

Child Development Centre

Performance Measures Report

September 2019

The Child Development Centre's mission: We work with families and community members to provide therapeutic services and support the developmental needs of all Yukon children from birth to kindergarten.

The Child Development Centre is accredited for programs providing early childhood therapy services and supports. The objective of the programs is to provide appropriate therapeutic services (screening, assessment, diagnosis, intervention and follow up) to children with developmental needs. This is done using a family-centered philosophy. These services may include the services of an occupational therapist, physiotherapist, speech-language pathologist, psychologist, developmental therapist, teacher or therapy assistant and are designed to meet the individual needs of the child and family.

The Child Development Centre strives to provide a high quality service to children and families throughout the territory and is committed to establishing performance measures that ensure this standard of service.

Performance measurement and management are the responsibility of program coordinators and the executive director.

The information provided in this report is a compilation of performance measures and data gathered over the past program year as it relates to the operational and strategic plans of the Centre. It examines the following service areas: effectiveness; efficiency; service access; input and satisfaction; staff development; and business functions.

The results of objectives as well as considerations and recommendations are discussed below.

Effectiveness

TARGET: 80% of children and families achieve or partially achieve their goals

Results: 99%



Families reported increased knowledge through parent only group intervention

100% Handle with Care

90% Hanen programs

Target: more than 90%

94% of families in the communities reported increased knowledge as a result of a group or working with a therapist

Target: 80%

95% of Early Childhood Educators reported they learned something in the professional development sessions that they can use in their work

Target: 80%

Efficiency

Staff will use their time efficiently to serve clients

80 %

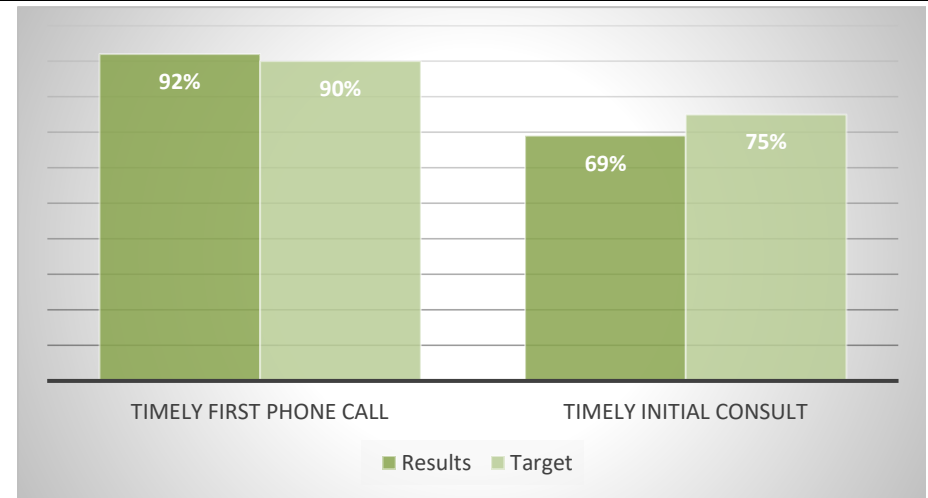
of therapists used at least 75% of their time in client related activities

Maintain decreased therapy hours for the preschool while maintaining goal achievement

TARGET: Less than 1000 hours

RESULTS: 891.7

Service Access



CDC provided **four sessions** for families on the waitlist to learn some strategies to use while their children were waiting for regular intervention.

Target: 2 – 3 sessions

Stakeholder Input and Satisfaction

- **96%** of families reported a positive initial phone call. Target: **90%**
- **91%** of families reported a positive initial consult. Target: **90%**

We surveyed families in the communities
95% found the services helpful
100% felt their opinions and values were respected

“They come to us, which makes getting services a lot easier in the community.”
 “The team has been super supportive and encouraging. I greatly appreciate all their help over the years. I wish I has more kids to bring to them.”
 “They are very helpful and just easy to talk to.”
 “Services are always tailored to the child/family’s needs/wants.”

Staff Development

- **83%** of therapy meetings included a documented case review, research related discussion or training opportunity. Target: **90%**
- **100%** of therapists reported that they learned something new from other therapies during professional development presentations Target: **90%**

Business Measures

Increase our presence on social media – 10% increase in likes on Facebook	We had a 24% increase in likes on Facebook
Fundraise \$2500	\$18,533 for program year
Increase in government funding	We received the requested increase to meet the demands of our collective agreement
Increase accessibility to our referral form	Now on Website and electronic version on physician’s referral platform
Strengthen relationships with community by attending community events	Staff attended many events including Health Fairs, CPNP lunches, community groups and college campuses

Considerations and Recommendations

1. Continue to create goals with families and collect data on progress towards SMART goals.
2. Continue to provide opportunities for parents to learn about child development and strategies they can use to support their children at home in a group or individually as this has shown to be an effective way to provide support.
Recommendation: Move towards offering more group opportunities for families waiting for services so they have access to information that will help them support their child's development while waiting.
3. Continue to monitor staff time.
Recommendation: Develop caseload management guidelines to help staff manage caseloads while providing maximum number of therapy opportunities.
4. Continue to target timely connections with families for first phone call and initial consults.
 - 92% of first phone call fell within the target of 15 days, an increase from 75% last year. We continued to try to do first phone calls once a week during the summer months when we were closed. Of those that fell outside the 15 days for first phone calls:
 - 18 were late;
 - 7 were staff error;
 - 10 were due to a fax machine error in the summer; and
 - One was due to March break.
 - 69% of initial consults were completed in the target of 35 days, the same as last year. Of those that fell outside the 35 days for initial consults:
 - 26 were due to the fact we did not have the consult times available;
 - 24 were due to difficulty connecting with families;
 - 22 were due to closures;
 - 9 were due to family preference; and
 - Two were staff error.

Considerations:

- We had a 97% increase in referrals to developmental therapy and 53% increase to speech therapy from the previous year. Although we added more consult times, hiring extra staff at times, we were unable to provide enough extra spaces to meet the growing demands. We will be monitoring the number of extra consult times needed in the upcoming year.
- Previous data collection indicated families are happy with the process of intakes over the phone followed by the initial consult as it allows them to tell their story sooner. Therefore, the management team will continue to work with staff towards processes and measures that support timely first phone calls and initial consults. We have added more consult times for PT and DT.

Recommendations:

- We just replaced our aging phone system; therapists now have cell phones versus desk phones. This will allow the intake coordinator to text families to connect and set up consult times.
 - We will look at overall therapy time and consider offering a limited number of consults over the summer as dictated by the working year embedded in the collective agreement.
 - Increase consults in the spring, as the budget and access to extra staff time allows, when there seems to be a rise in referrals
5. Continue to use iPad and survey app to collect feedback from families. We significantly shortened the survey we used compared to the more complex Measure of Processes of Care survey used in previous year.
 6. Continue to find ways to offer professional development opportunities to early childhood educators based on their interests.
Recommendation: Use Early Learning Program Support staff to gather interests and provide the training vs therapy staff when possible given the waitlists for therapy services.
 7. Continue to meet regularly with government to keep them updated with services and current needs.
 8. Continue to promote clinical decisions based on research and best practice
Consideration: We broadened the scope of therapy meetings to include discussion on research and training opportunities. We increased the inclusion of this in therapy meetings to 83% from 50% the previous year.
Recommendation: Management continue to encourage staff in this area and monitor more closely.