



*Elizabeth House
Annual Report*

2012-2013



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Message from the President of the Board of Directors and the Executive Director	3
Declaration Regarding the Reliability of Data.....	4
Contained in the Annual Report of Activities and Related Controls.....	4
About Elizabeth House	5
Mission, Vision and Values Statements.....	5
About the Clients We Serve.....	6
Elizabeth House Organizational Structure	Error! Bookmark not defined.
Rehabilitation Services at Elizabeth House.....	9
Rehabilitation Services Highlights 2012-2013	9
Program Activities and Special Workshops for Clients.....	9
Program Development.....	11
What Rehabilitation Means in the Elizabeth House Context.....	11
Case Management and Intervention Planning.....	12
The Role of Elizabeth House in Permanency Planning	12
Residential Services (Mother-Child and Prenatal Programs)	13
Intake Statistics for Residential Programs	15
External Services.....	16
Semi-Supervised and Transitional Apartment Programs	16
Education Program and Nursery	17
Family Assistance Program.....	18
Objectives for Rehabilitation Services in 2013-2014.....	19
Food Services.....	19
Student Internships (Stagiaires)	21
Accreditation	21
Partnerships, Communication, Community and Public Relations.....	22
Partnership Development.....	22
Partnerships	22
Collaborative Relationships.....	22
Participation on Advisory Tables and Tables de Concertation in Montreal.....	23
PR/Communication Plan.....	23
Risk Management and Quality Improvement	25
Incident, Accident and Event Reporting.....	25
Integrated Risk Management and Quality Improvement Committee (IRMQIC).....	26
Service Quality and Vigilance Committee (SQVC)	28
Quality Improvement Committee	28
Client Satisfaction Surveys.....	29
Handling of Complaints and Promotion of User Rights.....	30
Committee for Client Support and Satisfaction (CCSS).....	31
Strategic Planning.....	32
The Strategic Plan (2008-2014).....	32
The New Strategic Plan (2013-2016).....	32
Governance	33
General Board Responsibilities	33
Board Committees 2012-2013.....	33
Accomplishments 2012-2013.....	33

Human Resources Management	35
Hiring and Staffing Changes.....	35
Human Resources Staffing Levels.....	35
Policy and Procedure Development.....	35
Orientation	36
Performance Management.....	36
Professional Development and Training.....	36
Employee Complaints Process.....	37
Employee Wellness Program.....	37
Employee Assistance Program	37
Worklife Pulse Survey.....	37
The Wellness Committee	38
Volunteers	38
Information Security and Confidentiality Agreements.....	39
Code of Ethics	40
Elizabeth House Code of Ethics (Basics).....	40
Application of the Code of Ethics	42
Integration of the Code of Ethics.....	43
Building, Property, and Equipment Management	44
Maintenance, Repairs and Renovations.....	44
Building Security and Systems	45
Equipment Replacement	45
Financial Management	46
Grants.....	46
Bill 100.....	46
Maintien des actifs	46
Audit Results	46
Follow-up on Previous Audit Recommendations.....	46
Objectives for 2013-2014:.....	46
Independent Auditor’s Report on Summary of Financial Statements	47
Summary Statement of Financial Position.....	48
Summary Revenues and Expenses.....	49

Message from the President of the Board of Directors and the Executive Director

It is with great pride that we present this annual report of activities for the 2012-2013 year. The overarching theme for Elizabeth House's accomplishments this past year is formalization. We have concretised many practices and procedures at both the governance and operational levels in the interest of increased clarity and consistency. We worked extensively on reviewing and revising our by-laws to bring them in harmony with the most up-to-date legal and good governance standards. Our risk management policy and procedures are firmly in place, and the organization as a whole has become increasingly comfortable with the culture of risk management. The plan describing various aspects of Elizabeth House services was updated to clarify admission criteria, intake and assessment processes, program objectives as well as our treatment philosophy and approach.

We have undertaken a new strategic planning process involving consultations with our Board, management, staff, and external stakeholders. The results will guide our discussions and decisions as we determine our strategic directions for the next three to five years. As well, we have been preparing for the next cycle of the accreditation process which will be carried out this fall. Due to the diligent and creative efforts of employees and Board members, we are confident that we will again meet the standards and guidelines set out by Accreditation Canada. We are well placed to help our clients take advantage of the opportunity to change their lives and positively impact the lives of their children. We believe that an organization that meets national standards of excellence in service delivery and quality provides solid opportunities for clients to succeed.

Among other notable accomplishments were our Open House, held in October, a successful public relations event attended by some 70 interested professionals and organizational representatives from our network of stakeholders; and our revised and more fully bilingual website.

Two unexpected budget cuts applied by the Agence late in the year, coupled with unplanned reductions in Foundation funding, impacted Elizabeth House greatly resulting in a year end deficit. Our current budgetary constraints constitute a major challenge, in the context of which we have had to absorb the significant cost of staff sick leaves.

Despite these major financial circumstances we maintained our level of service to clients. We served more clients this year than in the past and surveys indicate an increased satisfaction with services. Elizabeth House continued to provide training opportunities to the front line staff working directly with clients and progress was made to formalize and document the objectives, learning activities and methods of evaluation for our lifeskills education groups.

None of this could have been accomplished without the dedication and commitment of our management and staff teams as well as the motivated student interns from CEGEP and University programs. Our success as an organization is also due to the contributions of many special individuals: volunteers, donors, consultants, community partners and members of the Board of Directors. Their involvement has made a significant difference in the lives of the young mothers, fathers and children with whom we work.

Cerise Morris
President

Linda Schachtler
Executive Director

Declaration Regarding the Reliability of Data Contained in the Annual Report of Activities and Related Controls

The information contained in this annual activity report falls under my responsibility. This responsibility relates to the reliability and integrity of the data contained therein and to the related controls.

The results and data in this report of activities for the fiscal year 2012-2013 accurately describe the mission, the mandate, the values and the strategic orientations of the organization; accurately describe the goals, the indicators, and the results obtained; and present correct and reliable financial and statistical data.

I certify that the data contained in this annual activity report is reliable, in other words is objective, accurate and verifiable. The same applies to the controls related to the data presented. The data and information accurately reflect the activities for the year ending March 31, 2013.

Linda Schachtler
Executive Director

About Elizabeth House

Elizabeth House is a private rehabilitation centre that offers a continuum of intensive intervention and specialized support services to parents, particularly young mothers and mothers-to-be, experiencing serious difficulties in their parenting role. We work to optimize the emotional and physical development of our co-clients - the parents and their young children - and to foster the development of a permanent parenting plan for each child. Our approach to treatment is relationship based, focused on the strengths of the individual. We work with the parents in our residential, external and educational programs, in supported independent living settings and in the community. We serve the English speaking community of Quebec.

Mission, Vision and Values Statements

Our Vision is a world where children are safe, secure and loved and where parents are supported and empowered so that they all have the opportunity to develop to their full potential.

Our Mission is to positively impact the lives of young children whose parents require intensive support and intervention to improve their capacity to parent.

Our Values - As an organization, Elizabeth House is committed to:

Integrity

- in respect for all
- in embracing diversity
- in effective communication
- in our commitment to accountability and transparency
- in our ethical practices

Innovation

- in responding to the evolving needs of young families and changes in society
- in developing and disseminating best practices
- in creating and evaluating new knowledge
- in embracing the reality of change

Excellence

- in compassionate, professional care and service
- in safe and healthy environments
- in management and decision making
- in promoting teamwork and encouraging leadership
- in fostering a learning environment and the continuation of education

Collaboration and Partnership

- in working with young parents and their families throughout the rehabilitation process
- in supporting transitions of care and service
- in valuing our staff and their contributions
- in building knowledge and capabilities
- in all our relationships.

Approved by the Elizabeth House Board of Directors on May 5, 2008

Elizabeth House is committed to a proactive and integrated approach to risk management, in particular to client safety, and to quality improvement that is rooted in the organization's strategic, operational and project-related objectives and practices.



About the Clients We Serve

Elizabeth House serves a client population with multiple challenging and complex needs. Some clients require the services of Elizabeth House to help them transition to parenthood due to their young age and lack of independent living skills or experience.

