector.

McMan Calgary & Area uses reporting guidelines as indicated by respective funder contracts, accreditation standards, and policy and procedures, to develop a culture of continuous quality improvement.

Processes include, but are not limited to:

- Demonstrating the reliability, validity, completeness and accuracy of data
- Collecting data on persons served at various points in time (the beginning of services, appropriate intervals, the end of services and post service delivery, when applicable)
- Measuring the effectiveness and efficiency of services, service access, as well as the satisfaction of persons served and other stakeholders
- Quarterly file audits to ensure:
  - The quality of service delivery, as evidenced by the record of the person served
  - Appropriateness of services
  - Patterns of service utilization
  - Model fidelity, when an evidence-based practice is identified
- Quarterly program audits on outcomes and complete data sets
- The completion of an Annual Performance Analysis with corresponding action plans to improve performance

## PROGRAM PERFORMANCE – CALGARY REGION – MINISTRY OF CHILDREN’S SERVICES

### Foster Care

The Foster Care program provides a safe and caring out-of-home placement for children/youth (0-17 years) that are unable to live at home.

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	28 (47%)	31 (52%)	+3 (+5%)
Female	32 (53%)	29 (48%)	-3 (-5%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	60 (100%)	60 (100%)	0 (0%)

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	23 (38%)	24 (40%)	+1 (+2%)
Indigenous	29 (48%)	28 (47%)	-1 (-1%)
Hindu	4 (7%)	1 (2%)	-3 (-5%)
Mixed Race	0 (0%)	4 (7%)	+4 (+7%)
Other	4 (7%)	3 (4%)	-1 (-3%)
TOTAL	60 (100%)	60 (100%)	0 (0%)

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	33 (55%)	30 (50%)	-3 (-5%)
Children (7-11)	11 (18%)	17 (28%)	+6 (+10%)
Youth (12-17)	16 (27%)	13 (22%)	-3 (-5%)
Young Adults (18-24)	0 (0%)	0 (0%)	0 (0%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	60 (100%)	60 (100%)	0 (0%)

#### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted Spaces	45	45	N/A
Annual occupancy	74%	90%	+16 %
Total intakes	29	26	-3
Total discharges	19	18	-1
Average Length of Time in Program at Discharge	437 days	462 days	+25 days

#### Program Outcomes



## McMan Service Areas

### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	-	-	-
Improved Connection and Belonging	11/23 (48%)	10/10 (100%)	-1 (+52%)
Improved Well-being and Development	39/44 (89%)	34/34 (100%)	-5 (+11%)

### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	-	-	-
Improved Connection and Belonging	29/31 (94%)	17/18 (94%)	-12 (0%)
Improved Well-being and Development	18/18 (100%)	18/18 (100%)	+1 (0%)

## Program Outcomes

### Discharged Persons Served (n=18)

\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client is safe from abuse, maltreatment and/or neglect	18/18	100%
Client has safe and stable housing	18/18	100%
Client is connected to physical health supports in the community	18/18	100%
Client is connected to mental health/addiction supports in the community	2/2*	100%
Client has demonstrated improved behavior	17/18	94%
Client is progressing in meeting developmental milestones	18/18	100%
Client is progressing in learning skills to live intra-dependently	2/2*	100%
Client is engaged in school, education, and/or employment	14/18	77%
Client has positive connections to family or natural supports	18/18	100%
Client is connected to community services/resources	17/18	94%

Caregiver is engaged in activities to enhance their capacity to care for the child(ren) in their care	18/18	100%
Client is connected to cultural/spiritual activities and/or resources	12/12*	100%

**Assessment Scores**

Pediatrics Symptoms Checklist (PSC)

The Pediatric Symptom Checklist is a psychosocial screen designed to facilitate the recognition of cognitive, emotional, and behavioral problems so that appropriate interventions can be initiated as early as possible. It has a maximum score of 70, with a cut-off score of 28, with decreasing scores indicating positive change.

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
18	18	14	9 (50%)

Casey Life Skills

Casey Life Skills is a youth assessment focusing on life and living skills. It is measured on a 5-point scale, with increasing scores indicating positive change.

Persons served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
5	4.30	4.43	4 (80%)

Ages and Stages

ASQ-3/ASQ:SE-2

The ASQ system is a developmental and social-emotional screening system for children from birth to 6 years. Positive outcomes are demonstrated by percent of persons served demonstrating no concerns.

ASQ-3 Output Reporting

Output	Amount
Total # of children 0-6 within program during fiscal year	31
# of children receiving regular screenings (2 or more)	17



Total # of screenings conducted during the fiscal year	60
# of children with 1 screening	14
# of children with 2 screenings	8
# of children with 3 screenings	7
# of children with 4 screenings	1
# of children with 5 screenings	1
# of children with 6 screenings	0

ASQ:SE-2 Output Reporting

Output	Amount
Total # of children 0-6 within program during fiscal year	31
# of children receiving regular screenings (2 or more)	16
Total # of screenings conducted during the fiscal year	61
# of children with 1 screening	13
# of children with 2 screenings	6
# of children with 3 screenings	6
# of children with 4 screenings	3
# of children with 5 screenings	1
# of children with 6 screenings	0

ASQ:SE-2 # of screenings conducted per age interval	
Age interval	# of screenings
2 months	1
6 months	6
12 months	3
18 months	7
24 months	6
30 months	11
36 months	12
48 months	9
60 months	6
TOTAL	61

ASQ-3 Post Reporting – Active Individuals Served

% of Post-screens that fell below the cutoff identifying developmental concerns by domain						
Age Interval	n=	Communication	Gross Motor	Fine Motor	Problem Solving	Personal Social
2 months	1	0%	0%	0%	0%	0%



4 months	1	0%	0%	0%	0%	0%
6 months	2	0%	50%	50%	0%	0%
8 months	2	50%	50%	0%	50%	50%
9 months	1	0%	100%	100%	100%	0%
10 months	0	-	-	-	-	-
12 months	0	-	-	-	-	-
14 months	0	-	-	-	-	-
16 months	0	-	-	-	-	-
18 months	2	50%	50%	100%	50%	0%
20 months	2	50%	0%	50%	0%	50%
22 months	1	0%	0%	0%	0%	0%
24 months	1	0%	0%	0%	0%	0%
27 months	2	0%	0%	0%	50%	0%
30 months	2	0%	0%	0%	0%	0%
33 months	5	33%	17%	33%	0%	0%
36 months	3	0%	33%	33%	0%	0%
42 months	7	0%	0%	0%	0%	0%
48 months	3	0%	0%	0%	0%	0%
54 months	1	0%	0%	0%	0%	0%
60 months	0	-	-	-	-	-

ASQ:SE-2 Post Reporting – Active Individuals Served

Age Interval	n=	% of scores that were “above” cutoff (concerns)
2 months	1	0%
6 months	3	0%
12 months	1	0%
18 months	3	25%
24 months	1	0%
30 months	4	0%
36 months	6	11%
48 months	6	0%
60 months	1	0%

ASQ-3 Post Reporting – Discharged Individuals Served

% of Post-screens that fell below the cutoff identifying developmental concerns by domain						
Age Interval	n=	Communication	Gross Motor	Fine Motor	Problem Solving	Personal Social
2 months	0	-	-	-	-	-
4 months	0	-	-	-	-	-



6 months	0	-	-	-	-	-
8 months	0	-	-	-	-	-
9 months	1	100%	0%	0%	0%	0%
10 months	1	100%	100%	0%	100%	100%
12 months	1	0%	0%	0%	100%	0%
14 months	0	-	-	-	-	-
16 months	2	0%	50%	0%	100%	50%
18 months	0	-	-	-	-	-
20 months	1	0%	0%	0%	0%	0%
22 months	1	0%	0%	0%	0%	0%
24 months	2	0%	0%	0%	0%	0%
27 months	1	0%	0%	0%	0%	0%
30 months	3	0%	0%	0%	0%	0%
33 months	2	50%	0%	0%	50%	0%
36 months	2	0%	0%	0%	0%	0%
42 months	1	0%	0%	0%	0%	0%
48 months	1	0%	100%	100%	0%	0%
54 months	2	0%	50%	50%	0%	0%
60 months	3	0%	33%	33%	0%	0%

ASQ:SE-2 Post Reporting – Discharged Individuals Served

Age Interval	n=	% of scores that were “above” cutoff (concerns)
2 months	0	-
6 months	1	0%
12 months	1	0%
18 months	3	0%
24 months	2	0%
30 months	4	0%
36 months	2	0%
48 months	2	0%
60 months	4	20%

Persons Served Feedback Survey

Foster Child Feedback Survey (n=7)

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
I feel safe and cared for in my foster home	85%	15%	0%	0%	0%	0%



I like my foster home	85%	15%	0%	0%	0%	0%
My foster parents really cares about me	100%	0%	0%	0%	0%	0%
My foster parent(s) know the things I like	58%	42%	0%	0%	0%	0%
I feel I can go to my foster parent(s) when something is not right	72%	28%	0%	0%	0%	0%
My foster parent(s) helps me with my school work	72%	28%	0%	0%	0%	0%
I do fun things with my foster family	58%	42%	0%	0%	0%	0%
I understand why I am in foster care	72%	28%	0%	0%	0%	0%
My foster parent(s) tell me the good thing I do	100%	0%	0%	0%	0%	0%
My foster parent(s) help me to learn new things	72%	28%	0%	0%	0%	0%

### Feedback survey comments

*I think that this home is the best home and pretty much the only home I've been in. And there isn't much anything to say that needs to be improved or to complain about.*

*I feel safe and loved*

### Foster Youth Feedback Survey (n=6)

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
My foster home is a safe and caring place to live	33%	50%	17%	0%	0%	-17%
I enjoy living in my foster home	50%	33%	17%	0%	0%	0%
My foster parent(s) really cares about me	50%	50%	0%	0%	0%	0%
My foster parent(s) know the things I like and dislike	33%	67%	0%	0%	0%	+33%
I feel I can go to my foster parent(s) when something is not right	50%	33%	17%	0%	0%	+21%
My foster parent(s) helps me with my school work	33%	50%	17%	0%	0%	+5%
I do fun things with my foster family	50%	50%	0%	0%	0%	+16%
I understand why I am in foster care	33%	67%	0%	0%	0%	+12%

My foster parent(s) tell me the good things I do	33%	67%	0%	0%	0%	0%
My foster parent(s) help me to learn new things	50%	17%	33%	0%	0%	-21%
As requested, my foster parent(s) help me stay connected with my family and other important adults in my life	17%	66%	0%	0%	17%	-17%
My foster parent(s) helped me build the skills needed to strengthen important relationships in my life.	50%	50%	0%	0%	0%	-
As requested, my foster parent(s) help me stay connected with my culture and/or religion	17%	17%	0%	0%	66%	-33%

### Feedback Survey Comments

*I love my family*

*I love them*

*I love where I am and the people I'm with*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with Bio Family	7 (37%)	4 (22%)	-3 (-15%)
Living with Kin/Natural Support	7 (37%)	10 (56%)	+3 (+19%)
Living Independently	0 (0%)	0 (0%)	0 (0%)
Youth Transitions to Adulthood	0 (0%)	2 (11%)	+2 (+11%)
Transitional Placement (adult services)	0 (0%)	0 (0%)	0 (0%)
Adoptive home/Private Guardianship	0 (0%)	1 (6%)	1 (+6%)
Transition to another Foster Care Program	5 (26%)	1 (6%)	-4 (-20)
Other	0 (0%)	0 (0%)	0 (0%)
Unknown	0 (0%)	0 (0%)	0 (0%)
TOTAL	19 (100%)	18 (100%)	-1

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Violence	2 (29%)	0 (0%)	-2 (-29%)
Accident	1 (14%)	0 (0%)	-1 (-14%)

Injury to the child	1 (14%)	1 (7%)	0 (-7%)
Charges/offences	1 (14%)	0 (0%)	-1 (-14%)
AWOL	1 (14%)	2 (13%)	+1 (-1%)
Allegation of Abuse/Neglect	0 (0%)	4 (27%)	+4 (+27%)
Serious Change in Child's Health	0 (0%)	2 (13%)	+2 (+13%)
Severe Acting Out	0 (0%)	1 (7%)	+1 (+7%)
Threat of Self-harm/Suicide Attempt	0 (0%)	1 (7%)	+1 (+7%)
Inappropriate Sexual Behavior	0 (0%)	1 (7%)	+1 (+7%)
Destruction	0 (0%)	1 (7%)	+1 (+7%)
Other	1 (14%)	2 (14%)	+1 (0%)
TOTAL	7 (100%)	15 (100%)	+8

## Program Performance Summary

The Foster Care program continues to focus on monthly recruitment efforts to address the needs of the system. Although this year did not have the support of a designated recruiter, there continues to be a consistent increase to capacity through the program's ongoing recruitment efforts. This was evidenced by the annual occupancy reaching 90%

### McMan Service Areas

#### *Improved Safety*

- This service area is generally not an area that the program will create goals for clients as it is assumed that by being placed in a licensed foster home, safety concerns have been alleviated.

#### *Improved Connection and Belonging*

- With the implementation of Building Connections Framework, McMan's priority focus was on supporting clients to maintain, strengthen or identify positive connection to family and natural supports rather than on legal permanency.
- The avenues used to maintain connection were supporting parental visits, facilitating sibling and extended family visits and through the use of technology such as Facetime and Skype to provide further opportunity for connection

#### *Improved Well-Being and Development*

- Areas of focus for this area are developmental milestones, community involvement, access to mental health services, school, behavior and life skills.

### Assessment Tools

#### Pediatrics Symptom Checklist

- 3/18 (17%) clients only had a pre-assessment completed
- the overall cut-off score is 28
  - 4/18 (22%) clients scored above the cut-off on the pre-assessment screening

- 15/18 (83%) clients scored below the cut-off on the post-assessment screening
- 6/18 (33%) clients showed increases in their overall score; for all 6 clients, the post score was below the cut-off score of 28.

#### Casey Life Skills

- The age range for this assessment is 15+ years
- Clients whom demonstrated improvement did so in the areas of Permanency, Daily Living, Relationships and Community, Housing and Money Management, Work and Study Life, Career and Education Planning and Looking Forward.

#### ASQ-3 & ASQ-SE2

- 60 paired screenings (ASQ-3 & ASQ-SE2) were completed
- 29 children were screened
  - 24 children had two or more screenings completed
    - 15/24 (63%) demonstrated improve in one or more developmental areas
    - 5/24 (21%) demonstrated a decrease in one or more developmental areas
    - 4/24 (16%) demonstrated no change in one or more developmental areas
- 40 Developmental Support Plans were completed
  - 16/40 (40%) focused on social-emotional development

#### Persons Served Feedback Surveys

- 7/9 (78%) children (6 – 11 years) completed the foster child feedback survey (one youth age 13 years completed the foster child survey due to cognitive delays)
- 6/9 (67%) youth (12 – 17 years) completed the foster youth feedback survey

Currently, the program only completed feedback surveys once a year. Moving forward, feedback surveys will be completed at discharge to increase sample size.

#### Critical Incidents Summary

- The majority of critical incidents that happen within the program were isolated incidents.
- The 2 in the other category were Missed Medication and Expelled/Suspended from School.
- 4 clients were involved in more than one incident, however only 1 client had incidents that were related to the same concern:
  - The client had two incidents of Allegations of Abuse/Neglect. The youth disclosed information regarding abuse she experienced at her previous foster placement. This information was shared with the case team.
- For the other two incidents of Allegations of Abuse/Neglect – one was related to a disclosure of abuse that happened in a previous foster placement and one was related to a current incident that occurred between 2 clients.

#### Respite Care Connection



Respite Care provides planned, short-term respite for families and caregivers who parent high-needs children and/or youth.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	9 (69%)	7 (88%)	-2 (+19%)
Female	4 (31%)	1 (12%)	-3 (+19%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	13 (100%)	8 (100%)	-5

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	9 (69%)	6 (75%)	-3 (+6%)
Indigenous	2 (15%)	2 (25%)	0 (+10%)
African	1 (8%)	0 (0%)	-1 (-8%)
Other	1 (8%)	0 (0%)	-1 (-8%)
TOTAL	13 (100%)	8 (100%)	-5

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	6 (46%)	2 (25%)	-4 (-21%)
Youth (12-17)	7 (54%)	6 (75%)	-1 (+21%)
Young Adults (18-24)	0 (0%)	0 (0%)	0 (0%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	13 (100%)	8 (100%)	-5

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted bed nights	20-25	20-25	N/A
Annual occupancy	29 bed nights	32 bed nights	+3 bed nights
Total intakes	1	2	+1
Total discharges	5	8	+3
Average Length of Time in Program at Discharge	905 days	906 days	+1 day

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018-2019 Difference
Returned late	1 (33%)	0 (0%)	-1 (-33%)

Other	2 (67%)	0 (0%)	-2 (-67%)
Allegation of abuse/neglect	0 (0%)	1 (50%)	+1 (+50%)
Inappropriate sexual behavior	0 (0%)	1 (50%)	+1 (+50%)
TOTAL	3 (100%)	2 (100%)	-1

### Program Performance Summary

- There continues to be a high demand for respite services in the region, especially hourly respite as caregivers search for options that don't entail a 24 hour overnight away from home.
- Having a low number of respite providers that care for long term clients makes it challenging to support new clients seeking respite services.
- The program did enlist additional manpower in a recruitment coordinator to increase providers. Despite this, challenges remained with the most significant being financial compensation and the training requirements involved. Providing respite for FSCD contracts is less involved than providing respite for Children's Services children as this requires caregivers to be licensed facilities
- The program was successful in on-boarding 2 new respite caregivers – unfortunately the program was unsuccessful in finding an appropriate match for one caregiver and the other caregiver was on-boarded just prior to the end of the fiscal year.

Following consultation with CS and a comprehensive review of the Respite contract, resources were re-allocated effective April 1, 2019 to another Child Intervention contract where there was a more significant need for resources. Prior to this re-allocation a transition plan was implemented in January to ensure both the needs of respite providers and families were addressed and alternate resources were put in place where needed. McMan was successful in ensuring that a seamless transition occurred for the current respite providers and respite clients.

- the two new respite caregivers were referred to another program outside the agency who agreed to support them
- one respite caregiver will continue to provide respite services to their current respite clients independently
- one respite provider, whom was licensed, is now being supported under foster care and arrangements have been for her to continue to support the respite client.

### Critical Incident Summary

Both critical incidents involved interactions between respite clients and involved sexual innuendos . In both incidents, the actions did not go any further and were reported to the appropriate people. Both respite clients were not permitted to return to the home

### Kinnections

The Kinnections Kinship Care Program supports family members/significant others who provide care to children and youth who are unable to remain in their homes due to an identified risk. The program is designed to work with the caregivers in



order to build parenting capacity, strengthen family functioning, maintain family connection and support permanency planning for the child. The Kinnections program is a partnership between McMan Calgary & Area and Hull Services.

## Persons Served Demographics

### Caregiver Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	29 (15%)	33 (15%)	+4 (0%)
Female	164 (85%)	180 (85%)	+16 (0%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	193 (100%)	213 (100%)	+20

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	120 (62%)	133 (63%)	+13 (+1%)
Indigenous	33 (17%)	41 (19%)	+8 (+2%)
African	11 (6%)	12 (6%)	+1 (0%)
Other	29 (15%)	27 (12%)	-2 (-3%)
TOTAL	193 (100%)	213 (100%)	+20

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	0 (0%)	0 (0%)	0 (0%)
Young Adults (18-24)	2 (1%)	4 (2%)	+2 (+1%)
Adults 25-34	28 (14%)	26 (12%)	-2 (-2%)
Adults 35-44	58 (31%)	70 (33%)	+12 (+2%)
Adults 45-54	45 (23%)	47 (22%)	+2 (-1%)
Adults 55-64	43 (22%)	52 (24%)	+9 (+2%)
Adults 65+	17 (9%)	14 (7%)	-3 (-2%)
TOTAL	193 (100%)	213 (100%)	+20

### Children Demographics

Gender	2018-2019
	Persons Served
Male	121 (51%)
Female	117 (49%)
Transgender	1 (<1%)

TOTAL	238 (100%)
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Ethnicity/Culture	2018-2019
	Persons Served
Caucasian	143 (60%)
Indigenous	68 (29%)
African	10 (4%)
Other	17 (7%)
TOTAL	238 (100%)

Age	2018-2019
	Persons Served
Infants/Toddlers (0-6)	110 (47%)
Children (7-11)	82 (34%)
Youth (12-17)	45 (19%)
Young Adults (18-24)	1 (<1%)
Adults (25+)	0 (0%)
TOTAL	238 (100%)

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	8544 hrs	8544 hrs	N/A
Annual occupancy	7348 hrs (86%)	7775 hrs (91%)	+427 hrs (+5%)
Total intakes	82	84	+2
Total discharges	63	62	-1
Average Length of Time in Program at Discharge	458 days	458 days	0 days

### Program Outcomes

#### McMan Service Areas

##### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	48/76 (63%)	60/80 (75%)	+12 (+12%)
Improved Connection and Belonging	86/154 (53%)	70/94 (73%)	-16 (+20%)
Improved Well-being and Development	2/3 (66%)	4/4 (100%)	+2 (+34%)

##### Discharged Persons Served



Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	48/57 (84%)	51/57 (88%)	+3 (+4%)
Improved Connection and Belonging	63/71 (89%)	16/18 (89%)	-47 (0%)
Improved Well-being and Development	3/3 (100%)	44/50 (87%)	+41 (-13%)

## Program Outcomes

Discharged Persons Served (n=62)

\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client is safe from abuse, maltreatment and/or neglect	56/62	90%
Client has safe and stable housing	59/62	94%
Client requires support developing and implementing a permanency plan	14/49*	29%
Client is connected to community services/resources	59/62	94%
Client is engaged in activities to enhance their capacity to care for the child(ren) in their care	45/62	73%
Client is connected to cultural/spiritual activities and/or resources (child)	46/49*	94%
Child is progressing in meeting developmental milestones	33/37*	90%
Client has positive connections to family or natural supports	59/62	94%

## Assessment Scores

### Family Assessment Form (FAF)

The FAF is a family functioning assessment measured on a 5-point scale, with decreasing scores indicating positive change.

\*The FAF assessment tool was being used from April 1, 2018 to September 30, 2018. The program transitioned to the FAST assessment tool beginning on October 1, 2018. The data below represents discharged persons served between April 1, 2018 to September 30, 2018 assessed on the FAF. Due to the transition in assessment tools there is not enough data with the FAST tool to report at this time.

### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
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31	2	1.9	19 (62%)
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ASQ-3/ASQ:SE-2

The ASQ system is a developmental and social-emotional screening system for children from birth to 6 years. Positive outcomes are demonstrated by percent of persons served demonstrating no concerns.

ASQ-3/ASQ:SE-2 Output Reporting

ASQ-3 Output Reporting

Output	Amount
Total # of children 0-6 within program during fiscal year	96
# of children receiving regular screenings (2 or more)	62
Total # of screenings conducted during the fiscal year	217
# of children with 1 screening	34
# of children with 2 screenings	31
# of children with 3 screenings	14
# of children with 4 screenings	8
# of children with 5 screenings	7
# of children with 6 screenings	2

ASQ:SE-2 Output Reporting

Output	Amount
Total # of children 0-6 within program during fiscal year	96
# of children receiving regular screenings (2 or more)	62
Total # of screenings conducted during the fiscal year	219
# of children with 1 screening	34
# of children with 2 screenings	32
# of children with 3 screenings	13
# of children with 4 screenings	8
# of children with 5 screenings	6
# of children with 6 screenings	3

ASQ:SE-2 # of screenings conducted per age interval	
Age interval	# of screenings
2 months	1
6 months	20
12 months	30
18 months	34
24 months	31
30 months	21
36 months	40
48 months	21



60 months	21
TOTAL	219

ASQ 3/ASQ:SE-2 Post Reporting

ASQ-3 Post Reporting – Active Individuals Served

% of Post-screens that fell below the cutoff identifying developmental concerns by domain						
Age Interval	n=	Communication	Gross Motor	Fine Motor	Problem Solving	Personal Social
2 months	1	0%	0%	0%	0%	0%
4 months	1	0%	0%	0%	0%	0%
6 months	6	0%	17%	33%	17%	0%
8 months	7	14%	14%	0%	14%	28%
9 months	3	0%	33%	33%	0%	33%
10 months	4	0%	25%	0%	0%	0%
12 months	9	0%	22%	0%	11%	11%
14 months	9	0%	11%	0%	0%	0%
16 months	10	0%	10%	0%	10%	0%
18 months	6	0%	0%	0%	0%	0%
20 months	4	0%	0%	0%	0%	0%
22 months	7	0%	0%	0%	0%	0%
24 months	7	0%	0%	0%	0%	0%
27 months	14	14%	14%	0%	0%	0%
30 months	10	20%	10%	10%	10%	10%
33 months	8	0%	0%	0%	0%	0%
36 months	12	0%	8%	8%	0%	0%
42 months	13	15%	15%	8%	8%	15%
48 months	11	0%	0%	9%	0%	0%
54 months	5	0%	0%	0%	0%	0%
60 months	4	0%	0%	25%	25%	0%

ASQ:SE-2 Post Reporting – Active Individuals Served

Age Interval	n=	% of scores that were "above" cutoff (concerns)
2 months	1	0%
6 months	9	6%
12 months	12	4%
18 months	12	0%
24 months	15	4%
30 months	12	18%
36 months	20	11%



48 months	12	13%
60 months	6	14%

ASQ-3 Post Reporting – Discharged Individuals Served

% of Post-screens that fell below the cutoff identifying developmental concerns by domain						
Age Interval	n=	Communication	Gross Motor	Fine Motor	Problem Solving	Personal Social
2 months	0	-	-	-	-	-
4 months	1	0%	0%	0%	0%	0%
6 months	0	-	-	-	-	-
8 months	3	0%	0%	0%	0%	0%
9 months	1	0%	0%	0%	0%	0%
10 months	1	0%	0%	0%	0%	0%
12 months	1	0%	0%	0%	0%	0%
14 months	2	0%	50%	0%	0%	0%
16 months	4	0%	25%	25%	0%	0%
18 months	4	0%	0%	0%	0%	0%
20 months	7	0%	0%	14%	0%	0%
22 months	4	0%	0%	0%	0%	0%
24 months	1	0%	0%	0%	0%	0%
27 months	1	0%	0%	0%	0%	0%
30 months	2	0%	0%	0%	50%	0%
33 months	2	0%	0%	0%	0%	0%
36 months	6	0%	0%	0%	0%	17%
42 months	8	0%	0%	0%	0%	0%
48 months	2	0%	0%	0%	0%	0%
54 months	4	0%	0%	0%	0%	0%
60 months	12	8%	8%	15%	0%	8%

ASQ:SE-2 Post Reporting – Discharged Individuals Served

Age Interval	n=	% of scores that were “above” cutoff (concerns)
2 months	0	-
6 months	4	0%
12 months	3	0%
18 months	9	0%
24 months	6	0%
30 months	4	0%
36 months	9	17%
48 months	6	0%

60 months	14	7%
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### Persons Served Feedback Survey

Caregiver Feedback Survey (n=49)

\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
The McMan Kinnections Worker was helpful in supporting our family	80%	20%	0%	0%	0%	+4%
The McMan Kinnections Worker was respectful towards our family	85%	15%	0%	0%	0%	0%
The McMan Kinnections Worker understood the needs of our family in taking care of our child	72%	26%	2%	0%	0%	+2%
The McMan Kinnections Worker helped us to better <u>understand</u> the developmental needs of our child	60%	30%	2%	0%	8%	-6%
The McMan Kinnections Worker helped us to better <u>meet</u> the developmental needs of our child	53%	37%	4%	0%	6%	+4%
The McMan Kinnections Worker helped our family to connect with community services and resources	57%	31%	8%	0%	4%	+5%
The McMan Kinnections Worker was responsive to the needs of our family	70%	28%	2%	0%	0%	+2%
The McMan Kinnections Facilitator spoke to me about the importance of having family, friends and community in my life	62%	34%	2%	0%	2%	-
The McMan Kinnections Facilitator helped me build the skills needed to strengthen important relationships in my life	49%	27%	4%	0%	20%	-

### Feedback Survey Comments

*The services are ongoing and very helpful. We are trying our best and having someone help us is great. Great service.*

*I was very happy with everything that was done for me and my family. They went above and beyond*

*Our worker is very knowledgeable and goes above and beyond for our family. I really value having our worker to be there as a support.*

*My facilitator has been an invaluable support for myself and the child/children in my care. Their knowledge and understanding of our situation has been amazing.*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Bio Parent	19 (30%)	17 (27%)	-2 (-3%)
Kinship placement	29 (46%)	27 (44%)	-2(-2%)
Natural Support	0 (0%)	0 (0%)	0 (0%)
Private Guardianship	0 (0%)	0 (0%)	0 (0%)
Adoption	4 (6%)	4 (6%)	0 (0%)
Foster Care	8 (13%)	9 (15%)	+1 (+2)
YTA	0 (0%)	0 (0%)	0 (0%)
Group Home	2 (3%)	3 (5%)	+1 (+2%)
Supported Financial Agreement	0 (0%)	0 (0%)	0 (0%)
Living Independently	1 (2%)	1 (2%)	0 (0%)
Support Home	0 (0%)	1 (2%)	+1 (+2)
TOTAL	63	62	-1

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Allegation of abuse/neglect	1 (34%)	0 (0%)	-1(-34%)
Use of Physical Restraint	1 (33%)	0 (0%)	-1 (-33%)
Injury to the Child	0 (0%)	2 (29%)	+2 (+29%)
Threat of self-harm/suicide attempt	0 (0%)	2 (29%)	+2 (+29%)
Violence	0 (0%)	1 (14%)	+1 (+14%)
Other	1 (33%)	2 (28%)	+1 (-5%)
TOTAL	3 (100%)	7 (100%)	+4

### Program Performance Summary

This year, Kinnections has continued to see an increase in the complexity of families in the program. Families are requiring supports due to financial strain, caregivers are increasingly needing education, information and support in caring for and

meeting the needs of the kinship children placed in their homes. Many of these families are also dealing with issues of isolation. These factors have contributed to an increase in PRAT investigations throughout the past year.

