



MAINSTREAM ASSOCIATION FOR PROACTIVE COMMUNITY LIVING



OUTCOMES MANAGEMENT REPORT
2008 - 2009



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Message from the Continuing Quality Improvement Officer

“When you get to a fork in the road, take it!”

- Yogi Berra

Whether it’s **“the road less traveled”**, or the route home from work, sometimes our plans have to be altered. Life happens as they say, and decisions are sometimes made based on contingencies that hadn’t been considered in advance of their emergence or discovery.

The past year has once again been an eventful one for MAPCL. The continued rolling out of an ambitious Operational Plan, the experience of our third CARF Accreditation survey, and the design and implementation of a new Quality Assurance Review process, have kept us all very busy...and that’s before I mention the great work that we do directly supporting persons served!

After three years of working with a diffuse approach to barriers and accessibility reporting, it is clear we need to adopt a change of strategy to undertake the necessary, meaningful and valuable work related to the quality of life the people we support experience. Look for an accessibility committee to be struck in the fall.

A clear indication that programs have become increasingly conversant in Outcomes Management is that enthusiastic supervisors and managers have approached me with the desire to look at different ways of telling their program’s story. Next year’s report will include new measures for Laurel, Host Family Services, and our Supported Living Network.

I recently had a conversation with an SSW at a training event. She shared a story about a person served who frequently changes their mind with respect to his ISP goals. “That’s great!” I said, “his journey will be all the more interesting for it.” We are accountable for our part in helping persons served navigate life’s journey. With respect to their wants, dreams and desires, when they come to a fork in the road they get to take it...or leave it!

I would like to thank Corinne Stockford and Javier Barreto for database work, and a special thanks to our summer student, Polina Lozhkin, for her magical chart making!

Thanks also to Bouwe Weirdsma and Sarina Ram for producing the Business Functions part of this report.

David Livingstone

Continuing Quality Improvement Officer

“Quality is not an act, it is a habit”

- Aristotle

Satisfaction Surveys: Persons Receiving Service

Respondents: 164

Survey Method: Satisfaction Surveys are distributed during annual ISP planning meetings.

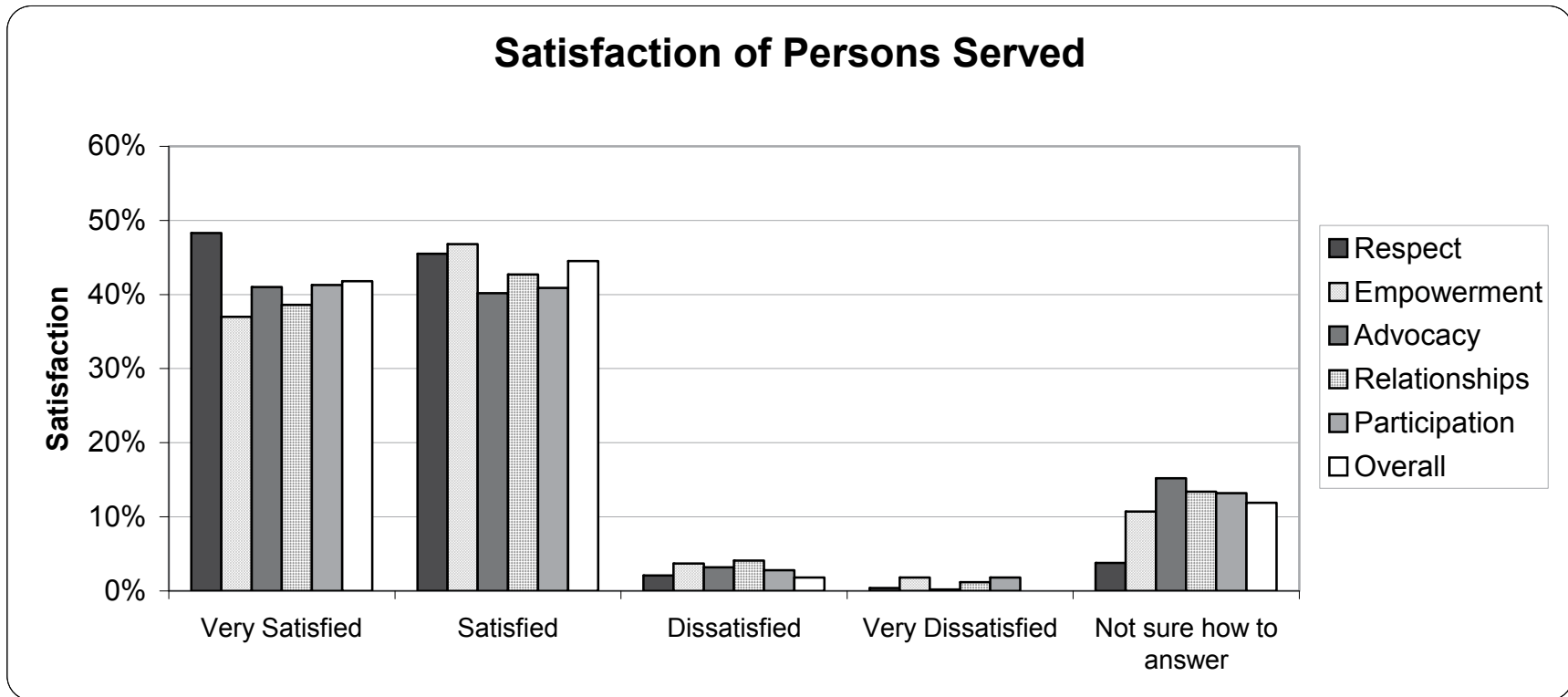
Response Distribution

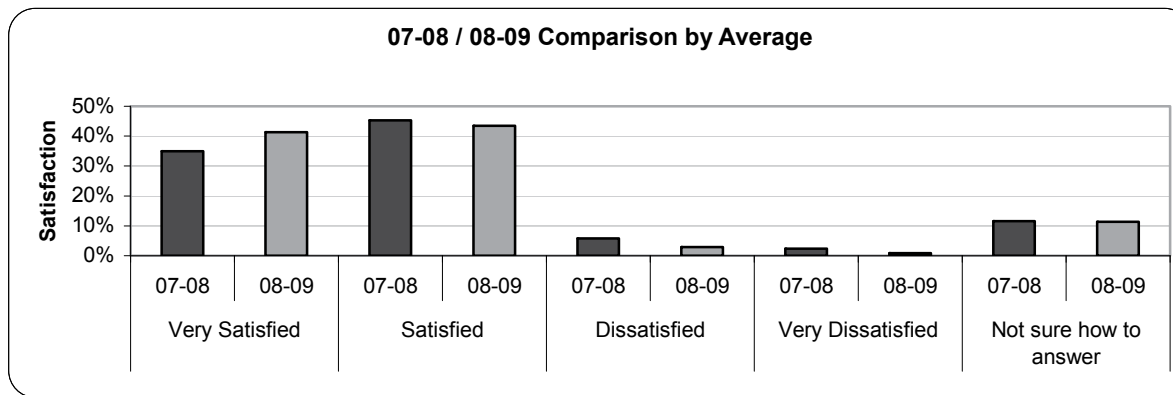
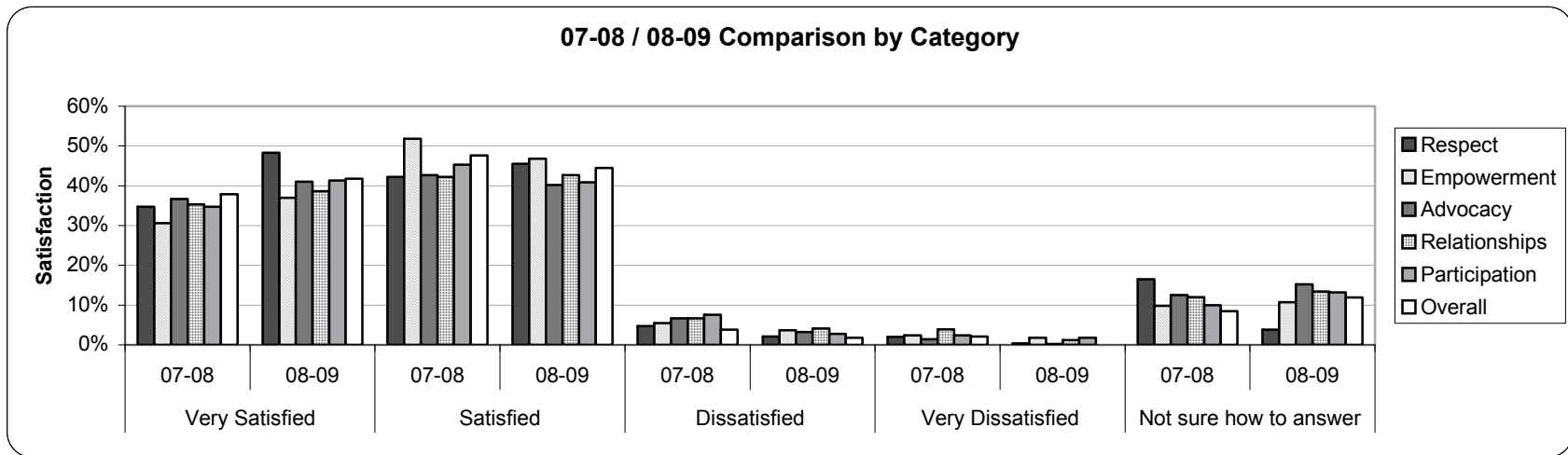
Community Housing (Residential):	17.7% (29)	Male:	59.2% (97)
Community Integration (Day program, life skills):	56.7% (93)	Female:	40.2% (66)
Supported Living:	12.2% (20)	Not Identified:	00.6% (01)
Host Family Services:	04.9% (08)		
Not Identified:	08.5% (14)		