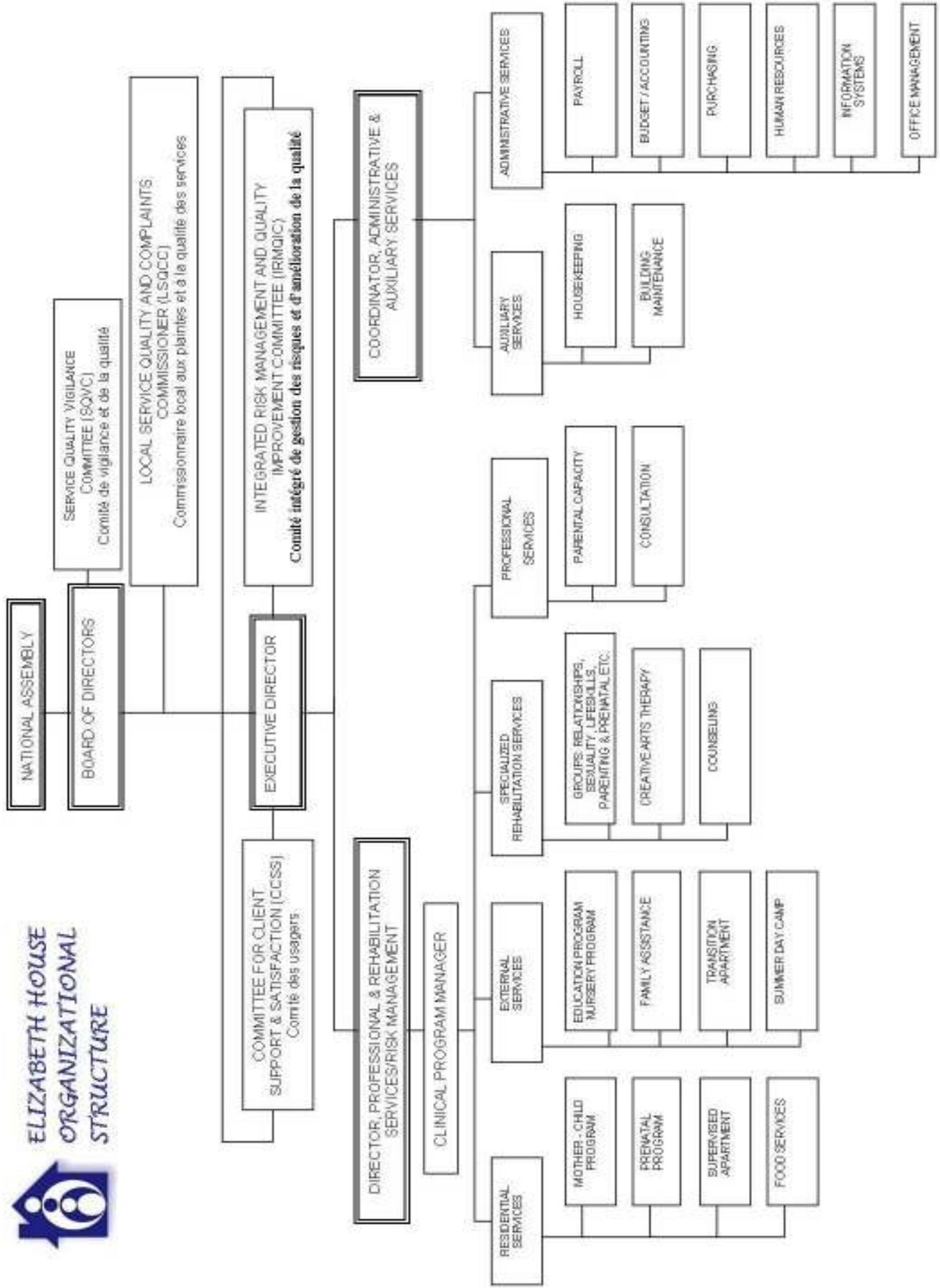
For some clients the transition to parenthood is difficult because of factors such as intellectual disability, learning difficulties, or mental health problems or issues.

Some of our clients have had past experiences with Youth Protection or placement in foster and group homes; some continue to be involved with Youth Protection in their capacity as parents. Many of the clients we serve are likely to have experienced the following conditions or situations during their childhood or adult life:

- Separations from primary attachment figures and/or disruptions in care
- The absence of appropriately protective fathers or father figures
- Family disorganization/dysfunction
- Physical, sexual and/or psychological abuse
- Little or no consistent, useful guidance from significant adults
- Substance abuse
- Lack of or inadequate family support
- Social isolation
- Experiences with conjugal violence
- Mental health difficulties
- Oppositional thinking and behaviour
- Frequent moves and lack of stability in the community
- Lack of independent living skills
- Susceptibility to exploitation



ELIZABETH HOUSE ORGANIZATIONAL STRUCTURE





Rehabilitation Services at Elizabeth House

Elizabeth House is part of the Quebec Health and Social Services network. It is a private rehabilitation centre offering specialized second-line intervention and support services to girls and women who are experiencing significant difficulties dealing with their pregnancy, and to mothers and fathers who are experiencing significant difficulties in adjusting to their role as parents. Elizabeth House is the only resource of its kind mandated to serve the English-speaking population throughout Quebec.

Elizabeth House works with the parents of children between the ages of 0-5 but primarily services the adolescent or young adult mother with a child under the age of two. Elizabeth House

offers Residential Services as well as External Services (through its Education and Family Assistance Programs). Services are offered to fathers through external services.

Core services in the rehabilitation programs at Elizabeth House emphasize the development of parenting and independent living skills. Educators use structured and purposeful activities as well as teachable moments in activities of daily living to help clients acquire and develop the skills they need. Specifically designed teaching modules and programs, therapeutic groups, and individual counseling are among the approaches used with clients in all programs.

Rehabilitation Services Highlights 2012-2013

This year, Elizabeth House provided services to one hundred and seventy-four (174) clients through its residential and external programs. Thirty-six (36) of these clients received services through two or more separate programs, concurrently or sequentially as they moved throughout the continuum of services, thus reducing the official statistics to one hundred and thirty eight (138) individual clients. The above figure also includes incidental contacts, including consultations with professionals, brief interventions to assist former and potential clients (forty-one (41) in total).

Program Activities and Special Workshops for Clients

The work in the Education Program, Residential Services and Family Assistance, has continued to focus on helping clients to cope with the many challenges they face, such as the adjustment to parenthood, the lack of support, the lack of financial resources, and conjugal violence. Regular group sessions were held on the topics of prenatal care, parenting, life skills development, relationships and sexuality.

Child Stimulation Group

Clients within the Residential Mother-Child Program have continued to participate in a child stimulation group given twice a week, so they may learn how to interact and play with their child, according to their child's age and stage of development. The goal of the group is to work with and through the parent to promote optimal child development.

The child stimulation program is to end at the end of June 2013 and to resume in September 2013. Parents are encouraged to participate in child stimulation programs offered through the CSSS's and community organizations to continue and further maximize their child's development and to learn how to access and effectively use community resources.

The Ages and Stages Questionnaire

The Ages and Stages Questionnaire (ASQ), published by Paul H. Brookes, is used in all programs. The questionnaire is a user friendly tool which involves parents in the screening and monitoring of their child's development. The objective for using the tool at Elizabeth House is to promote clients' interest in their child(ren)'s development, and to help them recognize the benefits of child stimulation.

Since the implementation of the ASQ tool last year, there has been an increased focus on children's individual needs. Parents, for the most part, have been receptive to using the tool. They have shown pride in their children's accomplishments and motivation to partake in additional activities to enhance their child's development. In

some instances, the tool has assisted in the early identification of difficulties requiring expert consultation.

The increased focus on child development is consistent with the work done by our community partners in helping parents prepare their children for school, and identifying as early as possible, any children who may require specialized services in order to develop to their full potential.

Special Groups and Education Sessions

Guest speakers and students doing internships at Elizabeth House animated group sessions for clients on varied topics, such as nutrition, child safety, budgeting, conjugal violence, gambling addiction, and legal rights related to child custody and access. The Local Service Quality and Complaints Commissioner met with the Residential and Education Program clients, in two separate sessions, to discuss client rights and the client complaints procedure.

Food and Living

For the third year in a row, a representative from the YWCA has run groups at the Education Program and the Residence on the topics of wellness, food and healthy living. The YWCA assisted in the creation of a garden at the residence so that clients could learn to grow herbs and vegetables.

Writers in the Community

The residential program has continued to offer creative writing workshops through an agreement with the Quebec Federation of Writers and the Centre for Literacy of Quebec. The two workshops, given in the spring and fall, were met with ongoing enthusiasm by clients, as they realized their ability and creative talents, and benefitted from having an outlet to deal with some of the complex emotions and issues they face. The residential clients read a selection of their work to their significant others and staff at two special events.

Activities in the Education Program

Students in the Education Program participated in numerous educational and cultural activities at the school and through planned outings. They took part in a series of art therapy and yoga classes,

organized in conjunction with the English Montreal School Board (EMSB). The curriculum based on the 2011 film production of “Miss Representation” has continued to be used to raise awareness about the negative portrayal of girls and women in the media and how this impacts on women’s position in society.

“Vous êtes ce que vous mangez” Cooking Course

The Ministry of Education, Leisure, and Sport added a cooking course to the high school curriculum, as part of teaching French as a second language and healthy living skills. The course entitled “Vous êtes ce que vous mangez” began in late October 2012 and ran throughout the school year. It was made possible for a small number of residential clients to attend the course also, affording them the opportunity to improve their knowledge of nutrition and cooking.