## Demographics

The demographics in the Kinnections program have stayed consistent during this reporting period in comparison to 2018-2019. The program has seen an increase in overall numbers as the region utilizes kinship as the best option for children requiring out of home placements. This increased demand for kinship supports resulted in an increase to the Kinnections contract with additional resources being added for staffing, and an intention response to in staff for the program and the responsive ability to intake families after referral.

The Kinnections program added a section to the data base to capture the number and demographics of children being served in the program so that emergent needs could be responded to. 90 new Kinship families were assigned to facilitators at McMan in 2018-2019 including an additional 146 children in the homes.

## Program Outputs

- The program continued to have a waitlist this year; consistently 50+ throughout the year. Children's Services staff aided in supporting these families on the waitlist.
- Two full time staff and a supervisor were added to address the growing needs of the program
- 2018-2019 there were 90 intakes into the Kinnections Program and 65 discharges. There appears to be no significant change in discharges since the previous year. Discharges from the program continue to take a long time; families are opting to stay in the program past PPA as they want access to support should that need rise, Home Assessments are also taking a long time to reach assignment.
- Occupancy rate rose from 86% to 91%.

## Assessment Scores

- 206 Ages and Stages questionnaires (paired assessments; ASQ-3 and ASQ – SE2) were completed.
- 97 children were entered into the Ages and Stages Tracker, 71 children had more than one screening since entering the program.
  - 47 children showed improvement in 1 or more domains
  - 19 children showed no change
  - 6 children showed no improvement
- 70 Developmental Support Plans were individually created. 20 of these Developmental Support Plans targeted the Social-Emotional Domain while the others were created targeting 1 or more domains in Gross Motor, Fine Motor, Problem Solving, Communication and Personal-Social.
- 14 children were connected to BICS.

## Service Areas

There was an increase in all the service areas; Improved Safety, Connection and Belonging as well as Improved Well-being and Development. Goals and strategies were more clearly defined and targeted to the families' Individual plans. With a

focus on connection and belonging we are anticipating a higher percentage demonstrating improvement in all service areas going forward.

#### Satisfaction Survey

The Kinnections program has stayed consistent in the support that is offered to kinship families. The majority of families are feeling supported and respected. Focusing on the areas of connection, belonging and relationships for the 2019-2020 year should continue to highlight the quality work that is being done within the program.

#### Discharge Status

Kinnections continues to see the majority of the children in the program reaching permanency (44%) within the Kinship family that they were placed; while 27% of children have the ability of returning to parental care. These numbers have not shifted much since the last reporting period.

#### Critical Incident Summary

There were 6 critical incidents this year; this is an increase from 3 last year. This is possibly due to the increase in families that have entered the program as well as the complexities being seen.

Kinnections also began tracking secondary incidents (incidents where McMan staff are not the first to receive notification / or a report of the incident) in the kinship homes to better reflect the increasing complexity. These incidents help guide the programs response to trends or patterns in order to provide any adjustments or resources that the family /child may need.

There was a total of 21 secondary incidents this reporting period; 5 – violence, 3 – Allegation of Abuse, 2 – injury to child, 2 – failure to care of child, 1 – death, 2 – self harm/suicidal attempt and 6 – other.

### Family Development Program (FDP)

The Family Development Program provides support and education to families in the Calgary community and rurally in the Municipal Districts of Foothills and Willow Creek, who have identified needs or challenges that impact the well-being of the child and family.

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	105 (51%)	100 (53%)	-5 (+2%)
Female	101 (49%)	86 (46%)	-15 (-3%)
Transgender	0 (0%)	1 (1%)	+1 (+1%)
TOTAL	206 (100%)	187 (100%)	-19 (-10%)

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	160 (78%)	149 (80%)	-11 (+2%)
Indigenous	6 (3%)	4 (2%)	-2 (-1%)

Latin	10 (5%)	13 (7%)	+3 (+2%)
Other	30 (14%)	21 (11%)	-9 (-3%)
TOTAL	206 (100%)	187 (100%)	-19 (-10%)

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	71 (34.5%)	59 (32%)	-12 (-2.5%)
Children (7-11)	86 (42%)	85 (45%)	-1 (+3%)
Youth (12-17)	48 (23%)	42 (22%)	-6 (-1%)
Young Adults (18-24)	1 (0.5%)	1 (1%)	0 (+0.5%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	206 (100%)	187 (100%)	-19 (10%)

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	14240 hrs	14240 hrs	N/A
Annual occupancy	12246 hrs (86%)	11819 (83%)	-427 hrs (-3%)
Total intakes	144	118	-26
Total discharges	132	119	-13
Average Length of Time in Program at Discharge	175 days	184 days	+9 days

### Program Outcomes

#### McMan Service Areas

##### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	2/2 (100%)	2/5 (40%)	0 (-60%)
Improved Connection and Belonging	11/12 (92%)	16/16 (100%)	+4 (+8%)
Improved Well-being and Development	28/46 (61%)	-	-28 (-61%)

##### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	41/43 (96%)	117/119 (98%)	+76 (+2%)
Improved Connection and Belonging	113/138 (82%)	102/119 (86%)	-11 (+4%)
Improved Well-being and Development	12/14 (86%)	16/18 (89%)	+4 (+3%)

### Program Outcomes

#### Discharged Persons Served (n=119)



\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Caregiver is engaged in activities to enhance their capacity to care for the child (ren) in their care	106/119	89%
Client is safe from abuse, maltreatment and/or neglect	117/119	98%
Client has demonstrated improved behavior	106/119	89%
Client is progressing in meeting developmental milestones	119/119	100%
Client is maintained at home	93/99*	94%
Client has been returned home	12/16*	75%
Client has positive connections to family or natural supports	117/119	98%
Client is connected to community services/resources	114/119	96%
Client is connected to cultural/spiritual activities and/or resources	94/119	79%

## Assessment Scores

### Family Assessment Form (FAF)

The FAF is a family functioning assessment measured on a 5-point scale, with decreasing scores indicating positive change.

### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
119	2.2	2.1	90 (76%)

### ASQ-3/ASQ:SE-2

### ASQ-3 Output Reporting

Output	Amount
Total # of children 0-6 within program during fiscal year	59
# of children receiving regular screenings (2 or more)	15
Total # of screenings conducted during the fiscal year	61
# of children with 1 screening	28
# of children with 2 screenings	13
# of children with 3 screenings	2
# of children with 4 screenings	0

# of children with 5 screenings	0
# of children with 6 screenings	0

ASQ:SE-2 Output Reporting

Output	Amount
Total # of children 0-6 within program during fiscal year	59
# of children receiving regular screenings (2 or more)	15
Total # of screenings conducted during the fiscal year	61
# of children with 1 screening	44
# of children with 2 screenings	15
# of children with 3 screenings	0
# of children with 4 screenings	0
# of children with 5 screenings	0
# of children with 6 screenings	0

ASQ:SE-2 # of screenings conducted per age interval	
Age interval	# of screenings
2 months	0
6 months	7
12 months	10
18 months	5
24 months	5
30 months	6
36 months	9
48 months	10
60 months	9
TOTAL	61

ASQ-3 Post Reporting – Active Individuals Served

% of Post-screens that fell below the cutoff identifying developmental concerns by domain						
Age Interval	n=	Communication	Gross Motor	Fine Motor	Problem Solving	Personal Social
2 months	0	-	-	-	-	-
4 months	1	0%	0%	0%	0%	0%
6 months	1	0%	0%	0%	0%	0%
8 months	1	0%	0%	0%	0%	0%
9 months	0	-	-	-	-	-
10 months	3	33%	33%			33%
12 months	2	0%	0%	0%	0%	0%
14 months	2	0%	0%	0%	0%	0%
16 months	1	0%	0%	0%	0%	0%



18 months	1	0%	0%	0%	0%	0%
20 months	0	-	-	-	-	-
22 months	2	0%	0%	0%	0%	0%
24 months	1	0%	0%	0%	0%	0%
27 months	2	0%	0%	50%	50%	50%
30 months	1	0%	0%		100%	100%
33 months	0	-	-	-	-	-
36 months	3	66%	0%	0%	66%	66%
42 months	3	33%	0%	33%	33%	0%
48 months	3	0%	0%	0%	0%	0%
54 months	1	0%	0%	0%	0%	0%
60 months	2	0%	0%	0%	0%	0%

ASQ:SE-2 Post Reporting – Active Individuals Served

Age Interval	n=	% of scores that were “above” cutoff (concerns)
2 months	0	-
6 months	4	0%
12 months	4	40%
18 months	1	100%
24 months	4	0%
30 months	1	100%
36 months	4	50%
48 months	5	60%
60 months	3	40%

ASQ-3 Post Reporting – Discharged Individuals Served

% of Post-screens that fell below the cutoff identifying developmental concerns by domain						
Age Interval	n=	Communication	Gross Motor	Fine Motor	Problem Solving	Personal Social
2 months	0	-	-	-	-	-
4 months	1	0%	0%	0%	0%	0%
6 months	0	-	-	-	-	-
8 months	2	0%	0%	50%	50%	0%
9 months	2	0%	50%	0%	0%	0%
10 months	1	0%	0%	0%	0%	0%
12 months	1	0%	0%	0%	0%	0%
14 months	3	0%	0%	66%	0%	0%
16 months	2	0%	0%	0%	0%	0%
18 months	2	0%	0%	0%	0%	0%
20 months	0	-	-	-	-	-

22 months	1	0%	0%	0%	0%	0%
24 months	0	-	-	-	-	-
27 months	0	-	-	-	-	-
30 months	4	0%	0%	0%	0%	0%
33 months	1	0%	0%	0%	0%	0%
36 months	2	0%	0%	0%	0%	0%
42 months	4	0%	0%	0%	0%	0%
48 months	2	0%	0%	50%	0%	0%
54 months	2	0%	0%	0%	0%	0%
60 months	1	0%	0%	0%	0%	0%

ASQ:SE-2 Post Reporting – Discharged Individuals Served

Age Interval	n=	% of scores that were “above” cutoff (concerns)
2 months	0	-
6 months	2	0%
12 months	5	0%
18 months	4	0%
24 months	1	0%
30 months	4	0%
36 months	4	40%
48 months	4	20%
60 months	4	25%

**Persons Served Feedback Survey**

*FDP Family Feedback Survey (n=50)*

*\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
The FDP Worker was helpful in supporting our family connection	94%	2%	0%	0%	4%	-4%
The FDP Worker was respectful towards our family	98%	2%	0%	0%	0%	0%
The FDP Worker understood the needs of our family	92%	8%	0%	0%	0%	0%

The FDP Worker was active in helping our family with our needs	88%	8%	2%	0%	2%	-4%
The FDP Worker helped us to be more effective parents/caregivers	84%	10%	2%	0%	4%	-3%
The FDP Worker helped our family to connect with community services and resources	82%	12%	0%	0%	6%	+7%
The FDP Worker provided opportunity to connect with my culture	56%	4%	4%	0%	36%	+8%
The FDP worker spoke to me about the importance of having family, friends and community in my life	94%	2%	2%	0%	2%	-
The FDP worker helped me build the skills needed to strengthen important relationships in my life	86%	10%	0%	0%	4%	-

### Feedback Survey Comments

*My FDP worker was very accommodating to my needs and has been a huge help in having my brother adjust to my home. Thank you!!*

*It was so wonderful feeling so welcomed and having such great support and knowing I am able to always receive such warm service*

*My life has improved greatly over the time we worked together*

*Extremely helpful. Very pleased with tools I have learned from McMan.*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Bio Parent(s)	117 (88%)	105 (88%)	-12 (0%)
Kin/Natural Supports	6 (5%)	5 (4%)	-1 (-1%)
Children's Services placement	4 (3%)	4 (4%)	0 (+1)
Other	5 (4%)	5 (4%)	0 (0%)
TOTAL	132	119	

## Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Threat of self-harm/suicide attempt	8 (50%)	1 (20%)	-7 (-30%)
Severe acting out	1 (6%)	1 (20%)	0 (+14%)
Allegation of abuse/neglect	6 (38%)	1 (20%)	-5 (-18%)
Charges/Offences	1 (6%)	0 (0%)	-1 (-6%)
AWOL	0 (0%)	1 (20%)	+1 (+20%)
Serious Injury to the Child	0 (0%)	1 (20%)	+1 (+20%)
TOTAL	16 (100%)	5 (100%)	-11

## Program Performance Summary

The 2018/2019 fiscal year has shown overall positive outcomes again for the Family Development Program (FDP) where the three identified Service Areas (Improved Safety, Improved Connection and Belonging, and Improved Well-Being and Development) achieved 80% or higher positive goal achievement.

This fiscal year, FDP continued to use the Family Assessment Form (FAF) as the primary assessment tool with all families engaged in services. FAF focuses on the strengths of the family and the protective factors which already exist within the environment. Areas to highlight within the tool which align with the focused supports provided to families include Caregiver/Child Interactions (76% improvement) and Interaction Between Caregivers (68% improvement). The improvement shown in these areas continues to promote the focus of in-home (i.e. Increasing knowledge in the areas of parenting and child development, increasing resilience in parenting) and the positive environmental impact in-home has on vulnerable children.

In the coming year the Family Development Program will be moving to a new assessment tool which is anticipated to result in similar outcomes. The new tool is the Family Advocacy & Support Tool (FAST) which is a family planning and outcome tool for understanding family circumstances and assisting in planning for services and reunification.

Another area to highlight is the use of the Ages and Stages Questionnaire (ASQ) and Developmental Support Plans (DSP). During the fiscal year 56 children participated in the ASQ screening process resulting in workers creating 22 DSPs. Developmental Support Plans assist the in-home workers to teach and inform parents about activities they can be implementing with their children to encourage continued progress toward developmental milestones. The plans are developed when the results of the child's ASQ screening has shown concerns in one or more developmental and/or social/emotional areas. When an ASQ did not require the writing of a DSP, workers would provide families with information from the Comfort, Play & Teach website to encourage developmentally appropriate activities to play with their children.

A Client Feedback Survey was conducted with all active persons served which overall resulted in majority positive feedback. This year sections were added into the feedback survey focusing on McMan's initiative of Building Connection. Families reported a high level of satisfaction with the Building Connections initiative this has been demonstrated by workers introducing and encouraging families to bring in their natural supports to assist in the work being done. In turn, families are

beginning to look beyond their in-home worker/other professionals as being the major change agents, rather they are turning to those already in their lives to help during crisis and celebrate their successes.

This fiscal year (2018/2019) there was decrease in Annual Occupancy (-3%), Total Intakes (-26) and Total Discharges (-13) and an increase in Average Length of Time in Program (+9 days). As was consistent with the previous fiscal year, families continue to remain in program longer than in years past, often due to the multiple complexities' families are facing. With families remaining in program longer this will then decrease the total number of discharges along with total intakes. Due to a fluctuating staff contingency this year, the Annual Occupancy did see a decrease as these positions were unable to be filled due to circumstances surrounding the vacancy (ie. Medical leaves).

Over the coming year, the Family Development Program will be implementing a new Assessment tool (FAST) which we anticipate will be a good addition to the program. As FAST focuses on the entire family's strength and needs (not just a single individual), the outcomes will ensure in-home workers assists with increasing strengths and addressing needs, resulting in better outcomes. With the introduction of Building Connections and Trauma Informed Practice last fiscal year, FAST will help pull all these practices together ensuring workers are targeting the most urgent needs within the family.

### High Fidelity Wraparound

In partnership with Hull Services, Enviros and Calgary Children's Services, this program ensures that children and youth grow up in their natural homes and communities. The model emphasizes voice and choice. It enables family/children/youth to identify a team of people they consider to be helpers in their lives. The team then supports these individuals to achieve their goals.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	24 (49%)	30 (59%)	+6 (+10%)
Female	21 (43%)	19 (37%)	-2 (-6%)
Transgender	4 (8%)	2 (4%)	-2 (-4%)
TOTAL	49 (100%)	51 (100%)	+2

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	26 (53%)	29 (57%)	+3 (+4%)
Indigenous	13 (27%)	11 (22%)	-2 (-5%)
Mixed Race	2 (4%)	2 (4%)	0 (0%)
Other	8 (16%)	9 (17%)	+1 (+1%)
TOTAL	49 (100%)	51 (100%)	+2

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	3 (6%)	6 (11%)	+3 (+5%)
Children (7-11)	6 (12%)	5 (10%)	-1 (-2%)
Youth (12-17)	26 (53%)	30 (59%)	+4 (+6%)

Young Adults (18-24)	14 (29%)	10 (20%)	-4 (-9%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	49 (100%)	51 (100%)	+2

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	7120 hrs	7120 hrs	N/A
Annual occupancy	5838 hrs (82%)	5980 hrs (84%)	+142 hrs (+2%)
Total intakes	25	32	+7
Total discharges	28	27	-1
Average Length of Time in Program at Discharge	373 days	227 days	-146 days

### Program Outcomes

#### McMan Service Areas

##### Active Persons Served

Service Area	2018-2019 Persons Served # (%) Demonstrating Improvement
Improved Safety	16/32 (50%)
Improved Connection and Belonging	21/32 (66%)
Improved Well-being and Development	13/32 (41%)

##### Discharged Persons Served

Service Area	2018-2019 Persons Served # (%) Demonstrating Improvement
Improved Safety	21/27 (78%)
Improved Connection and Belonging	22/27 (81%)
Improved Well-being and Development	25/27 (94%)

### Program Outcomes

##### Discharged Persons Served (n=27)

\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client has maintained personal safety and or safety of others	21/27	78%

Client has demonstrated improved behavior	23/27	87%
Client is connected to mental health/addiction supports in the community	25/27	95%
Client is connected to physical health supports in the community	27/27	100%
Client is engaged in help seeking behavior to remain or return home	14/17*	82%
Client has positive connections to family or natural supports	25/27	95%
Client is connected to community services/resources	23/27	87%
Caregiver is engaged in activities to enhance their capacity to care for their child(ren)	21/27	78%
Client is connected to cultural/spiritual activities and/or resources	7/15*	47%

### Assessment Scores

#### Child and Adolescent Functional Assessment Scale (CAFAS)

CAFAS is a youth behavioral assessment. Decreasing scores indicate positive change

#### Active Persons Served

Persons Served Assessed	Pretest Score (mean)	Interim Score (mean)	# (%) Demonstrating Improvement
29	122	111	9 (40%)

#### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
16	101	74	12 (75%)

#### Persons Served Feedback Survey

*Youth/family feedback Survey (n=24)*

*\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
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The HFWA Facilitator was helpful in supporting me/our team to work together	67%	25%	8%	0%	0%	-8%
The HFWA Facilitator was respectful towards me	70%	25%	5%	0%	0%	-5%
The HFWA Facilitator understood my needs	54%	42%	4%	0%	0%	-4%
The HFWA Facilitator was instrumental in helping to reduce conflict in our home	38%	38%	4%	0%	20%	-8%
The HFWA Facilitator coordinated team meetings to meet my goals	45%	45%	0%	5%	5%	-6%
The HFWA Facilitator helped me to identify my strengths and my team's strengths	54%	38%	0%	0%	8%	+8%
The HFWA Facilitator helped me to connect with community services and resources	46%	38%	8%	0%	8%	+4%
The HFWA Facilitator spoke to me about the importance of having family, friends and community in my life.	54%	42%	0%	4%	0%	-
The HFWA Facilitator helped me build the skills needed to strengthen important relationships in my life.	46%	50%	0%	0%	4%	-

### Feedback Survey comments

*Very helpful! I have a lot of respect for the program and people running it*

*The facilitator when asked upon went above and beyond some of our expectations and it was greatly appreciated*

*We are forever grateful and thankful. It's been great and truly a blessing from the bottom of our hearts*

### Team Member Feedback Survey (n=8)

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
You are satisfied with the quality of support the client received from HFWA	87%	13%	0%	0%	0%
The HFWA Facilitator kept you well informed during the process of HFWA	87%	13%	0%	0%	0%
The HFWA Facilitator provided you with quality plans	100%		0%	0%	0%

The HFWA Facilitator was responsive to helping the client's with their needs	87%	13%	0%	0%	0%
The HFWA Facilitator was instrumental in helping to reduce conflict in the home	63%	25%	0%	0%	12%
The HFWA Facilitator helped the client identify community services and resources	75%	25%	0%	0%	0%
If requested, the HFWA Facilitator provided the client with opportunities to connect with their culture/spirituality	63%	25%	0%	0%	12%

*This program has been helpful for identifying the supports in our life*

*Great safety/prevention plan*

*Amazing level of services for our family*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with bio-family	7 (25%)	10 (37%)	+3 (+12%)
Living with kin/natural supports	5 (18%)	3 (11%)	-2 (-7%)
Living independently	3 (11%)	1 (4%)	-2 (-7%)
Adoptive home/private guardianship	0 (0%)	0 (0%)	0 (0%)
YTA placement	2 (7%)	2 (8%)	0 (+1%)
Transitional placement (adult)	0 (0%)	1 (4%)	+1 (+4%)
Homelessness	0 (0%)	0 (0%)	0 (0%)
Other Children's Services Placement	6 (22%)	5 (18%)	-1 (-4%)
Unknown	0 (0%)	0 (0%)	0 (0%)
Other (Absent from care, Foster Care, incarcerated, shared living, treatment facility)	5 (17%)	5 (18%)	0 (+1%)
TOTAL	22 (100%)	27 (100%)	+5

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Threat of self-harm/suicide attempt	2 (67%)	2 (18%)	0 (-49%)
Severe Acting Out	0 (0%)	3 (27%)	+3 (+27%)

Drug/Alcohol Abuse	0 (0%)	2 (18%)	+2 (18%)
Injury to the Child	0 (0%)	1 (9%)	+1 (+9%)
Violence	0 (0%)	1 (9%)	+1 (+9%)
Other	1 (33%)	2 (18%)	+1 (-15%)
TOTAL	3 (100%)	11 (100%)	+8

**McMan Trends 2018-2019 Reported from HFWA Collaborative**

WFI-4 Results and Feedback

The HFWA Collaborative in Calgary is made up of a partnership between McMan, Enviros, Hull Services and Calgary and Area Children’s Services. The national report is compiled across Canada and the US under the WFI-4 evaluations. The data from the HFWA Collaborative report below show that we consistently scored above the national average, (overall 93% over 82%). Through interviews with facilitators, persons served and their team members (32 individuals), our highest score correlate with a strong implementation process and successful transitions. Our lowest scores are consistent with areas of focus, including cultural planning and earlier prevention/safety planning.

**Interviews Completed: 32 (9 files)**

McMan was rated **93%** to fidelity during the 2018-2019 reporting period; higher than the national average of 82%. Facilitators’ ratings were consistent with their team members, youth, and caregivers scores.

**Principles:** McMan rated higher than the national average in fidelity in all principles. McMan’s highest rating principles were Culturally Competent, Family Voice and Choice and Persistence. McMan’s lowest rating principles were Individualized and Community Based.