Detail		Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Not sure how to answer
Respect	<i>At MAPCL...</i>	48.3%	45.5%	2.1%	0.4%	3.8%
1. Staff listen to what I have to say.		45.7%	48.2%	1.8%	0.6%	3.7%
2. Staff are nice to me.		52.1%	42.5%	1.4%	0.0%	4.1%
3. Staff accept me for who I am.		47.0%	45.7%	3.1%	0.6%	3.7%
Empowerment	<i>At MAPCL...</i>	37.0%	46.8%	3.7%	1.8%	10.7%
4. I make my own decisions.		39.0%	47.0%	4.3%	1.2%	8.5%
5. I can do the things I want to do.		37.2%	50.0%	3.0%	0.6%	9.1%
6. I have a say in what happens to me.		34.8%	43.3%	3.7%	3.7%	14.6%
Advocacy	<i>At MAPCL...</i>	41.0%	40.2%	3.2%	0.2%	15.2%
7. I am learning to speak up for myself.		45.1%	39.0%	1.8%	0.0%	14.0%
8. My staff speak up for me when I want them to.		45.1%	42.7%	3.0%	0.0%	9.1%
9. I know my rights.		32.9%	39.0%	4.9%	0.6%	22.6%
Relationships	<i>At MAPCL...</i>	38.6%	42.7%	4.1%	1.2%	13.4%
10. There is someone I can talk to about personal things.		38.4%	43.9%	3.7%	0.0%	14.0%
11. I am happy with the number of friends in my life.		39.0%	42.7%	6.1%	1.8%	10.4%
12. I can meet more people if I want to.		38.4%	41.5%	2.4%	1.8%	15.9%

		Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Not sure how to answer
Participation	<i>At MAPCL...</i>	41.3%	40.9%	2.8%	1.8%	13.2%
13. I can go to the places I want.		44.5%	40.2%	2.4%	4.3%	8.5%
14. I can join in the activities I like.		43.3%	40.9%	4.9%	1.2%	9.8%
15. Staff will help me if I want to find work or to volunteer.		36.0%	41.5%	1.2%	0.0%	21.3%
Overall	<i>At MAPCL...</i>	41.8%	44.5%	1.8%	0.0%	11.9%
16. I have a say in the services I get.		42.7%	40.2%	1.2%	0.0%	15.9%
17. I am happy with the services I get.		40.9%	48.8%	2.4%	0.0%	7.9%

Outcome (results)





Discussion

- More than 20% of respondents were unsure how to answer questions 9 and 15.
- Most dissatisfaction occurs in the areas of relationships and empowerment.
- The highest rate of dissatisfaction was prompted by the question, “I am happy with the number of friends in my life”. 7.9% of respondents reported being either dissatisfied or very dissatisfied.
- The percentage of survey responses to total of persons served (26.2%) remained statistically steady this year (as compared to last).
- High rates of “Not sure how to answer” in response to the statements “I know my rights” and “Staff help me if I want to find work or to volunteer” suggest the need for work in these areas.

Follow-up

Proposed Action

- A thorough revision of the satisfaction form was not undertaken last year.
- Revise the satisfaction survey to reflect new core values, and remove/reword questions that persons served are having difficulty answering.
- Establish targets in satisfaction surveys.

Satisfaction Survey: Stakeholders

Respondents: 65

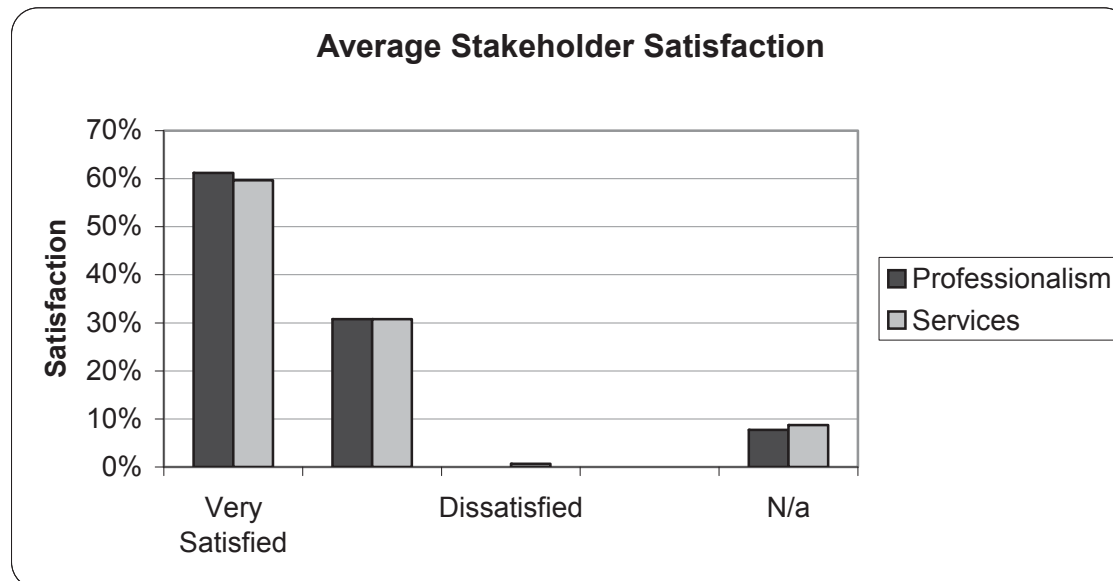
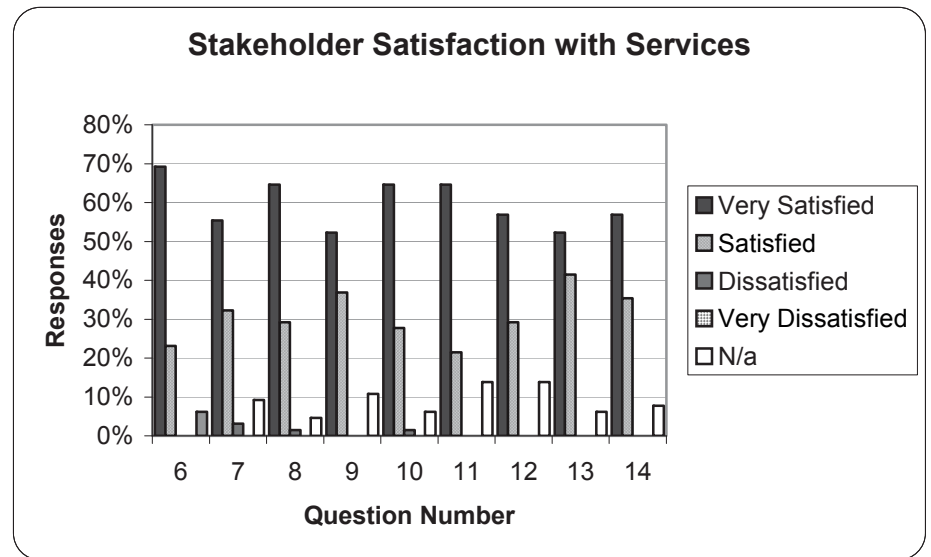
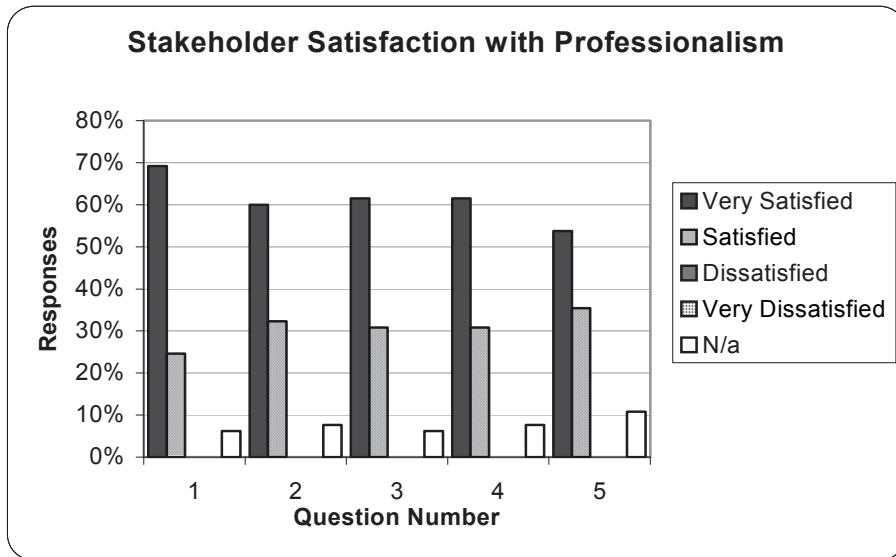
Survey Method: Satisfaction Surveys are distributed during annual ISP planning meetings.