Summer Day Camp

The Elizabeth House summer day camp offers clients a unique opportunity to spend quality time with their children, taking part in child-oriented activities and benefiting from some teenage or adolescent time while children are cared for in the nursery. It provides much needed respite for young parents and demonstrates to them how it is possible to balance their needs and their children’s needs through the planning of family-centered activities and through the friendships developed with other parents. For some parents it breaks the isolation they experience as single parents with limited support.

The program runs two full days a week for six weeks; one day is dedicated to parent/child activities, while the other is dedicated to activities solely for the parents. The activities are supervised by the staff, while clients play a role in determining which activities they will take part in throughout the summer. The activities are budget friendly and consistent with what clients could afford to do on their own. Among the goals of the program are teaching clients about their city and its surroundings, and how to take advantage of the numerous free or low-cost public events and activities that are held during the summer period.

Last summer nine (9) mothers and their children took part in the program compared to twelve (12) in the previous year. As part of the parent/child

activities, the parents participated in child-led play with their children based on the “Watch, Wait, and Wonder” therapeutic approach, aimed at strengthening parent/child attachment. Interactions between parent and child were filmed for

teaching purposes. Parents benefited as they acquired a greater appreciation of their child(ren)’s needs and capabilities, and could observe their own strengths and weaknesses in the manner they related to their child(ren).

Program Development

Program development has been, and will continue to be, a priority for rehabilitation services. The main topics that are being reviewed and further developed pertain to the acquisition of parenting skills and independent living skills through specific teaching models that can be applied to all three programs. The possibility of organizing group activities specifically for fathers in conjunction with other organizations in the community is actively being explored.

Parenting and Independent Living Skills

The Family Assistance educator and a Concordia student studying Adult Education are working together to create an independent living workshop. The combination of the Concordia’s student’s skills set in the area of course design and “transfer of knowledge” combined with the educator’s knowledge of the clientele and client needs has proven to be valuable. The workshop will be aimed at helping parents acquire life skills related to parenting and independence and will be offered to all Elizabeth House clients.

Planning Your Pathway to Autonomy

Elizabeth House has started using a questionnaire called “Planning Your Pathway to Autonomy” or PAP to help older adolescents and young adults to evaluate their competencies, identify areas of weakness and set personal goals for themselves. The tool is being used by other rehabilitation service providers, including Batshaw and Centre Jeunesse de Montreal, and will become the “common language” used to identify and address the needs of youth, particularly vulnerable youth who have limited family or social support.

What Rehabilitation Means in the Elizabeth House Context

Rehabilitation services at Elizabeth House occur in a multitude of settings ranging from the highly structured residential program, to a daily education program, and finally to a transitional living experience and/or support services in the community. It is through this continuum of services that Elizabeth House is best able to respond to its clients’ needs. An integrated treatment approach is used to identify and understand clients’ multi-dimensional needs, such as taking into consideration their

cultural backgrounds, value systems, etc., and the impact of societal and family systems on their needs. The concept of “psychosocial rehabilitation”, which most closely approximates the type of rehabilitation offered at Elizabeth House, has been defined as “the process of facilitating an individual’s restoration to an optimal level of independent functioning in the community...”



psychosocial rehabilitation invariably encourages persons to participate actively with others in the attainment of mental health and social competence goals. The process emphasizes the wholeness and wellness of the individual and seeks a comprehensive approach to the provision of vocational, residential, social/recreational, educational and personal adjustment services". (Cnaan et al, "Psychosocial Rehabilitation Journal, Vol 11, No. 4", April 1988, pg. 61). While rehabilitation implies a return to a more optimal state of functioning, this does not necessarily always apply at Elizabeth House. Many of our clients are first-time parents and are therefore not coming from a previous functioning base (as a parent). They require support and intervention to attain an adequate level of parenting. Thus, rehabilitation at Elizabeth House may be considered as a form of psychosocial rehabilitation perhaps without the emphasis on "restoration" but more an emphasis on the development, attainment and maintenance of the necessary skills and attributes required to be a "good enough" parent.

Case Management and Intervention Planning

The primary goal of case management is to optimize client functioning. As an important case management tool, we continue to focus on the development and effective implementation of the intervention plan. The intervention plan is developed in conjunction with the client and social worker and is written in plain language with the objectives, activities and timeframes clearly defined.

Within the Residential and Family Assistance Programs, the intervention plan includes a progress report which explains the client's progress and serves to define the next phase of work to be done via the intervention plan objectives. Weekly meetings with the case coordinator give the client support, guidance and feedback on her progress. The initial intervention plan for the Residential Mother/Child Program further includes the use of an observation tool to evaluate a client's parenting ability and progress.

The restructuring of human resources accomplished in 2011-2012 has had some major benefits for case management. The addition of a clinical program manager to provide direct

coordination, support and supervision to residential and external programs has resulted in the following:

- Supervision meetings are held on a more regular basis and the manager is generally more available to staff.
- The manager spends several hours a week "on the floor" in the residential program directly intervening with clients. The manager is largely accessible to clients to share in their day-to-day experiences and to address any dissatisfaction.
- Educators within the Residential Program are more available to meet individually with clients as the aides (préposées aux bénéficiaires) have assumed a more active role in intervening with the client group.

The restructuring further reinforced the integrated approach to clinical practice within the organization. Integrated clinical meetings, involving the Family Assistance worker and the Residential and Education Program teams, allows for exchange of information and an opportunity for peer consultation. Shared cases are discussed during these meetings, as well as various clinical issues, policies and procedures.

The Role of Elizabeth House in Permanency Planning

Permanency planning refers to a timely goal-directed approach used by child protection agencies aimed at ensuring stability and continuity of care for children. It is based on attachment theory and the tenet that all children need to form secure attachments for optimal development. The primary goal is for children to remain in the care of their parents. However, when this is not possible or not deemed to be in a child's best interest, another permanent or long-term plan is established for the child.

The amendments to the Quebec Youth Protection Act which came into effect in 2007 support the practice of permanency planning. There are now legal time-frames and corresponding policies applied by all the Departments of Youth Protection (DYPs) to try to ensure that permanent plans are made for

children as early as possible in a child's life. The DYPs are now able to intervene in potential situations of risk to an infant based on the history of neglect by his/her parent with respect to a child born previously.

Parents of young children (age 0-5) who are followed under Youth Protection are given limited periods of time to correct the situation of risk to their child (the reason for the involvement of Youth Protection), and to demonstrate that they can provide their children with security and stability over time. They are requested to promptly take the necessary steps to improve their personal situations; at the same time there is a responsibility on the part of health and social services to provide them the resources and necessary support.

For reasons related to the parents' history and/or the seriousness of the risk factors, some parents would not be permitted to maintain their child or children in their care if it were not for the intensive services that Elizabeth House provides. The residential program, in particular, offers mothers an important opportunity to demonstrate that they can improve their parenting skills and stabilize their situations, while they are supported and supervised in their parenting role.

Elizabeth House has observed that in response to permanency planning and the changes in the law there has been a consistent demand for the residential program and a change in the nature of referrals made. There are more prenatal admissions of mothers-to-be who are known to Youth Protection, or who are trying to prevent the involvement of Youth Protection. There are more infants than toddlers or pre-school age children admitted into the residential program. This year 73% of the children admitted to the residential program were followed under Youth

Protection. The figure was 76% for 2011-2012 and 61% for 2010-2011.

In situations where a child is followed under Youth Protection, a strong collaboration is required to ensure that pertinent information is exchanged and that clients are well aware of the tasks or changes they are being asked to undertake. Members of the Elizabeth House clinical team accompany clients to key meetings at the Youth Protection offices where they provide direct, transparent feedback regarding a client's progress. Their role is vital; they provide a neutral assessment of a parent's strengths, weaknesses and abilities and they help parents understand the decisions that are being made.

While the main objective of the work at Elizabeth House is to assist parents in learning to provide adequate care for their children, this cannot always be realized. In situations where it is determined that a parent is not in a position to meet all her child's needs, or where a parent determines for herself that she is not ready to parent full-time, the staff at Elizabeth House continues to play a role in evaluating the parent's ability to care for her child part-time, where applicable, and to support the parent, where possible, in influencing decisions that are made for her child.

Some mothers within the residential program have shown a great deal of courage by acknowledging their limitations and/or decision not to parent. They are commended for their maturity and sense of responsibility, and more often than not, respected and accepted by their parent peers. External support is provided to these mothers for a period of time while they reorganize their lives and set new goals; a different measure of success, but success nonetheless.

Residential Services (Mother-Child and Prenatal Programs)

These highly structured programs offer residential care coupled with targeted intervention services to pregnant women and mothers of young children. Elizabeth House has space for up to 18 residents (comprised of mothers and their children). Clients requiring residential services are not able to live in the community for a variety of reasons. They need to develop the necessary skills and support systems that will enable them to parent and function successfully in the community. Residential placement at Elizabeth House provides them with the resources, the focus and the time they need to develop these skills. The Residential Prenatal Program at Elizabeth House helps mothers have healthy pregnancies and deliveries, and offers

support to enable them to continue their education and to make plans for themselves and their baby after the birth. The Mother-Child Program teaches parents to develop healthy routines and patterns of care, both physical and emotional, for their child. The emphasis in this program for both mother and child is on developing a secure attachment and bond. Emphasis is also placed on the parents feeling safe and secure, having a new and different experience as a parent, learning new skills, integrating these skills and preparing to live independently in the community. For the babies, the emphasis is on feeling safe and secure, having their needs met in a healthy and predictable manner.