- Family Voice and Choice 98%
- Team Based 91%
- Natural Supports 94%
- Collaboration 95%
- Community Based 89%
- Culturally Competent 99%
- Individualized 85%
- Strengths Based 90%
- Persistence 96%
- Outcomes Based 92%

**Phases:** McMan scored above the national average in all the phases. The highest scoring phases were Implementation and Transition. The lowest scoring phase was Initial Planning.Engagement 93%

- Initial Planning 89%
- Implementation 95%
- Transition 94%



**Areas of Improvement (scored less than 0.5 below average):** Having a crisis/safety plan on file

**Trends:**

Teams appreciated: team gave many viewpoints, communication was open, understanding of roles became clearer, food was nice, facilitator connection with youth/teams was strong, collaboration with the team, etc.

Teams struggled with would like more natural support involvement/commitment, youth sometimes has “too much voice”, keeping professionals and CS accountable, transportation/location of meetings, low youth motivation/engagement, balancing youth and team needs, needing clear objectives/mediation for teams in conflict, etc.

**Program Performance Summary**

In 2018-19, High Fidelity Wraparound (HFWA) has maintained a high occupancy rate (at 84%), while increasing Intakes by 7 from the previous year. This has been attained by decreasing the average amount of days people were accessing the process (-146 days). Addressing safety concerns promptly, then engaging in meaningful planning for wellness is also a contributor to shorter lengths of time in service. Our new average length of time involved with HFWA has dropped below 1 year, allowing the staff team to provide services to 7 additional youth/families. This is significant considering 7 persons served is a full-time caseload for 1.0 FTE Facilitator.

As with previous years, one of HFWA’s greatest outcomes for 2018-19 is youth residing with their biological family upon discharge (37%). An additional 27% of youth were living independently and/or independently with supports upon discharge. This also speaks to the value HFWA placed on connection with family and natural supports. The most impacted service area for those who have completed their involvement with HFWA is improved well-being and development (94%). Connection and belonging has always been a primary focus for HFWA. Its principle-based practice, Theory of Change and logistical approach of bringing supports to youth/families for planning means it has produced a 81% improvement in connection and belonging for those who have completed services with HFWA.

CAFAS scoring shows 75% of those being scored as improving overall behavior. HFWA’s average score upon discharge from 101 to 74 is a significant decrease. A score of 100 indicates residential intensity services being required or multiple sources of support needed to be maintained in an outpatient program, the decrease indicates they likely will find success in a family home with additional services to support. Siblings who presented no behavioral issues have been captured within HFWA’s scoring, and this accounts for most scores with no change.

Feedback surveys from youth, family and natural support team members show that facilitators continue to prioritize using strengths (+8%) to connect to community (+4%). Natural support team members highlighted their strong agreement with HFWA producing quality plans (100%), quality of support, information & responsiveness (87%). Consistently across measures, there has been a recognition of the strength in HFWA prevention/safety planning and a desire to have it more frequently implemented, particularly for reducing conflict in homes.

HFWA typically has very low rates of critical incidents (3 in 2017-2018) due to the program being a prevention and/or team-based intervention model. Facilitators are not typically present with youth/families in the immediate times of crisis. The 11 reported critical incidents in 2018-2019 were, in fact, 6 reports that crossed multiple types of incidents. Of the 6 reports, 3 included a single youth in which the incidents occurred over a single month. In true reflection of the critical incidents there was not an increase of number, but rather an increase in complexity.



Without a concrete measurement, HFWA would also like to recognize the increased focus during 2018-2019 on incorporating Signs of Safety (SOS), 3-5-7 Grief and Loss, and Motivational Interviewing into our practice. This year has also been the first full year of continued work with Manhattan group home (all Manhattan youth receive Wraparound services). The success we are seeing with this collaboration will continue to grow over the coming year as we focus on growing natural support networks and planning for transitions out of formal care.

## Youth Transitions to Adulthood (YTA)

The YTA program assists youth who require support in order to live independently yet are unable to stay with their natural families.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	25 (49%)	24 (55%)	-1 (+6%)
Female	25 (49%)	19 (43%)	-6 (-6%)
Transgender	1 (2%)	1 (2%)	0 (0%)
TOTAL	51 (100%)	44 (100%)	-7

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	21 (41%)	15 (34%)	-6 (-7%)
Indigenous	17 (33%)	15 (34%)	-2 (+1%)
African	6 (12%)	7 (16%)	+1 (+4%)
Other	7 (14%)	7 (16%)	0 (+2%)
TOTAL	51 (100%)	44 (100%)	-7

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	5 (10%)	6 (14%)	+1 (+4%)
Young Adults (18-24)	45 (88%)	38 (86%)	-7 (-2%)
Adults (25+)	1 (2%)	0 (0%)	-1 (-2%)
TOTAL	51 (100%)	44 (100%)	-7

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted spaces	23	23	N/A
Annual occupancy	23 (100%)	23 (100%)	0 (0%)

Total intakes	16	13	-3
Total discharges	19	9	-11
Average Length of Time in Program at Discharge	688 days	538 days	-150 days

## Program Outcomes

### McMan Service Areas

#### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	9/12 (75%)	20/21 (95%)	+11 (+20%)
Improved Connection and Belonging	27/32 (83%)	36/36 (100%)	+9 (+17%)
Improved Well-being and Development	24/32 (79%)	35/36 (97%)	+11 (+18%)

#### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	4/4 (100%)	8/9 (93%)	+4 (+7%)
Improved Connection and Belonging	17/19 (91%)	8/9 (93%)	-9 (+2%)
Improved Well-being and Development	18/19 (92%)	8/9 (93%)	-10 (+1%)

## Program Outcomes

#### Discharged Persons Served (n=9)

\*The data collection tool for this section was implemented early in the fiscal year. Two persons served were not in the program during the implementation, resulting in discharge data for 7 of the 9 persons served that were discharged

\*\*Items with a double asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client has maintained personal safety	5/7	71%
Client has safe and stable housing	7/7	100%
Client is connected to physical health supports in the community	5/7	71%

Client is connected to mental health/addiction supports in the community	4/5*	80%
Client is engaged in school, education, and/or employment	4/6*	67%
Client is progressing in learning skills to live intra-dependently	6/7	86%
Client has positive connections to family or natural supports	5/7	71%
Client is connected to cultural/spiritual activities and/or resources	4/6*	67%
Client is connected to community services/resources	6/7	86%

## Assessment Scores

### CASEY Life Skills

Casey Life Skills is a youth assessment focusing on life and living skills. It is measured on a 5-point scale, with increasing scores indicating positive change.

#### Active Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
18	4.2	4.5	10 (56%)

#### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
9	3.9	4.4	8 (93%)

### Youth Acuity Scale

The Calgary Homeless Foundation developed the Youth Acuity Scale to assess client acuity and to match that acuity to, and inform, case management service planning. The acuity scale is a short assessment completed to assess the level and intensity of services an individual requires, as well as progress and/or setbacks the young person experiences while receiving services. The Youth Acuity Scale assesses the status of a young person in the following areas: current housing; financial readiness for independence; living skills; education/employment; mental health; mental health supports; addiction; social competency; social supports; victimization; medical needs.

Discharged Persons Served (n=9)

\*The data collection tool for this section was implemented early in the fiscal year. Two persons served were not in the program during the implementation, resulting in discharge data for 7 of the 9 persons served that were discharged

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
7	30	25	6 (86%)

**Persons Served Feedback Survey**

*Persons Served Feedback Survey (n=16)*

*\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
I was provided support to find safe and stable place to live	94%	6%	0%	0%	0%	0%
I felt that staff cared about my safety	88%	12%	0%	0%	0%	0%
I was provided support when needed to maintain my safety	75%	19%	0%	0%	6%	-6%
I was provided support to attend school or find employment	88%	6%	0%	0%	6%	-6%
I was provided help to be successful at school and/or work	75%	19%	0%	0%	6%	-6%
I was provided with support to connect with community resources	50%	44%	0%	0%	6%	-1%
I was provided support to be physically healthy	57%	25%	6%	6%	6%	-3%
I was provided opportunities to learn new skills to be independent (cooking, budgeting, etc.)	69%	25%	6%	0%	0%	-6%
My McMan staff spoke to me about the importance of having family, friends and community in my life	82%	6%	6%	6%	0%	-

My McMan staff helped me build the skills needed to strengthen important relationships in my life	57%	31%	0%	6%	6%	-
If requested, I was provided opportunity to connect with my culture with my culture	44%	12%	0%	0%	44%	-29%

### Feedback Survey Comments

*I would like to say it was great to meet all the staff and have a good connection and experience with people I work with*

*My worker is amazing and incredibly supportive. It is a great program. I love it. Staff are super helpful*

*It was great to meet all the staff and have a good connection and experience with people I work with*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with bio-family	2 (11%)	1 (11%)	-1 (0%)
Living with kin/natural supports	3 (15%)	1 (11%)	-2 (-4%)
Living independently	10 (53%)	3 (33%)	-7 (-20%)
Treatment program	0 (0%)	0 (0%)	0 (0%)
Unsafe living arrangement	0 (0%)	0 (0%)	0 (0%)
Transitional placement (adult)	0 (0%)	0 (0%)	0 (0%)
Shared living	0 (0%)	2 (22%)	+2 (+22%)
Homelessness	0 (0%)	1 (11%)	+1 (+11%)
Incarcerated	0 (0%)	0 (0%)	0 (0%)
Unknown	0 (0%)	1 (11%)	+1 (+11%)
Other	4 (21%)	0 (0%)	-4 (-21%)
TOTAL	19 (100%)	9 (100%)	-10

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Threat of self-harm/suicide attempt	6 (20%)	5 (14%)	-1 (-6%)
Serious change in child's health	5 (17%)	3 (8%)	-2 (-9%)
Drug/Alcohol Abuse	4 (13%)	5 (14%)	+1 (+1%)
Injury to the child	3 (10%)	2 (6%)	-1 (-4%)
Death	2 (7%)	0 (0%)	-2 (-7%)

Violence	2 (7%)	2 (6%)	0 (-1%)
Hospitalization	2 (7%)	4 (11%)	+2 (+4%)
AWOL	1 (3%)	5 (14%)	+4 (+11%)
Severe acting out	1 (3%)	1 (3%)	0 (0%)
Destruction	1 (3%)	1 (3%)	0 (0%)
Threat from others	1 (3%)	0 (0%)	-1 (-3%)
Inappropriate sexual behavior	1 (3%)	2 (6%)	+1 (+3%)
Physical/mental health concerns	0 (0%)	2 (6%)	+2 (+6%)
Accident	0 (0%)	1 (3%)	+1 (+3%)
Charges/offences	0 (0%)	1 (3%)	+1 (+3%)
Other	1 (3%)	2 (6%)	+1 (+3%)
TOTAL	30 (100%)	36 (100%)	+6

### Program Performance Summary

YTA has 23 contracted spaces and accommodates additional fee for service (FFS) spaces. Over the course of the year, McMan provided support to 17 FFS youth. Even though the amount of discharges significantly decreased in 2018-19, there was still an intentional focus on planning for transition, thus the decrease in average length of time in program at discharge from 688 days to 538 days.

The YTA program has worked on a goal this reporting period to increase supportive housing in order to house youth with complex needs. At the end of this review, three youth were receiving increased supports through living in supportive housing and over 60% of discharges from YTA were to independent or shared living. YTA did have one youth discharge to homelessness in this reporting period. It is important to note that this discharge speaks directly to the complexity of youth within the program and the impact this has on the level of engagement.

Active YTA youth have increased in all McMan Service areas - safety, connection and belonging, and well-being and development - by as much as 20%, throughout 2018-19. Upon discharge eight out of nine youth made progress towards their goals in all service areas. The incorporation of the natural support framework over the past year has created a focus on connection and belonging and has supported youth in developing skills related to building and maintaining relationships in their lives.

CASEY Life Skills is an assessment tool that is completed in the intake period and every six months thereafter. For both active and discharge youth we have seen scores increase this reporting period, which indicates positive change in life and living skills. There is an increase of 93% in pre and post scores for discharged youth and a 56% increase in pre and interim scores for active youth. As active youth progress through the program, gain more knowledge and have more opportunities to practice living skills, we should see this percentage increase even further upon discharge.

The Youth Acuity Scale is a new scale that was implemented for the 2018-19 year with youth in YTA. It is completed during the intake period, as well as every three months thereafter. This tool assesses the level of complexity of a young person's experiences. It is used to determine the appropriate level, intensity and frequency of supports required in order to help the youth successfully transition to adulthood. It supports the staff and youth in identifying goal areas and informs decisions related to additional supports or referrals needed for the youth, whether internally or in the community. Over the last year, 86% of youth showed improvements between their pre and post

scores (from the time of intake until discharge).

This year YTA saw 29 critical incidents, some involving multiple categories, increasing that number to 36. This is a slight increase from last year where there were 24 incidents involving 30 categories. The areas of self harm/suicidal ideation, serious change in child’s health and drug/alcohol abuse, remain the top three categories accounting for 35% of incidents this reporting period. Of interest, four youth were involved in 14 of the incident reports, which directly related to the complexity of program youth with mental health, addictions and complex needs.

### Manhattan Place

Manhattan Place is a community-based home for youth age 13-17 years of age who are referred through Children’s Services and require temporary transitional placement. The program provides a safe, stable, and healthy living environment for its youth. Each youth participates in High Fidelity Wraparound to enhance and explore their connection to family, community and natural supports.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	11 (100%)	13 (100%)	+2 (0%)
Female	0 (0%)	0 (0%)	0 (0%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	11 (100%)	13 (100%)	+2

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	7 (63%)	8 (62%)	+1 (-1%)
Indigenous	1 (9%)	2 (15%)	+1 (+6%)
African	1 (9%)	1 (8%)	0 (-1%)
Other	2 (19%)	2 (15%)	0 (-4%)
TOTAL	11 (100%)	13 (100%)	+2

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	8 (73%)	11 (85%)	+3 (+12%)
Young Adults (18-24)	3 (27%)	2 (15%)	-1 (-12%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	11 (100%)	13 (100%)	+2

## Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted spaces	6	6	N/A
Annual occupancy	89%	90%	+1%
Total intakes	5	8	+3
Total discharges	6	6	0
Average Length of Time in Program at Discharge	265 days	444 days	+179 days

## Program Outcomes

### McMan Service Areas

#### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	1/1 (100%)	2/2 (100%)	+1 (0%)
Improved Connection and Belonging	2/2 (100%)	3/3 (100%)	+1 (0%)
Improved Well-being and Development	2/6 (33%)	1/1 (100%)	-1 (+64%)

#### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	5/6 (83%)	6/6 (100%)	+1 (+17%)
Improved Connection and Belonging	4/6 (66%)	6/6 (100%)	+2 (+34%)
Improved Well-being and Development	4/6 (66%)	4/6 (66%)	0 (0%)

## Program Outcomes

#### Discharged Persons Served (n=6)

\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client is safe from abuse, maltreatment and/or neglect	6/6	100%
Client has safe and stable housing	6/6	100%
Client has maintained personal safety	2/6	33%
Client is connected to physical health supports in the community	5/6	83%

Client is connected to mental health/addiction supports in the community	6/6	100%
Client has demonstrated improved behavior	3/6	50%
Client is engaged in school, education, and/or employment	3/6	50%
Client is progressing in learning skills to live intra-dependently	5/6	83%
Client has positive connections to family or natural supports	6/6	100%
Client is aware of and/or connected to appropriate community resources as needed	5/6	83%
Client is connected to cultural/spiritual activities and/or resources	4/5*	80%

### Assessment Scores

#### Child and Adolescent Functional Assessment Scale (CAFAS)

CAFAS is a youth behavioral assessment. Decreasing scores indicate positive change

#### Active Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
5	146	120	3 (60%)

#### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
6	132	115	3 (50%)

### Persons Served Feedback Survey

Persons Served Feedback Survey (n=6)

\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
I felt safe residing at Manhattan Place	83%	0%	0%	17%	0%	-17%
I felt that staff cared about me	83%	0%	0%	17%	0%	+16%

I was provided opportunity to improve relations with my family/kin	50%	33%	0%	17%	0%	-17%
I was provided support to attend school or employment	52%	16%	16%	16%	0%	+1%
I was provided help with things that concerned me	50%	33%	0%	17%	0%	-12%
I was provided with support to connect with community resources	67%	17%	0%	16%	0%	+17%
I was provided support to be physically healthy	67%	33%	0%	0%	0%	+33%
I was provided opportunities to learn new skills to be more independent (cooking, etc.)	66%	17%	17%	0%	0%	-17%
Staff at McMan spoke to me about the importance of having family, friends and community in my life	50%	33%	17%	0%	0%	-
Staff at McMan helped me build the skills needed to strengthen important relationships in my life	66%	34%	0%	0%	0%	-
If requested, I was provided opportunity to connect with my culture	33%	17%	0%	0%	50%	-17%

### Feedback Survey Comment

*It's awesome. It helped me*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Homelessness (emergency shelter)	2 (33%)	0 (0%)	-2 (-33%)
Living with bio-family	1 (17%)	1 (17%)	0 (0%)
Living with kin/natural supports	0 (0%)	1 (17%)	+1 (+17%)
Living independently (ILS/SIL)	3 (50%)	3 (50%)	0 (0%)
Transitional placement (adult)	0 (0%)	0 (0%)	0 (0%)
Unsafe living arrangement	0 (0%)	0 (0%)	0 (0%)
Treatment program	0 (0%)	1 (16%)	+1 (+16%)
Incarcerated	0 (0%)	0 (0%)	0 (0%)
Unknown	0 (0%)	0 (0%)	0 (0%)
Other	0 (0%)	0 (0%)	0 (0%)
TOTAL	6 (100%)	6 (100%)	0

## Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
AWOL	149 (40%)	251 (53%)	+102(+13%)
Drug/alcohol abuse	39 (10%)	14 (3%)	-25 (-7%)
Threat of self-harm/suicide attempt	34 (9%)	18 (4%)	-16 (-5%)
Violence	24 (6%)	10 (2%)	-14 (-4%)
Severe acting out	23 (6%)	34 (7%)	+11 (+1%)
Missed medication	23 (6%)	37 (8%)	+14 (+2%)
Refused medication	12 (3%)	35 (7%)	+23 (+4%)
Injury to the child	8 (2%)	7 (1%)	-1 (-1%)
Serious change in child's health	7 (2%)	3 (1%)	-4 (-1%)
Charges/offences	5 (1%)	2 (0%)	-3 (-1%)
Destruction	5 (1%)	9 (2%)	+4 (+1%)
Returned late	5 (1%)	18 (4%)	+13 (+3%)
Medication administration error	4 (1%)	12 (3%)	+8 (+2%)
Room Search	0 (0%)	10 (2%)	+10 (+2%)
Accident	0 (0%)	2 (0%)	+2 (0%)
Other	39 (10%)	9 (2%)	-30 (-8%)
TOTAL	376 (100%)	474 (100%)	+98

## Program Performance Summary

Over the course of the 2018-19 fiscal year, Manhattan's occupancy rate had a slight increase which can be attributed to the substantial increase in average length of time in the program. Four out of the six youth who transitioned during this reporting period had been in the program for greater than one year at the time of their transition.

The continued implementation of the High Fidelity Wraparound (HFWA) model with the Manhattan youth contributed to a 34% increase (from last year), in the area of improved connection and belonging for the youth. 100% of youth also had positive connections to family or natural supports and all youth have goals related to connection, belonging and building or strengthening relationships. Through these increased relationships, the program saw three of the six youth transition from the program to permanent homes with a family member or an important pre-existing relationship. This collaboration supported an additional two out of six youth to transition into a supported independent living (SIL) placement with a supported roommate. Both youth who transitioned into SIL also experienced a strengthening of their relationship with each of their perspective biological families who they spent several days with each week. The program saw one youth transition to a more intensive program, which accounts for the one youth with an increased CAFAS score, this one youth also had several areas of need captured within the program outcomes report, and client satisfaction survey.

Of the six youth discharged four experienced an increase in the area of well-being. All of the youth who had a goal in the areas of safety and connection and belonging during this reporting period demonstrated improvement in these service areas through the support of Manhattan and their HFWA teams.

With the successful transitions of six youth this reporting period, there was an increased vacancy in the fourth quarter of this reporting period. This allowed for five new youth to move into the program within the final 6 weeks of the reporting period. All of the youth’s initial assessments and goals were completed however they were not in the program long enough at this time to have any interim assessments or goal progresses to report. Therefore, the statistics for active youth in Manhattan during this reporting period are for a single youth. As this individual has made excellent strides and has multiple goals under each service area during this reporting period, the outcomes show a 100% improvement in all service areas including safety, connection and belonging, and well-being and development. This success has come from an increase in natural supports and family involvement which have been identified, accessed on a regular basis, and built into a safety plan through the collaboration with HFWA.

CAFAS scores saw a decrease for the one active youth who had an initial and interim assessments. For the youth who transitioned out of the program there was a decrease in scores for three out of six youth, an unchanged score for two out of six youth, and an increase for one out of six youth. As mentioned above, this one youth was also transitioned from Manhattan to a more intensive program.

Manhattan saw an overall increase in critical incidents during this reporting period. This is directly attributed to the increase in AWOL and returning late critical incidents from a single youth who consistently stayed overnight with their biological family at a high frequency before transitioning out of the program to a SIL placement. We saw a considerable decrease in drug and alcohol use and threat of self-harm/ suicide attempt which is heavily linked to the implementation of safety plans created in collaboration with HFWA. Changes year after year in critical incidents are based on the population of youth residing at Manhattan within the reporting period.

## Skills Groups

The Life Skills program provides youth with life skills and strategies to prepare them for adulthood.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	46 (69%)	76 (67%)	+30 (-2%)
Female	21 (31%)	35 (31%)	+14 (0%)
Transgender	0 (0%)	2 (2%)	+2 (+2%)
TOTAL	67 (100%)	113 (100%)	+46

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	40 (60%)	57 (50%)	+17(-10%)
Indigenous	11 (16%)	16 (14%)	+5 (-2%)



African	5 (8%)	Mixed race 7 (6%)	+2 (-2%)
Other	11 (16%)	33 (30%)	+22 (+14%)
TOTAL	67 (100%)	113 (100%)	+46

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	36 (53%)	78 (69%)	+42 (+16%)
Young Adults (18-24)	31 (47%)	34 (30%)	+3 (-17%)
Adults (25+)	0 (0%)	1 (1%)	+1 (+1%)
TOTAL	67 (100%)	113 (100%)	+46

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	1424 hrs	1424 hrs	N/A
Number of participants	67	113	+46
Number of participants completing program	55	93	+38

### Persons Served Feedback Survey

*Skills for Life Persons Served Feedback Survey (n=7)*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
I learned how to identify stress and deal with situations	43%	29%	14%	0%	14%
I learned how to pay attention to the person who is speaking	58%	14%	14%	0%	14%
I learned how to ask effective questions (eg: 5WH) to gather information	43%	43%	0%	0%	14%
I learned how to express my ideas and respect others ideas	58%	14%	14%	0%	14%
I learned how to understand and express my feelings	43%	43%	0%	0%	14%
I learned how to identify my feelings and triggers around anger	72%	14%	0%	0%	14%
I learned how to set boundaries with others in a positive way	43%	43%	0%	14%	0%

I learned how to identify challenges and ways to work through them	58%	14%	14%	14%	0%
I have become more aware of my helpful and harmful behaviors	58%	28%	0%	14%	0%
The group facilitator spoke to me about the importance of having family, friends and community in my life	58%	14%	14%	0%	14%
The group facilitator has helped me to build skills needed to strengthen important relationships in my life	58%	14%	0%	14%	14%
The group facilitator was effective in teaching life skills	100%	0%	0%	0%	0%
I felt safe as a participant of the group	72%	14%	14%	0%	0%

### Feedback Survey Comments

*I learned equality towards everyone and feel, think then do what I've orchestrated in thought*

*I learned that sometimes I'm not always the victim and that using body language/facial expressions can sometimes create problems and miscommunications. I also learned that I am too hard on myself and should not be*

*The important thing I learned is why and 5WH questions, knowing others, participate play roles. Awesome group*

### Skills for Anger Person's Served Feedback Survey (n=22)

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
I learned how to define anger	45%	50%	5%	0%	0%
I learned how to identify my feelings and triggers	36%	50%	4%	10%	0%
I learned how my values impact my decisions	50%	32%	18%	0%	0%
I learned about the cycle of anger and coping with the changes that occurs within the cycle of anger	36%	32%	32%	0%	0%
I learned how to identify challenges and resolve conflict	28%	68%	4%	0%	0%
I learned how to identify my strengths and implement positive calming/coping strategies	41%	45%	15%	0%	0%

I learned skills for effective social interaction	41%	32%	27%	0%	0%
I learned about positive resources and strategies to cope with anger	45%	41%	14%	0%	0%
The group facilitator spoke with to me about the importance of having family, friends and community in my life	50%	41%	9%	0%	0%
The group facilitator has helped me build the skills needed to strengthen important relationships in my life	41%	50%	9%	0%	0%

**Feedback Survey Comments**

*What I learned was the factors of what causes my anger and the feelings that lead up to that anger. I am going to change my behavior to be less extreme to my emotional reactions and have more positive outcomes due to good coping strategies.*

*I learned how to define my anger and I will change my behaviors by using new strategies that I learned at the class around how to deal with my anger.*

*I learned about what my anger was coming from and how to change that. I will definitely try to understand how I'm feeling and change it before I yell or try talking calmly.*

*The consequences of my actions. Since taking this group I'll think before I act.*

**Program Performance Summary**

There has been a great response to the Skills for Anger program in the community. Our facilitator is fully booked two months in advance throughout the year. Skills for life continues to work on different recruitment and referral sources to continue its success in the community.

This past year we witnessed a significant increase in the number of participants attending our Skills groups. This is a result of fine tuning our recruiting and follow up approach. We were also fully staffed for the entire year and ran many groups at full capacity.

A significant change in the cultural make up, is leading the Skills facilitators to ensure that their material is representative of the changing diversity of their groups.

The youth that have been attending the Skills groups report back that they are increasing their life skill knowledge and are able to put the skill sets into practice in their day to day life. In the past year, the program has been working on outcome measures and developed a client feedback survey administered at discharge, the survey was implemented in January of 2019. As of year-end, only 4 groups have been surveyed. Youth reported positive outcomes (strongly agree or agree) in the areas of: trigger awareness, healthy boundaries and dealing with stress.



Skills for Anger youth reported positive feedback around social interactions and coping with changes within the cycle of anger.

Next year these programs will have a full cycle of survey responses which will further clarify successes and challenges in the program.

### Parent-Child Assistant Program (P-CAP)

P-CAP supports the development and maintenance of healthy family lives. The voluntary program aids to prevent further births of alcohol/drug exposed children.