Response Distribution:

Family Member	41 (63.1%)
Friend/Advocate	0
Funder/Case Manager	0
Host Family Care Provider	22 (33.8%)
Not Identified	2 (03.1%)

	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	N/a
Professionalism	61.2%	30.8%	0.0%	0.0%	7.7%
1. I am treated with courtesy and respect by the Association.	69.2%	24.6%	0.0%	0.0%	6.2%
2. My concerns are dealt with in a timely manner.	60.0%	32.3%	0.0%	0.0%	7.7%
3. My concerns are satisfactorily addressed.	61.5%	30.8%	0.0%	0.0%	6.2%
4. The Association provides me with the information I need.	61.5%	30.8%	0.0%	0.0%	7.7%
5. The Association's staff are knowledgeable.	53.8%	35.4%	0.0%	0.0%	10.8%
Support to Persons Receiving Services	59.6%	30.8%	0.7%	0.0%	8.7%
6. Persons receiving services are valued, respected and treated with dignity.	69.2%	23.1%	0.0%	0.0%	6.2%
7. Persons receiving services have opportunities to learn worthwhile skills.	55.4%	32.3%	3.1%	0.0%	9.2%
8. Persons receiving services are supported to participate meaningfully in the community.	64.6%	29.2%	1.5%	0.0%	4.6%
9. Persons receiving services are helped to strengthen their present relationships and to develop meaningful ones.	52.3%	36.9%	0.0%	0.0%	10.8%
10. The Association promotes safety and health for persons receiving services.	64.6%	27.7%	1.5%	0.0%	6.2%
11. The Association effectively advocates for supported individuals/their families.	64.6%	21.5%	0.0%	0.0%	13.8%
12. The Association supports persons receiving services to make their own decisions.	56.9%	29.2%	0.0%	0.0%	13.8%
13. The Association provides services that are individualized.	52.3%	41.5%	0.0%	0.0%	6.2%
14. The Association's services are flexible and responsive.	56.9%	35.4%	0.0%	0.0%	7.7%

Outcome (results):



Discussion

- Response rate is up this year by 12% compared to last (from 58 to 65).
- Overall satisfaction in both broad categories (Professionalism and Service) went up slightly this year. In the area of Professionalism 92% of respondents report being either “Very Satisfied” or “Satisfied” (87.1% in 2007-8). In the area of service 90.4% of respondents report either “Very Satisfied” or “Satisfied” (87.6% in 2007-8).
- Overall satisfaction with services went from 87.6% in 2007-8 to 91.4% this year.
- The highest level of satisfaction in the category of professionalism (93.8%) was prompted by the statement, “I am treated with courtesy and respect by the Association.” The lowest level of satisfaction in the category of professionalism (89.2%) was prompted by the statement, “The Associations staff are knowledgeable.”
- The highest level of satisfaction in the category of service (93.8%) was prompted by the statement, “Persons are supported to participate meaningfully in the community.” The lowest level of satisfaction in the category of service (86.1%) was prompted by two statements, “The Association effectively advocates for supported individuals/families” and “The Association supports persons receiving services to make their own decisions.”

Proposed Action

- Our 2008-9 and 2009-10 strategic planning incorporates a number of objectives that should impact areas of dissatisfaction.
- Our values have been revised to include a commitment to teaching and mentoring persons served
- We have made a commitment to expanding on the delivery of life skills outside of life skills programs, incorporating it throughout all of our services. As part of this commitment we have purchased curriculum on social skills/healthy relationships and begun train-the-trainer workshops with employees from various programs. Once trained, workshops/skills building can be delivered throughout our services.
- We are exploring ways to enhance our core training to incorporate workshops on teaching new skills.
- Our Family Resource Coordinator is assisting with advocacy for families that request it, and is also identifying advocacy networks for individuals, families and employees to resource.

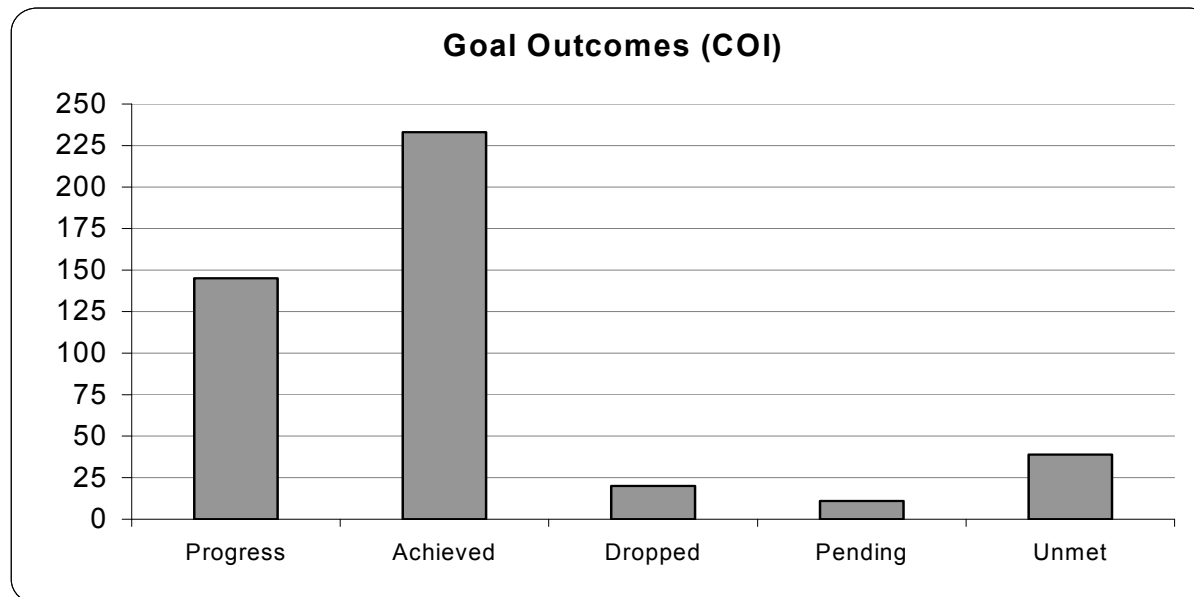
Effectiveness

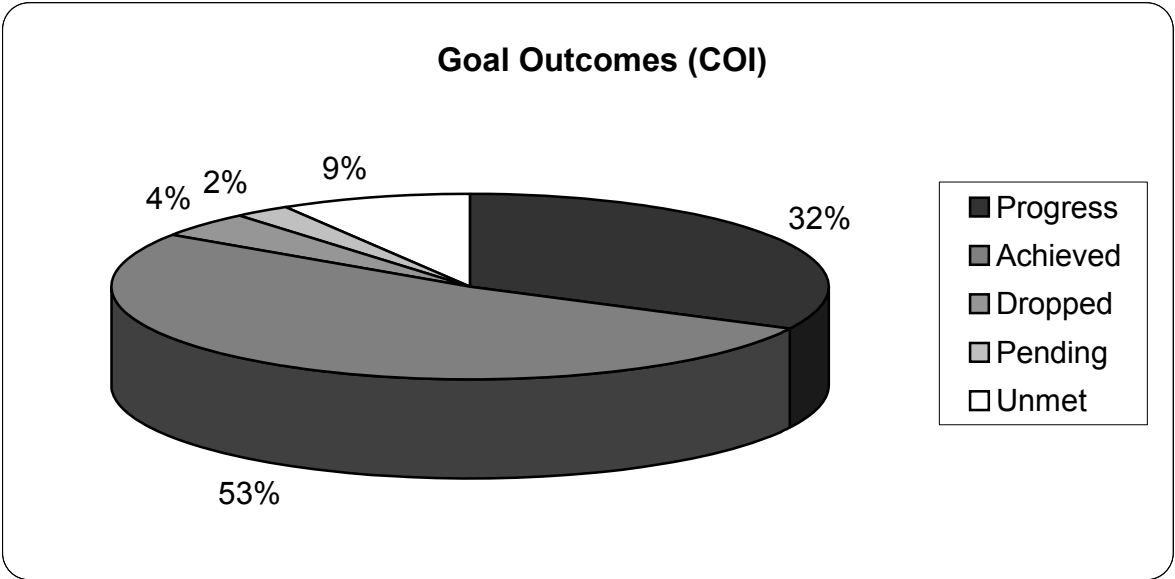
Community Integration

Objective: To assist persons served in meeting or making progress toward ISP goals

Measure	Applied To	Time of Measurement	Data Source	Obtained By	Target
% of total goals wherein clients reported that they “got what they wanted” or “made progress on what they wanted”	Persons served	March 31, 2009	Goal data collection sheets; log notes; client files; monthly reports	CQI	75%

Outcome (results): 84% - The target was achieved.





Limitations

Though the data is to be collected from one source (ISP forms) staff may also be including “goals” that are not part of the formalized planning process.

Key Findings/Trend

- Of the 480 persons supported in Community Integration programs, 167 (34.8%) are represented in this report.
- 53% (233) of all goals reported (448) were achieved.
- Progress was made in 32% (145) of total goals.

Interpretation of result

- Dropped goals are included in the measure for the purpose of transparency. This artificially reduces our performance (it is not possible to achieve or make progress on a goal that has been dropped).

Follow-Up

All proposed action items from 2007-8 were completed.

Proposed Action

- CQI will meet with the Procedures Committee to clarify to process of data collection
- Deliver Goal Measuring in-service to programs as requested

Monitoring

- Supervisors, Assistant Supervisors and Senior Support Workers will review progress on ISPs on a quarterly basis.