All clients receive support and intervention in learning how to manage the documents that need to be completed when one becomes a parent. They also have the opportunity to develop or improve their independent living skills such as managing finances, cooking, making appointments, articulating their needs and asking for help. A major focus is also placed on increasing the amount and availability of social and family support systems for these young parents.

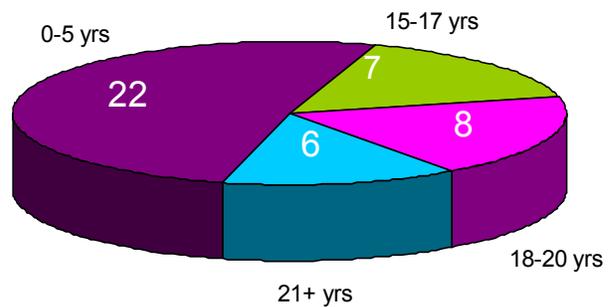
Supervision, intervention, and support are offered 24/7 by trained educators. The program is open (not a locked unit); clients are encouraged to maintain connections to their communities; the amount of support and intervention offered is based on the client's individual needs.

There continued to be a high demand for residential services this past year. Twenty-one (21) mothers and twenty-two (22) children received services from the residential programs as compared to twenty (20) mothers and seventeen (17) children last year.

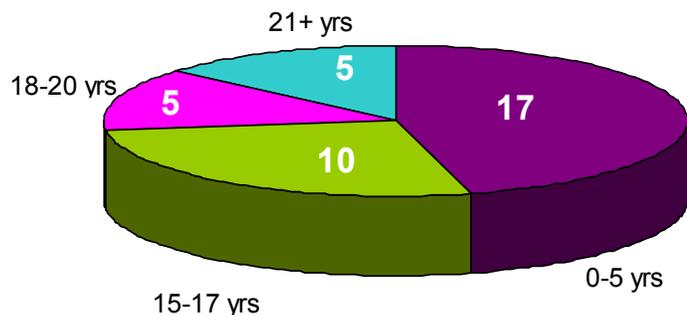
Other statistics and trends in the Residential Programs 2012-2013:

- A third of the mothers (33%) were age 15 to 17. Seventy-one percent (71%) of the mothers were under the age of 21;
- Four of the seven adolescent mothers were followed under Youth Protection;
- The majority of the mothers (71%) were first-time mothers, while the others had older children in their care at Elizabeth House, or entrusted to others;
- Seventy-two percent (72%) of the children were infants under twelve months of age, while 28% were toddlers or pre-school age;
- Sixteen (16) out of twenty-two (22) that is, 73% of the children were followed under Youth Protection;
- French was the mother tongue of 28.5% of the mothers compared to 20% in the previous year;
- Fourteen fathers were involved with the children admitted to Elizabeth House, with five fathers having assumed an active parental role.

Distribution of Residential Clients by Age 2012-2013



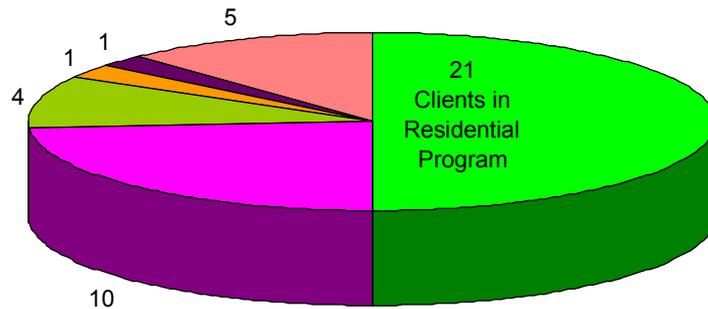
Distribution of Residential Clients by Age 2011-2012



Intake Statistics for Residential Programs

Referrals to the residential program increased significantly over the past year, while the actual number of admissions was almost the same. The length of time between initial contact and admission continues to vary depending on a range of circumstances related to the client's situation. Bed availability has not been a factor. There were more referrals from non-Youth Protection sources, as reflected in the table below.

2012-2013



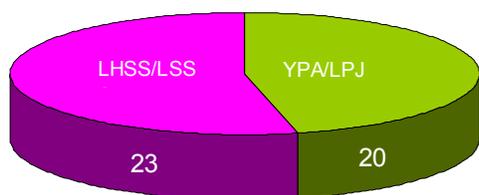
Number of Clients in the Residential Program were referred from:	
■	Batshaw Youth and Family Services
■	Centre Jeunesse de la Monteregie (including one shared case with Kahnawake Community Services).
■	Centre Jeunesse de Montreal
■	Centre Jeunesse de l'Outaouais
■	From the community (hospitals, CLSC's or community clinics).

Comparative Intake statistics 2012-2013

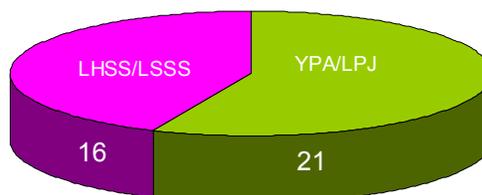
Comparative Statistics: Client Intakes	2012-2013	2011-2012
Intake meetings	31	21
Intake meetings leading to residential admissions	16	15
Clients in the Residential Program were referred from:		
■ Batshaw Youth and Family Services	10	13
■ Centre Jeunesse de la Montérégie	3	2
■ Centre Jeunesse de la Montérégie and Kahnawake Community Services (shared case)	1	0
■ Centre Jeunesse de la Montérégie and Centre Jeunesse de la Mauricie (shared case)	0	1
■ Centre Jeunesse de Montréal	1	1
■ Centre Jeunesse de l'Outaouais	1	0
Cree Health Board	0	1
■ From the community (hospitals, CLSCs, or community clinics)	5	2

Distribution of Residential Clients by Law

Distribution of Residential Clients by Law
2012-2013

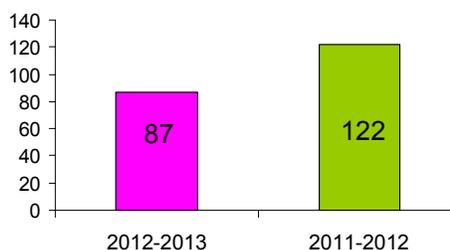


Distribution of Residential Clients by Law
2011-2012

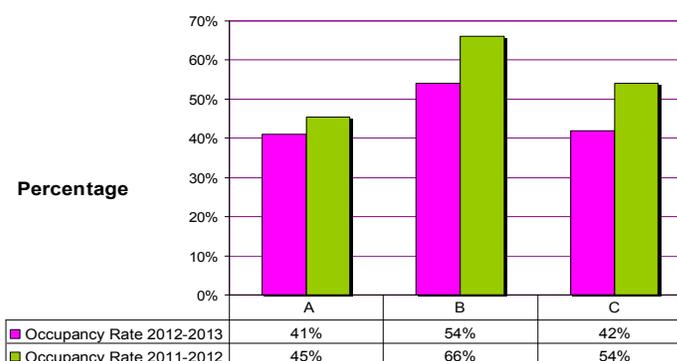


Residential Programs: Average Length of Stay and Occupancy rates

Average Length of Stay - Days



Occupancy Rate



- A: *jours présences* as per government regulations
- B: when client is either sleeping at EH or absent– but is still considered admitted – i.e. the bed is not available for any other client
- C: theoretical occupancy is 9x 365 as opposed to 18x366 (2012 leap yr)

External Services

Semi-Supervised and Transitional Apartment Programs

Elizabeth House runs two independent living programs named Path and Track for the benefit of clients who require assistance to transition from Elizabeth House programs into living in the community. The housing, which consists of two duplex apartments, is situated in close proximity to the main residence. Each location can support a parent and child(ren) or a couple and child(ren). The apartments are furnished and equipped with basic items.

The Path Program is for clients who are ready to transition from the structure of the residential program yet still require daily intervention and support to consolidate the gains or progress they have made. The Track Program is intended for any other Elizabeth House client (father, mother, or couple) who requires independent living support, but of a less intensive nature. Clients must demonstrate the capacity to ensure the safety and security of his/her child(ren) on their own. They must also have an income to support their living expenses.

The length of stay in a Path or Track apartment is generally up to six months. Path and Track clients are followed by an educator from Residential Services or the Family Assistance Program. They are expected to abide by rules in relation to curfews, visitors, and respect of the physical living environment. Clients make a financial contribution for their stay at Path or Track, simulating a real-life housing situation. They are expected to participate in a savings program, setting aside funds that can be used for their eventual transition into their own dwelling or for their personal goals.