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	0 (0%)	0 (0%)	0 (0%)
Female	68 (100%)	73 (100%)	+5 (0%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	68 (100%)	73 (100%)	+5

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	35 (53%)	40 (55%)	+5 (+2%)
Indigenous	26 (39%)	27 (37%)	+1 (-2%)
Latin	2 (3%)	African 1 (2%)	-1 (-1%)
Other	3 (5%)	5 (6%)	+2 (+1%)
TOTAL	68 (100%)	73 (100%)	+5

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	0 (0%)	0 (0%)	0 (0%)
Young Adults (18-24)	5 (7%)	10 (14%)	+5 (+7%)
Adults 25-34	43 (64%)	46 (63%)	+3 (-1%)
Adults 35-44	19 (28%)	17 (23%)	-2 (-5%)
TOTAL	68 (100%)	73 (100%)	+5

## Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	5696 hrs	5696 hrs	N/A
Annual occupancy	5126 hrs (90%)	5582 hrs (98%)	+456 hrs (+8%)
Total intakes	25	26	+1
Total discharges	17	13	-4
Average Length of Time in Program at Discharge	992 days	871 days	-121 days

## Program Outcomes

### McMan Service Areas

#### Active Persons Served

Service Area	2018-2019 Persons Served # (%) Demonstrating Improvement
Improved Safety	37/60 (62%)
Improved Connection and Belonging	33/60 (58%)
Improved Well-being and Development	33/60 (58%)

#### Discharged Persons Served

Service Area	2018-2019 Persons Served # (%) Demonstrating Improvement
Improved Safety	10/13 (78%)
Improved Connection and Belonging	9/13 (70%)
Improved Well-being and Development	10/13 (78%)

## Program Outcomes

#### Discharged Persons Served (n=13)

\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client has safe and stable housing	10/13	78%
Client is safe from abuse, maltreatment and/or neglect	10/13	78%
Client's physical health needs are being met	10/13	78%
Client is connected to mental health/addiction supports in the community	8/13	62%

Client is engaged in school, education, and/or employment	2/4*	50%
Client is connected to community services/resources	12/13	89%
Client is connected to cultural/spiritual activities and/or resources	2/3*	67%
Client is connected to physical health supports in the community	10/13	78%
Client's physical health needs are being met	10/13	78%
Client has positive connections to family or natural supports	12/13	89%
Caregiver is engaged in activities to enhance their capacity to care for the child(ren) in their care	3/9*	33%
Client had no births affected by prenatal exposure to alcohol and/or drugs	2/3*	67%
Client has maintained a sober/clean pregnancy	1/1*	100%
Client is practicing effective birth control	6/7*	86%

**Client Satisfaction Survey**

*Persons Served Feedback Survey (n=42)*

*\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
The PCAP program helped me to stay safe	85%	12%	0%	0%	3%	-3%
The PCAP program helped me to maintain safe and stable housing	69%	26%	0%	0%	5%	+12%
The PCAP program helped me to maintain a sober/clean pregnancy	55%	14%	3%	0%	28%	+22%
The PCAP program helped me to connect with physical health care services in the community	74%	22%	2%	0%	2%	-4%
The PCAP program helped me to connect with mental health/addiction services in the community	72%	21%	2%	0%	5%	-1%
The PCAP program helped me build positive supports in my life (family, kin or friends)	69%	24%	0%	2%	5%	-7%



The PCAP program helped me connect with important community resources and services	74%	24%	2%	0%	0%	-2%
Participation in the PCAP program helped increase my skills and ability to care for my child(ren)	62%	29%	2%	0%	7%	-5%
The PCAP program helped me connect with cultural and/or spiritual supports	50%	26%	7%	0%	16%	-4%
My P-CAP staff spoke to me about the importance of having family, friends and community in my life	69%	21%	2%	2%	6%	-
My P-CAP staff helped me build the skills needed to strengthen important relationships in my life	60%	29%	2%	2%	7%	-

### Feedback Survey Comments

*P-CAP Program has helped a lot with resources and just having someone to talk to*

*The support and availability of the staff is incredible and helps dramatically with my skills and peace of mind while allowing me to maintain independence*

*Really couldn't have seen life going on if I didn't have Sophie come into my life when my 3rd child was born. With all the traumatic events that have happened in 3 years would have been more than I could handle*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Treatment Program	0 (0%)	0 (0%)	0 (0%)
Living with bio-family	0 (0%)	0 (0%)	0 (0%)
Living with kin/natural supports	1 (6%)	1 (8%)	0 (+2%)
Living independently	8 (47%)	5 (38%)	-3 (-9%)
Unsafe living arrangement	0 (0%)	0 (0%)	0 (0%)
Incarcerated	0 (0%)	0 (0%)	0 (0%)
Transitional placement (adult)	2 (12%)	0 (0%)	-2 (-12%)
Homelessness	0 (0%)	1 (8%)	+1 (+8%)
Unknown	6 (35%)	5 (38%)	-1 (+3%)
Other	0 (0%)	1 (8%)	+1 (+8%)
TOTAL	17 (100%)	13 (100%)	-4

## Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Violence	1 (10%)	0 (0%)	-1 (-10%)
Drug/Alcohol Abuse	3 (30%)	1 (20%)	-2 (-10%)
Threat of self-harm/suicide attempt	2 (20%)	0 (0%)	-2 (-20%)
Mental health concerns	1 (10%)	0 (0%)	-1 (-10%)
Missing person	1 (10%)	0 (0%)	-1 (-10%)
Severe acting out	2 (20%)	0 (0%)	-2 (-20%)
Death	0 (0%)	2 (40%)	+2 (+40%)
Injury to client	0 (0%)	1 (20%)	+1 (+20%)
Charges/offences	0 (0%)	1 (20%)	+1 (+20%)
TOTAL	10 (100%)	5 (100%)	-5

## Program Performance Summary

P-CAP serves participants who are pregnant or six (6) months post-partum who have acknowledged using drugs or alcohol during their pregnancy. Over the course of three (3) years in the program the participants and their Advocates work towards the goals of the program which are; to support women to reduce or stop alcohol and/or drug use during pregnancy, to achieve and maintain recovery, and to support healthy pregnancies and lives for women and their children.

In the 2018-2019 fiscal year, P-CAP demonstrated overall positive outcomes in the program. P-CAP's average program capacity for this fiscal year was 94%. Client satisfaction survey's reported that the women in the program are pleased with the services they are receiving.

The program did achieve its main goal by having 86% of women using effective birth control. Additionally, the program saw one (1) woman, have a clean and sober pregnancy.

The results from the client satisfaction survey are very positive. It is important to note that the program did see a 22% increase in the number of women maintaining a sober/clean pregnancy and a 12% increase in maintaining safe and stable housing. Advocates continue to work with the women to implement safety plans and regularly review them to ensure they are up to date with current strategies and tools.

P-CAP showed 75% or higher achieved outcomes in the areas of Safety, and Well-being and Development. The Advocates in the program have focused on connecting the women to community resources such as; mental health assessment and/or counselling, substance use treatment programs, stable income and housing, and domestic violence programs. Additionally, to increase these service areas, the Advocates role model healthy boundaries, appropriate social and communication skills to increase their capacity to aid in addressing identified needs.

The Service Area of, Improved Connection and Belonging, showed 70% of women in the program achieved this goal. This is considered a positive outcome due to the women's complex needs and their reluctance to connect with others due to their shame and guilt they feel in areas of addictions, mental health and trauma etc.

The Advocates have focused on new strategies such as using technology, skype and facetime, to connect with supports that live outside their community. The women have reported that they are able to better connect with their supports and have been utilizing them more often to help them meet their needs. Advocates empower the women by allowing them to be the driver of the goals they want to focus on, with small successes the women experience it increase the women’s self-confidence and self-efficacy.

Overall, the women entering P-CAP are seen with increased complex needs which have attributed to the challenges the program has experienced. As a result of this, there have been two (2) critical incident reports during the last year that involved death of a client. To be proactive in addressing the safety of the complex needs of the women, P-CAP will ensure that all women actively involved in the program will have a safety plan. The safety plan is developed with the woman to include both professional and natural supports. If the woman is not available, the Advocate will create a plan outlining their actions to reengage her or find her by using her professional and natural supports.

The assessment tool (Addiction Severity Index- ASI) has recently been discontinued. It was determined that the intrusive nature of the questions was traumatizing the women it was being administered to. As a result, P-CAP Council is looking for an alternative assessment tool for the program. It has been communicated that they hope to have this implemented within the next year.

### Protection of Sexually Exploited Children Act (PSECA)

PSECA supports youth who are at risk of, or are involved in, sexual exploitation.

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	0 (0%)	1 (4%)	+1 (+4%)
Female	19 (100%)	22 (96%)	+3 (-4%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	19 (100%)	23 (100%)	+4

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	9 (48%)	16 (70%)	+7 (+22%)
Indigenous	4 (21%)	3 (12%)	-1 (-9%)
Mixed race	5 (26%)	2 (9%)	-3 (-17%)
Other	1 (5%)	2 (9%)	+1 (+4%)
TOTAL	19 (100%)	23 (100%)	+4

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)

Youth (12-17)	16 (84%)	17 (74%)	+1 (-10%)
Young Adults (18-24)	3 (16%)	6 (26%)	+3 (+10%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	19 (100%)	23(100%)	+4

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	1424 hrs	1424 hrs	N/A
Annual occupancy	1097 hrs (77%)	1281 hrs (90%)	+184 hrs (+13%)
Total intakes	19	15	-4
Total discharges	11	13	+2
Average Length of Time in Program at Discharge	110 days	210 days	+100 days

### Program Outcomes

#### McMan Service Areas

##### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	3/9 (33%)	10/15 (67%)	+7 (+37%)
Improved Connection and Belonging	1/1 (100%)	7/16 (44%)	+6 (-66%)
Improved Well-being and Development	1/1 (100%)	9/15 (59%)	+8 (-41%)

##### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	11/11 (100%)	12/12 (100%)	+1 (0%)
Improved Connection and Belonging	10/11 (90%)	10/12 (83%)	0 (-7%)
Improved Well-being and Development	9/11 (88%)	9/12 (75%)	0 (-13%)

### Program Outcomes

#### Discharged Persons Served (n=13)

\*One person served was in the program for one month, resulting in discharge data for 12 of the 13 persons served that were discharged

\*\*Items with a double asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client is safe from sexual exploitation	8/12	67%
Client is not engaging in activities that place others at risk of sexual exploitation	10/12	83%
Client is safe from abuse, maltreatment and/or neglect	12/12	100%
Client is connected to physical health supports in the community	10/12	83%
Client is connected to mental health/addiction supports in the community	9/12	75%
Client is engaged in school, education, and/or employment	7/12	58%
Client is engaged in help seeking behavior to remain or return home	8/12	67%
Client has positive connections to family or natural supports	11/12	92%
Client is connected to cultural/spiritual activities and/or resources	2/2**	50%
Caregiver capacity to care for child/youth has improved	7/12	58%
Caregiver is engaged in activities to enhance their capacity to care for the child (ren) in their care	6/12	50%

## Assessment Scores

### PSECA Acuity Scale

Acuity Scale is an assessment of the level of complexity of a young person's experiences. It is used to determine the appropriate level, intensity and frequency of case management supports to sustainably end a young person's sexual exploitation, or risk of. Two factors can impact a youth's acuity score, the number of individual issues present, and the severity of those issues. The more of these issues and the higher the severity of the issues the individual is experiencing the higher their acuity. Decreasing scores indicate positive change

### Active Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
9	35	36	4 (44%)

## Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
12	38	27	9 (75%)

### Sexual Exploitation Risk Assessment Form (SERAF)

SERAF is a risk and protective factor assessment for sexually exploited youth. Decreasing scores indicate positive change. SERAF Assessment includes points for Vulnerabilities, Moderate risk indicators, and Significant risk indicators. Each has varying point amounts and timeframes to consider.

Youth Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
15	22	24	11 (73%)

## Persons Served Feedback Survey

*Persons Served Feedback Survey (n=16)*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
I was provided opportunities to learn the risks of sexual exploitation	94%	6%	0%	0%	0%	0%
I felt that staff supported me in making a positive connection to my natural supports	94%	0%	6%	0%	0%	-6%
I felt that staff really cared about my personal safety	87%	13%	0%	0%	0%	0%
I was provided support when needed to maintain my safety	56%	44%	0%	0%	0%	0%
I was provided support to attend school or find employment	25%	63%	6%	0%	6%	+8%
I was provided with support to connect with community resources	75%	25%	0%	0%	0%	+10%
My McMan PSECA worker spoke to me about the importance of having friends, family and community in my life	94%	0%	6%	0%	0%	-
My McMan PSECA worker helped me build the skills needed to strengthen important relationships in my life	88%	6%	6%	0%	0%	-

If requested, I was provided opportunity to connect with my culture	44%	31%	6%	0%	19%	-15%
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### Feedback Survey Comments

*Enjoyed the program. Felt very safe and cared about.*

*The program really made a difference in how I feel about who I am*

*It helped me get out of bad situations and learn new skills*

### Starburst (group) Survey Results (n=30)

Survey Item	For Sure	Neutral	Not Really	N/A
I have a better understanding of sexual exploitation	80%	17%	3%	0%
I know who I can talk to if I am unsafe or need support	83%	17%	0%	0%
I have a better understanding of what puts me at risk and what I can do to stay safe	70%	30%	0%	0%
The facilitator did their best to answer my questions	74%	23%	3%	0%
I enjoyed how the information was presented to me	70%	30%	0%	0%

### Feedback Survey Comments

*It was very informative and interesting to listen to.*

*It was good. I learned a lot.*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with bio-family	10 (63%)	6 (46%)	-4 (-17%)
Living with kin/natural supports	0 (0%)	1 (8%)	+1 (+8%)
Living independently	1 (6%)	0 (0%)	-1 (-6%)
Adoptive home/private guardianship	0 (0%)	0 (0%)	0 (0%)
Other Children's Services Placement	2 (12%)	3 (24%)	+1 (+12%)
YTA placement	0 (0%)	0 (0%)	0 (0%)
Transitional placement (adult)	0 (0%)	1 (8%)	+1 (+8%)
Homelessness	0 (0%)	0 (0%)	0 (0%)

Unknown	3 (19%)	0 (0%)	-3 (-19%)
Other	0 (0%)	2 (16%)	+2 (+16%)
TOTAL	16 (100%)	13 (100%)	-3

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Threat of self-harm/suicide attempt	1 (100%)	0 (0%)	-1 (-100%)
Allegation of abuse/neglect	0 (0%)	1 (100%)	+1 (+100%)
TOTAL	1 (100%)	1 (100%)	0

### Program Performance Summary

In 2018-2019, PSECA saw a slight increase (10%) in youth between the ages of 18-24. This means, youth ages 18-24 are returning for PSECA services they previously received when under 18 years of age.

This year there was an increase in the length of time in program and annual occupancy. In 2017-2018, these were impacted due to a gap in staffing and then the re-building of a new caseload. The 2018-19 reporting period shows a more accurate representation of both the annual occupancy and length of time in program. This length of time in program also speaks to the stability of the program and that persons served are more committed and engaged with staff. Staff report transitions feeling more purposeful, timely and smoother. This would ideally translate into next year's report showing less youth returning for services at age 18 and over.

In addition to SERAF, this year PSECA introduced two new assessment tools: the Client Outcomes Report and the Acuity Scale. They contribute significantly to our ability to accurately report that PSECA has had positive and meaningful outcomes. Overall the program demonstrates positive outcomes. Staff have defined and focused goal setting and service planning to align with the program outcome measurement strategies. An increased focus this year was placed on impacting persons served sense of connection and belonging with natural supports. 92% have positive connections to family or natural supports upon discharge. In addition, upon discharge youth showed improvements in Safety (92%), Connection and Belonging (83%) and Well-being and Development (75%) all of which remain high outcome measures for PSECA.

The PSECA Acuity Scale is a new scale that was implemented for the 2018-19 year with youth in the PSECA program. It is completed during the intake period, as well as every three months thereafter. This tool is an assessment of the level of complexity of a young person's experiences. It is used to determine the appropriate level, intensity and frequency of supports required to sustainably end a young person's sexual exploitation, or risk of. With average scores dropping by 11pts and 75% persons served showing improvement; PSECA is reducing the overall risk and vulnerabilities for sexual exploitation. These findings line up with the traditionally used, SERAF Assessment which shows 73% improvement for youth from intake until discharge.

Upon discharge over 50% of youth are living with bio-family (46%) or kin (8%). This speaks to the ongoing effectiveness of transition and discharge planning with the youth and their families.

## Fetal Alcohol Spectrum Disorder (FASD) Maps

FASD Maps is an advocacy /mentorship program that supports youth and their respective families or caregivers. FASD Maps is a partnership program with Renfrew Educational Services, Hull Services and Woods Homes. The partnership offers a continuum of services for families with children and youth affected by FASD.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	9 (56%)	5 (36%)	-4 (-20%)
Female	7 (44%)	9 (64%)	+2 (+20%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	16 (100%)	14 (100%)	-2

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	9 (56%)	5 (36%)	-4 (-20%)
Indigenous	5 (32%)	7 (50%)	+2 (+18%)
Latin	1 (6%)	1 (7%)	0 (+1%)
Other	1 (6%)	1 (7%)	0 (+1%)
TOTAL	16 (100%)	14 (100%)	-2

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	12 (75%)	9 (64%)	-3 (-11%)
Young Adults (18-24)	4 (25%)	5 (36%)	+1 (+9%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	16 (100%)	14 (100%)	-2

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	1424 hrs	1424 hrs	N/A
Annual occupancy	1110 hrs (78%)	1196 hrs (84%)	+86 hrs (+6%)
Total intakes	9	6	-3
Total discharges	7	7	0
Average Length of Time in Program at Discharge	216 days	282 days	+66 days

## Program Outcomes

### McMan Service Areas

#### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety and Security	0/0 (0%)	7/7 (100%)	+7 (+100%)
Improved Connection and Belonging	4/13 (31%)	6/7 (85%)	+2 (+50%)
Improved Well-being and Development	0/0 (0%)	3/7 (42%)	+3 (+42%)

#### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety and Security	7/7 (100%)	7/7 (100%)	+0 (0%)
Improved Connection and Belonging	6/7 (85%)	7/7 (100%)	+1 (+17%)
Improved Well-being and Development	7/7 (100%)	7/7 (100%)	0 (0%)

## Program Outcomes

#### Discharged Persons Served (n=7)

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client has safe and stable housing	7/7	100%
Client is safe from abuse, maltreatment and/or neglect	7/7	100%
Client is connected to mental health/addiction supports in the community	7/7	100%
Client has improved life skills	7/7	100%
Client is engaged in school, education, and/or employment	7/7	100%
Client has increased knowledge and understanding of their FASD diagnosis	7/7	100%
Client has positive connections to family or natural supports	7/7	100%
Client is connected to community services/resources	7/7	100%
Client is connected to cultural/spiritual activities and/or resources	7/7	100%

## Assessment Scores

### Casey Life Skills (12-24 yrs.)

Casey Life Skills is a youth assessment focusing on life and living skills. It is measured on a 5 point scale, with increasing scores indicating positive change.

#### Active Persons Served

Persons Served Assessed	Pretest Score (mean)	Interim Score (mean)	# (%) Demonstrating Improvement
7	3.87	4.37	7 (100%)

#### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
7	3.61	4.33	7 (100%)

## Persons Served Feedback Survey

Persons Served Feedback Survey (n=14)

\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
The MAPS coordinator treated me with respect	100%	0%	0%	0%	0%	0%
The MAPS coordinator had timely and relevant communication with me	100%	0%	0%	0%	0%	0%
The MAPS coordinator was professional	100%	0%	0%	0%	0%	0%
The MAPS coordinator helped increase my understanding of FASD	100%	0%	0%	0%	0%	0%
The MAPS coordinator helped me learn new skills and strategies	100%	0%	0%	0%	0%	0%
I was provided with support to connect with community resources	100%	0%	0%	0%	0%	0%
I was provided opportunity to reconnect with my family or other important people in my life	100%	0%	0%	0%	0%	0%

My self-confidence has increased	91%	9%	0%	0%	0%	0%
My decision-making skills have increased	91%	9%	0%	0%	0%	0%

### Feedback Survey comments

*My parents understand FASD more. This has improved our relationship.*

*I'm learning so much about all the community resources and programs available to me and my family. We are learning a lot about FASD as a family.*

*The FASD maps program is awesome I love how visual the resources and strategies we use are. For cooking and grocery shopping we make visual grocery lists and recipes by taking photos with my cell.*

*I gained so much insight and self-awareness which has changed everything for me. I am less frustrated and scared now. MAPS changed and saved my life.*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Homelessness	0 (0%)	0 (0%)	0 (0%)
Bio Parent(s)	2 (29%)	4 (58%)	+2 (+29%)
Kin/Natural Supports	2 (29%)	1 (14%)	-1 (-15%)
Living Independently	2 (29%)	0 (0%)	-2 (-29%)
Unsafe living arrangements	0 (0%)	0 (0%)	0 (0%)
Children's Services placement	0 (0%)	0 (0%)	0 (0%)
Treatment Program	0 (0%)	0 (0%)	0 (0%)
Incarceration	0 (0%)	0 (0%)	0 (0%)
Other	1 (13%)	2 (28%)	+1 (+15%)
TOTAL	7 (100%)	7 (100%)	0

### Critical Incident Summary (n=0)

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
TOTAL	0 (0%)	0 (0%)	0 (0%)

## Program Performance Summary

MAPS continue to exceed its stated outcome objectives at program discharge. Implementation of the building connections framework has enhanced active program participants feelings of connection and belongingness. A slight decrease in the number of youth served (from 16 to 14) is attributed to the increase in length of time in program. The MAPS Coordinator reports that youth have been more invested in completing their stated goals thus increasing the length of stay in program. One demographic of note this year, was the doubling of biological parents enrolled. A continued upward trend in this number is important as it speaks to the collaborative positively addressing the severe stigma faced by biological parents. Positive gains in life skills are attributed to the innovative approaches implemented by the MAPS coordinator. Cooking, cleaning and laundry skills have grown via the creative use of videos and photos to assist with this learning.

For individuals with an FASD, the risk of experiencing secondary concerns such as homelessness and incarceration is substantially greater than the general population. The MAPS program is evidence that, with the right amount of collaboration and support, these concerns can be eliminated. In the last two years, NONE of the youth have been incarcerated or experienced homelessness during their participation in the McMan MAPS program. This is a significant accomplishment and speaks to an effective collaboration between community and natural supports.

## PROGRAM PERFORMANCE – FAMILY SUPPORTS FOR CHILDREN WITH DISABILITIES (FSCD)

### Milestones

The Milestones program provides behavioural and developmental aide to support families who have a child with a developmental disability.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	114 (70%)	122 (75%)	+8 (+5%)
Female	49 (30%)	39 (24%)	-10(-%)
Transgender	0 (0%)	1 (1%)	+1 (+1%%)
TOTAL	163 (100%)	162 (100%)	-1

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	112 (67%)	105 (65%)	-7 (-2%)
Indigenous	0 (0%)	0 (0%)	0 (0%)
Mixed race	13 (8%)	19 (12%)	+6 (+4%)
Other	48 (25%)	38 (23%)	-10 (-2%)
TOTAL	163 (100%)	162 (100%)	-1

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	18 (11%)	21 (13%)	+3 (+2%)
Children (7-11)	76 (47%)	76 (47%)	0 (0%)
Youth (12-17)	57 (35%)	55 (34%)	-2 (-1%)
Young Adults (18-24)	12 (7%)	10 (6%)	-2 (-1%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	163 (100%)	162 (100%)	-1

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	9968 hrs	9968 hrs	N/A
Annual occupancy	7576 hrs (76%)	7775 hrs (78%)	+199 hrs (+2%)
Total intakes	101	109	+8
Total discharges	107	82	-25
Average Length of Time in Program at Discharge	182 days	190 days	+8 days

### Program Outcomes

#### McMan Service Area

##### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	1/4 (25%)	3/4 (75%)	+2 (+50%)
Improved Connection and Belonging	37/71 (52%)	27/36 (78%)	-10 (+26%)
Improved Well-being and Development	42/62 (68%)	23/26 (88%)	-19 (+20%)

##### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	5/6 (83%)	17/17 (100%)	+12 (+17%)
Improved Connection and Belonging	87/107 (82%)	77/82 (94%)	-10 (+12%)
Improved Well-being and Development	95/107 (89%)	74/82 (90%)	-21 (+1%)

## Program Outcomes

Discharged Persons Served (n=82)

Outcome	# of Persons Served Achieving Outcome	Percent of Persons Served achieving outcome
Client has demonstrated improved behavior	68/82	84%
Client is improving developmental skills	70/82	85%
Caregiver has an increased understanding of their child's disability and behavioural and/or developmental needs	76/82	93%
Caregiver understands the significant safety risks and/or vulnerabilities of their child's diagnoses/disability	78/82	95%
Client has positive connections to family and/or natural supports	70/82	86%
Client is connected to community services/resources	72/82	88%
Caregiver is working towards enhancing capacity to care for their child(ren)	80/82	97%

## Assessment Scores

Family Assessment Form (FAF)

The FAF is a family functioning assessment measured on a 5-point scale with decreasing scores indicating positive change.