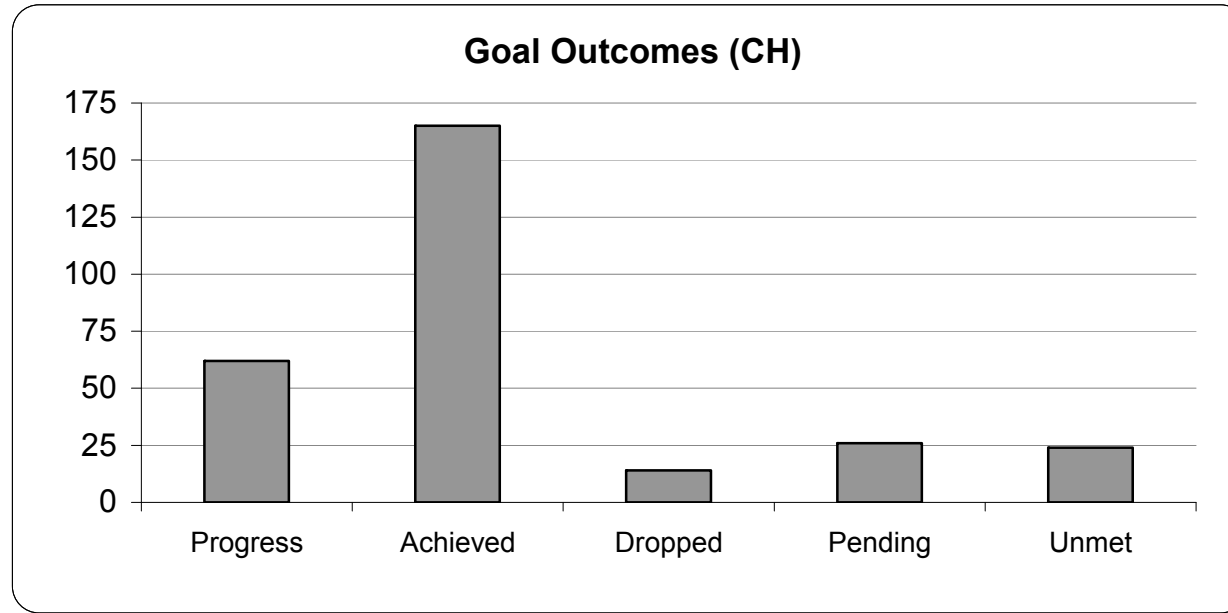
Effectiveness

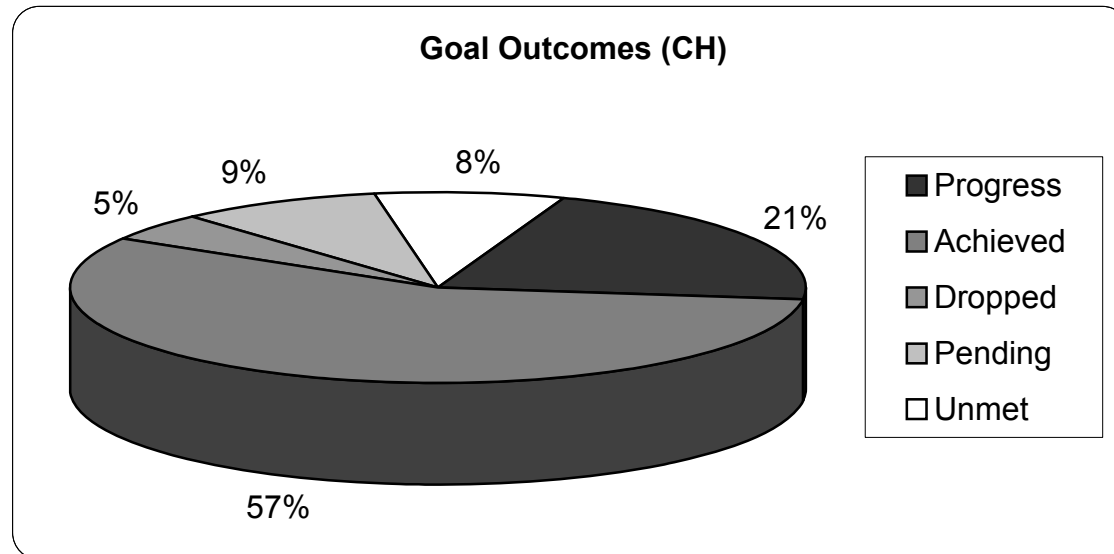
Community Housing

Objective: To assist persons served in meeting or making progress toward ISP goals

Measure	Applied To	Time of Measurement	Data Source	Obtained By	Target
% of total goals wherein clients reported that they “got what they wanted” or “made progress on what they wanted”	Persons served	March 31, 2009	Goal data collection sheets; meeting minutes; client files; log notes	CQI	75%

Outcome (results): 78% - The target was achieved.





Limitations

Though the data is to be collected from one source (ISP forms) staff may also be including “goals” that are not part of the formalized planning process.

Key Findings/Trends

- Of the 130 persons supported in Community Housing programs, 102 (78.5%) are represented in this report.
- 57% (165) of all goals reported on (291) were achieved.
- Progress was made 21% (62) of total goals.

Interpretation of results

Dropped goals are included in the measure for the purpose of transparency. This artificially reduces our performance (it is not possible to achieve or make progress on a goal that has been dropped).

Follow-Up

All proposed action items from 2007-8 were completed.

Proposed Action

- CQI will meet with the Procedures Committee to clarify the process for data collection
- Deliver Goal Measuring in-service to programs as requested

Monitoring

- Supervisors, Assistant Supervisors and Senior Support Workers will review progress on ISPs on a quarterly basis.

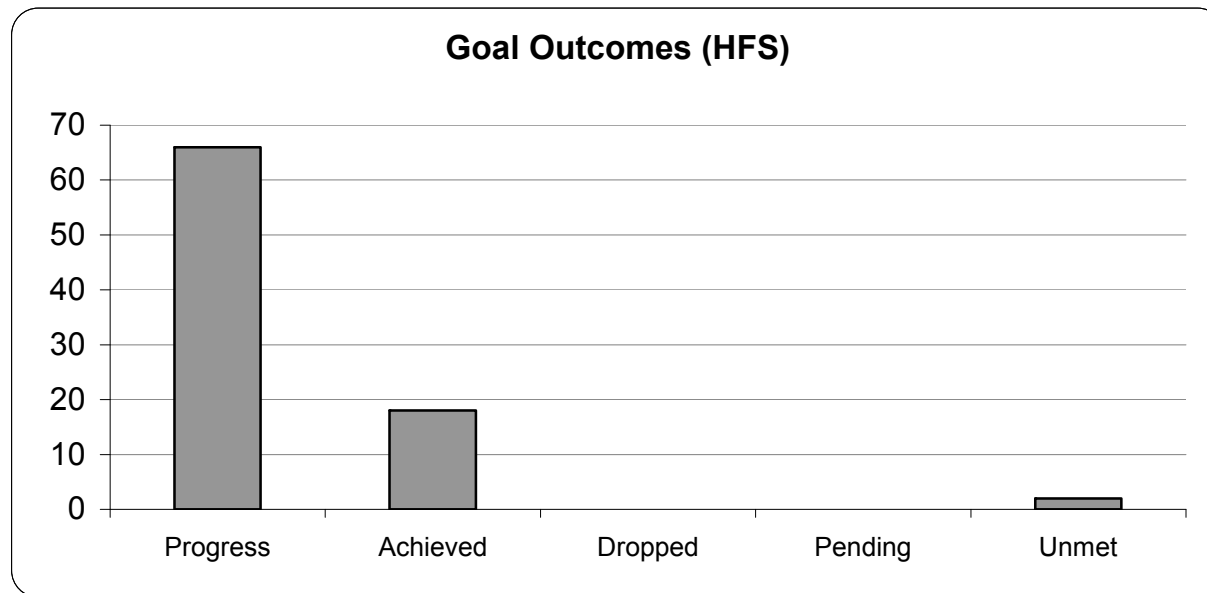
Effectiveness

Host Family Services

Objective: To assist persons served in meeting or making progress toward ISP goals

Measure	Applied To	Time of Measurement	Data Source	Obtained By	Target
% of total goals wherein clients reported that they “got what they wanted” or “made progress on what they wanted.	Persons served	March 31, 2009	Goal data collection sheets; Team Leader	CQI	75%

Outcome (results): 98% - The target was achieved.



Limitations

Goal tracking and monitoring are completed by the HFS contractors. Some contractors require training in this area.

Key Findings/Trends

- Of the 59 persons supported in Host Family Services, 47 (79.7%) are represented in this report.
- 20.9% (18) of all goals reported (86) were achieved.
- Progress was made in 76.7% (66) of total goals.
- The % of goals achieved and progress made is the inverse of other programs.
- No goals were reported as dropped or pending

Interpretation of result

- The Host Family Service Team Leader now has a Host Family Coordinator to help with HFS support including ISP writing. This has helped to increase the number persons served represented in this measure.
- The proportionally higher rate of goals where “progress” was made compared to “achieved” is likely due to the fact that most caregivers are not trained to the level of MAPCL staff with respect to ISPs.

Follow-Up

Though caregivers have received direct support and guidance regarding goal writing, tracking and measurability, they did not receive formal training. All other action items were achieved.

Proposed Action

- Design and delivery a specialized Host Family Services ISP training module.

Monitoring

- The Host Family Service Team Leader and Coordinator will continue to monitor ISPs through quarterly visits and monthly reports.