Four (4) mothers benefited from these programs, including one mother who resided independently on a part-time basis, compared to four (4) mothers and a father (1) from the previous year.

Education Program and Nursery

Clients living in the residential program as well as those living in the community can participate in the Elizabeth House Education Program and Nursery.

This program is run through a partnership with the English Montreal School Board and offers academic courses from Secondary I-V as well as individual counseling and specialized groups. Clients who meet the requirements for entrance into a youth sector school and who meet eligibility requirements for access to English education may attend this specialized high school. A modified curriculum is also offered to prepare some students for a vocational or skills-related program.

Statistics and trends in the 2012-2013 academic year:

- Fifteen of the twenty-three students, or 65% were minors, of which 33.3% were followed under Youth Protection.
- Five of the seventeen children (29%) were followed under Youth Protection.
- The majority of students (56.5%) were self-referred to the Education Program.
- Five out of twenty-three students, or 22%, were returning students.
- Ten out of twenty-three students, or 43.5%, had participated in other Elizabeth House programs.
- The large majority of students resided with their parents and/or in a multi-generational household.

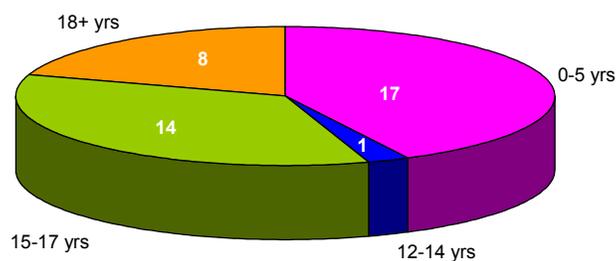
The emphasis in this program is on the young women continuing their education as they prepare for motherhood or develop their parenting skills. Clients benefit from individual intervention and the significant relationship they develop with the Elizabeth House educators, as well as from peer support. Specialized groups are offered by trained educators in preparing for parenting (for pregnant clients), enhancing parenting skills, relationships and sexuality, anger management, independent living skills, dealing with government organizations, learning about the dynamics of violence and control in relationships, and strengthening the clients' ability to identify and address personal issues that have an impact on their lives and ultimately, their children.

Elizabeth House further supports mothers attending school by offering access to an on-site Nursery program for babies 18 months of age and younger, and clinical intervention and support through an on-site educator. The staff in the Nursery program not only cares for the babies while the mothers attend school and groups, they also monitor and track child development and assist the mothers with specific parenting issues and concerns. The fathers of the children are given the opportunity to participate in certain events and activities, and to visit their child in the nursery, where deemed appropriate.

There were twenty-three (23) clients or students registered in the Education Program over the course of the last academic year, almost equal to the number (22) in the previous year.

Seventeen (17) children attended the nursery, at various points during the school year, compared to a total of eighteen (18) for the previous year.

**Distribution of Clients in the Education Program by Age
2012-2013**



Total number of clients in the Education Program: 40

Family Assistance Program

In the Family Assistance Program, clinical staff provides intervention and support services to young families living in the community who are experiencing difficulties. These difficulties are differentiated from those treated by first line services such as *Centres de santé et de services sociaux* (CSSS) or community organizations by the number of problems requiring intervention, the seriousness of the problems (based on an assessment of the potential repercussions or risk of non-intervention to the young child(ren) or to the unborn baby) and the lack of appropriate social or familial resources available to adequately support the young parent and child(ren).

Family Assistance services are offered based on the needs of the clients. As much as possible, the educators follow the parent's lead, taking into account parental goals. This approach facilitates the parent being an active participant and fosters a sense of partnership between parents and the educator. Interventions are based on an integrated approach and address the hierarchy of the family's needs, taking into account the emotional well-being of the parents and child(ren). Program objectives also include developing and improving independent living and parenting skills.

Other statistics and trends noted are the following:

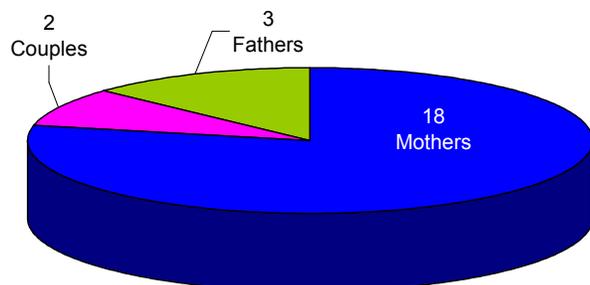
- Six out of twenty-five parents, that is, 24% were of minor age, of which four were followed under Youth Protection.
- Four out of twenty-five parents, that is, 16% had more than one child.
- Eleven of the twenty children (55%) were followed under Youth Protection, compared with 30% in the previous year.
- Thirteen out of twenty-five parents (52%) had participated in other Elizabeth House services reflecting our integrated approach and commitment to helping clients through the continuum of services.

The emphasis in this program is on clients applying and maintaining their skills and abilities as a parent. The focus can be on both direct parenting skills as well as independent living skills and lifestyle issues. Elizabeth House educators support the physical, emotional, and cognitive development of young children and help parents to identify and connect with community resources, decrease their isolation and develop the skills to know when, where, and how to ask for the appropriate help needed, and to acknowledge that this is a strength, not a weakness.

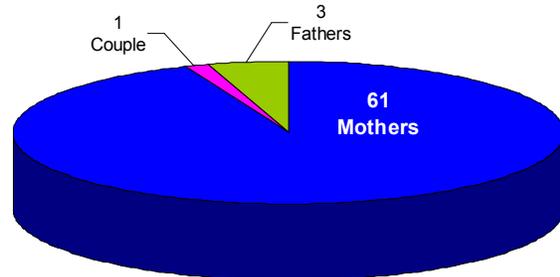
This past year, the program ran with one full-time educator and a social service intern (*stagiaire*). The work continued to focus on the following areas: child discipline and routines, home organization, cleaning and child safety, accompaniment related to legal and welfare issues, domestic violence and controlling relationships, other relationship issues, finding affordable housing and daycare, and following through on medical and other critical appointments.

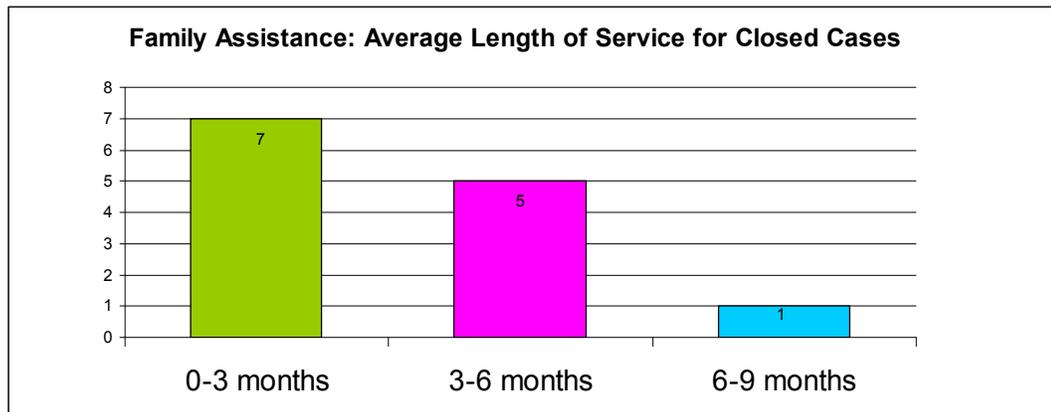
This year twenty-three (23) families, including twenty-five (25) parents and twenty (20) children, received services through the Family Assistance program. Twenty (20) parents were female; while five (5) were male. Fifteen (15) families consisted of single parent mother households.

Distribution of Clients in Family Assistance
2012-2013



Distribution of Clients in Family Assistance
2011-2012





Objectives for Rehabilitation Services in 2013-2014

The short-term objective for rehabilitation services is to continue to implement aspects of the Elizabeth House improvement plan in preparation for accreditation.

The long-term objectives for rehabilitation services which are in progress are the following:

- Completing the work on evidence-based outcomes through staff evaluation of the outcome of their work, and mechanisms to evaluate client satisfaction and integration of knowledge;
- Defining competencies, activities and evaluation criteria;
- Developing and/or standardizing programs and program materials;
- Adopting a model for teaching parenting skills and developing the expertise in the clinical staff to train and animate groups;
- Developing a framework for the provision of services for fathers;
- Continuing to develop and implement aspects of the Client Safety Plan.



Food Services

Responsibility for the management of food services was shared by the Coordinator of Administrative and Auxiliary Services and the Clinical Program Manager.

Elizabeth House provides food for clients in its residential programs. Clients participate in menu planning, grocery shopping, meal preparation and clean-up. They are encouraged to prepare and share recipes from their cultural traditions.