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
82	2.5	2.0	64 (78%)

## Persons Served Feedback Survey

*Persons Served Feedback Survey (Behavioral Aides) (n=22)*

*\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
After working with my Family Coordinator, I have a better understanding of my child's strengths and abilities	68%	27%	5%	0%	0%	-
After working with my Family Coordinator, I have a better understanding of my child's challenges and needs	59%	36%	5%	0%	0%	-
After working with my Family Coordinator, I understand my child's diagnosis better	48%	42%	5%	0%	5%	-4%
After working with my Family Coordinator, I feel more confident talking to others (friends, family, teachers, coaches etc.) about my child's diagnosis, their needs and strategies that are helpful	62%	28%		0%	10%	-
I understand and feel confident in implementing the strategies that have been developed with my Family Coordinator	60%	40%		0%	0%	-
I use the strategies I have learned regularly in my home	55%	40%	5%	0%	0%	-
My child's challenging behaviours have decreased as a result of using the strategies I have learned	40%	36%	14%	0%	10%	-24%
My Family Coordinator assisted me in connecting to other resources such as respite, community aide, programs, services etc.	50%	40%	5%	0%	5%	-10%
I understand the importance of respite/self-care for myself and my family's well being	60%	40%		0%	0%	-
My Family Coordinator spoke to me about the importance of having family, friends and community in my life	45%	40%	5%	0%	10%	-

My Family Coordinator helped me build the skills needed to strengthen important relationships in my life	50%	32%	4%	0%	14%	-
I know what other programs and services are available to me and my child when I am finished with Behavioural/Developmental Aide Supports	45%	50%	5%	0%	0%	-
I was informed who to contact if I have questions or concerns about my Family Coordinator or the program	68%	32%		0%	0%	-
My Family Coordinator was respectful of my family and our needs (asked my opinion, involved me in developing goals, supportive etc.)	81%	19%		0%	0%	0%
My Family Coordinator was professional (on time, prepared, communicated in a timely manner, followed through, dressed appropriately etc.)	90%	10%		0%	0%	0%
My Family Coordinator was knowledgeable and skilled at meeting the needs of my child/family	77%	18%	5%	0%	0%	-
I would recommend the Milestones program to other parent/caregivers raising a child with a developmental disability	81%	19%		0%	0%	0%

### Feedback Survey Comments

*Our family, child's teachers, and Family Liason worker have all noticed significant changes in our child's behavior, attitude and outlook on life. We are so grateful for all the help provided.*

*The program has been instrumental in helping us develop our family.*

*I do not know what I would have done without my Family Coordinator and the rest of Milestones being on my side. I also suffer from a severe disability and some days I have felt at my wits end. It is wonderful to have someone that is not just able but willing to step in and help me to understand my child's disability better, thus making it easier for me to help him with his day to day needs. (also making it easier for the rest of my family to cope). So, so greatly appreciated!!!*

Persons Served Feedback Survey (Transition Coordinator) (n=4)

\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
As a result of working with the Transition Coordinator, I now have a better understanding of my child's strengths and abilities as they transition into adulthood	75%	25%	0%	0%	0%	0%
As a result of working with the Transition Coordinator, I understand what skills and areas to focus on as my child moves into adulthood	50%	50%	0%	0%	0%	-
I understand the Transition to Adulthood process and what it involves (Guardianship, Trusteeship, PDD, AISH, future planning etc.)	75%	0%	0%	0%	25%	-
I have tools and ideas to help my youth learn the necessary skills as they move towards transition to adulthood	50%	50%	0%	0%	0%	-
After working with the Transition Coordinator, I feel more prepared and optimistic about my youth's future	75%	0%	25%	0%	0%	-
I feel connected, or know how to connect, to other resources (post-secondary education, employment, PDD etc.) in the community	75%	25%	0%	0%	0%	0%
My Transition Coordinator spoke to me about the importance of having family, friends and community in my life	75%	25%	0%	0%	0%	-
My Transition Coordinator helped me build the skills needed to strengthen important relationships in my life	50%	25%	25%	0%	0%	-
I know who to contact if I have questions or concerns about the Transition Coordinator or the program	75%	25%	0%	0%	0%	-

My Transition Coordinator was respectful of my family and our needs (asked my opinion, involved me in developing goals, supportive etc.)	100%	0%	0%	0%	0%	0%
My Transition Coordinator was professional and communicated regularly with me (dressed appropriately, on time, prepared, followed through on tasks, timely in responses etc.)	100%	0%	0%	0%	0%	0%
My Transition Coordinator was knowledgeable and skilled at meeting the needs of my child/family	75%	0%	25%	0%	0%	-
I would recommend the Milestones program, Transition Supports, to other parent/caregivers raising a child with a developmental disability	75%	25%	0%	0%	0%	0%

### Feedback Survey Comments

*Professional service, great coordinator with follow through on all commitments.*

*Very professional and compassionate resource for our family during a critical period in our son's transition. Many thanks for your dedication, patience and skill.*

*Went above and beyond to help us with the process, everything we asked they had the answer for or found out for us! We could never thank you enough for all your help! Excellent program!!!!*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with bio-family	92 (89%)	80 (97%)	-12 (+8%)
Living with kin/natural supports	3 (3%)	2 (3%)	-1 (0%)
Living independently	0 (0%)	0 (0%)	0 (0%)
Adoptive home/private guardianship	0 (0%)	0 (0%)	0 (0%)

YTA placement	0 (0%)	0 (0%)	0 (0%)
Transitional placement (adult)	1 (1%)	0 (0%)	-1 (-1%)
Homelessness	1 (1%)	0 (0%)	-1 (-1%)
Unknown	0 (0%)	0 (0%)	0 (0%)
Other	6 (6%)	0 (0%)	-6 (-6%)
TOTAL	103 (100%)	82 (100%)	-21

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Threat of self-harm suicide attempt	2 (67%)	1 (100%)	-1 (+33%)
Threat to kill others	1 (33%)	0 (0%)	-1 (-33%)
TOTAL	3 (100%)	1 (100%)	-2

### Program Performance Summary

In the 2018/2019 fiscal year, Milestones has demonstrated positive outcomes wherein all NOM Domains attained a 90% or higher improvement. In addition, client feedback has overall been positive across all services provided by the Milestones program.

The discrepancy between the number of persons served (162) versus the number of completed outcomes and FAF (Family Assessment Form) scores (82) can be explained by understanding that families served by the Triple P program as well as the Transition Coordinator are not accounted for within the NOM domains and FAF totals due to utilizing other assessment tools specific to those niches.

The past year has shown little change in the demographic areas of the families Milestones serves. Gender, Culture/Ethnicity and age of clients remained at similar rates from the previous reporting year.

Milestones overall capacity improved slightly from 76% to 78% for the 2018-2019 year. There was one FTE position that remained unfilled for several months that impacted the ability to attain a higher overall occupancy rate.

For the 2018-2019 year, Milestones has returned to using the FAF Behavioral Functioning Factors to capture outcomes for our BDA program. Although the overall score of the FAF shows minimal change within the scores (with an overall 78% of clients showing improvement), this change is still positive. The Program Outcomes speak more clearly to the achievements of the clients served with an average of 90% improvement.

Milestones continues to work to address a variety of challenges that families face including stranger awareness, community and internet safety, self-harming behaviours, increasing natural supports, educating extended family members, decreasing challenging behaviours, increasing independence and daily living skills, establishing routines and schedules, increasing parental skill and confidence, teaching parents how to effectively advocate for their child in a variety of programming including school and community, friendship and social skills, communication skills,

sensory regulation and emotional regulation strategies, connecting to community resources and addressing mental health concerns and basic needs.

As seen in previous years, the trend towards more complex diagnoses continue. This past year Milestones worked with children and their families whom have diagnosis' such as Reactive Attachment Disorder, Unspecified Trauma and Stress Disorder, ODD (severe), Schizophrenia, PTSD, Dysregulated Mood Disorder as well as with several children who were inpatient at ACH mental health unit.

The Feedback Surveys that Milestones received demonstrate our strong capacity to engage families and provide excellent programing and service delivery that delivers results. This is both true in our BDA and Transition to Adulthood work.

The critical incidences that Milestones experienced during the 2018-2019 year decreased from 3 the previous year to one this reporting year. No significant trends can be detected.

In 2018-2019 Milestones enhanced service delivery in several ways, as seen below. The program also saw another Coordinator trained in Triple P Stepping Stones bringing the number of Coordinators trained to 3.

### Sibshops

Sibshops was chosen to enhance our service delivery as we heard from parents, and the community, that this important program had been absent from the Calgary area for quite some time.

Recognizing this gap, as well as understanding the importance that siblings play in the lives of those with disabilities and in keeping with McMan's framework of building connections, Milestones felt that this was a vital program that not only benefits the relationships between Siblings (therefore increasing natural supports) but also enhances the overall family wellbeing by increasing understanding and tolerance between Sibs and their sibling with a disability.

In the summer of 2018 our Transition Coordinator, a Sib herself, was trained in the Sibshops model. We ran our first session ran in the fall of 2018 with a total of 9 Sibs (ages 8 -11) attending. We then ran two age groups in winter/spring with ten Sibs (8-11) and 7 Sibs (ages 12 -14).

Comments from parents:

*"I'm very glad she participated, and we look forward to doing it again in the fall. The Sibshops series definitely got us closer!"*

*"He really enjoyed having an opportunity to be with other kids who understand what he goes through in the family. He learned that he is not alone and sometimes things are hard and wonderful at the same time".*

### Parent and Kid Connect

In keeping with McMan's framework of building natural supports, Milestones began a group for parents raising challenging kids with the intention of sharing stories, resources, comradery with the end goal of building connections

between parents as natural supports. Although there are some other ‘support groups’ available within the city, many were restrictive to a particular type caregiver (ie. Grandparents only) or specific disability (ie. Children diagnosed with Autism or FASD). Milestones wanted to create an all-encompassing, inclusive group where parents could connect with other parents and kids could connect with kids.

Run on a monthly basis and facilitated by two Family Coordinators (one for parents and one for kids), the parents meet to discuss various challenges while the kids group completes a mini lesson focused on regulation and then the lesson is reinforced throughout the remainder of the time during free play, games and activities.

### Transitioning to Adulthood

Milestones has continued to evolve its transition to adulthood services with 1 FTE dedicated to serving this population of families.

Over the past year, this service was streamlined in response to parent feedback to include families who need less support by offering a consultation model, as well as keeping with our full programming.

Consultation is typically 2-4 visits to share resources, ensure parents are on track with any paperwork and application requirements for their youth transition to adulthood and to answer any questions regarding the transitioning process.

The full program continues to focus on building independence, development of key life skills, and self-advocacy skills of youth with disability. This work involves a parent as well as the youth who participates in all meetings. A more formalized curriculum is in development to ensure that youth, and their parents, can be as prepared as possible for this critical time in a youth’s life.

### **Milestones Counselling**

The Milestones program provides a full-time clinician who provides short-term counselling support and strategies in parenting a child with a disability, enhancing knowledge around diagnosis, addressing grief and loss, as well as exploring underlying factors contributing to the challenges of raising a child with a disability. The Clinician also commonly addresses family, marriage and/or sibling challenges including step parenting and parenting conflicts, mental health concerns and any other challenges specific to the family’s unique needs.

### **Persons Served Demographics**

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	60 (80%)	61 (75%)	+1 (-5%)
Female	15 (20%)	20 (25%)	+5 (+5%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	75 (100%)	81 (%)	+6

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	47 (63%)	60 (74%)	+13 (+11%)
Indigenous	1 (1%)	1 (1%)	0 (0%)
Chinese	5 (7%)	Mixed Race 3 (4%)	-2 (-3%)
Other	22 (29%)	17 (21%)	-5 (-8%)
TOTAL	75 (100%)	81 (100%)	+6

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	8 (11%)	6 (7%)	-2 (-4%)
Children (7-11)	29 (39%)	35 (43%)	+6 (+4%)
Youth (12-17)	35 (47%)	35 (43%)	0 (-4%)
Young Adults (18-24)	3 (4%)	5 (6%)	+2 (+2%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	75 (100%)	81 (100%)	+6

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	1424 hrs	1424 hrs	N/A
Annual occupancy	1053 (74%)	1053 hrs (74%)	hrs (%)
Total intakes	39	42	+3
Total discharges	34	57	+23
Average Length of Time in Program at Discharge	715 days	283 days	-432 days

### Client Satisfaction Survey

Program Survey (n=4)

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
My counsellor treated me with respect	100%	0%	0%	0%	0%
My counsellor made me feel comfortable in talking about my challenges	100%	0%	0%	0%	0%
My counsellor helped me learn about myself	75%	25%	0%	0%	0%
My counsellor helped me understand my child better	75%	25%	0%	0%	0%
As a result of counselling, I feel more confident as a parent	50%	50%	0%	0%	0%

As a result of counselling, my anxiety has been reduced	25%	25%	25%	25%	0%
As a result of counselling, my stress has decreased	25%	25%	25%	25%	0%
As a result of counselling, my and/or my family's overall well-being has improved	25%	50%	0%	25%	0%
I will be able to continue utilizing the strategies the counsellor taught me independently at home	50%	50%	0%	0%	0%
I would recommend Milestones Counselling to others	75%	25%	0%	0%	0%

### Feedback Survey Comments

*He is an amazing counsellor. He really made me feel heard and listened to. His strategies and ideas were useful and practical. I felt understood*

*The counsellor has been amazing*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with bio-family	38 (91%)	53 (93%)	+15 (+2%)
Living with kin/natural supports	0 (0%)	3 (5%)	+3 (+5%)
Living independently	0 (0%)	0 (0%)	0 (0%)
Adoptive home/private guardianship	2 (5%)	0 (0%)	-2 (-5%)
YTA placement	0 (0%)	0 (0%)	0 (0%)
Transitional placement (adult)	0 (0%)	0 (0%)	0 (0%)
Homelessness	0 (0%)	0 (0%)	0 (0%)
Shared living	0 (0%)	1 (2%)	+1 (+2%)
Other	2 (4%)	0 (0%)	-2 (-4%)
TOTAL	42 (100%)	59 (100%)	+17

## Program Performance Summary

In the 2018/2019 reporting year, demographic information overall remains like that in the previous reporting year.

There was a significant decrease in the average length of time; this can be attributed to a change in clinicians. The new clinician had a different counseling style which incorporated solution focused and trauma informed practices which were able to identify the needs of the clients in a timely matter.

A pre/post tracking system was implemented to support reporting of clinical outcomes.

The clinician did leave this position in March 2019 and a new clinician was hired in June 2019. The program has proposed possible solutions to our funders on how best to address the issue of clinician turnover.

## PROGRAM PERFORMANCE – Homeless, PCAP and Community Programs

### Hope Homes/Aboriginal Hope Homes

The Hope Homes program and Hope Homes for Aboriginal Youth program provide service to youth, between the ages of 15-24, who are currently in the process of completing high school and are experiencing homelessness.

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	22 (47%)	17 (45%)	-5 (-2%)
Female	24 (51%)	20 (53%)	-4 (+2%)
Transgender	1 (2%)	1 (3%)	0 (+1%)
TOTAL	47 (100%)	38 (100%)	-9

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	17 (36%)	15 (39%)	-2 (+3%)
Indigenous	21 (45%)	15 (39%)	-6 (-6%)
African	2 (4%)	2 (5%)	0 (+1%)
Other	7 (15%)	6 (17%)	-1 (+2%)
TOTAL	47 (100%)	38 (100%)	-9

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	0 (0%)	0 (0%)	0 (0%)
Young Adults (18-24)	42 (89%)	38 (100%)	-4 (+11%)
Adults (25+)	5 (11%)	0 (0%)	-5 (-11%)
TOTAL	47 (100%)	38 (100%)	-9

## Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted spaces	Hope Homes – 24 Aboriginal Hope Homes - 8	Hope Homes - 24 Aboriginal Hope Homes - 8	N/A
Annual occupancy	Hope Homes - 98% Aboriginal Hope Homes – 100%	Hope Homes – 99% Aboriginal Hope Homes – 97%	Hope Homes - +1% Aboriginal Hope Homes - -3%
Total intakes	12	7	-5
Total discharges	10	7	-3
Average Length of Time in Program at Discharge	723 days	1032 days	+ 309 days

## Program Outcomes

### McMan Service Areas

#### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	19/22 (86%)	26/31 (84%)	+7 (-2%)
Improved Connection and Belonging	13/15 (87%)	26/31 (84%)	+13 (-3%)
Improved Well-being and Development	29/31 (92%)	27/31 (87%)	-2 (-5%)

#### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	10/10 (100%)	6/7 (85%)	-4 (-15%)
Improved Connection and Belonging	10/10 (100%)	6/7 (85%)	-4 (-15%)
Improved Well-being and Development	9/10 (90%)	6/7 (85%)	-3 (-5%)

## Program Outcomes

#### Discharged Persons Served (n=7)

\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served	Percent of Persons Served achieving outcome
Client has safe and stable housing	6/7	86%
Client has maintained personal safety	6/7	86%
Client is connected to physical health supports in the	5/7	71%

community		
Client is connected to mental health/addiction supports in the community	5/6*	83%
Client is engaged in school, education, and/or employment	3/6*	50%
Client is progressing in learning skills to live intra-dependently	6/7	86%
Client has positive connections to family or natural supports	5/7	71%
Client is connected to cultural/spiritual activities and/or resources	2/4*	50%

### Assessment Scores

#### Youth Acuity Scale

The Youth Acuity Scale is a youth risk assessment. Decreasing scores indicate positive change.

#### Active Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
25	43	40	17 (68%)

#### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
7	45	36	7 (100%)

### Persons Served Feedback Survey

*Persons Served Feedback Survey (n=25)*

*\*2017-2018/2018-2019 Difference column represents the annual difference between the combined responses for Strongly Agree and Agree*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	2017-2018/2018-2019 Difference
I was provided support to find safe and stable place to live	60%	36%	4%	0%	0%	-4%
I felt that staff cared about my safety	64%	32%	4%	0%	0%	-1%

I was provided support when needed to maintain my safety	72%	20%	8%	0%	0%	-5%
I was provided support to attend school or find employment	44%	40%	4%	4%	8%	-2%
I was provided help to be successful at school and/or work	56%	24%	0%	4%	16%	-3%
I was provided with support to connect with community resources	56%	44%	0%	0%	0%	+14%
I was provided support to be physically healthy	48%	40%	8%	4%	0%	+2%
I was provided opportunities to learn new skills to be independent (cooking, budgeting, etc.)	52%	40%	4%	0%	4%	+6%
My staff spoke to me about the importance of having family, friends and community in my life	76%	20%	4%	0%	0%	-
My staff helped me build the skills needed to strengthen important relationships in my life	64%	32%	4%	0%	0%	-
If requested, I was provided opportunity to connect with my culture	44%	44%	0%	0%	0%	+12%

### Feedback Survey Comments

*It has helped me get back on my feet! So I am satisfied :)*

*There are good people who work at Hope Homes*

*It's an amazing program*

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with Bio Family	0 (0%)	0 (0%)	0 (0%)
Living with Kin/Natural Supports	0 (0%)	0 (0%)	0 (0%)
Living Independently	5 (50%)	5 (71%)	0 (+21%)
Transitional Placement (adult services)	0 (0%)	0 (0%)	0 (0%)
Treatment Program	0 (0%)	0 (0%)	0 (0%)

Unsafe Living Arrangement	0 (0%)	0 (0%)	0 (0%)
Incarcerated	0 (0%)	0 (0%)	0 (0%)
Homelessness	1 (10%)	0 (0%)	-1 (-10%)
Unknown	0 (0%)	1 (14%)	+1 (+14%)
Other	4 (40%)	1 (14%)	-3 (-26%)
TOTAL	10 (100%)	7 (100%)	-3

### Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Threat of self-harm/suicide attempt	4 (20%)	7 (37%)	+3 (+17%)
Violence	4 (20%)	1 (5%)	-3 (-15%)
Drug/Alcohol abuse	3 (15%)	3 (16%)	0 (+1%)
Injury	2 (10%)	1 (5%)	-1 (-5%)
Accident	1 (5%)	0 (0%)	-1 (-5%)
Domestic violence	1 (5%)	0 (0%)	-1 (-5%)
Allegation of abuse/neglect	1 (5%)	1 (5%)	0 (0%)
Drug paraphernalia	1 (5%)	0 (0%)	-1 (-5%)
Destruction	1 (5%)	0 (0%)	-1 (-5%)
Serious change in child's health	1 (5%)	0 (0%)	-1 (-5%)
Death	1 (5%)	1 (5%)	0 (0%)
Charges/offences	0 (0%)	1 (5%)	+1 (+5%)
AWOL	0 (0%)	1 (5%)	+1 (+5%)
Other	0 (0%)	2 (10%)	+2 (+10%)
TOTAL	20 (100%)	18 (100%)	-2

### Program Performance Summary

Hope Homes programs, inclusive of Aboriginal Hope Homes, experienced a decrease in persons served from 2017 – 2018 to the current reporting year. Program intakes and discharges both reported a decrease for the current year. However, program occupancy remained on average ninety-eight percent. This past year the death of a client is believed to be the result of imperfect occupancy.

Serving equal amounts of forty percent of both Caucasian and Indigenous young people which speaks to the benefit of having a specialized first nation person. Approximately twenty percent of folks served identified as diversified ethnicity/culture. It may be of value to investigate cultural workers to support the non-indigenous people, this appears to be a gap in service.

This past year the building connections framework was embedded into practice. A celebration of implementation as youth reported high levels of support to connect with their community. Furthermore, youth felt they were provided with more opportunity than before to connect to their culture. Smaller gains were made with youth improving physical health as well as gain new skills of independence. Offering “Keys to Independence” and “Skills for Life”

programming appears to be directly impacted the success reported.

Youth safety appears to be an area of data inconsistency. While in program youth did not feel as supported in maintaining their safety. Whereas at discharge vast majority of youth identified as maintaining safety and having safe and stable housing. This appears to be a success of working on safety with clients.

Critical incidents remained on par for the past year. Although it was noted threat of self-harm/suicide attempt increased substantially whereas violence and destruction decreased. It is suggested the increase of connection and relationships with youth and their supports increased our knowledge of more personal details – seen in the increase of reporting of self-harm/suicide. As well the higher connection and engagement could equally reflect the lower reports of violence and destruction.

Youth discharged experienced a positive increase of twenty one percent from the previous year to successfully discharged into living independently. The nine-point average decrease in acuity for youth exiting program was a huge success. Every single youth discharged experienced a substantial improvement in positive change.

### Rapid Rehousing

The goal of Rapid Rehousing is to provide youth who are at risk of or experiencing homelessness with stable housing and supports. The program aims to reunify the young person and their family. If family reunification is not safe or appropriate, the program aims to enhance relationship between the young and their family while supporting the young person to secure safe and appropriate housing.

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	2 (29%)	2 (40%)	0 (+11%)
Female	4 (57%)	3 (60%)	-1 (+3%)
Transgender	1 (14%)	0 (0%)	-1 (-14%)
TOTAL	7 (100%)	5 (100%)	-2

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	5 (70%)	3 (60%)	-2 (-10%)
Indigenous	2 (30%)	0 (0%)	-2 (-30%)
East Indian	0 (0%)	1 (20%)	+1 (+20%)
Hispanic	0 (0%)	1 (20%)	+1 (+20%)
TOTAL	7 (100%)	5 (100%)	-2

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	2 (30%)	1 (20%)	-1 (-10%)
Young Adults (18-24)	5 (70%)	4 (80%)	-1 (+10%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	7 (100%)	5 (100%)	-2

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted spaces	3	3	N/A
Annual occupancy	100%	89%	-11%
Total intakes	4	3	-1
Total discharges	5	2	-3
Average Length of Time in Program at Discharge	205 days	294 days	+89 days

### Program Outcomes

#### McMan Service Areas

##### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	-	3/3 (100%)	+3 (+100%)
Improved Connection and Belonging	2/2 (100%)	-	-2 (-100%)
Improved Well-being and Development	2/2 (100%)	3/3 (100%)	+1 (0%)

##### Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	-	-	-
Improved Connection and Belonging	4/5 (80%)	2/2 (100%)	-2 (+20%)
Improved Well-being and Development	5/5 (100%)	2/2 (100%)	-3 (0%)

## Program Outcomes

### Discharged Persons Served (n=2)

Outcome	# of Persons Served	Percent of Persons Served achieving outcome
Client has safe and stable housing	2/2	100%
Client has maintained personal safety	2/2	100%
Client is connected to mental health/addiction supports in the community	2/2	100%
Client is engaged in school, education, and/or employment	2/2	100%
Client is progressing in learning skills to live intra-dependently	2/2	100%
Client is engaged in help seeking behavior to remain or return home	2/2	100%
Caregiver is engaged in helping strategies to support their child to live at home	2/2	100%
Client has positive connections to family or natural supports	2/2	100%
Client is connected to cultural/spiritual activities and/or resources	2/2	100%

## Assessment Scores

### Youth Acuity Scale

The Youth Acuity Scale is a youth risk assessment. Decreasing scores indicate positive change.

#### Active Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
3	32	31	2 (66%)

#### Discharged Persons Served

Persons Served Assessed	Pretest Score (mean)	Posttest Score (mean)	# (%) Demonstrating Improvement
2	30	37.5	0 (0%)

## Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with Bio Family	0 (0%)	0 (0%)	0 (0%)
Living with Kin/Natural Supports	0 (0%)	0 (0%)	0 (0%)
Living Independently	3 (60%)	1 (50%)	-2 (-10%)
Living independently with supports	2 (40%)	1 (50%)	-1 (+10%)
Transitional Placement (adult services)	0 (0%)	0 (0%)	0 (0%)
Treatment Program	0 (0%)	0 (0%)	0 (0%)
Incarcerated	0 (0%)	0 (0%)	0 (0%)
Unsafe Living Arrangement	0 (0%)	0 (0%)	0 (0%)
Homelessness	0 (0%)	0 (0%)	0 (0%)
Unknown	0 (0%)	0 (0%)	0 (0%)
Other	0 (0%)	0 (0%)	0 (0%)
TOTAL	5 (100%)	2 (100%)	-3

## Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
TOTAL	0 (100%)	0 (100%)	0 (0%)

## Program Performance Summary

Rapid Rehousing experienced a decrease in persons served. Although the decrease is only a difference of 2, the program is reviewing program structure to increase rapid successful transitions.

Longer transitional times are believed to be a result of; longer days in homelessness, lower natural supports, limited to no financial support, and limited employability.

It has been noted that in 2017-2018 intake process changed. This change to the intake process has appeared to impact program outputs; increasing length in program and perceived higher complexity of individuals served. These impacts appear to be interconnected.

Persons served continually report outstanding scores around safety as well in well-being and development, at 100 percent – although the test population is low.

A result of the focus and implementation of the Natural Supports Framework, twenty percent of youth at discharged reported having improved connection and belonging. Persons reported excellence in service with 100 percent outcomes across all categories of program outcomes, including but not limited to: Safe and stable housing, Personal Safety, Engagement in education and/or employment, and Connection to cultural/spiritual resources.

In reviewing where young people were discharged to, clients consistently discharged to living independently with or without supports. This emulates 2017-2018 data.

### Parent-Child Assistance Program – Expanded Enrollment (P-CAP-EE) (CFAN Funded programs)

P-CAP-EE is a program that supports parents diagnosed with, or suspected of having, Fetal Alcohol Spectrum Disorder (FASD). The program provides support to parents in order to strengthen parenting skills, decrease breakdowns within the parent-child relationship and build on existing strengths within the home.