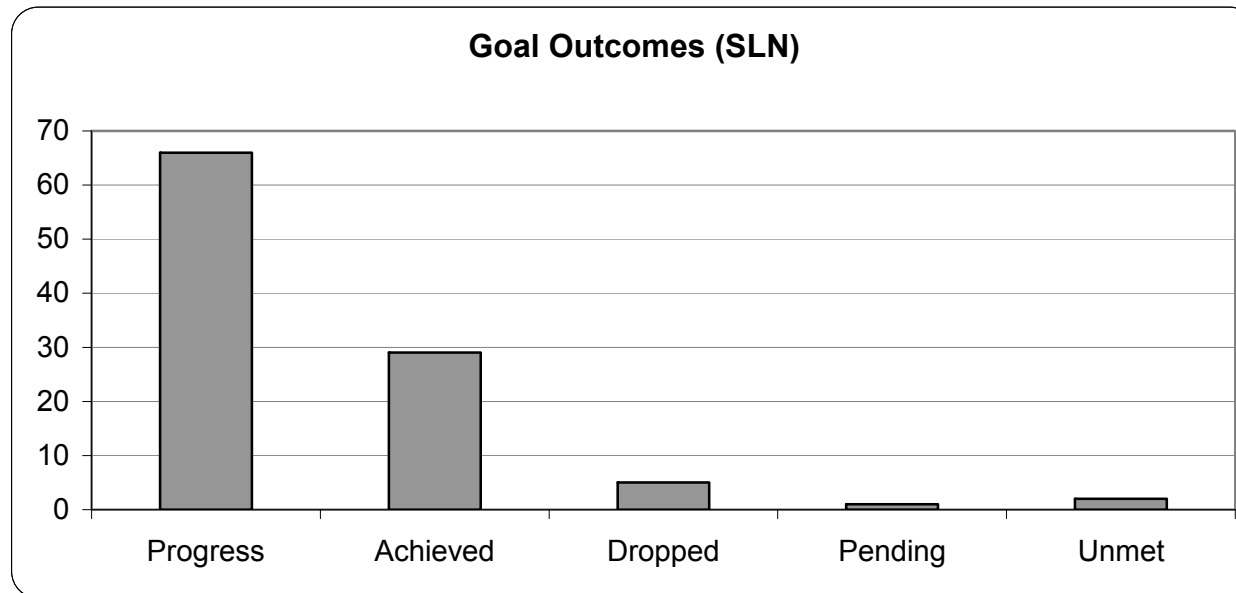
Effectiveness

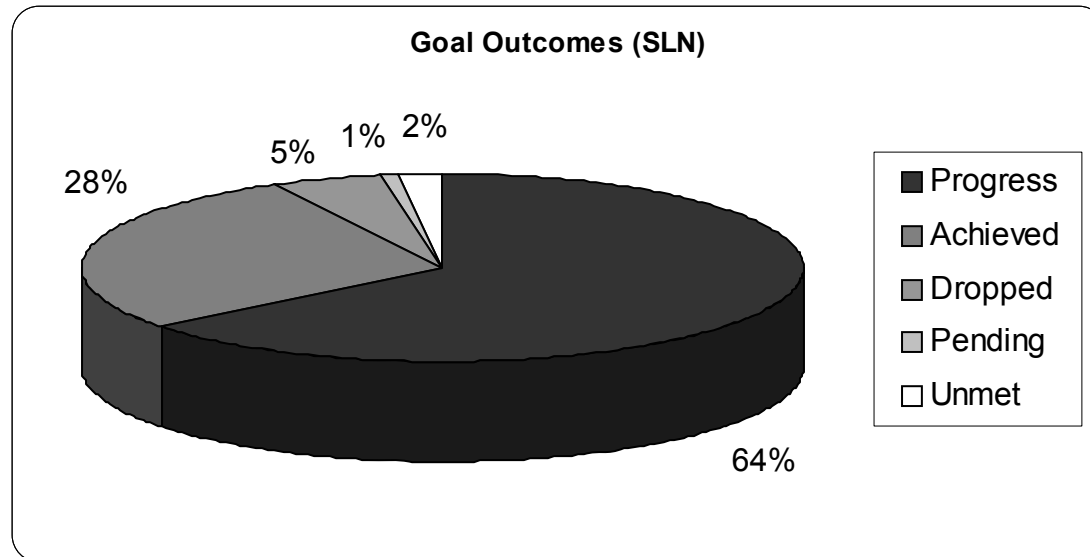
Supported Living Network

Objective: To assist persons served in meeting or making progress toward ISP goals

Measure	Applied To	Time of Measurement	Data Source	Obtained By	Target
% of total goals wherein clients reported that they “got what they wanted” or “made progress on what they wanted”	Persons served	March 31, 2009	Goal data collection sheets; log notes; client files; monthly reports	CQI	75%

Outcome (results): 94% - The target was achieved.





Limitations

Though data is to be collected from one source (ISP forms) staff may also be including “goals” not part of the formalized planning process.

Key Findings/Trend

- Of the 60 people supported by SLN, 51 (85%) are represented in this report.
- 28% (29) of all goals reported were achieved.
- Progress was made on 64% (66) of total goals.

Interpretation of result

- SLN staff have been well trained and supported in helping persons served express goals and writing ISPs in measurable terms which accounts for the high percentage representation of persons served in this measure.
- SLN staff spend significantly less time in direct support of persons served as compared to Community Housing (CH) and Community Integration (COI) programs. This may account for the much higher rate of “made progress” goals compared to CH and COI.

Follow-Up

N/A

Proposed Action

- CQI will meet with the Procedures Committee to clarify the process for data collection.
- Deliver Goal Measuring in-service to programs as requested

Monitoring

- Supervisors, Assistant Supervisors and Senior Support Workers will review progress on ISPs on a quarterly basis.

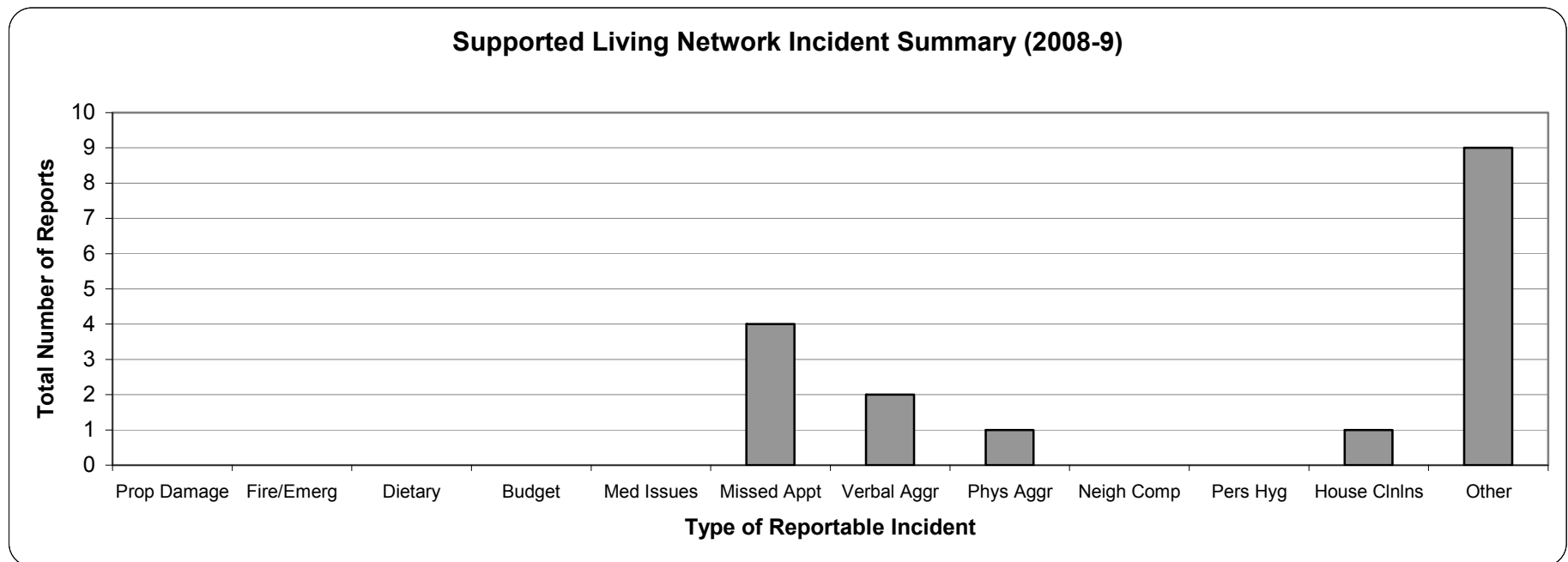
Effectiveness

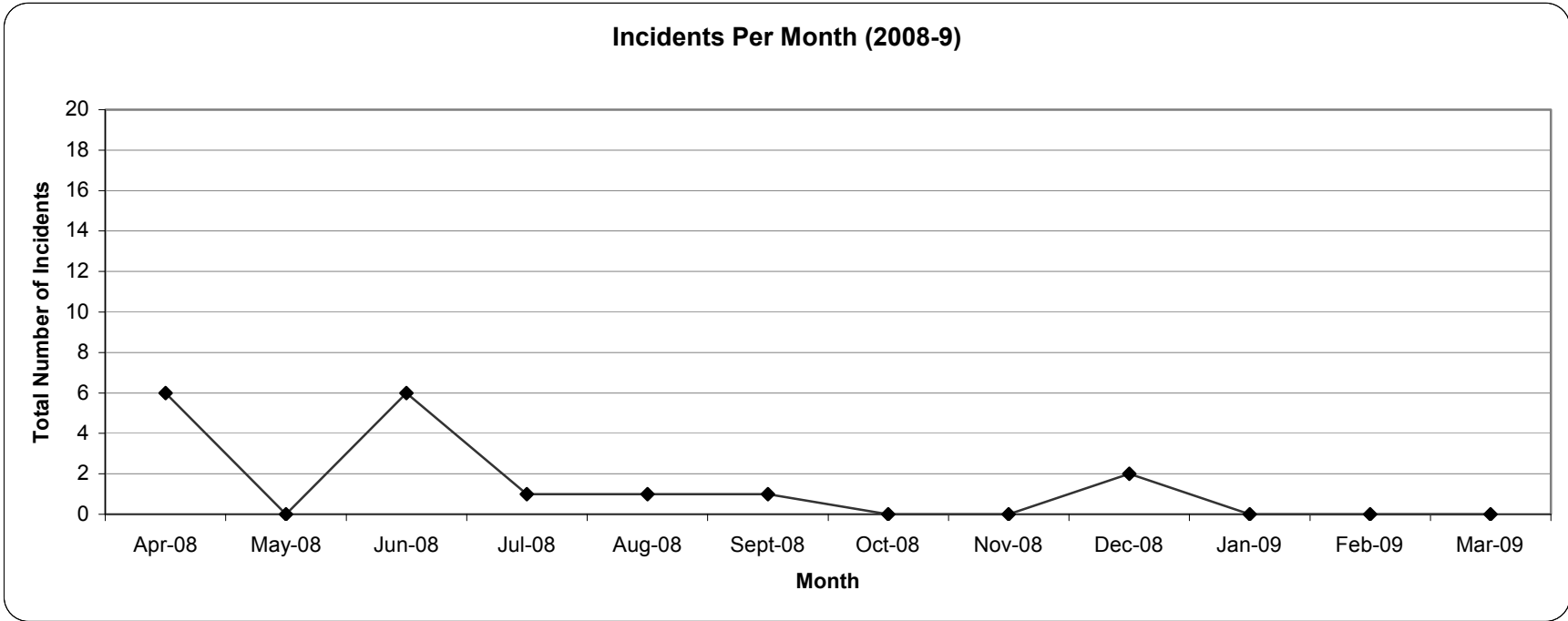
1. Supported Living Network

Objective: Persons receiving services in the Supported Living Network will experience fewer incidents that may jeopardize their current independent living arrangements in the community.