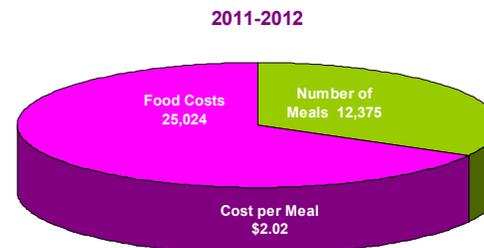
Through education modules and through teachable moments during activities of daily living, the clinical staff also trains clients in the principles of healthy eating, and teaches the essentials related to hygiene, cleanliness and food handling and storage. (This education and training also forms part of the work done with external clients.) The clinical staff and residential clients share meals in the common dining room, providing opportunities for communication and positive

supportive interaction, not only between staff and clients, but also between the clients. Along with providing structure and routine, shared meals also have a positive impact on children’s language acquisition and their socialization.

In 2012-2013, clients took part in a six-week course on nutrition given at the Residence.

This past year the industrial fridge was replaced with a state-of-the-art high-capacity model. The dining room was painted and blinds were added to the dining room area to increase privacy vis-à-vis the adjacent apartment building. Clients appreciated the increased sense of security.

Elizabeth House has developed a Food Policy in response to The Ministry of Health and Social Services plan calling for the promotion of healthy lifestyles and the prevention of problems linked to obesity (*Plan d'action gouvernemental de promotion des saines habitudes de vie et de prévention des problèmes reliés au poids 2006-2012*). The policy is based on the Ministerial document “*Miser sur une saine alimentation: une question de qualité*” as well as on the Canada Food Guide. It was approved by the Board of Directors and has been implemented.



Food Services Objectives for 2013-2014

- Elizabeth House will continue to expand its procedures and training related to food handling and hygiene, for staff and for clients.
- Replace the dishwasher.
- In conjunction with Merck’s “Merck for Moms” program, print and bind the cookbook of favorite recipes and cooking tips which will be used for client education as well as for fundraising purposes.

Meal Statistics

- 11,342.5 meals were served to clients in 2012-2013.
- The average cost per meal was \$1.60.



Student Internships (Stagiaires)

Elizabeth House welcomes students from different disciplines to complete their internship (*stage*) requirements at Elizabeth House. These students play an integral role in the team as they apply their skills and knowledge to intervention planning, program development, client supervision and accompaniment. The students are also able to benefit from in-house training as well as an extensive orientation program.

Once again this year we received nine students in our internship program within the Residential, Education and Family Assistance programs. There were six students studying Special Care Counseling in their second or third year from Champlain College Saint-Lambert (1), Champlain College Lennoxville (2), Vanier College (2), and Lasalle College (1). There was a third year student from the Dawson College Social Services Program, a third year student from the Sexology Department at the Université du Québec à Montréal, and a Concordia student who was completing a certificate in Adult Education.

Accreditation

Elizabeth House achieved full accreditation in 2010 by Accreditation Canada with no conditions and continues to be on very solid ground as it moves into the future. As part of the preparation for the September 2013 accreditation survey, Elizabeth House administered several confidential surveys regarding Elizabeth House practices and performance in relation to national standards in the areas of Sustainable Governance, Leadership and Effective Organizations, Infection Prevention and Control and Rehabilitation Services. It also conducted work-life wellness, Board functioning and client safety questionnaires to assess the status of the organization in these areas. Questionnaire results were reviewed and discussions on how to make improvements were held with Board and staff. The feedback provides a clear roadmap to improvement; follow-up on the feedback and the roadmap is an ongoing focus of the leadership of the organization.

The management team assessed Elizabeth House's compliance with national standards and updated the Elizabeth House Improvement Plan (EHIP) to reflect modifications or development of policies, procedures, systems and practices to meet these requirements. Accreditation planning and follow-up became a regular item on meeting agendas and later in the year, dedicated accreditation meetings were held bi-weekly.

Objectives for the 2013-2014 year will be to continue the quality improvement journey and prepare for the September 2013 accreditation survey.



Partnerships, Communication, Community and Public Relations

Partnership Development

Elizabeth House values collaboration and continues to work in partnership with other organizations in the Health and Social Service network and the Montreal community to ensure a range of complementary services for our clients, to promote clear and on-going communication among treating professionals and to ease the transfer of clients between organizations. We continue to prioritize transparent and timely communication amongst our partners and all organizations and professionals with whom we work.

Partnerships

CSSS Cavendish

The formal partnership between Elizabeth House and the CSSS Cavendish was renewed following several meetings throughout the course of the year. The partnership agreement outlines the mechanism for communication and referral between the two organizations with the view of providing timely, quality service to our shared clients. Designates from each establishment are to meet twice a year to ensure the functioning of the entente and to evaluate its efficacy. The partnership will be renewed on an annual basis, with any necessary adjustments.

Collaborative Relationships

The following are some of the organizations we have collaborated with over the past year.

Aide Juridique Sud-Ouest de Montréal
Avenir d'enfants
Carrefour Jeunesse-Emploi Notre-Dame de Grâce
CCS-Catholic Community Services
Centre for Literacy of Quebec
Centre Jeunesse de la Montérégie
Centre Jeunesse de l'Outaouais
Centre Jeunesse de Montréal
Champlain College Saint Lambert/Longueuil
Champlain College Lennoxville
CLSC Dorval-Lachine
CLSC Lac St. Louis
CLSC Lasalle
CLSC Notre-Dame de Grâce
CLSC Pierrefonds

Objectives for 2013-2014:

- Raising the profile of Elizabeth House by establishing formal links with the 12 CSSSs in the Montreal region;
- Continuing to identify and develop new opportunities for partnerships with organizations and specialized resources that facilitate our work with young families in difficulty.

Other partners include:

Batshaw Youth and Family Centres
English Montreal School Board
Elizabeth House Foundation
Les Maisons Transitionnelles O3 On Our Own
McGill University Oral Health Centre
Trinity Memorial Church

CLSC René-Cassin
CLSC Saint-Hubert
CLSC Villeray
COVIQ-Comité de vie de quartier Duff-Court
CSSS Cavendish
CSSS Dorval-Lachine-Lasalle
CSSS Sud-Ouest-Verdun
Concordia University
Dawson College
Ecole Rosalie Jetté
Hopital Fleury
Foster Pavillion
Generations Foundation
Head and Hands
Hippy-Quebec

Kahnawake Community Services
 Lasalle Boys and Girls Club
 LaSalle College
 Maison Bleue
 Maison Jean Lapointe
 MAP-Mères avec Pouvoir
 Montreal Children's Hospital Adolescent Clinic
 Montreal Diet Dispensary
 Montreal Museum of Fine Arts
 Montreal Public Health Department
 Mosaik Family Resource Centre
 Native Women's Shelter
 Notre-Dame de Grâce Community Council
 Pointe Saint-Charles Community Clinic
 Service de police de la Ville de Montréal, Poste de Quartier 11

Service de police de la Ville de Montréal, Poste de Quartier 16
 Quebec Writers' Federation
 Royal Victoria Hospital
 Saint-Raymond Community Centre
 Separated Fathers
 Tandem Côte-des-Neiges/Notre-Dame de Grâce
 Teen Haven
 University du Québec à Montreal
 Vanier College
 Volunteer Bureau of Montreal
 West Montreal Re-adaptation Centre
 Women Aware
 Women on the Rise
 YWCA

Participation on Advisory Tables and Tables de Concertation in Montreal

One of our strategic objectives was to raise our profile so that professionals and organizations working with young parents and families at risk or in difficulty were more aware of the specialized services offered by Elizabeth House. The organization committed resources to the issues tables and committees focused on young families with children under the age of 5, including participation on the following tables or committees:

Tables de Concertation

Table de concertation 0-5 - CSSS Cavendish

- SIPPE (Les services intégrés en périnatalité et petite enfance pour les familles vivant en contexte de vulnérabilité) – CSSS Cavendish
- Table de Concertation Mères Adolescentes du Sous-Comité du RUIS

Duff Court Project – Coordination Committee

Anglo Family Council

Network Partnership Initiative – CCS Community Services Summit

Member of *Cadre de reconnaissance et de collaboration entre Les Centres jeunesse de la région de Montréal et des organismes d'insertion socioprofessionnelle de Montréal*

Réseau d'organismes et d'établissements œuvrant auprès des jeunes familles (ROEJEF)

PR/Communication Plan

Elizabeth House continues to implement aspects of its Communication Plan.

Outreach Strategy

The Director of Professional and Rehabilitation Services/Risk Management and the Clinical Program Manager continued to expand the outreach strategy to raise the profile of Elizabeth House for client referrals. Several presentations were made to community tables (*table de concertation*) representing a wide cross-section of community organizations and individuals working with this population.

The Executive Director continued to raise the

profile of the organization by speaking to potential funders at special events and meetings.

Objectives for 2013-2014 include:

- Continuing the visiting program to highlight Elizabeth House services to ensure that professionals are aware of the specialized services offered by the organization and to raise the profile of the organization for fundraising and partnership development.

