

Child Development Centre

# Performance Measures Report

August 2021 – June 2022

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 provides 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 in Whitehorse and the rural communities. This is done using a family-centered philosophy and may include the services of an occupational therapist, physiotherapist, speech-language pathologist, psychologist, developmental therapist, diagnostic coordinator, teacher or therapy assistant. Services are designed to meet the individual needs of the child and family. The Early Learning Support team also provides support to childcare centres to facilitate inclusion and a developmentally appropriate environment and programming.

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.

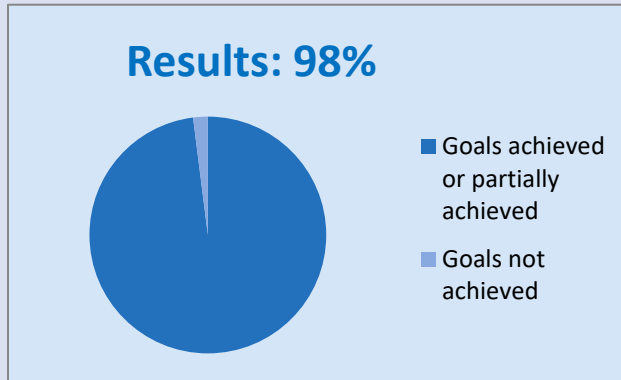
Performance measurement and management are the responsibility of program coordinators and the executive director.

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: 85% of children and families achieve or partially achieve their goals**



**86% of families completing our survey, reported they learned something from CDC to use at home with their child**  
Target: 90%

**90% of families who responded, reported increased knowledge as a result of parent group training**  
Target: 90%

**100% of Early Childhood Educators reported they learned something in the professional development sessions that they can use in their work**  
Target: 90%

**100% of ECEs achieved their goals set with ELPS program**  
Target: 85%

## Efficiency

**Staff will use their time efficiently to serve clients**

**54% increased to 82% by third quarter** of therapists used at least 75% of their time in client related activities

**Began year with no space, 2 building moves, Covid impacts including cancelled trips affected this outcome**

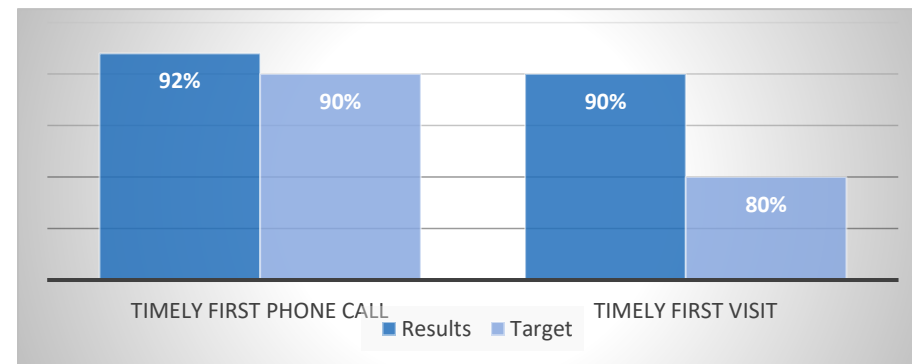
**Retain service access in therapeutic preschool by continuing new model**

**TARGET: 43 children**

**RESULTS: 57 children**

**57 children with targeted goals attended this program year**

## Service Access



**Despite service disruption, we continued to provide parents with access to first phone calls and visits in the targeted time.**

- Children on the SLP and DT waitlist will have access to a follow up phone call when waiting longer than 4 months. **Target: 80%**  
**Results = 40% within 4 months, 76% total after that time frame**
- First Nation children on the waitlist for SLP and DT services will be seen for services ahead of their due dates through Jordan's Principle funding **Target: 75%** **Results: 69% SLP 63% DT%**



## Considerations and Recommendations

1. Continue to create goals with families within the allotted time for Whitehorse and the communities and collect data on progress towards SMART goals.

### Considerations:

- When therapists and families work together to create SMART goals, 96% of children are achieving them, however some children are receiving services do not have clear goals identified in their file.
- Outreach has been impacted by disruptions to travel over the past 2 years which made it challenging to build relationships and establish goals.

### Recommendations:

- Prioritize establishing family plans with all children with recommended therapeutic intervention.
- Create and measure goals for children receiving consistent therapeutic supports in the rural communities where there are regular community visits.
- Program coordinators develop a system of gathering data on family plans and goals several times a year in order to provide ongoing support to this process.

2. Continue to provide and explore different 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.

### Considerations:

- While parents reported a positive experience with individual sessions, parent groups via Zoom continued to be challenging for families. Zoom sessions for groups were offered due to ongoing concerns with Covid-19.

#### Recommendations:

- Continue to offer groups for parents in order to provide training in an efficient manner and opportunities for families to connect.
- Move to in person training for families when possible and as space allows in our temporary location.
- Offer monthly drop in groups
- Continue to offer Zoom for individual sessions and for one-time presentations when parent time is limited.