Measure	Applied To	Time of Measurement	Data Source	Obtained By	Target
% of staff visits that identify an incident (incident rate)	All adults served by the Supported Living Network (SLN).	April 1, 2008 – March 31, 2009	Incident Checklist	Program Employees Central Filing	< 5%

Outcome (results): 0.4% - the target was achieved.





Limitations

- There is an element of staff discretion in determining whether or not an event constitutes a potential threat to continued independent placement within the community.

Key Findings/Trends

- There are 51 Supported Living Network (SLN) clients in this measure. There were a total of 17 incidents reported this year down from more than 90 in 2007-8.
- The highest number of incidents was attributed to “other” (52.9%).
- Missing appointments dropped to 23.5% (39.8% 2007-8)
- 8 persons (15.7%) accounted for all reported incidents.
- 4 persons accounted for 76.5% (13) of all incidents.
- 84.3% of persons served by SLN had no incidents in 2008-9.
- 17 incidents were reported this year compared with just over 106 in 2007-8

Interpretation of results

Staff training over the past year has increased of incident category understanding and incident reporting. The significant drop in reports of “Missing Appointments” and “Verbal Aggression is an indication of this.

Follow-Up

All action items from 2007-8 were completed.

Proposed Action

Because there is little value in continuing with this measure, a new effectiveness measure has been created for next year.

Monitoring

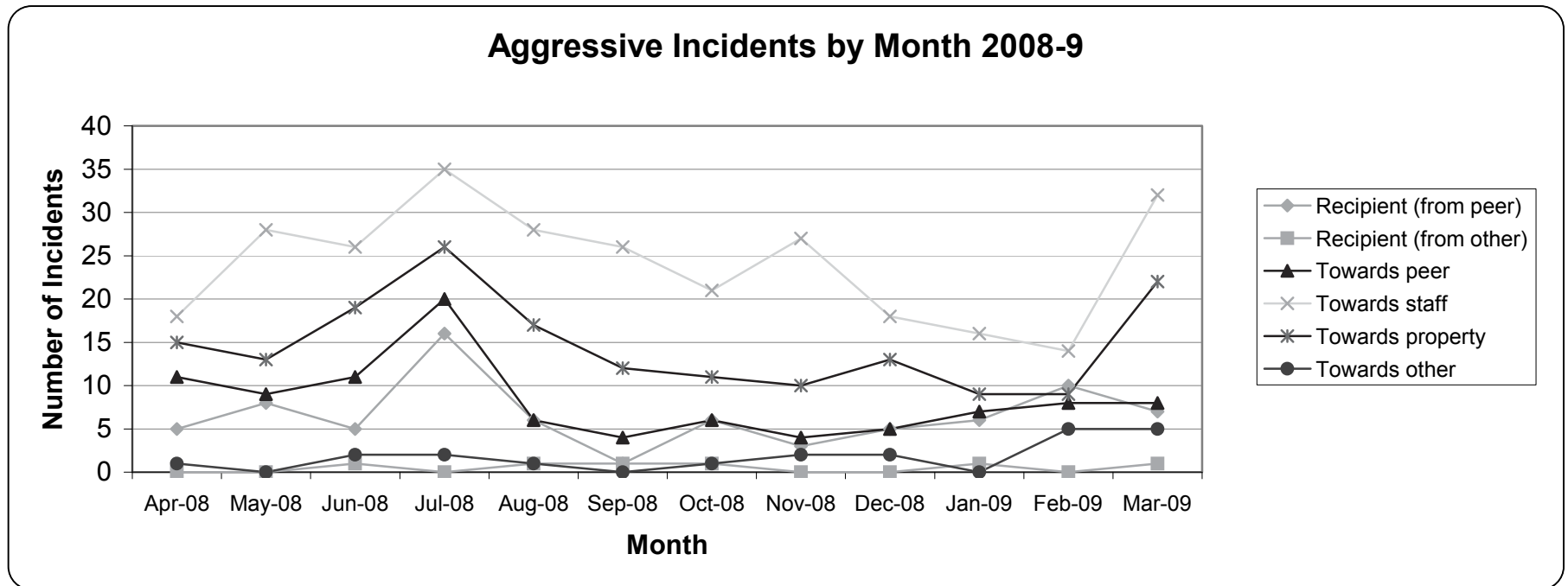
N/A

Effectiveness: Community Living Services

Objective: To reduce the number of incidents involving aggression.

Measure	Applied To	Time of Measurement	Data Source	Obtained By	Target
# of aggressive incidents to average # of persons served	Persons served	April 2009	Critical Incident Database	Director of Administration	0.5

Outcome (results): 0.80 - The target was not achieved

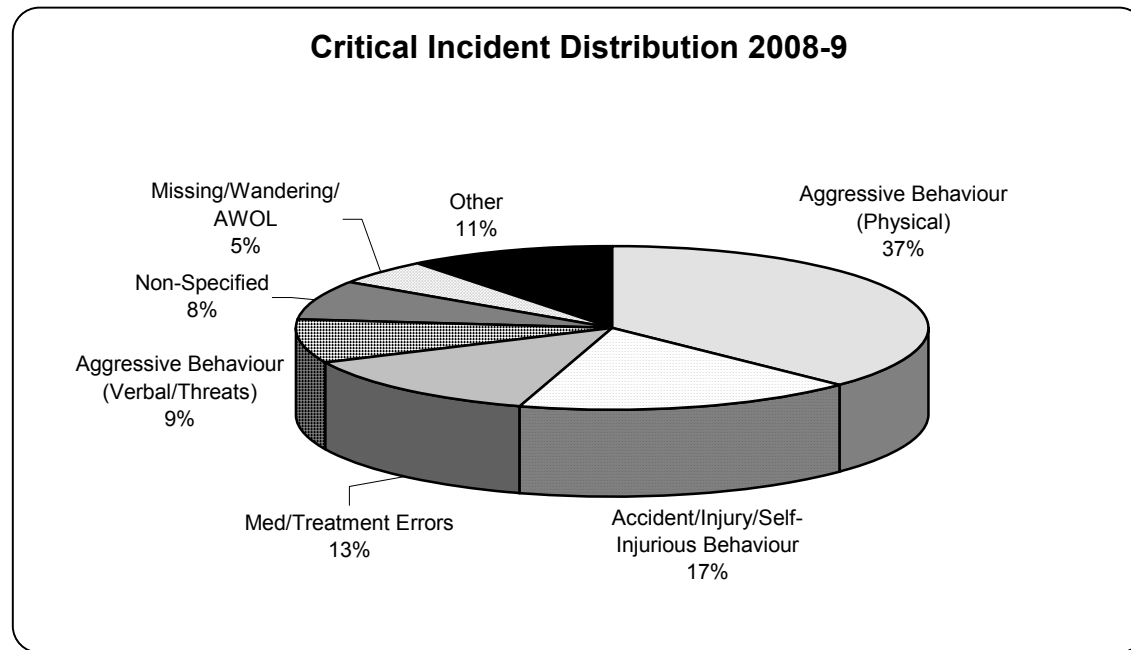


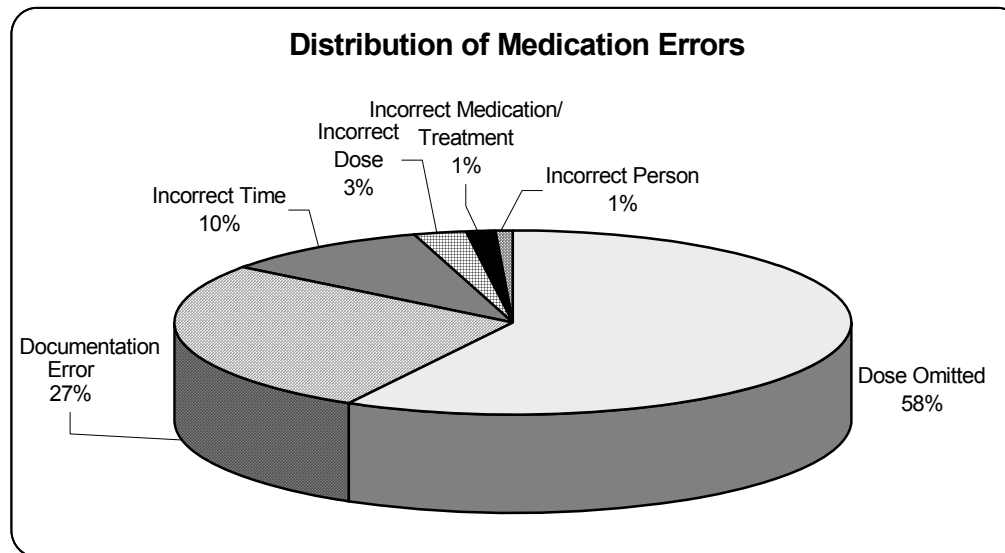
Limitations

- While there will always be a margin for error relating to consistently categorizing and accurately entering critical incidents into our data base system, we have done what we can to mitigate this effect by having one person responsible for these activities, by meeting on a regular basis with continuing quality improvement and central files management to discuss hard-to-categorize incident reports, and by refining and clarifying the written definition of categories.