- Planning events to mark the 45th anniversary year to raise our profile for referral and fundraising purposes.

Promotional Materials

The management and administration teams revised and translated the promotional materials for distribution to the community and for other public relations events. These new materials were used throughout the year. Feedback on the new materials has been positive.

Program and Services Plan

The document describing Elizabeth House programs and services has been revised. The draft revision of the Program and Services Plan provides clear information to referring professionals on Elizabeth House programs and services, referral and assessment processes, program objectives, clinical interventions and group work, treatment philosophy and approach, and general and specific admission criteria.

Objectives for 2013-2014 include completing the revision and translation of the program plan describing services, client profiles, referral and intake processes, and other information of interest to referring professionals, partners, community organizations, and funders.

Open House

An open house was organized to promote our services and to ensure that information about our work is disseminated to potential clients and referring professionals. The event was attended by over 70 professionals and feedback confirmed that Elizabeth House is an important resource for first line workers. Guests commented on the type and scope of the programs and services, the caring and compassion that is apparent in staff as they approach their work, as well as the warm and welcoming atmosphere felt throughout.

PR and Communication objectives for 2013-2014 include:

- Holding an open house just prior to the annual general meeting to highlight our services and to celebrate 45 years of service to the community.
- Following up on the interest generated and requests for partnerships resulting from contacts made at the open house.

Annual two-way Communication and Stakeholder Surveys

The annual stakeholder survey was first conducted in June 2011 at the Annual General Meeting to ensure two-way communication with our stakeholders. In 2012 it was conducted during the Open House in October. It will be administered in June 2013 in an expanded and more formal process to inform the new strategic plan.

Creating Opportunities to Hear the Client Voice

This year feedback was solicited from client representatives on the Committee for Client Support and Satisfaction (CCSS) in the areas of client satisfaction survey development related to quality improvement and stakeholder survey development related to strategic planning.

Representatives also participated in the Open House speaking to guests about their experience with services and accompanied the Executive Director on speaking engagements to raise the profile and promote the organization and its services.

Website

The website was revised to facilitate access to pertinent information for professionals, potential clients and donors. It includes a connection to the Canada Helps donation button on the Elizabeth House Foundation website. Also, employees and volunteers were recruited from job postings and opportunities posted on our website.

The entire site was translated and is now available in French.

Objectives for 2013-2014 include

- Expanding the website to include information from the Committee for Client Support and Satisfaction (CCSS) as well as links to other organizations providing services to young families.

Risk Management and Quality Improvement

Incident, Accident and Event Reporting

In an effort to improve service quality and in order to respect the organization's obligations under the Law on Health and Social Services, Elizabeth House continues to place great emphasis on the reporting of risk situations which could have, or did have, a negative effect on the health, safety and security of Elizabeth House clients, visitors and personnel. A government computer program referred to as S.I.S.S.S. (*Système d'information sur la sécurité des soins et services*) is used to submit data to the Ministry of Health and Social Services on incidents and accidents.

An incident is defined as an action or situation that does not have consequences for the state of health or welfare of a user, professional involved or third-party, but the outcome of which is unusual and could have had consequences under different circumstances. An accident is defined as an action or situation reaching or affecting a user, a professional involved or third party, which has, or could have, consequences for their state of health or welfare.

A complication, in the psychosocial context, is defined as the foreseeable aggravation of a

situation in which the risks are already known. The Ministry of Health and Social Services makes a distinction between accidents and complications; the latter are not reported to the Ministry as they relate to the risk situations and observations made in rehabilitation services which are anticipated and to which interventions are geared.

Elizabeth House has maintained reporting and monitoring procedures to deal with specific risk situations that do not fall within the legal definition of incident or accident. The events which concern clients are referred to as intervention-related risk events and generally relate to complications. The other three categories of risk events include general risk events (related to equipment, building security, and general safety), infection prevention and control (related to communicable disease or infection), and staff work accidents. The recording of risk events provides Elizabeth House with valuable information used to determine key areas of intervention, communication and training to ensure the safety of clients and staff.



The table below provides a comparison of the number of incidents, accidents and risk events that have been recorded over the past three fiscal years.

Type of Risk Occurrence	2010-2011	2011-2012	2012-2013
Accidents	10	9	10
Incidents	22	9	1
Events:			
Intervention-related	37	61	24
General risk	75	55	29
Infection Prevention and Control (IPAC)	27	26	17
Work accidents	5	7	0
Other (not classified)	9	0	0
Total	185	167 *	81

* This represents an addition to the past year's figures of one incident that had been addressed but not included in the figures presented in the 2011-2012 annual report.

From April 1, 2012 to March 31, 2013, a total of eighty-one (81) incidents, accidents, and events were reported, a decrease of eighty-six (86) from the previous year. There was a marked decrease in the number of incidents and events reported this year, compared to last year. This is attributed to the ongoing efforts to distinguish between maintenance requests or needs and actual risk causing situations, as well as to distinguish

between those potential risk situations for which Elizabeth House has adequate policies and procedures in place, versus situations where procedures are non-existent, inadequate or not being followed.

There was a reduction in the number of staff work related accidents (including falls) this past year, with no accidents having occurred, compared to seven the previous year.

Integrated Risk Management and Quality Improvement Committee (IRMQIC)

The Integrated Risk Management and Quality Improvement Committee (IRMQIC) is a committee that merges the mandates and member-composition of the formerly separate Risk Management Committee and Quality Improvement Committees. Bridging the work of these two committees, the IRMQIC meets the legal requirements to have ongoing oversight and management of risk within the organization while at the same time expanding its mandate to encompass all matters, policies, procedures and monitoring related to both risk management and quality improvement.

The Integrated Risk Management Committee met four times this year. A decision was made in the fall of 2011 to hold meetings on a quarterly basis, instead of every two months, while a sub-committee of staff representatives within Elizabeth House meets between formal meetings to discuss risk management issues. Risk management and the handling of incidents, accidents and events continues to be a regular topic of discussion at management meetings, leading to more timely decisions and follow-up regarding risk situations.

The organization has maintained a heightened awareness of the importance of safety within the culture of the organization. Close attention has been given to the prevention of medication errors due to certain near-miss situations that were encountered in the previous fiscal year. Certain procedures for the storage and distribution of medication within the residence have been modified to prevent any medication errors or near-miss situations. The change in procedures will be reflected in the Medication Policy which is currently under review.

Other pro-active measures have been taken to promote safety and to ensure that Elizabeth House is prepared to deal with emergency situations. A meeting with a fire prevention marshal from the City of Montreal was held in October 2012 for consultation regarding the Elizabeth House evacuation plan and other questions related to fire safety. Further enquiries have been made with the Education Department of the City of Montreal for the identification of visual material that can be used to teach clients about fire safety, and training that can be offered to clients and staff.

A consultation was undertaken with a business specializing in child safety to determine the needs of the residence with respect to improving child safety, particularly for toddlers.

Elizabeth House is in the process of seeking a church facility, situated away from the residence on Marlowe Avenue, which could be used as a temporary shelter in the event of an emergency evacuation of the street and surrounding area (for instance, in the event of a gas leak).

All staff members took part in a refresher/training on the topic of hand hygiene, in preparation for the winter and cold/flu season. Hand hygiene audits have been done to reinforce the importance of good hand and respiratory hygiene. Staff members also took part in training on falls prevention, and a review of the identification and functioning of emergency and safety equipment within the residence.

Fire drills were conducted periodically to improve and promote fire preparedness. Ongoing education and prevention work has been done by the clinical staff with clients to promote safe sleep for infants using educational material produced by

the Canadian Foundation for the Study of Infant Deaths (CFSID).

A number of staff members attended a Sentinel Training at the CSSS Cavendish given by a representative from Suicide Action Montreal. The training was aimed at helping to identify if someone may be suicidal and teaching staff about the specialized resources available to intervene.

Two representatives from Maison Bleue met with the clinical staff to share their knowledge about common childhood illness, and the appropriate response depending on the circumstances.

Other accomplishments overseen by the IRMQIC are as follows:

- Review and approval of the quarterly incident, accident and event reports and recommendations;
- Monitoring the application of the by-law regarding the safe provision of services to clients;
- Monitoring the application of the integrated organization framework regarding risk management and quality improvement that underlines the organization's commitment to ongoing improvement in the areas of safety and client satisfaction;
- Receipt and review of the client satisfaction survey results for 2012-2013;
- Continued development of the Elizabeth House Improvement Plan and integration of the work into the activities of committee members;
- Ensuring that high-risk activities and incidents were prioritized for review;
- Presentation of regular reports to the Board of Directors on the activities related to risk management and quality improvement;
- Encouraging and supporting employee participation in discussions related to the formulation of satisfaction survey questions;
- As a member of the IRMQIC the Executive Director met regularly with clients in the Residential Program and conducted 33 formal satisfaction surveys or exit interviews (compared to 38 the previous year).