### 3. Service access continues to be a priority.

#### Considerations

- Parents who completed our family survey indicated only 71% said their child's needs were being met. Analysis of comments provided indicated the wait for services was long and the amount of available therapy time was not meeting the needs of the child once on caseload. Many comments appreciated the work we do, but said there needed to be more staff.
- Follow-up phone calls were found valuable to parents and staff and helped therapists to re-prioritize families that needed more immediate support. While 29% of children referred to SLP and DT services began receiving therapeutic supports within 3 months, the remainder of those referred waited longer. Follow-up phone calls were made to 40% of families waiting 3-4 months. 74% of families who were waiting for more than 3 months received a check-in phone call, but not always in a timely manner. This was down from previous years and analysis showed the process of hiring a contract person to do first visits vs CDC staff affected timely follow up calls.

#### Recommendations

- Secure funding for the 3 phases of the new structural renewal plan that will see an increase of staff and allow therapists to focus more time on providing therapy and less time on administrative duties. The goal of the plan is to significantly decrease wait times.
- Review and improve process for follow up phones calls for families waiting longer than 3-4 months.

4. Continue to monitor and support staff time for direct service.

Considerations:

- Staff ability to connect with children and families was significantly impacted by the following:
  - Our sudden relocation from our permanent space and two subsequent moves
  - Surges in COVID-19 results in cancellations by staff and families
  - We had to cancel trips to the communities for November and December and one in January due to the pandemic risk. When trips were cancelled, not all families were interested or able to connect with Zoom or on the phone. Families in rural communities have consistently expressed a preference to see therapists in person.
  - Many other trips went ahead following time spent cancelling, rescheduling, re-booking and connecting with First Nations and other community partners. This was time consuming but important work.
- Our plan was to develop caseload management guidelines to help staff manage caseloads while providing maximum number of therapy opportunities. However, demands on program coordinators time due to increased staff, building issues and continued impacts of COVID-19, forced us to put that on hold.

Recommendations:

- With increased program coordinator time as per the structural renewal plan, the following will be prioritized:
  - The development of clear caseload management guidelines will be a priority; and
  - Our orientation for new employees will be reviewed and enhanced.

5. We have achieved consistent standards for timely connections with families for first phone call and first visits over the past 6 years. We have continued with access to first phone calls over the summer months and first visits where possible.

Considerations

- This year we added time standards for first visits for internal referrals to a new therapy. We were able to continue to meet our goal.

- There were some delays in first phone calls and visits due to sudden building relocation in August and subsequent building moves.

Recommendations:

- Continue to monitor need for extra first visits during months with high referral numbers.
- Continue to make first phone calls and first visits available to families referred in June – August.
- Continue to offer a choice of first visits over tele-practice or in person.

6. Continue to connect with First Nation governments and agencies to inform our work and collaborations with others

Recommendation:

- Consider more specific feedback from each community via meetings, phone calls or survey.
- Continue working with YFNED to offer clear options to families in Whitehorse and the communities. Connect with visitors from their early years program in communities where this support is offered.
- Promote connections between the new team offering services to Indigenous children in Whitehorse and community agencies to increase access to complementary and collaborative services

7. Continue to find ways to connect with Indigenous children and families in Whitehorse through the Jordan’s Principle Project in a timely manner.

Considerations:

- Moving buildings and continued cancellations due to COVID 19 affected therapist’s ability to connect with families.
- We were able to provide speech / language and developmental therapy supports to 171 children during this program year. This compares with 107 the previous year, which was the first year of this increased funding. Increase in therapy time allowed us to see 171 children vs 107 last year.

- It was challenging to begin services within the desired time frame for all of the children due to the factors discussed, however 25/38 new referrals in Whitehorse did receive DT/SLP support in a timely manner compared to only 12% of other children in Whitehorse.

Recommendations:

- The organizational renewal, with support of Jordan's Principle funding, planned for an additional team in Whitehorse that will focus on seeing Indigenous children only.
- Continue to collaborate with YFNED to determine how services are provided in the communities and where to focus our therapy time.

8. Continue to offer professional development opportunities to early childhood educators based on the information gathered by the Early Learning Support Program staff regarding their interests.

Recommendation: Do this in collaboration with Educations' Early Learning and Childcare.

9. Continue to meet regularly with the Department of Education to keep them updated with services and current needs.

Recommendations:

- Use the organizational renewal plan to guide these conversations.
- Collaborate with Early Learning and Childcare to solidify services to early childhood educators and promote inclusion.

10. Continue to support staff to provide services that help families make desired changes as outlined on their family plan

Recommendation: Provide monthly opportunities for staff to strengthen what they learned in Motivational Interviewing training through peer discussion and problem solving.