Key Findings/Trends

- The number of serious incidents involving physical aggression decreased from 760 in 2007-8 to 668 this year.
- July and March show significant increases in numbers overall January and February show significant decreases.
- 10 programs account for 65% of all incidents involving physical aggression. 3 programs accounted for 33%.
- 1 person served accounted for 6% all incidents involving physical aggression.
- Of the 1797 incidents reported, the highest number in terms of category was physical aggression at 668 or 37%, accident/injury/self-injury accounted for the next highest number 313 (17%). There were 240 medication errors reported, 115 (48%) were staff errors. 45% (52) of those were "dose omitted. A further 35% were documentation errors.





Interpretation of Results The spikes in aggression during the months of March and July can be attributed to 3 individuals.

Follow-Up

- Competency based medication training has been delivered to 95% of MAPCL staff.
- All other action items from 2007-8 have been achieved.

Proposed Action

- Because we have significantly increased the number of persons served to whom this measure is applied by adding in the Laurel Behavioural Support Services, next year's target will be adjusted accordingly.
- MAPCL will implement a new system of behavioural support training for staff. The Mandt System emphasizes relationship building and effective communication as fundamental to its positive behavioural support approach.
- Competency based medication training will continue through 2009-10.

Monitoring

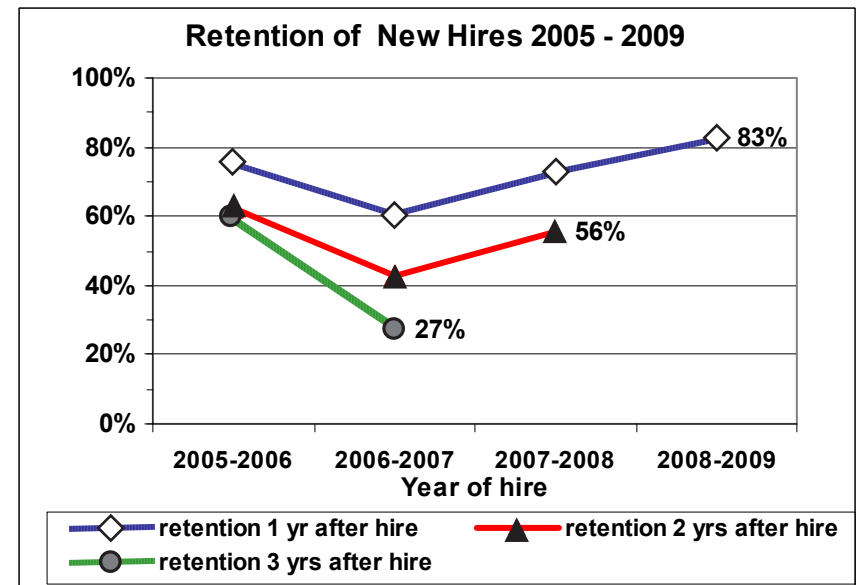
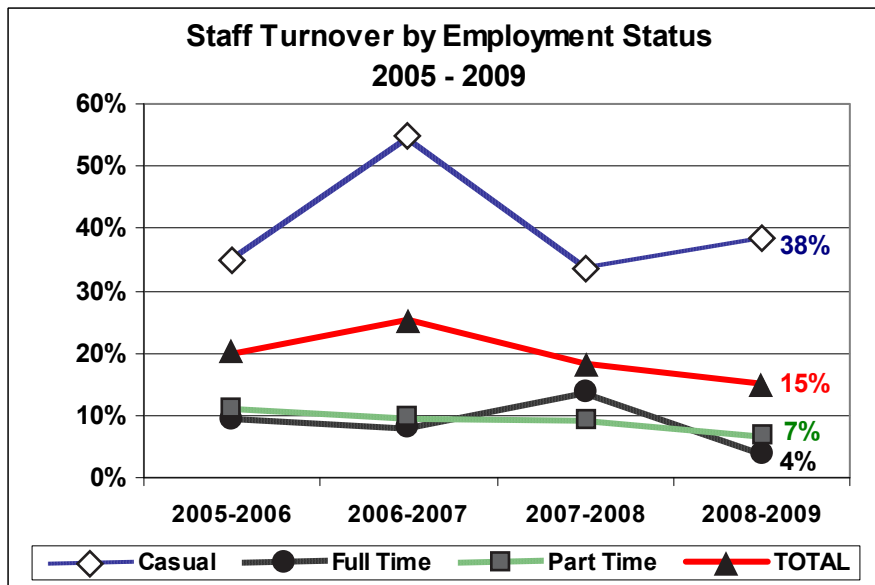
Program Directors and Team Leaders will continue to review trends in critical incidents on a quarterly basis.

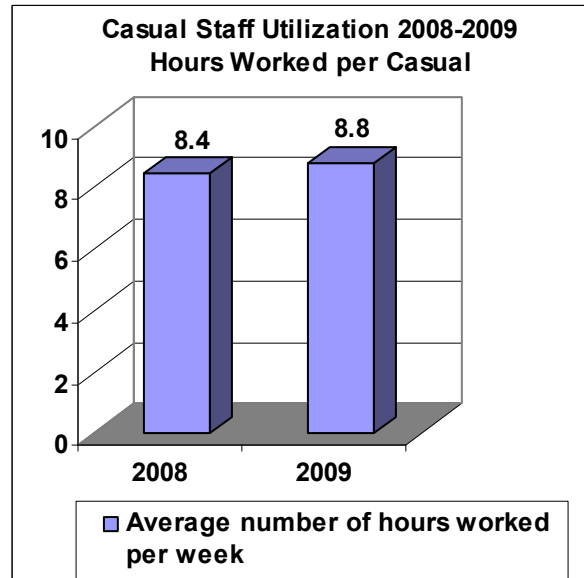
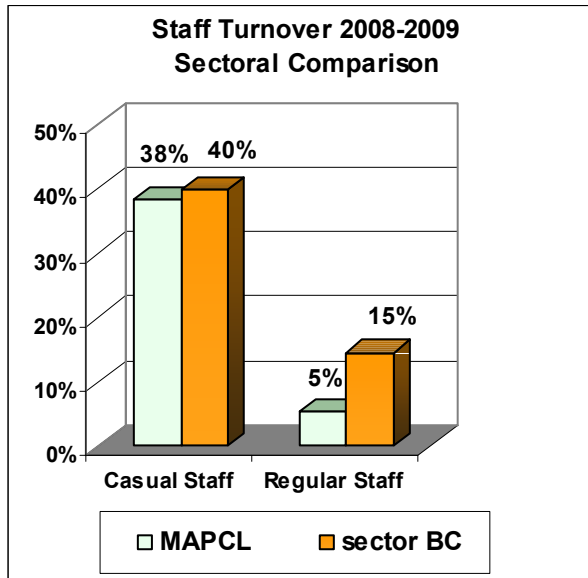
Business Functions

1. Staff Utilization

Objective: To increase the efficient utilization of our staff
 Time Of Measurement: April 2009
 Obtained by: Human Resources

Measure	Applied To	Data Source	Target 2008-9	Outcome 2008-9	Target 2009-10
% of staff exits	All staff in 2008-9	HR Database	10%	15%	10%
% of new hires retained	All staff in 2008-9	HR Database	--	27% after three years	40% after three years
average number of hrs worked by casuals	All casual staff 2008-9	Payroll System	--	8.8 hours per week	10 hours per week
% of casual staff hired into regular positions	All casual staff 2008-9	HR Database	--	14 %	20%





Key Findings/Trends:

- As in previous years, the turnover rate of casual employees remains high at 38% (2007-8: 34%).
- The turnover of regular full time staff fell significantly from 14% in 2007-8 to 4% currently. The turnover of part time staff was 7%, a decrease of 2 percentage points compared to the previous year.
- A comparison between MAPCL’s turnover and our sector as a whole in BC is now available. Turnover of casual staff in the sector was 40%, comparable to MAPCL’s 38%. The turnover for regular (part time and full time) staff in the sector was 14%, considerably higher than MAPCL’s 5%.
- Retention of new hires: of staff hired up to one year ago, 83% is still with us. For staff hired between 1-2 years ago retention is at 56%, 2-3 years ago at 27%. Over the last three years the trend is that fewer staff are leaving within their first 2 years of employment with MAPCL.
- The average number of hours worked has increased from 8.4 hours per week in the first pay period of the fiscal year of 2008-2009 to 8.8 in the last pay period, an increase in efficiency of 4%.
- In 2008-9, 14% of casual staff was hired into a regular (part time or full time) position, a decrease by 3 percentage points compared to 2007-8.
- The number of employees has remained virtually the same at 605 (2007-8: 607).