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	4 (21%)	3 (14%)	-1 (-7%)
Female	15 (79%)	18 (86%)	+3 (+7%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	19 (100%)	21 (100%)	+2

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	9 (47%)	9 (45%)	0 (-2%)
Indigenous	9 (47%)	10 (50%)	+1 (+3%)
Portuguese	1 (5%)	1 (5%)	0 (0%)
Other	0 (0%)	0 (0%)	0 (0%)
TOTAL	19 (100%)	21 (100%)	+2

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	0 (0%)	0 (0%)	0 (0%)
Young Adults (18-24)	2 (10%)	3 (14%)	+1 (+4%)
Adults (25-34)	10 (54%)	10 (48%)	0 (-6%)
Adults (35-44)	7 (36%)	7 (33%)	0 (-3%)
Adults (45-54)	0 (0%)	1 (5%)	+1 (+5%)
TOTAL	19 (100%)	21 (100%)	21

#### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted spaces	18-20	18-20	N/A
Annual occupancy	98%	94 %	-4%
Total intakes	1	6	+5



Total discharges	2	12	+10
Average Length of Time in Program at Discharge	938 days	1046 days	+108 days

### Program Outcomes

Outcome	Indicators of Success	Percentage of persons served who met this indicator
Families will experience more success in functioning in their environment	Families will demonstrate increased access to community services	<p>22/22 (100%) families demonstrated improvement in functioning in their environment by attending school, remaining in stable living environments, having jobs or having stable means to support their families</p> <p>22/22 (100%) are on AISH or Alberta Works</p> <p>2/22 (9%) of persons served are working</p> <p>19/22 (86 %) of families report no addiction issues.</p> <p>17/22 (77%) of families do not have Children’s Services (CS) involvement</p> <p>6/22 (27%) of persons served are either in the process of obtaining a Medigene assessment or have completed one</p>
Persons served will develop goals and work toward achieving them with appropriate levels of support	Persons served developed goals with their mentor based on their individual needs	22/22 (100%) of families are making achievements towards personal goals
Safety of children will be enhanced by ensuring families are in stable and safe home environments	Increased number of families will be in stable housing	17/22 (77%) of families are living in stable accommodations
Caregiver capacity and skills are increased, enhancing safety of children	Families have increased knowledge and understanding of parenting skills.	<p>100% of families have worked on parenting strategies with the Mentors.</p> <p>4/22(18%) of our families have attended parenting classes in the community.</p>

## Program Outcomes

### Discharged Persons Served

Outcome	Percent of Persons Served achieving outcome
Caregiver is engaged in activities to enhance their capacity to care for the child (ren) in their care	100%
Client had no births affected by prenatal exposure to alcohol and/or drugs	20%
Client has maintained a sober/clean pregnancy	100%
Client has positive connections to family or natural supports	100%
Client has safe and stable housing	67%
Client is connected to community services/resources	100%
Client is connected to cultural/spiritual activities and/or resources	83%
Client is connected to mental health/addiction supports in the community	50%
Client is connected to physical health supports in the community	83%
Client is engaged in school, education, and/or employment	100%
Client is practicing effective birth control	100%
Client is safe from abuse, maltreatment and/or neglect	83%
Client's physical health needs are being met	83%

### Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with Bio Family	0 (0%)	0 (0%)	0 (0%)
Living with Kin/Natural Support	2 (100%)	0 (0%)	-2 (-100%)
Living Independently	0 (0%)	7 (58%)	+7 (+58%)
Transitional Placement (adult services)	0 (0%)	0 (0%)	0 (0%)
Unsafe Living arrangement	0 (0%)	0 (0%)	0 (0%)
Homelessness	0 (0%)	1 (9%)	+1 (+9%)
Other	0 (0%)	1 (9%)	+1 (+9%)
Unknown	0 (0%)	3 (24%)	+3 (+24%)
<b>TOTAL</b>	<b>2 (100%)</b>	<b>12 (100%)</b>	

## Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Child Apprehension	0 (0%)	1 (100%)	+1 (+100%)
TOTAL	0 (0%)	1 (100%)	+1 (+100%)

## Program Performance Summary

The 2018-2019 fiscal year has shown overall positive outcomes for PCAP EE. As well, client feedback was overall positive with participants being happy with the service provided. PCAP EE works with parents who are diagnosed or suspected of having Fetal Alcohol Spectrum Disorder (FASD) and who are parenting their children at least fifty percent (50%) of the time. PCAP EE focuses on teaching parents about developmental milestones and helping them to understand what is normal for their children. Parents who have a good understanding of appropriate behavior are better able to successfully parent and the safety of their children is enhanced when they have a better understanding of their children.

During this reporting period, PCAP EE saw a slight decrease (4%) in occupancy due to staffing shortage and an increase in service delivery of one hundred and eight days (108). This increase can be attributed to participants requiring additional supports to help ensure a successful transition from the program and to remain in stable housing.

Sixty seven percent (67%) of families are living in stable accommodations with the majority of clients living in accommodations through Calgary Housing. When housing is consistent, families can focus on creating a more stable home life for both themselves and their children, thereby decreasing Children's Services involvement and instability for their family unit. This can be attributed to mentors building relationships with landlords and Calgary Housing to assist in helping people to truly understand the complexities of an FASD and how to implement successful strategies with their families to sustain stable housing.

One hundred percent (100%) of participants have indicated being connected with family or other Natural Supports. This is due to mentors actively exploring with participants who they would contact in times of celebration and crisis on an ongoing basis. Mentors develop Safety Plans with participants which identify who they reach out to during tough times. The outcome for those that access addictions and mental health supports is lower at 50% due to the fact that not all participants in the program are struggling with these concerns.

Throughout the upcoming year, PCAP EE mentors will be trained in the Ages and Stages Questionnaire (ASQ) and Developmental Support Plans (DSP's). Developmental Support Plans assist the mentors to teach and inform parents about activities they can be implementing with their children to encourage continued progress toward developmental milestones. The plans are developed when the results of the child's ASQ screening has shown concerns in one or more developmental and/or social/emotional areas

## Parent-Child Assistance Program Rural and Urban (P-CAP Rural and Urban)

P-CAP Rural and Urban supports the development and maintenance of healthy family lives. The voluntary program aids to prevent further births of alcohol/drug exposed children.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	0 (0%)	0 (0%)	0 (0%)
Female	28 (100%)	28 (100%)	0 (0%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	28 (100%)	28 (100%)	0

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	17 (61%)	16 (57%)	-1 (-4%)
Indigenous	9 (31%)	10 (37%)	+1 (+6%)
African	1 (4%)	1 (3%)	0 (-1%)
Other	1 (4%)	1 (3%)	0 (-1%)
TOTAL	28 (100%)	28 (100%)	0

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	0 (0%)	1 (4%)	+1 (+4%)
Young Adults (18-24)	4 (14%)	3 (11%)	-1 (-3%)
Adults (25-34)	20 (71%)	20 (71%)	0 (0%)
Adults (35-44)	4 (15%)	4 (14%)	0 (-1%)
TOTAL	28 (100%)	28 (100%)	0

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted spaces	16-20	16-20	N/A
Annual occupancy	100%	94%	-6%
Total intakes	5	6	+1
Total discharges	5	7	+2
Average Length of Time in Program at Discharge	1150 days	1015 days	-135 days

## Program Outcomes

### P-CAP Rural Outcomes

Outcome	Indicators of Success	Percentage of persons served who met this indicator
Women are able to function better in their lives with appropriate levels of support from a mentor	<p>The measures and indicators that are used to track this outcome are; tracking the connections to:</p> <ul style="list-style-type: none"> <li>• Alberta Works</li> <li>• AISH</li> <li>• Student Funding</li> <li>• Children Services Supports</li> <li>• Employment</li> </ul>	7/10 (70%) persons served worked actively with their advocate to improve the quality of their lives
Persons served will develop goals and work toward achieving them with appropriate levels of support	Persons served have demonstrated progress towards working on personal goals	9/10 (90%) persons served have developed goals and are actively working on them.
Persons served are properly supporting baby and successfully parenting (where applicable)	Where applicable, persons served demonstrate increased parenting skills	9/10 (90%) are successfully parenting.
Persons served have stabilized housing and sources of income	Persons served will be living in stabilized housing or working towards finding stabilized housing and sources of income.	<p>8/10 (80%) live in stable housing</p> <p>2/10 (20%) are homeless</p> <p>9/10 (90%) of persons served have a stable source of income. Of these 9 women:</p> <ul style="list-style-type: none"> <li>• 2/10 (20%) of persons served are working,</li> <li>• 6/10 (60%) are on Income Assistance or AISH</li> <li>• 1/10 (10%) is being supported by her partner.</li> </ul>
With appropriate levels of support, mothers will be aware of and able to access community resources for professional services and education that will help them build and maintain healthy lives	Persons served will have increased knowledge and ability to access community agencies and feel more confident in their abilities to maintain these relationships.	9/10 (90%) of the persons served have been connected to community resources

Persons served will be supported in accessing alcohol and drug treatment, staying in recovery and resolving complex problems which have arisen during the period of their substance abuse	Persons served will have either stopped using or decreased either the amount of use or have moved to drugs that are known to have less harm	5/10 (50%) of persons served accessed treatment this year.  6/10 (60%) of persons served are currently abstinent.
Persons served will be helped to navigate the child welfare and court systems if necessary.	Persons served will have increased understanding and support in navigating court processes	4/10 (40%) of the women were involved with Children's Services.  3/10 (30%) of the women were involved with the court system.  3/10 (30%) of women were not involved in the court system.
Mothers will be supported in finding and using reliable birth control, and if having another child, supported to ensure the pregnancy is alcohol and drug-free	Persons served will be either using effective birth control or will have stopped using drugs and/or alcohol.  Persons served will have a second pregnancy within the program that is drug and alcohol free.	8/10 (80%) of the women are on birth control. <ul style="list-style-type: none"> <li>63% of these women have had tubal ligations.</li> </ul> 2/10 (20%) of the women are not using birth control.

P-CAP Urban Outcomes

Outcome	Indicators of Success	Percentage of persons served who met this indicator
Women are able to function better in their lives with appropriate levels of support from mentor	The measures and indicators that are used to track this outcome are; tracking the connections to: <ul style="list-style-type: none"> <li>Alberta Works</li> <li>AISH</li> <li>Student Funding</li> <li>Children Services Supports</li> <li>Employment</li> </ul>	18/19 (95%) of persons served worked actively with their worker to improve the quality of their lives  1/19 (0.05%) one person served reported moving out of the province and was not engaged for the duration of services delivered to her therefore she is not counted in the deliverables
Persons served will develop goals and work toward achieving them	Persons served have demonstrated progress towards working on personal goals	18/19 (95%) of persons served have developed goals and are actively working on them

with appropriate levels of support		
Persons served are properly supporting baby and successfully parenting (where applicable)	Persons served will work towards increasing their parenting skills to successfully support their baby and/or children.	12/19 (63%) of persons served are successfully parenting
Persons served have stabilized housing and sources of income	Persons served will be living in stabilized housing or working towards finding stabilized housing and sources of income.	17/19 (89%) persons served live in stable housing  18/19 (95%) of persons served have a stable source of income  11/19 (58%) of persons served are on Alberta Works or AISH  4/19 (21%) of persons served are currently working  2/19 (11%) of persons served are receiving financial support through student loans  1/9 (0.05%) of persons served are receiving Children Services Supports
With appropriate levels of support, mothers will be aware of and able to access community resources for professional services and education that will help them build and maintain healthy lives	Persons served demonstrate increased ability to access community agencies and feel confident in their abilities to maintain these relationships and services	18/19 (95%) of the persons served have been connected to community resources
Persons served will be supported in accessing alcohol and drug treatment, staying in recovery and resolving complex problems which have arisen during the period of their substance abuse	Through the harm reduction framework, the persons served will work towards decreasing use, using a safer drug or abstaining from substance use.	8/19 (42%) of persons served accessed treatment this year.  10/19 (53%) persons served are currently abstinent of both drugs and alcohol
Persons served will be helped to navigate the child welfare and court systems if necessary.	Persons served will have increased understanding and support in navigating court processes	8 /19 (42%) of the women were involved with Children's Services.  4/19 (21%) of the women were involved with the court system

<p>Mothers will be supported in finding and using reliable birth control, and if having another child, supported to ensure the pregnancy is alcohol and drug-free</p>	<p>Mothers will work towards either using effective birth control and discontinued use of drugs and/or alcohol</p> <p>Mothers who are experiencing their second pregnancy within the program will work towards being drug and alcohol free.</p>	<p>13/19 (68%) of the women are on birth control</p> <p>3/19 (16%) of the women report they are not sexually active</p> <p>1/19 (5%) of women had a second pregnancy not affected by drugs or alcohol</p> <p>1/19 (5%) of women reported not being on birth control because she wanted to get pregnant</p>
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Discharged Persons Served (n=7)

\*Items with an asterisk identify number and percent excluding N/A responses

Outcome	# of Persons Served	Percent of Persons Served achieving outcome
Caregiver is engaged in activities to enhance their capacity to care for the child (ren) in their care	3/7	42%
Person served had no births affected by prenatal exposure to alcohol and/or drugs	1/3*	33%
Person served has maintained a sober/clean pregnancy	0/2*	0%
Person served has positive connections to family or natural supports	5/7	71%
Person served has safe and stable housing	5/7	71%
Person served is connected to community services/resources	3/7	43%
Person served is connected to cultural/spiritual activities and/or resources	1/5*	20%
Person served is connected to mental health/addiction supports in the community	3/7	43%
Person served is connected to physical health supports in the community	5/7	71%
Person served is engaged in school, education, and/or employment	4/7	57%
Person served is practicing effective birth control	4/7	57%
Person served is safe from abuse, maltreatment and/or neglect	5/7	71%
Person served's physical health needs are being met	4/7	57%

## Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Homelessness	0 (0%)	0 (0%)	0 (0%)
Living with Bio Family	0 (0%)	0 (0%)	0 (0%)
Living with Kin/Natural Support	1 (16%)	1 (14%)	0 (-2%)
Living Independently	4 (68%)	4 (58%)	0 (-10%)
Transitional Placement (adult services)	0 (0%)	0 (0%)	0 (0%)
Unsafe Living arrangement	0 (0%)	0 (0%)	0 (0%)
Homelessness	0 (0%)	1 (14%)	+1 (+14%)
Other	0 (0%)	0 (0%)	0 (0%)
Unknown	1 (16%)	1 (14%)	0 (-2%)
TOTAL	6 (100%)	7 (100%)	+1

## Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Total	0 (0%)	0 (0%)	0 (0%)

## Program Performance Summary

P-CAP Rural and Urban serves participants who are pregnant or six (6) months post-partum who have acknowledged using drugs or alcohol during their pregnancy. The voluntary program aids to prevent further births of alcohol/drug exposed children over a three year term and supports the development and maintenance of healthy family lives.

Over the course of three (3) years in the program, the participants and the mentors will work on goals to prevent future affected births through connecting them to a variety of services, not limited to, community resources, mental health and substance use treatment.

Overall, the women entering P-CAP Rural and Urban programs are seen with multiple complex needs which have attributed to the challenges the program has experienced. In both settings' long waitlists to access services such as; low income housing, mental health and addiction support, parenting classes and basic needs supports has made it a struggle to appropriately address their needs. However, the advocates will support their clients in exhausting all resources in the community to meet their needs.

To help address areas where the program can, the advocates have been able to access funds through donations to the P-CAP program to provide basic needs (ex. Food, housing supplies etc.) to the clients. Continued efforts are being made in the both communities to leverage partnerships and to explore housing, addiction and mental health services for P-CAP clients.

Other strategies the program has been utilizing to address the needs of the women and to overcome the gaps in the community is increasing and strengthening the women’s natural support network. Increasing this network will provide a range of resources that the women can access immediately and without further barriers. These resources can include; childcare options, wellbeing, transportation and housing support.

A “support-folio” was created to address barriers that can occur when women are using the health care system. Typically, the women will have to repeat multiple times the challenges they have, and this can be traumatizing for the individual. The women tend to have multiple systems and services involved and are unable to share this information effectively due to their complexities. This package will include all the supports and contact information, any letters of participation in various skill building programs and release of information to natural and professional supports. This has received supportive feedback from professionals when dealing with the women in our program as they have accurate information in an expedited manner.

There were certain outcome areas that had lower percentages and this can attributed to the complex needs of the women and the expectations and goals of the program.

Women typically will not be engaged in school and/or employment as their focus is addressing their addictions and mental /emotional health needs. The program does encourage and promote this area depending where the women are at in their lives.

Women are provided opportunities to connect to cultural/ spiritual activities upon intake and throughout their time in the program. Many of the women indicate that they have supports in place and others choose not to pursue further connection to these activities.

The outcome areas for the program specific goals reflected higher percentages. PCAP did not have a pregnancy affected by drug/ and or alcohol this year.

The assessment tool (Addiction Severity Index- ASI) has recently been discontinued. It was determined that the intrusive nature of the questions were re-traumatizing the women. As a result, P-CAP Council is looking for an alternative assessment tool for the program. It has been communicated that they hope to have this implemented within the next year.

## Youth Alternative Program (YAP) Caseworker

The Youth Alternative Program enables vulnerable children and youth to increase their self-esteem and self-confidence, build decision making and relationship skills so that they can make safe life choices delivered through group sessions and individual youth work

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	7 (50%)	6 (67%)	-1 (+17%)
Female	7 (50%)	3 (33%)	-4 (-17%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	14 (100%)	9 (100%)	-5

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	9 (64%)	6 (67%)	-3 (+3%)
Indigenous	3 (22%)	3 (33%)	0 (+11%)
Mixed race	1 (7%)	0 (0%)	-1 (-7%)
Other	1 (7%)	0 (0%)	-1 (-7%)
TOTAL	14 (100%)	9 (100%)	-5

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	7 (50%)	2 (22%)	-5 (-28%)
Young Adults (18-24)	7 (50%)	7 (78%)	0 (+28%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	14 (100%)	9 (100%)	-5

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted spaces	10	10	N/A
Annual occupancy	76%	91%	+15%
Total intakes	8	5	-3
Total discharges	10	4	-6
Average Length of Time in Program at Discharge	258 days	284 days	+26 days

### Program Outcomes

#### McMan Service Areas

##### Active Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	-	5/6 (83%)	+5 (+83%)
Improved Connection and Belonging	3/4 (75%)	6/6 (100%)	+3 (+25%)
Improved Well-being and Development	3/4 (75%)	6/6 (100%)	+3 (+25%)

## Discharged Persons Served

Service Area	2017-2018 Persons Served # (%) Demonstrating Improvement	2018-2019 Persons Served # (%) Demonstrating Improvement	Difference
Improved Safety	1/1 (100%)	4/4 (100%)	+3 (0%)
Improved Connection and Belonging	9/10 (90%)	4/4 (100%)	-5 (+10%)
Improved Well-being and Development	9/10 (90%)	4/4 (100%)	-5 (+10%)

## Program Outcomes

Discharged Persons Served (n=4)

Outcome	# of Persons Served	Percent of Persons Served achieving outcome
Person served has not offended/re-offended	4/4	100%
Person served has maintained personal safety	4/4	100%
Person served has increased life skills*	4/4	100%
Person served is engaged in school, education, and/or employment	4/4	100%
Person served has connections to family or natural supports	4/4	100%
Person served is connected to community services/resources	4/4	100%

## Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with Bio Family	7 (70%)	3 (75%)	-4 (+5%)
Living with Kin/Natural Supports	0 (0%)	0 (0%)	0 (0%)
Living Independently	1(10%)	1 (25%)	0 (+15%)
Unsafe Living Arrangement	0 (0%)	0 (0%)	0 (0%)
Children's Services Placement	0 (0%)	0 (0%)	0 (0%)
Treatment Program	0 (0%)	0 (0%)	0 (0%)
Incarceration	0 (0%)	0 (0%)	0 (0%)
Open Custody	0 (0%)	0 (0%)	0 (0%)
Homelessness	0 (0%)	0 (0%)	0 (0%)
Unknown	1 (10%)	0 (0%)	-1 (-10%)
Other	1 (10%)	0 (0%)	-1 (-10%)
TOTAL	10 (100%)	4 (100%)	-6

## Critical Incident Summary

Type of Critical Incident	2017-2018 # (%) of total critical incidents	2018-2019 # (%) of total critical incidents	2017-2018/2018- 2019 Difference
Threat of self-harm/suicide attempt	3 (23%)	5 (71%)	+2 (+48%)
Drug/alcohol abuse	2 (15%)	2 (29%)	0 (+14%)
AWOL	2 (15%)	0 (0%)	-2 (-15%)
Charges/offences	2 (15%)	0 (0%)	-2 (-15%)
Allegation of abuse	1 (8%)	0 (0%)	-1 (-8%)
Violence	1 (8%)	0 (0%)	-1 (-8%)
Injury to the child	1 (8%)	0 (0%)	-1 (-8%)
Sexually inappropriate behavior	1(8%)	0 (0%)	-1 (-8%)
TOTAL	11 (100%)	7 (100%)	-4 (0%)

## Program Performance Summary

This is the second year that Youth Alternative Program (YAP) has continued to shift practice around the one to one support, as the program continues to shift towards delivering services to youth in a group-based curriculum. The youth 18-24 years old that have been coming into the program with more complex mental health disorders and experiencing more addictions. We have seen an increase in this area for the one to one support as they are in that area of age where there isn't a lot of services out in the community that work with youth over the age of 18 years old that don't have Children Services status.

There has been an increase in "Threats of Self Harm/suicide attempt" reports due to the increase of high-risk youth that have been intake into the program. This also affect the duration of the time that they have been in the program as they are needing further support to work with them around Safety and Well-being.

The staff have infused the learnings from the agency around building connections and implementing it into their practice with the youth that they are working with. There have been 3 out of the 4-youth discharged to their bio family and the other youth was over the age of 18 and they were discharged into independence, which is also considered a success. The staff are making sure that every youth is working building up their natural support capacity by using genograms and eco maps to identify the others that are involved in their lives. With that information they can guide the youth towards those people instead of relying on professionals to support them with all their goal tasks.

At discharge, YAP Casework has exceeded intended outcomes with 100% of youth reporting improvement in all three of McMan's intended Domains.

## Youth Alternative Program (YAP) Kick-Start/Restart Groups

KICKSTART (Kids In the Community with Knowledge) is a workshop based program for young people aged 7-11 years of age who are interested in improving their personal development and leadership skills. Over the course of the program the young people will come together to improve their social competence and overall emotional well-being.

RESTART (Re-Entering Society Through Active Responsible Thinking) is a workshop based program for young people 12-24 years of age who are looking to increase and develop their life and coping skills.

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	173 (77%)	176 (61%)	+3 (-16%)
Female	51 (23%)	112 (39%)	+61 (+16%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	224 (100%)	288 (100%)	+64

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	128 (57%)	149 (52%)	+21 (-5%)
Indigenous	29 (13%)	33 (11%)	+4 (-2%)
African	21 (10%)	39 (14%)	+18 (+4%)
Other	46 (20%)	67 (23%)	+21 (+3%)
TOTAL	224 (100%)	288 (100%)	+64

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	59 (26%)	96 (33%)	+37 (+7%)
Youth (12-17)	126 (56%)	158 (55%)	+32 (-1%)
Young Adults (18-24)	39 (17%)	34 (12%)	-5 (-5%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	224 (100%)	288 (100%)	+64

## Program Outputs

Output	2017-2018	2018-2019	Difference
Number of participants	224	288	+64
Number of participants completing program	141	163	+22

## Assessment Scores

### FCSS Social Inclusion Indicators

The FCSS Social Inclusion Scales are scored on a 5-point scale with higher scores reflecting positive change.

#### Kickstart FSII Outcomes

Youth Assessed	Domain	Pretest Score (mean)	Posttest Score (mean)	Difference
32	Self-esteem, self-confidence, optimism	2.3	2.4	+ 0.1

#### Restart FSII Outcomes

Youth Assessed	Domain	Pretest Score (mean)	Posttest Score (mean)	Difference
47	Self-esteem, self-confidence, identity	3.7	3.7	0
34	Pro-social attitudes, clear values	2.9	2.8	-0.1
33	Constructive use of time	3.3	3.4	+0.1

## Persons Served Feedback Survey

### *Kickstart Persons Served Feedback Survey (n=21)*

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
I enjoyed the group I participated in	72%	24%	4%	0%	0%
I learned how to improve my self-esteem	52%	38%	10%	0%	0%
I learned about "I-messages"	52%	29%	14%	5%	0%
I learned how to make good decisions	71%	19%	10%	0%	0%
I learned about the effects of smoking	86%	10%	4%	0%	0%
I learned why some people do not smoke	86%	10%	4%	0%	0%

I learned about ways advertisers use to trick me to buy their products	62%	28%	5%	5%	0%
I learned about the causes of stress	76%	24%	0%	0%	0%
I learned about ways to better manage my stress	62%	29%	9%	0%	0%
I learned about ways to better communicate	67%	19%	10%	0%	4%
I learned skills to get along with other people	62%	28%	5%	0%	5%

### Feedback Survey Comments

*I like Kickstart because it teaches you many things and the activities make it fun*

*It is really fun and the learning is really good because you can make stuff and I like to learn that way*

*The program is awesome and fun!*

### Restart Persons Served Feedback Survey (n=91)

Survey Item	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
I enjoyed the group I participated in	52%	42%	6%	1%	0%
I learned about social skills	52%	42%	6%	1%	0%
I learned about ways to deal with anxiety	44%	33%	19%	3%	1%
I learned about ways to deal with peer pressure	60%	32%	7%	1%	0%
I learned about risk taking and substance abuse	60%	33%	6%	1%	0%
I learned how the media influences me	55%	34%	10%	0%	1%
I learned about techniques to manage my emotions	50%	34%	14%	2%	0%
I learned about family communication	54%	33%	11%	2%	0%
I learned how to build healthy relationships	53%	33%	11%	2%	1%
I learned about ways to better communicate	44%	48%	6%	1%	1%
I learned techniques to make positive decisions	52%	41%	6%	0%	1%

## Feedback Survey Comments

*Helped a lot with my anger and figuring out how to calm down*

*It really helped with making good decisions*

*I learned a lot about what not to do and how to resist peer pressure*

## Discharge Placement

Discharge Placement	2017-2018 Person's Served (#/%)	2018-2019 Person's Served (#/%)	2017-2018/2018- 2019 Difference
Living with Bio Family	126 (71%)	153 (73%)	+27 (+2%)
Living with Kin/Natural Supports	1 (1%)	6 (3%)	+5 (+2%)
Living Independently	1 (1%)	1 (<1%)	0 (0%)
Unsafe Living Arrangement	0 (0%)	0 (0%)	0 (0%)
Children's Services Placement	0 (0%)	11 (5%)	+11 (+5%)
Treatment Program	0 (0%)	0 (0%)	0 (0%)
Incarceration	29 (16%)	25 (12%)	-4 (-4%)
Other	7 (4%)	1 (<1%)	-6 (-3%)
Homeless	0 (0%)	0 (0%)	0 (0%)
Unknown	13 (7%)	11 (5%)	-2 (-2%)
TOTAL	177	208	+31

## Program Performance Summary

Restart and Kickstart program have continued to be the focus for the Youth Alternative Program, as there is a high level of interest for Group Programming in the community and in Calgary Board of Education. This past year the program added 3 schools increasing the amount of youth served.

In embedding the building connections framework, the RESTART and KICKSTART groups have started to offer schools the opportunity to have a parent information night, allowing all parents to come together and be more involved with our groups. There has been feedback from schools that have asked to increase the number and frequency of Parent information nights.

McMan has continued to work with the City of Calgary in aligning the appropriate FSII survey with the intent of the program. Changes have been made in this fiscal which should lead to more noticeable positive changes in the youth that participate. There is a small variance in the FSII outcomes (from 0% to 1% in the positive). This is a result of alignment issues with the program deliverables. The youth are increasing their knowledge around the topics in McMan's feedback survey, but we are not reflecting this in their FSII. The staff have taken extra measures of doing them 1:1 with the youth in the groups, so that they are understanding what they are answering for each question.

The areas of positive feedback with the KICKSTART program is around the Smoking Education and Stress, these two

sessions have a lot of hands on activities and they get to see the cause and affect during these activities. The areas that are needing growth are the sessions on making good decisions and communication. These topics are the more abstract out of the 8 sessions. Over the summer, the facilitators will be making changes around the sessions that are needing growth.

The RESTART program’s positive feedback has been in sessions that speak to; social skills, decision making, communication and education on drug and alcohol use. These sessions have a strong reflection component and allow for robust discussion. The areas that were less well received, focus on managing emotions and peer pressure. This is not a surprise as these two sessions are more difficult for youth to engage in as they require trust and vulnerability. The program has been working on different ways to engage the youth and there will be changes made over the summer to these two areas with the hope to engage the youth into the conversation where they will feel they gained what they needed from those sessions.

### Youth and Adult Action Club (YAAC)

The goal of the YAAC program is to provide a peer support group for youth living with an FASD. Specific services provided include:

- Increase natural supports and community connections
- Increase understanding of FASD
- Better able to manage their day to day routines
- Connect youth exiting CYOC to post discharge supports
- Support youth in 6 key areas- cognitive functioning/communication, adaptive daily living skills, physical health, mental health and behaviour, sleep and sensory issues

#### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	7 (100%)	37 (97%)	+30 (-3%)
Female	0 (0%)	1 (3%)	+1 (+3%)
Transgender	0 (0%)	0 (0%)	0 (0%)
TOTAL	7 (100%)	38 (100%)	+31

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	0 (0%)	7 (18%)	+7 (+18%)
Indigenous	7 (100%)	25 (66%)	+18 (-34%)
African	0 (0%)	2 (5%)	+2 (+5%)
Other	0 (0%)	4 (11%)	+4 (+11%)
TOTAL	7 (100%)	38 (100%)	+31

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	6 (86%)	28 (74%)	+22 (-12%)
Young Adults (18-24)	1 (14%)	10 (26%)	+9 (+12%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	7 (100%)	38 (100%)	+31

## Program Outputs

Output	2017-2018	2018-2019	2017-2018/2018-2019 Difference
Number of workshop sessions	1	25	+24
Number of participants	7	38	+31
Number of participants completing the program	N/A	21	+21

## Program Performance Summary

This was the first year that YAAC had all their group sessions at Calgary Young Offender Centre (CYOC) with the new curriculum that was developed for this population. The program delivered 25 sessions this fiscal year, this equals to around 6.75 groups per year. There were 38 participants that attended groups, only 21 youth completed all 4 sessions. The dynamics of CYOC, and the justice system prove to be challenging to the success of the program. Many of the youth, who have been selected for YAAC, are at CYOC for only short periods of time and are released prior to completing all four session. This also impacts the ability to build relationships with the youth in the program. Decisions surrounding releases are made from a judge, which limits the ability for CYOC staff to address this situation. Our facilitator has done a great job with communicating with CYOC representative to try and choose youth that have longer sentences that can get all four sessions.

## Dialectical Behavior Therapy (DBT) Groups

### Program Description

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	9 (43%)	25 (34%)	+16 (-9%)
Female	11 (52%)	44 (60%)	+33 (+8%)
Transgender	1 (5%)	4 (6%)	+3 (+1%)
TOTAL	21 (100%)	73 (100%)	+ 52

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Indigenous	15 (71%)	31 (42%)	+16 (-29%)
Caucasian	3 (14%)	23 (32%)	+20 (+18%)
Mixed race	1 (5%)	4 (6%)	+3 (+1%)
Other	2 (10%)	15 (20%)	+13 (+10%)
TOTAL	21 (100%)	73 (100%)	+52

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	9 (43%)	31 (42%)	+22 (-1%)
Young Adults (18-24)	11 (52%)	41 (56%)	+30 (+4%)
Adults (25+)	1 (5%)	1 (2%)	0 (-3%)
TOTAL	21 (100%)	73 (100%)	+52

### Program Outputs

Output	2017-2018	2018-2019	Difference
Direct service hours provided	hrs	hrs	
Number of sessions provided			
Number of participants	21	73	+52
Number of participants completing program	18 (85%)	60 (82%)	+42

### Critical Incident Summary

No Critical Incidents reported

## Youth Clinician

Program Description

### Persons Served Demographics

Gender	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Male	3 (30%)	10 (34%)	+7 (+4%)
Female	7 (70%)	17 (59%)	+10 (-11%)
Transgender	0 (0%)	2 (7%)	+2 (+7%)
TOTAL	10 (100%)	29 (100%)	+19

Ethnicity/Culture	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Caucasian	3 (30%)	8 (28%)	+5 (-2%)
Indigenous	6 (60%)	14 (48%)	+8 (-12%)
African	1 (10%)	4 (14%)	+3 (+4%)
Other	0 (0%)	3 (10%)	+3 (+10%)
TOTAL	10 (100%)	29 (100%)	+19

Age	2017-2018	2018-2019	Difference
	Persons Served	Persons Served	
Infants/Toddlers (0-6)	0 (0%)	0 (0%)	0 (0%)
Children (7-11)	0 (0%)	0 (0%)	0 (0%)
Youth (12-17)	0 (0%)	1 (3%)	+1 (+3%)
Young Adults (18-24)	10 (100%)	28 (97%)	+18 (-3%)
Adults (25+)	0 (0%)	0 (0%)	0 (0%)
TOTAL	10 (100%)	29 (100%)	+19

### Program Outputs

Output	2017-2018	2018-2019	Difference
Contracted hours	hrs	hrs	N/A
Annual occupancy	hrs (%)	hrs (%)	hrs (%)
Total intakes	10	19	+9
Total discharges	0	0	0
Average Length of Time in Program at Discharge	N/A	N/A	N/A

## ASSESSMENT TOOL SUMMARY

In order to obtain relevant data, several different tools have been utilized to capture accurate outcomes. These tools will be identified in their respective sections however, a more detailed explanation of each tool is found below.

### Ages and Stages (ASQ)

Professionals rely on ASQ for the best developmental and social-emotional screening for children from one month to 5 ½ years. Highly reliable and valid, ASQ looks at strengths and trouble spots, educates parents about developmental milestones and incorporates parents' expert knowledge about their children. The ASQ-SE2 focuses on the social and emotional development and well-being of the child

### Child and Adolescent Functional Assessment Scale (CAFAS)

CAFAS is used to assess the degree of impairment in children and adolescents with emotional, behavioral, or substance use symptoms/disorders. It assesses a youth's day-to-day functioning across critical life subscales and helps determine whether a youth's functioning improves over time.

### Casey Life Skills

Casey Life Skills (CLS) assesses the behaviors and competencies youth need to achieve their long term goals. It aims to set youth on their way toward developing healthy, productive lives through enhancing their life and daily living skills

### Family Assessment Form (FAF)

The FAF is used to aid in family assessment, development of service plans and progress monitoring. The instrument looks at physical, social and financial environments. Both strengths and weaknesses can be monitored and summarized as the basis for a treatment plan. The target population is families at risk for out-of-home placement of children.

### Family Advocacy and Support Tool (FAST)

The FAST is a communimetric tool that is designed to maximize communication about the needs and strengths of families. The FAST includes ratings of the Family Together, each Caregiver, and all children and youth. Interventions in the family system can be directed at that system or to address the individual needs of family members or dyadic relationships within the family.

### Sexual Exploitation Risk Assessment Form (SERAF)

SERAF is a sexual exploitation risk assessment framework which forms part of an information and intervention pathway for safeguarding children and young people. The assessment supports: identifying children and young people at risk of or abused through sexual exploitation; manage information about children and young people in a way that identifies risk; gathers intelligence and monitors the extent of the issue locally; identify appropriate interventions and safeguarding actions for children and young people at risk of child sexual exploitation; deliver evidence based practice in responding to the needs of children and young people at risk of or abused through sexual exploitation.



### Triple P – Stepping Stones

Triple P aims to enhance family protective factors and to reduce risk factors associated with severe behavioral and emotional problems in children. The program is regarded as having a very strong evidence-base which is supported through extensive research and evaluation.

### Youth Acuity Scale

The Calgary Homeless Foundation developed the Youth Acuity Scale to assess person served acuity and to match that acuity to, and inform, case management service planning. The acuity scale is a short assessment completed to assess the level and intensity of services an individual requires, as well as progress and/or setbacks the young person experiences while receiving services. The Youth Acuity Scale assesses the status of a young person in the following areas: current housing; financial readiness for independence; living skills; education/employment; mental health; mental health supports; addiction; social competency; social supports; victimization; medical needs.

### Wraparound Fidelity Index (WFI)

The Wraparound Fidelity Index 4.0 (WFI-4) is a set of four interviews that measures the nature of the wraparound process that an individual family receives. The WFI-4 is completed through brief, confidential telephone or face-to-face interviews with caregivers, youth (11 years of age or older), Wraparound facilitators and team members.



## PERSONS SERVED SUCCESS STORIES

### Foster Care

Jack is a four-year-old boy who came into care at birth as a result of his biological mother's inability to care for him due to mental health concerns and drug use. Jack was placed in a foster home at birth and remained in this home until July 2018 when he was three years old. He was removed from this foster home as a result of an investigation related to the foster parents struggling to manage Jack's behavior. Jack was then placed into a McMan foster home. The behaviors reported when Jack was first placed included severe tantrums, hitting, throwing items in the home, extremely busy and unable to regulate his emotions. Jack had very limited communication skills and would often only point to objects in order to express his needs. The initial ASQ completed with Jack showed that he was requiring support in three of the five areas of development.

The current foster parents worked diligently to ensure that Jack received support in improving his communication skills. Jack qualified for PUF funding and began attending pre-school. Jack quickly settled into the foster home and benefited from the structure, predictability and routine that the foster parents provided for him. Through the support of the Placement Coordinator, the foster parents were able to create an environment that led to Jack's developmental success. Over the past year, Jack has shown significant improvement in his communication skills, he can now speak in clear sentences and express his needs. The most recent ASQ completed with Jack shows that he is developmentally on par in all areas of development. Jack has also shown a significant improvement in his social skills over the past year. He enjoys attending pre-school and has developed friendships within the community. Jack now attends events and outings with the foster family with no difficulty or tantrums.

### Kinnections

**Kinship Facilitator** – I first want to point out that I don't think any two days have looked the same because of how diverse and unique each of our families are. I want to share the Kinship Facilitator experience by sharing with you all a recent success story that was written as I believe it truly reflects how multidimensional our role can be and how McMan as a whole can positively impact a family.

The whole process starts with a referral made from Children's Services. It can share with us the emerging needs of the family, their history and the history of the child alongside concerns and perhaps where they are in regards to permanency. Sometimes there will need to be collaboration with biological parents and we will need to support this, or we are encouraged to help the family navigate their permanency option. In this family's case, the biological parents were no longer involved and this caregiver has been the 'parent' of this child for ten years. When we received the referral some of the things that it shared were that the family was in crisis, had struggled with addiction and domestic violence, and was incredibly challenging to work with- it's safe to say this was not the most strength-based referral. But, in McMan fashion, we are skilled at building trust and creating strong relationships by utilizing respect, our genuine nature and empathy right from the get-go.

At intake, the family shared that their first meeting was surprising to them as their facilitator was positive, welcoming, strength based and incorporated their culture and traditions. The family was quick to open up and shared their challenges. The caregiver described her family as 'broken' following the removal of her partner from the home due to a domestic violent situation in December 2017. The primary caregiver and her partner had gone through incredible amounts of adversity in 2017 including the miscarriage of their child, loss of several family members and had been experiencing financial struggles due to the caregiver's health and lack of employment. The



caregivers also had shared that they did not have a big natural support base as they had cut ties with many friends and family members due to addictions which also impacted their connection to their culture and traditions. They shared that the caregiver who was removed from the home was residential school survivor and his mother was involved in the 60s scoop- intergeneration trauma flowed deep. Both caregivers shared that they needed support in accessing their cultural & community resources, employment, recreation, addictions support, and navigating children's services.

Over the next few months in the Kinnections program, the caregivers expressed that they felt like their family had a voice due to the advocacy and support they received. They were able to recap that they were quickly connected to resources and had full support through weekly meetings and phone contact with their Kinnections Facilitator. They received support in accessing basic need community resources including the Calgary Food Bank, The Legacy Fund and CUPS which helped get them caught up on their bills. They recollected that she was supported in connecting to employment services through The Calgary Women's Centre and The Friendship Centre; she successfully found employment and felt empowered to be able to support her family. Her partner completed treatment on his own and invited their supports to watch him graduate from the program. The family received recreation support including Kids Up Front Tickets, Calaway Park passes and bikes for the whole family through the Kiwanis Bike Giveaway. The children were connected to Indigenous programming in the community alongside school supports which the caregivers share has positively impacted their scholastic achievement. The caregivers were provided with Indigenous events in their community where they began to connect to a local elder and attend sweats regularly. They stated that the support they received through McMan helped the family stay focused and hopeful for the future.

In Kinnections, Natural Supports is a big push because we recognize how important it is that families have connection throughout their journey and that does not just stop with the families that we serve. The Kinnections program and team understand the importance of utilizing our own connections within our agency and press for collaboration within our different programs. An example of this within this family was advocating for Children's Services to press for Hi-Fidelity Wrap around Services within McMan. The caregiver was coached in how to utilize her voice and connect to leaders within Children's Services to start the process of Hi-Fi and the family was lucky enough to be able to work with Nicole and the Hi-Fi team and amazing work was done over the six months that they have been involved.

In July 2018, the caregivers met their Wrap Facilitator and shared that they quickly became connected to her because of her welcoming and friendly demeanour and she gave the family a strong sense of hope. They stated that they were excited by this new process because they believed that their goal of getting Justin home after being gone for seven months would finally happen; and it did because the caregiver that was originally removed from the home moved back in in October 2018. They communicated that felt that their Wrap Around Worker was a strong advocate for their family and was grateful that their Children's Services worker became more involved. The caregivers stated that their facilitator created an amazing safety plan that they quickly implemented and felt better prepared for crisis. The process gave the family a voice, more support and the ability to work together to accomplish their goals. They share that they felt empowered and communicated that they now feel more open with their family and natural supports to share their struggles and successes. The family has begun to connect to their natural supports more often and will team together to overcome challenges before going to their professionals. The caregivers share that they are sad that Hi-Fidelity is closing but will continue to use the tools and strategies that their facilitator gave them.



When we discussed the success of the family over the past year, they shared that they have paid off all their debt, they are currently celebrating his one year of sobriety anniversary and he has received back his feathers that he had lost due to his addictions. They feel that they are reconnected to their culture and frequently attend sweats, Pow Wows and are teaching their children about their culture and traditions. The caregivers are also planning to speak at events about their journey to recovery in the hopes to inspire and empower others to start a path of healing and recovery. The caregivers have also welcomed a new baby boy in January 2019. I also want to point out that also in January the caregiver's partner had lost his mother suddenly. Historically, this would have caused the family to use unhealthy coping skills. The family instead utilized their natural and professional supports, accessed their safety plan and connected to their culture and traditions. The family is doing well and is healing all together.

The family is now preparing to apply for Private Guardianship of the kinship family. The caregivers are strong advocates and are not afraid of the challenges they may face down the road because they are aware of their resilience and strength.

When I was working on the success story with the family, they express gratitude for McMan and shared that McMan saved their family. The caregivers stated that McMan believed in them and has always had open arms to their family and they always felt support. They shared that McMan embraced them and everyone had a voice and was heard. The family shared that McMan's staff are authentic and genuinely care. The hope and encouragement Kinnections and Hi-Fi offered the family is what motivated them and kept them going despite any challenges that they faced.

Our roles are diverse depending on the family we are serving. We use collaboration, education and connection & relationship building to ensure the success of our families. This family is a reflection of McMan's values at play and how no matter how challenging the problems our persons served face, when we come together and listen to our person served's needs and fully empower and support them to overcome their adversity positive outcomes are always possible.

### **Family Success Story**

Our family became involved with McMan Calgary Youth, Family and Community Services through their Kinnections program in March 2018; we have been involved with Children's Services since 2008 when Sienna, my niece, was placed in our care. The Kinnections program helps family members who are caring for a child who is unable to remain in their home instead of placing them in the foster care system.

At intake, I described my family as 'broken' following the removal of my partner Justin from the home due to a domestic violence situation in December 2017. We co-parented and were expecting a child but sadly, lost the child in a miscarriage which caused intense grief for our family triggering Justin to drink. Justin was incarcerated and I was left with the children, finances and trauma lingering from the event. I needed support as I was off work, we were behind in our bills, and was worried about being evicted from our home. I felt very alone.

My partner and I have always been connected to our culture, traditions and customs; however, we had not connected to any local supports and had not been to Siksika due to broken family and friendship ties due to addictions. We had also experienced several deaths within our family and friendship circles, also due to addiction, which had left us both feeling alone. Justin is a residential school survivor and his mother was a 60's scoop survivor with intergenerational trauma flowing deep. Justin and I needed support to access cultural and community resources, employment, recreation, addictions support and help to strengthen our family.



McMan helped us become a family again by not only with access to addiction and employment services but by helping us re-build relationships with our community. Their staff were in touch every week to provide emotional support, advocacy and referrals to community resources such as the food bank and indigenous services. They ensured that both Sienna and the rest of our family could take part in the community and events though recreation, cultural events, and mentorship opportunities. Most importantly, they helped us rebuild relationships with friends, extended family and our community. They encouraged us to rely on our natural supports in times of crisis and helped us figure out how to strengthen the relationships within our own family.

Justin received the support and advocacy he needed to deal with his addictions and because of this was able to return home. Our family is stronger than ever. We are now applying for private guardianship for my niece and just welcomed a healthy baby boy in January. We now hope to be able to pay the help we received forward, to share our learning and experiences with others and help build stronger relationships and communities.

As such, our family is happy to support McMan Calgary & Area's nomination for the Alberta Non-Profit Innovation Award in response to our work supporting Building Connections.

### Family Development Program (FDP)

When I first made the call to McMan I remember feeling hopeless and lost, like I was failing as a mom, like I had lost all hope of ever surviving, I felt like a bad mom, because I couldn't financially support my children. I had been on medical disability for 4 years as I struggle with PTSD, I had put myself through school to better mine and my kids' lives and my world came crashing down, doctors didn't know if I will ever be able to go back to work and that devastated me. My son who is 15 now, but at the time had just turned 14. he was the stronger push for me to find someone besides doctors and therapist. Someone who could help me help him. K was diagnosed socially anxiety, ongoing depression and ADHD. The depression was swallowing him whole; he wasn't the happy vibrant boy that I and everyone knew him to be. The more he missed school the more he fell behind, the more he became angry and would fight with me and his siblings constantly, the more depressed he became. It got to the point that K wanted to take his own life, I feared that I wasn't enough for him anymore. I felt maybe I wasn't giving him the attention he needed, that I was too involved in understanding his sister A and all the diagnoses she had just received (ADHD, Emotional Dysregulation as well as Sensory Processing) as well as trying to make sure things stayed as routine as possible for my other son D who has OCD and IED and needed to have things stay routine.

I knew I had to reach out further, so I called McMan. After I talked to Lady at McMan, finally I felt like I was heard just for a moment. it wasn't long after a temporary worker called me, he talked about what I needed. came out to see us, brought some papers and courses for me to do. as I still had to wait for a permanent worker. the courses only gave me information that I had already been reading. I started to feel like I wasn't going to get anywhere, that I really was alone. However, I got the call from Julia. The moment she entered our home and our lives, I started to feel stronger and supported, she talked to me and heard me. I knew I was safe with her and that she more than understood every feeling I had. things started to get better for me. I for the first time as a single mom knew that I wasn't failing and that I could do this. the more meeting Julia had; she would check in to make sure my week was good. she wasn't just another doctor or therapist and my kids, and I were not just another patient.

K started high school this past September. on his first day the football coach, who had never meet K before, had no idea that K would even consider football walked up him as he was standing in line to get his photo id done, said "see you at practice after school" right away K texted me and said mom, I won't be home right after school, and



explained to me what Coach had said. From that moment on K pushed and pushed he went to his classes, went to his football practices. he was finally the boy I have always known him to be. Happy and full of life. however, depression got a hold of him again. I became worried and was able to express my fears to Julia. i have never had that before. This time K also spoke up and went to his Coach and for the first time for him, he had a male that he could talk to. K had also sat in a few meetings with Julia and i, even he would say how much of a blessing she has been to our family. K has never been one to trust easily or ever go to a teacher at all with any type of concern. so this was huge for him. His coach gave K the encouragement, the understanding from the point of view that i couldn't give him, no matter how much i praised him, supported him he knew I was his #1 fan and there was nothing he could do to change that. but he needed more, he needed someone other than mom to hear him and support him. K now has the opportunity for a football scholarship to the U OF C which has been a huge dream of his, he found out from the senior coach that he a prospect, the senior coach took K under his wing, he is now working with him ,constantly in every aspect of his life not only football. I owe so much to football for K, it has changed his world. has taking a grade 11 course, now which is required to graduate and has almost earned half the credits he needs to graduate, has only in grade 10, I also owe a lot of it to Julia.

There is a lot I could tell you about the successes that have happened in our lives over the past 6 months, that it would become a book. I can tell you the best thing and one of the scariest things i did was call Mcman. it's been emotional, it all hasn't all been easy. Julia has done so much for me as a mom, as a woman. she gave my kids and I a Christmas we will always remember, she helped with winter coats and clothing for my daughters. but most of all she helped me, see the mom that i am and gave me the strength to keep going, the voice to be herd. I put down the books on ADHD, and teens, and raising kids on the spectrum. I instead take the moment for me and smile each day knowing that i have done all i can do and tomorrow is a new day, tomorrow I will get one step further than yesterday. i know i have survived what most don't, because I didn't give up. I will never forget Julia and i only hope you truly know, how forever grateful i am.

### High Fidelity Wraparound

Able (aged 7) and Mindy (aged 5) were referred to the High Fidelity Wraparound Program in January 2017 by their caseworker Stewart Edwards as he was hoping that wraparound could support with helping the kids connect more to their family and culture, as well as to support with creative permanency planning and support with addressing their mental health concerns. Able and Mindy came into care early on in life and in 2011, Able moved into the Kirkland foster home in Calgary and a couple of years later in 2013, his little sister Mindy joined them there and they have been residing there ever since. At the time of the referral, the worker shared that the kids have 3 other siblings, two older sisters and a younger brother who reside in the Edmonton area in different placements. Able and Mindy's dad was in jail and they had no contact with him, and their mom's whereabouts were unknown. Prior to wraparound involvement, the Kirkland's approached Children's Services about private guardianship and adopting Able and Mindy, however, they were turned down by the children's Band due to the Kirkland's not being a culturally fit. Children's Services was thus given the task to complete another kinship search to see if there are any family members able and willing to provide permanency for the kids. A kinship search was completed, and two family members were identified that could potentially provide permanency. Writer and caseworker tried connecting with these individuals but had a wrong number and couldn't get through. We needed to be innovative and try and think of a different way to find family.

During this time, we started wraparound and at our first team meeting we had only four team members attend (caseworker, foster parents, and foster support worker), as these were the only known supports for the children at the time. During that first team meeting, our focus was on sibling connection as the kids only saw their siblings



about once a year. The team agreed that we needed to focus on the kids seeing each other more, so the team started to make connections with the other sibling's case teams and foster families in the Edmonton and Wetaskiwin area. Through a collaborative approach, we were able to arrange sibling visits every couple of weeks, switching between the kids going up to Edmonton and coming down to Calgary. The visits were going well and during this time a Family Group Conference was also getting arranged in the Wetaskiwin area. In June 2017, the wraparound team in Calgary attended a Family Conference for the children. It was at this family meeting that the team learned the children had another sibling (Danita) who was in a kinship home, and the team also got to meet mom who we learned was pregnant with her seventh child on the way. The team met many paternal and maternal family members of Able and Mindy at this meeting, many of whom stepped up and voiced that they would want to provide permanency for Able and Mindy. Their mom shared that her hope for the kids is that they live with her aunt and uncle. Writer introduced herself to the family and exchanged contact information to invite them to Able and Mindy's wraparound team to start building connection. Writer was also introduced to the Band Designates who was also invited to the team to support with family and cultural connection.

Those first six months to a year of doing wraparound was a whirlwind as our team of 4 team members grew to 13 team members comprising of school supports, foster parents, Band Designates, and family members. There were some heartaches as the team learned that none of the family members identified were fit to provide permanence to Able and Mindy. There were many changes in case teams as the other siblings moved around to various foster homes, kinship placements, and then group homes, resulting in a halt in sibling visits. There were some complex disputes happening in the background between the various Children's Services Offices and bands and we were losing team members and steam fast. The team dealt with another lose as Stewart left his job, and a new caseworker (Wendy) stepped in. The team was feeling deflated as all our efforts to provide family connection and permanency failed. It was at this point that Writer decided to host an Alignment Meeting in Calgary, inviting all team members and family to this to figure out where everyone is at, what is their commitment to these kids, and what will be our priority need moving forward. The team met and we decided that we needed to switch our focus to cultural and family connection, and we had to put the legal permanency on the back burner. Things were starting to improve, and we were starting to make some head way. Some of the goals we were able to achieve for Able and Mindy were completing life books for each of them, with stories and photos of their family and foster home from their birth to present day. We also arranged a Naming Ceremony for them, where they participated in their first cultural sweat and received their Spirit Names. Their siblings also were able to receive their Spirit Names as well. The team was able to get Mindy registered under her father's band, and we were also able to get Able assessed at the Cumulative Risk Diagnostic Center and the team was able to learn about Able's FAS diagnosis, as well as his unique strengths and challenges. Mom had her baby in July 2017, and the baby moved to a foster home in Calgary. The team planned for Able and Mindy to have bi-weekly visits with their baby sister, which they have continued to this day. Another big celebration was that the kids developed further connection to their long-lost sister Danita who they had previously not met. Danita ended up moving in with maternal family, the children's Kokum and Moshum, and the team contacted them for engagement. They actively attended wraparound team meetings. Able and Mindy were starting to spend more time with their Kokum and Moshum, and their sister Danita. They began attending more cultural ceremonies and Kokum and Moshum began to teach Able and Mindy how to speak their language, Cree. The children were learning more and more about their family and culture as time went on.