Interpretation of results:

- In past years we reported on staff turnover as a business function. This year we have broadened the scope and introduce a number of additional indicators to measure the efficient utilization of our workforce. We have measured outcomes for this year and are setting targets for next year.
- One new measure reported on is the retention of new hires, as an indicator to gauge the success of MAPCL's strategic objective to develop a vibrant workforce, resulting in a longer commitment to MAPCL as their employer.
- The utilization of casual staff is reported on for the first time, as MAPCL has focused on increasing the efficiency in this area in this past year.
- Turnover of casual staff remains an issue, both in MAPCL and in our sector as a whole. Of all turnover in MAPCL, 75% is caused by casual staff. This is to a large extent related to casual staff's personal choices and changing priorities.
- Turnover of regular staff has decreased significantly in 2008-2009. New strategic initiatives to develop a vibrant workforce and increase employees' engagement have likely played a role in this, as well as the current uncertain economic times where people place more value on job security.
- The percentage of casuals hired into regular positions is introduced as a measure as well this year. This measure is relevant to track retention efforts, as well as the efficient utilization of our staffing resources.
- We have been able to compensate for the high (casual) turnover and keep staffing levels unchanged compared to the previous year by recruiting 82 new staff. However, this comes at a high cost. The total cost of hiring and training new staff in the year 2008-2009 is estimated at close to \$300,000.

Follow up:

As announced in last year's report, this year we have focused on increasing the efficient utilization of our staffing resources, and developed some key indicators to track this. We have seen some progress, but more needs to be done.

Proposed action:

- Set targets for 2009-10 to increase the efficient utilization of our staff.
- Evaluate the cost of recruitment efforts and determine specific targets for cost reduction.
- Evaluate the effect of key strategic initiatives to develop a vibrant workforce.

Monitoring:

- Report every pay period on utilization of casual staff.
- Evaluate all data quarterly

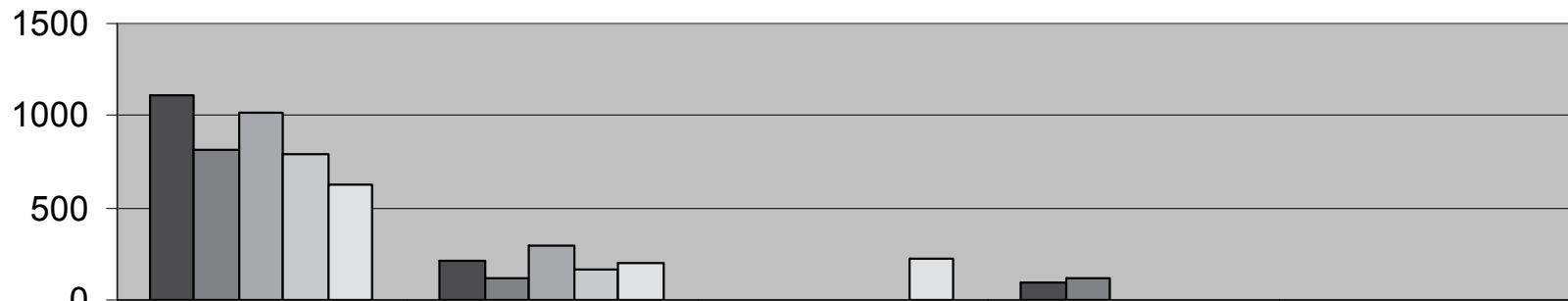
Business Functions

1. Work Days Lost

Objective: To reduce incidents
Time Of Measurement: April 2009
Obtained by: Human Resources

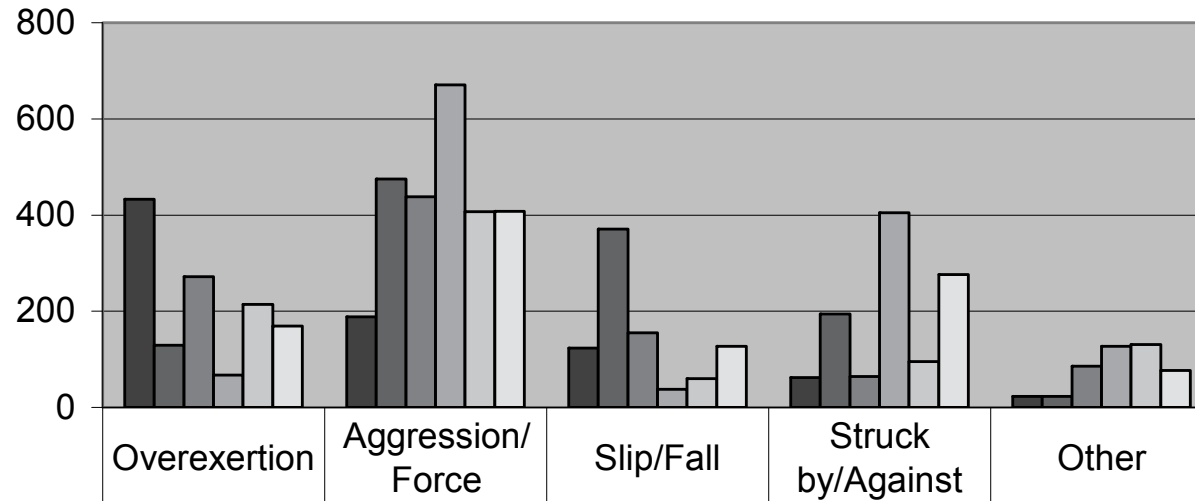
Measure	Applied To	Data Source	Target 2008-9	Outcome 2008-	Target 2009-10
Average # of work days lost resulting from aggression/force per employee	All staff in 2008-9	Disability Management Institute / MAPCL	.50	.68	.54
Average # of work days lost resulting from Overexertion per employee	All staff in 2008-9	Disability Management Institute / MAPCL	--	.28	.23
Average # of work days lost resulting from Slip/Fall per employee	All staff in 2008-9	Disability Management Institute / MAPCL	--	.21	.17
Average # of work days lost resulting from Struck By/ Struck Against per employee	All staff in 2008-9	Disability Management Institute / MAPCL	--	.46	.37
Average # of work days lost resulting from Other per employee	All staff in 2008-9	Disability Management Institute / MAPCL	--	.13	.10

Work Days Lost by Position



	Residential Care Worker	Day Support Worker	Life Skills Worker	Supervisor/Mgr	Other
■ 2004	1105	211		92	0
■ 2005	818	123		121	0
■ 2006	1014	294		0	0
■ 2007	790	161		0	0
□ 2008/2009	629	201	225	2	0

Work Days Lost by Claim Type



■ 2003	433	188	123	62	23
■ 2004	129	475	371	194	23
■ 2005	272	438	155	64	86
■ 2006	67	671	38	405	127
■ 2007	214	407	60	95	131
■ 2008/2009	169	408	127	276	77

Limitations:

- Starting in 2008/2009 the data for this report is generated by MAPCL. In previous years, the Disability Management Institute (DMI) generated the data.
- The calculation of a workday based on the injured employee's schedule. The number of hours in a workday therefore can fluctuate, and does affect the compensation paid by WorksafeBC.
- In prior reporting years the total number of days lost in a year were allocated to the year the injury/incident took place. This is no longer the case. The current reporting format calculates days lost in the year the days lost is incurred.

Key Findings/Trends:

- Claims involving "Aggression/Force" account for 38.59% of all workdays lost in the fiscal year 2008/2009 (down from 44.9% in 2007). "Overexertion" accounts for 15.98% of total lost workdays (down from 23.7% in 2007). Slip/Fall has increased to 12.01% from 6.6% in 2007 and "Struck by/Against" has increased from 10.5% in 2007 to 26.11% of all workdays lost in the 2008/2009 fiscal year.
- Overall workdays lost increased from 951 in 2007 to 1057 in 2008/2009
- Total number of claims filed has been reduced from prior periods; number of claims for this reporting period was 51.
- We did not reach our target from last year of .5 in regards to number of workdays lost resulting from aggression/force to the number of employees.
- There was a significant increase in "Struck by/Struck against" and "Slip/Fall" claims
- "Overexertion" incidents have considerably decreased
- We now report separately on the position of "Lifeskills Worker." In previous years, days lost for this position were included in the Day Support Worker position
- Beginning this year the reporting period is from April 1 – March 31, reports in prior years were based on the calendar year.

Interpretation of results:

Overall, the number of incidents in 2008/2009 have increased, however both Aggression and Over Exertion incidents have decreased from 2007. The number of incidents resulting in health care costs or compensation costs have reduced.

Follow-Up:

Focusing on enhancing a "Safety Culture" within MAPCL, there has been significant efforts to become a more safety-conscious culture in an effort to decrease the number of lost time incidents. Some of the new initiatives include:

- **A Program Safety Person has been appointed to each location operated by MAPCL.**
- **Risk Assessment Training has been provided to all supervisors of MAPCL.**
- A new Violence in the workplace program has been developed.
- The Safety Management Awareness of Risk Team (SMART) has been created to increase safety awareness at MAPCL.
- **Disability Management Institute Reporting:** A new procedure for reporting incidents has been implemented.

Proposed Action:

Mainstream Association for Proactive Community Living (MAPCL) believes that the health and safety of our employees is paramount and that employees have the right and obligation to insure that they are working safely and smartly, in order to do this MAPCL will:

- Continue monitoring the impact of DMI services in claims management, monitor on a program-by-program and incident basis.
- Continue to use partnership with Worksafe BC to make improvements to our health and safety systems.
- Provide additional training to Senior Support Workers, Supervisors and OSH Committee Members.

Monitoring:

- Continuing review of WCB Injury Reports and Accident/Incident Investigations by Team Leaders, HR, and the OSH Committee to ensure proper follow up is taking place for risk prevention purposes





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