The final and most surprising celebration was when the wraparound team opened the door back up to the Edmonton case team and started to work more collaboratively with them. Able and Mindy's younger brother was living in a group home in Edmonton, and completely disconnected from family. The Kirkland's foster home in Calgary had an opening to take in another foster child, and the team jumped on this opportunity and started discussing the possibility of their brother coming to live with them in Calgary. In January 2019, we were able to make that dream a



reality and he moved into the Kirkland foster home where he now resides with Able and Mindy. Although the kids have minimal connection with bio mom and dad as dad remains in jail, and mom's whereabouts aren't known, and the two oldest sister's whereabouts are also not known, the youngest five children are more connected now than they have ever been. At last, there is hope for the future for these children.

## Youth Transitions to Adulthood (YTA)

Kaylee is a 20-year-old aboriginal female who has flourished in to a smart and resilient young woman who has overcome countless barriers in her life.

Kaylee first entered the program in August 2015. Kaylee came into the program with the hopes of gaining support with connecting to community resources, setting boundaries with her family while still being able to access natural supports and addressing her physical and mental health. Kaylee valued being honest and transparent when it came to her barriers in her life and being receptive to the professional supports her in life. When Kaylee entered the program, Kaylee had a history with substance abuse. With all of Kaylee's barriers, she has always valued being transparent about her mental health and addictions. She was connected with a therapist who supported her through her trauma and history; as well she was connected to an addiction counselor who helped her achieve a healthy state of maintenance.

Kaylee has had continuous strains with her natural supports and struggled with maintaining her relationships since she joined the program. Kaylee always struggled with creating boundaries with her family. Most of Kaylee's natural supports struggled with mental health and addictions themselves. Kaylee started to distance herself from her family, as she realized she needed to have space in order for herself to flourish. Given the history with Kaylee's family, she started to develop relationships with her peers and other staff members from her time in other programs. Kaylee valued her connection to her peers and began creating relationships that were healthy for her.

Kaylee completed Skills for Life, attended most Keys to Independence groups, and enjoyed attending YTA recreation nights. Through each group, Kaylee was able to build many connections with her peers and the staff. Kaylee was very driven to continue growing and developing her skills throughout the many programming opportunities. Kaylee enjoys and values what the other programming opportunities have to offer. Kaylee has even built strong connections to different staff members through the programs.

Kaylee was living independently when she first came into the program. Over the years, Kaylee has continued developing her skills for living independently. Kaylee has learned the skills to cook and clean regularly. Kaylee has learned the skills to maintain her home and balance other life skills which included a day program. Since Kaylee's time in the program, staff have been able to witness a strong, dedicated, and resilient young woman overcome countless barriers. Kaylee has completed many goals with the supports, created new goals, and created a path towards bettering her future. Kaylee graduated from High School with her Diploma, which she never envisioned as a part of her future. Kaylee had a YTA staff member support her on the day of graduation, she was thankful to be able to experience this life milestone with someone by her side. Kaylee was proud to walk the stage and be handed her diploma. Kaylee was able to experience one day of feeling like a princess in her ball gown. Kaylee has maintained her employment since July 2018, which Kaylee identifies being the first time to ever maintain a position and enjoy it. Kaylee values her position and values being promoted. In a very short time, Kaylee was trained in all positions and given a leadership role within her position.



Kaylee has taken the skills she has gained and been able to identify when she is struggling with her mental health. Kaylee identifies when she is struggling with her mental health, how it impacts more than one area in life. Kaylee has continued to reconnect with her community therapist on her own, which is only one small example of how much she has grown into a successful young adult.

Kaylee has reconnected with her family, which she thought would never happen. Kaylee has experienced new relationships with certain family members, which at first, she was hesitant to open up to her family. With her continuous will to continue to grow, she was able to break down her walls and let her family into her life, which has been exceptionally positive for Kaylee.

Kaylee holds herself to high standard to be successful in her own way. It is an honor to be able to work with such a courageous young girl, who has had to jump countless hurdles, and yet she has come so far. Kaylee has achieved many milestones and has gratitude for those small things in life. Kaylee's journey has only started and she has so much potential to take all of her life experiences and go even further in life.

## Manhattan Place

At the age of three and a half, Tony was taken away from his mother due to neglect. In one of the final instances, he'd been locked in a room with his little brother for most of a day. His bio-dad was given full custody and Tony moved in. Things were difficult as Tony's dad is a long-haul truck driver and was gone so much that Tony's stepmother was the main caregiver. That relationship was strained and as Tony got older, his behaviours became too much for the home to support and he ended up being brought into care.

Our young man is originally from High River, however after the floods, he was forced to move to Calgary. He is a country boy at heart and loves the small-town life but was able to adapt to the city life pretty quickly.

He moved into Manhattan Place in May of 2018 and unlike his previous placement, he made it clear to staff that he actually enjoys being at Manhattan place. It has now been 8 months since we've had this wonderful youth, and within these 8 months, we have seen him grow, make friends, figure out school, laugh a ton, and love his family and friends. The positive relationships this youth has made with staff and his co-residents has been amazing to watch. Through all the good and bad times, Tony made a best friend at Manhattan Place who he looks up to as an older brother.

During these 8 months, Tony was able to re-connect with his mother. She has been clean and sober for 5 years and Tony's entire team whole-heartedly encouraged this connection. She became a big part of his life over the summer and he did many visits and sleepovers with her. She was a big help with enforcing positive relationships with him as he started dating, and the group home was happy for the help! Through this relationships and work with High Fidelity Wraparound, Tony was able to form a positive relationship with his maternal grandma, who everyone calls Nana. The relationship that Tony has with his Nana is absolutely amazing. It's been remarkable to see and hear about how he is when they spend time together. He is calmer, more patient, engaging and happy. He began visiting with and staying overnights with her in Okotoks and really began to love it there. We think that he is finding his way back to some of his small town and family roots, and it's been an incredibly positive experience for him.



Tony sometimes struggles with his emotions, but it is very evident that he is trying his best to become a more mature, respectful, and responsible young adult. He goes as far as admitting when he is wrong or being rude and sometimes gives staff a big hug as his way of apologizing. He is a troublemaker, but deep down, he is fiercely loyal to his friends and family. Once he gets going about how he would go out of his way to protect the people closest to him, there's no stopping him!

We are more than happy to say that with all the work that the professional and natural supports have done alongside this young man, he officially moved home with his Nana in Okotoks before Christmas!! When we asked him whether he will miss us once he's gone, he said "no, because I know exactly where you guys are and I'm going to come visit all the time." We are grateful Tony has called and visited since moving in with Nana!! We're so proud of this young man!

### Parent-Child Assistance Program (P-CAP)

1 Year ago, I was rushed to the hospital from detox 8 weeks pregnant and consumed with suicidal ideations. At the hospital I could feel the judgement from the doctors and nurses that I was just a pregnant junkie, and was treated as such. I did meet a social worker who recommended I contacted the PCAP program and phoned. I got to talk with Pam (Program Supervisor) and I felt hope.

At that time, I was homeless, having lost my home, marriage, job and 2 kids to drugs. I lost Pam's number and that connection, I carried on spending my time on the psychiatric ward battling my demons, and went to Aventa Treatment Center.

Following treatment, I struggled with Agoraphobia and night terrors of memories from my childhood. It was then I was able to access additional support through Perinatal Mental Health and Adult Addiction Services and through this I was able to understand all the trauma I had experienced. I was diagnosed with PTSD and got to lose the label of Bi-Polar Disorder which gave me freedom from a lifelong mental health issue, to being able to deal with my feelings and recovery was in sight.

On December 22, 2018 my miracle was born. I was overjoyed and felt that the future was bright, although on December 26, 2018 Children's Services came and apprehended my son from the NICU. This situation spiraled me back into panic, pain and sheer trauma to not have my child with me.

It was at this point that I was re-referred to PCAP and I got to reconnect with Pam, who gave me hope. I felt like I found her again, although I felt cautious because of all the professionals that have deceived me before. The day that I did my intake I was blown away and knew right away I could trust them and might enjoy my time with them. We immediately set goals to have my son returned to me, and a meeting was set with Children's Services. Following that meeting my baby was returned to me after only 6 weeks.

I am now actively rebuilding my shattered family, my first son has been spending weekends with me and will be returning to me fulltime in June 2019, I am reconnecting with visits with my daughter, and have my youngest full time in my care with no Children's Services involvement. I have returned to my church and have reconnected with both family and friends. I am now able to own sobriety and learn about seeking joy in healthy and productive ways. PCAP remains actively involved in my life and strong advocates and a huge support to me. Thank you so much



## Protection of Sexually Exploited Children's Act (PSECA)

Greg was first referred to the PSECA Community Outreach program by his father Tyson after Tyson found information on Greg's phone that led Tyson to believe that Greg had posted an ad on Craigslist and was meeting up with unknown males in the community and within his family home. Greg was honest with Tyson and stated that he had posted an ad looking to exchange sex for money and had met with two older males, but no money had been exchanged.

Tyson was quite upset and required immediate support as he was worried about Greg's overall safety and wellbeing and felt torn between wanting Greg to be safe and wanting him to understand the severity of his actions.

During the initial stages of understanding and supporting Greg and Tyson, immediate referrals and conversations were made around accessing community counselling, seeking grief and trauma support for Greg who was still trying to understand the severity of what had occurred for him; as well as ensuring that Tyson had supports around him that would be able to help him keep Greg safe while other resources fell into place.

PSECA supports spent countless hours connecting with natural supports that both Tyson and Greg felt were important to them and allowed Tyson to set clear boundaries and expectations for Greg while he spent time understanding the stages of grooming, what sexual exploitation looks like and how to move forward while regaining trust and belonging within his relationships.

Throughout the next six months, Greg was able to begin to understand that what had occurred between himself and the older males was not his fault, and in turn had placed him at risk of being taken advantage of. The greatest role that PSECA played within the lives of Greg and Tyson was the mutual understanding that what had happened made Greg a victim of sexual exploitation and the provision of hope that there were supports that could be put into place to not only protect Greg from this happening again, but to also support Tyson with moving forward and rebuilding the trust that was lost when this incident had occurred.

Both Tyson and Greg saw a need to develop and maintain healthy natural supports within their lives to not only support Tyson in receiving a break when things were tough but also to provide Greg with the opportunity to build a peer and support network that he could rely on.

Greg and Tyson became connected to community counselling, became involved in the High-Fidelity Wraparound process and used their supports to build up their natural support capacity and build their confidence in managing crisis and situations independently.

Greg was able to attend community school, earn back his electronics and community privileges and reports that he feels confident in who he is and has a stronger relationship with Tyson and his grandmother moving forward.

PSECA supports were used as a stepping stone to support Greg and Tyson in gaining the skills needed to understand what had happened and to prevent further risk of being taken advantage of online and in the community.

## Fetal Alcohol Spectrum Disorder Maps (FASD Maps)

Before the FASD MAPS program meal planning, grocery shopping and meal preparation was a nightmare. I could never remember all the ingredients or what ingredients went with what meal; everything would get all mixed up. Meal planning was always a fight. Somedays it would work out, most days it didn't. It was suggested we try creating an infographic as I am a very visual person, I am never without my cell and I love photos. We took photos of all my favorite meals, the ingredients to those meals and created my own personal infographics. These photos changed everything. Not only did these photos become a visual reminder of what goes into my favorite meals, they became my visual steps to meal preparation and my visual grocery list. I can now shop independently and navigate the grocery store with confidence. I can confidently cook meals without being overwhelmed and lost. The FASD MAPS program helped me play to my strengths and embrace who I am.



## Milestones

Sonja is a 6-year-old girl diagnosed with ASD. She is non-verbal, very rigid in her day to day interactions, and often shows signs of distress when her things are touched or when asked to do a simple task. She is highly sensitive to sounds and touch.

In August of 2018 this family was referred to the Milestones program. At that point in time Sonja's parents Anna and Anthony were concerned with her lack of communication. They also struggled to get her to transition from one thing, or place, to another. The Family Coordinator quickly observed how cautious and delicate Sonja's parents were when interacting with Sonja. Sonja was quick to react if things weren't going her way, and if things escalated, a show on a laptop was their only tool to calm her down. Sonja seemingly showed no patience or desire to communicate.

The Family Coordinator started by providing education to Sonja's parents regarding ASD behaviors and how Sonja fit along the spectrum. This raised their awareness of potential reasons for her various reactions and started the process of problem solving some of Sonja's behaviour. Visual tools were created to help relay expectations to Sonja. It did not take long before Sonja was showing more patience.

Sonja didn't have any play skills when the Milestones program started. She flipped through a toy magazine endlessly until its pages started to wear or fall out. If the magazine was touched by anyone else, she would escalate immediate tears streaming down her face, slamming to the floor on her knees, and hitting the "guilty" individual who came into her space. Simplifying tasks, pushing Sonja to play with others, and "weathering the storm", all worked together to increase her tolerance. She is now playful with mini figurines, looks at pages in a book and correctly labels shapes/colours/animals, and allows adults to interact in her play space. The Family Coordinator also observed a big change in Anna and Anthony's general feel around Sonja, more relaxed and carefree in their daughter's presence.

Bathing Sonja was also a difficult task that often resulted in mom being bit or scratched. Through work with the Family Coordinator, and moving slowly through various strategies, Sonja is now tolerating bathing.

The greatest success here is a true change of parental mindset. Anna and Anthony were apprehensive to begin and later discovered their own ability to evoke change. Not to be careful but to be assertive in their approach to parenting. This family achieved all their service plan goals and more.

## Hope Homes

E is a youth who has a story of courage and resilience. She fled family violence and abuse at an early age. When E came into our program, she struggled with depression, and isolation. She dropped out of school and became involved in an unhealthy relationship. When she became pregnant, E wanted to better her life, not only for herself, but especially for her baby girl. She refused to let the cycle of abuse and violence be a part of her future. E left the unhealthy relationship and decided to take parenting courses to prepare to be a parent. E had no problem in reaching out for support to better her situation. Her new baby girl would be the driving force in her success and continues to be.

In addition to being a new parent, E returned to school to complete the courses she needed to get into post-secondary. She is unstoppable in her goal to provide a better future for herself, and her daughter. She is currently a happy single mom, working part-time, and going to school!



Here is what E had to say about her journey, in her own words:

“I’d say I had a pretty normal childhood..... but I somewhat would be lying. I have a big family. When we were little kids, we were close. As we grew older, we slowly became very distant. My parents were the opposite of each other. My father is a quiet timid man and my mother a very loud ‘in your face’ person. My mother was and is still is a very selfish woman. She didn’t really raise us. Her version of parenting is as long as the children have food, a roof over their heads and clothes on their backs they were ok. My mother had no emotions except anger.

I was a really angry teenager. Because of the past heartaches I’ve had and trauma, I isolated myself. I thought isolation was the best way to heal but it made my life worst. I didn’t want to feel anything. My parents never understood, no one understood, and I was ok with that. I loved being alone.

I was the “black sheep” of the family. By the age of 16 I was sexually assaulted 3 times. The first time I was about 4 or 5 years old. I don’t quite remember my age but because the trauma was so horrific my brain shut it off. It wasn’t until I was about 17 years old when the memories came back. I think your mind is so powerful. It can either help you or destroy. At that point in my life it was destroying me.

My parents were not the best parents. Spankings usually turned to horrible beatings. My mom used to bite me out of anger. One time in middle school I came home an hour late because of the buses and weather. I remember attempting to walk home but it was so cold. My aunt saw me walking and gave me a ride home. My parents were livid. My mom bite me all over, stomped on me and my dad did the same. I hated them so much.

I became a McMan youth when I was 18 years old. At the time I didn’t really understand what the McMan agency was or did. I was just happy to have a safe environment to sleep at every night. Wanda was the first worker I had. She was amazing. She fought for my rights when I didn’t know I had any. The next worker I met was Donna. As the years went by Donna has become a big support for me. I met my now worker Kristina a few years ago and we clicked right away. All of these McMan workers seen what I didn’t see in myself.

Both Donna and Kristina pushed me to get my life back in order which is what I needed. In 2016 I became pregnant and didn’t know what to do. I told Kristina my worker right away. Even though I was very scared and fearful, she helped me with my journey.

Before my pregnancy I didn’t know what, I wanted to do with my life. I was not taking advantage of the positive opportunities for a better life McMan offered. Donna is always reminding me to take advantage of the opportunities this amazing program offers, and I am so blessed for it.

McMan has helped me in ways I didn’t know where possible. From McMan I found counselling. McMan has given me grants for school. McMan has helped me financially. Without McMan I wouldn’t be able to take care of my daughter.

A few years ago, I wouldn’t have thought my life would turn out the way it is right now. I’m focused on my education, building a career for myself and my daughter and being the best mother, I can. I’m currently upgrading courses at Bow Valley College to become a teacher. In the fall I will be applying to St. Mary’s university. I am so excited for my future. McMan has given hope back into my life. I wouldn’t be where I am today if it wasn’t for McMan and I will be forever grateful.”



## Hope Homes for Aboriginal Youth

Annie is a young, resilient and independent youth who is in the Aboriginal Hope Homes Program. She has been a part of the program since February 2017 and has overcome many hurdles and challenges from suspected drug use to toxic relationships and struggles with mental health. However, with all, she has continued to maintain stable housing at the McMan Triwood building, without any concerns or worries, and is always pleasant with staff and neighbors. Annie recently started post-secondary at Reeves College in April 2019 and is, taking the Addictions and Mental Health Program. She will complete her courses in December and will begin practicum in January 2020. As a first nation student, she has an opportunity to go overseas to work with those who struggle with addictions and mental health, she has yet to decide but has been seriously considering this opportunity to embrace new experiences as a young adult.

Since starting school in April, Annie has built new relationships and gained positive natural supports, whom she studies with and participates in healthy activities Annie is also now a lead singer with the all Indigenous band called "CHINIKI". She practices with her band members while maintaining a healthy balance and completing her school studies. Annie has shown a great deal of dedication, resilience and determination, she continues to strive and grow and recognizes her challenges and overcomes them to ensure her own success.

## Rapid Rehousing

Kevin is a 19-year-old male who was referred to the Rapid Rehousing program through the Calgary Homeless Foundation's Coordinated Access and Assessment committee. Kevin was new to homelessness and had been staying at the Drop-In Centre for approximately one month before moving into the Rapid Rehousing home. This was the first time Kevin had ever been in the Drop-In Centre which is an adult shelter. Kevin speaks of being very scared and uncomfortable while he stayed there and at times was picked on and was frightened. Being referred to the Rapid Rehousing program and being able to move in immediately gave him a quick exit out of homelessness and a safe comfortable place to sleep. Kevin is part of the Sikh culture and had become distant from all activities and people as he felt shame and was embarrassed due to his homelessness. Once he moved in the Rapid Rehousing home, he returned to the temple to pray where he re connected with his culture and the people there. Kevin reports that he does not currently have connections with his biological family but has made lifelong friends at the Temple and has two very close friends that he enjoys spending time with while in the community. Kevin is working on finding employment and feels once he has secured employment, he will be ready to leave the program and move out on his own.

## Parent-Child Assistance Program – Expanded Enrollment (P-CAP EE)

Robin is a 27 year old who has been a PAP-EE participant for one year. In the first weeks of her enrollment, Robin was binge drinking and ended up being taken in an ambulance with daughter, 4 years old, home. Children's services apprehended the daughter (TGO). Robin soon found out she was also expecting. Parent advocate was very involved with Robin and supported her in inpatient treatment at Aventa. Robin shared that going into Aventa she had to overcome many fears. Robin was worried about opening up in a group setting and being surrounded by multiple women during her treatment at Aventa. Robin pushed forward with the support of her PA and entered the program and completed it. Robin has maintained sobriety since!

Robin also was approved for AISH and this income has significantly improved the finances in her household and ability to provide for her children.



Her daughter that was apprehended, was returned to Robin in May 2019. The adjustment is going well, Robin stated that he is over the moon excited and thankful.

Robin was living with her partners mom who was a heavy drinker and there were many tensions in the home. Robin's father was also very involved and living in the family home. He also struggled with addiction. Between 2017-2018 both of these parents passed away. Robin was pregnant when her father passed away. PA worked with Robin to get her approved for Calgary Housing and was successful. Robin is so excited to be living with her partner and to have both her children back in her care permanently. Robin is thriving emotionally and physically. She is active, healthy, optimistic, has many natural supports in her life and in the lives of her family.

The relationship between Robin and her two Parent Advocates was instrumental in facilitating positive change by Robin feeling supported, never judged, connected to resources, someone to listen when Robin was struggling, and support with Children's Services in regards to meeting goals to get daughter back in Robins care and reuniting this family, sober, happy, and healthy!

### Youth Alternative Program (YAP) Caseworker

Jude is a 24 year old Aboriginal female who is a returning person served from nearly 2 years ago, to the Youth Alternative Program. When Jude was previously in the program a year ago, she was able to close her file as she was signed up for school, had employment, had her Indian Status Card, and access to fair entry benefits.

Jude reached out to the program recently again because she found herself in a situation where she needed support. Jude stated that she was engaging in risky behaviours, making bad decisions and continuing to do drugs. She was struggling with her relationship with her boyfriend and wasn't making positive friend choices and didn't have a lot of positive support.

Jude wanted the YAP program's support to help her navigate finding appropriate schooling, employment and help with her mental health and sobriety. She thought she also needed to have a better support system as well because she doesn't always know who she can lean on for support. Jude's biological mother struggles with addiction to drugs and alcohol and mental health to date, and Jude stated that her father also struggles with mental health and reports to being sober for the past 13 years, but still finds it overwhelming to assist Jude with her concerns. She remains close to her twin sister, brother Corey and some cousins. She also has another brother in BC that she visits when possible.

It appeared when Jude came into care that she wasn't only using alcohol, but was using cocaine weekly with her boyfriend. At this time, she was seeing her mother occasionally but mostly to party with and get drunk. As stated above, her father struggled with alcohol but was now sober and felt Jude needed more help than he could give. Jude claimed that they always didn't get along but that he was there for her.

When this worker met Jude and while she was involved with the YAP program, she had a few setbacks. Jude was in a very unhealthy relationship, working two jobs and using cocaine and alcohol regularly with her boyfriend, friends and sometimes family members. She also chose to relinquish two pregnancies. However, Jude felt that she wanted to go to post-secondary school and still had potential and encouragement. Her sibling was also attending there thus having her also for support.



She applied for Mount Royal University and this worker followed up with her eligibility of receiving funds from the Montreal Lake Band to attend both semesters, but living expenses for the winter semester due to mishaps with the application not being processed timely and actually being lost by the MLB.

Once Jude found out about receiving financial assistance for school, she was immediately connected with the Iniskim Center, had a tutor and many services offered through MRU to ensure success.

A few months after enrollment, Jude was finding work and school too overwhelming. She quit one of her jobs and was managing but still partying a lot with the boyfriend. Eventually, her relationship and addiction was overpowering her, also, her boyfriend broke up with her, when at this point, she went into a state of anxiety and depression. She felt anxious and depressed almost all the time was finding it very difficult to attend classes and returned back to living with her father. She continued to seek help at school. Due to her missing several appointments for help, she'd now have to wait for services. Jude decided to withdraw from school due to the demand being too overwhelming at this time, she was hardly sleeping, not getting enough shifts at work and wasn't able to pay for rent on her own. She was taken to the Youth Employment Center for support with her resume and to look for another job or training. After that, she came to the realization that she wasn't ready for work and wanted to focus on her mental health and addictions. During this period, Jude tried other drugs and overdosed. She also tried to hurt herself by taking multiple amounts of Aspirin causing her to go to the hospital. She was extremely distraught and lost her wallet. She did inform she was talking to a lot of family members for support and was asked to go to sweats. She received continuous support in the YAP program and was still able to see her Clinician. YAP services were extended for Jude due to her age. She was educated surrounding her drug use and began to talk more curiously about detox.

Previously, Jude was referred to the bank to learn a bit about banking, opening a savings account and overdraft protection for her account when she thought she needed a new job, but it was still beneficial to her. Jude was also brought to The Mayland Medical Center clinic to discuss side effects of her medication and to possibly get on a new one for her anxiety and depression. Often, she would want to stop taking the medication altogether, but was encouraged to discuss her issues with her Doctor which occurred several times. She still receives services from the same doctor to date. She received bus passes for her to attend her appointments and was referred to The Alex to begin retrieving her SIN number and identification, then onto the registry to complete it. She also met an outreach addictions counselor from AHS at The Alex with whom she connected with. The discussion lead to talks about Sunrise Native Addictions and she eventually agreed to go and was assisted with completing necessary paperwork for the 63-day rehab program. In order to pay for rehab, she had to apply for Alberta Supports which she was taken to do and qualified for and was encouraged to try for EI since she never applied when she left her jobs. She was recommended to attend groups and decided upon Cocaine Anonymous (CA). She received a sponsor began reading the AA book and applying the steps. This opened up more conversations with her father about his struggles with sobriety as well. She began to meet more and more sober people who were supportive of her treatment and began to feel more confident and committed to achieving sobriety. Jude went to Sunrise within 7 months of meeting this worker. While in the program, she continued attending meetings when allowed off site and had visits with her sister.

Jude successfully completed the 63 day detox program and moved back to her father's home until getting sober living housing and supports through The Dream Center. She had concerns regarding her Alberta Supports where she was taken to address them again, as she had to recently re-apply for funds. She also did her own taxes with this



workers minimal amount of assistance this year. She has many healthy relationships including having a new boyfriend who is sober and she has met his parents. She has positive friends and support, a sponsor and was inspired to continue on and control her life. Jude maintains plans of going back to school one day to become a Nurse. She was given information for Elbow River Healing Lodge and Ilkaakiimaat Indigenous mental Health to continue services out-patient. As noted above, she continues to go to the Mayland Medical Clinic.