Risk management/quality improvement objectives for 2013-2014:

1. Renewed training on incidents and accident reporting and continued revision of the internal event forms.
2. Continued training with clients and staff on the topics of falls prevention and hand and respiratory hygiene.
3. Fostering an environment of team work conducive to staff feeling comfortable reporting risk situations and finding solutions to prevent risk.
4. Completion of the revision of the policy and procedures on the reporting of incidents, accidents and events.
5. The development of procedures on how to manage extreme heat advisories taking into account guidelines issued by the *Agence de la Santé et des Services Sociaux*.
6. A review of the procedures for client orientation to the Path/Track apartments to facilitate integration and to ensure client safety.
7. The shortening and rewording of sections of the evacuation plan for greater clarity (as per recommendation stemming from consultation with the City of Montreal).
8. A review of the security of information policy and the development of a training session for staff on security of information and client confidentiality.
9. Finalization of Quarantine/Isolation procedures to avoid the spread of communicable disease or infection.
10. Consolidating the modules on client safety into a Client Safety Handbook.
11. Finalizing a policy regarding client satisfaction surveys.

Service Quality and Vigilance Committee (SQVC)

The mandate of the SQVC is to ensure respect for users' rights and promptness in processing users' complaints. It is also mandated to contribute to the pertinence, quality, safety and effectiveness of the services provided by Elizabeth House. It receives and analyzes reports, and makes recommendations to the Board on the quality, safety, and effectiveness of services, the handling of complaints, the enforcement of users' rights and actions to be taken. It ensures the implementation of recommendations and encourages collaboration. It ensures that the Local Service Quality and Complaints Commissioner has the necessary resources to carry out the responsibilities of this office.

The committee is composed of five members – the Executive Director, the Local Service Quality and Complaints Commissioner (LSQCC), and three Board members who do not work for or practice their profession in any of the Elizabeth House facilities. The past year, the committee functioned with the Executive Director, the LSQCC, and two board members; there was one vacant seat.

The SQVC met three times this year. Members participated actively on the newly formed Quality Improvement Committee focusing on client satisfaction survey development. The other work of the committee included the following:

- Reviewing and accepting the recommendations resulting from periodic reports and the annual Incident, Accident and Event report;
- Reviewing and accepting periodic reports and the annual complaints report produced by the

LSQCC and recommending to the Board of Directors at the Annual General Meeting to accept the report;

- Monitoring the adherence to the new By-law regarding the safe provision of health and social services;
- Ensuring that clients were made aware of and had free access to the client complaint process;
- Ensuring that clients were aware of their rights in general and reviewed their rights as Elizabeth House clients;
- Clarifying client rights in relation to protection (e.g. protection of privacy and of dignity), for provision (of basic rights, e.g. education) and for participation (e.g. the Youth Protection Act, the right to have a lawyer in court); sessions were offered to Elizabeth House clients in the Residential, Family Assistance and Education Programs; training on client rights and responsibilities was also given;
- Renewing the mandate of the Local Service Quality and Complaints Commissioner for the 2013-2014 year;
- Receiving satisfaction surveys and exit interviews results; synthesizing the data to be used to make improvements with the goal of increasing client satisfaction;
- Receiving and reviewing the annual operating objectives and the Elizabeth House Improvement Plan.

Quality Improvement Committee

The members of the Quality Improvement Committee are the Executive Director (Linda Schachtler), the Local Service Quality and Complaints Commissioner (Elizabeth Pusztai) and a member of the Service Quality and Vigilance Committee and Member of the Board of Directors (Sandra Sinclair).

The mandate of the committee in the long term is to develop and implement a sustainable quality improvement plan or strategy and to continue to

foster the growing culture of quality improvement such that it is woven through all aspects of the work at Elizabeth House.

In the short term the committee will look at the content of the client satisfaction surveys and related processes, including how clients are to be surveyed, survey timing, gathering mechanisms, tabulation of results, feedback mechanisms, roles and responsibilities.

The committee met four times this year and focused its work in the following areas:

- Discussed and adopted five categories on which Elizabeth House will gather feedback regarding client satisfaction: Accessibility, Care and services rendered, Interpersonal relations, Environment and material resources and Individual Rights;
- Conducted surveys of staff, board and management to gain feedback on what they would like to know from clients regarding their satisfaction with Elizabeth House services;
- Compiled and built a master question bank from existing surveys, exit interview questions, questions used in previous program evaluation surveys, questionnaires used by partners;
- Discussed the process for gathering feedback i.e. one general questionnaire for clients; if

needed for very specific issues, targeted questionnaires will be developed; focus groups will be used as necessary to gather more information to better understand an issue or to discuss solutions.

Objectives of the Committee for the 2013-2014 year include:

- Finalization of the general client satisfaction survey to include questions in each of the five meta-categories;
- Defining and testing the methods for data collection, analysis, feedback and follow-up;
- Developing a policy and procedure on Client Satisfaction Surveys and use of the data;
- Fostering the growing culture of quality improvement such that it is woven through all aspects of the work at Elizabeth House.

Client Satisfaction Surveys

Client satisfaction is evaluated every three years as part of accreditation. In addition to this process, Elizabeth House has a long standing practice of conducting satisfaction surveys and exit interviews to determine client satisfaction levels and to discuss possible improvements to its programs, the rules and how it functions.

This year, the Executive Director met with the residential clients each quarter to survey their satisfaction with the services they have received from Elizabeth House and to discuss any issues or recommendations for improvements. Exit interviews were also conducted with clients leaving the Residential Program when circumstances permitted. In total, feedback was received from 33 mothers this year as compared to 38 mothers in 2011-2012.

The areas surveyed included access to services (the client's first contact with the organization), provider competency information and decision making, client rights, food services, infection control, physical environment, safety and security, discharge process. Clients were also asked

whether they felt they had the supports in place to succeed when they were being discharged, and what those supports were, whether they had any additional comments or suggestions to make, and

whether they would like to keep in touch with Elizabeth House. The results of the survey have been given to the residential managers and the clinical team for follow up and for their suggestions for improvement.

Overall, services received a rating of 4 out of 4 (4 = fully satisfied, 3 = mostly satisfied, 2 = somewhat unsatisfied, 1 = not satisfied) as compared to a rating of 3 out of 4 in 2011-2012. This result will be used as a

benchmark for future satisfaction surveys. Clients generally expressed full satisfaction with food services, infection prevention and control practices, the physical environment, safety and security, and the discharge process. Clients reported that some improvements are required with respect to the availability of staff and the amount of time staff spent on their case; information and decision making regarding intervention plans, feedback and communication;

Overall, services received a rating of 4 out of 4 as compared to a rating of 3 out of 4 in 2011-2012. (4 being fully satisfied, 1 being not satisfied.)

the cleanliness areas in the residence which clients themselves are responsible for as part of their intervention plan to help them acquire independent living and parenting skills; the lack of lounge space; house rules limiting client access to cell phones during certain programs or activities; and aspects of policies and procedures related to safe sleep guidelines and overnight supervision. Many stated that if it had not been for coming to Elizabeth House they would have lost their babies.

Objectives for 2013-2014 include:

- Processing the results of the surveys with the staff teams and considering what can be

improved upon or what the organization can do more of;

- Continuing the work to evaluate the tool Elizabeth House is using to assess client satisfaction and developing an improved questionnaire to collect data for the 2013-2014 year;
- Developing more formal mechanisms for sharing feedback and for follow up on the feedback;
- Articulating a policy and procedure for the gathering, analysis, feedback and use of satisfaction survey results.

Handling of Complaints and Promotion of User Rights

This is the fifth year that the handling of formal client complaints has been the exclusive mandate of the Local Service Quality and Complaints Commissioner (LSQCC). From April 1, 2012 to March 31, 2013, there was one complaint processed and concluded, compared to one complaint last year. There were no corrective measures required and the complaint was resolved to the satisfaction of the client, the commissioner and the Service Quality and Vigilance Committee. The complaint was concluded within the prescribed 45-day time delay. No appeals were made to the Public Protector.

The Local Service Quality and Complaints Commissioner prepared a report on activities to improve the quality of services to our clients and to foster the enforcement of user rights. It was submitted to the Service Quality and Vigilance Committee as well as to the Board of Directors in conformity with the policy pertaining to the handling of client complaints.

The Complaints Commissioner reported again this year that “clients continue to be aware of the complaint procedures. Elizabeth House has a long-established approach that includes the practice of addressing client dissatisfactions and complaints directly with the person involved. This is confirmed by clients who report that they discuss their dissatisfactions about services they receive directly with the staff or the supervisor involved. Clients and staff are aware of the legally mandated client complaint procedure and recourse mechanisms.”

The activities of the LSQCC this year fell into three categories:

1. Promoting Client Rights
 - The LSQCC, in conjunction with Elizabeth House staff members, gave presentations to the residents and the clients in the Residential, Education and Family Assistance Programs concerning participation in the intervention planning process, the right to be accompanied and the rights and responsibilities of parents whose children are under Youth Protection.
 - The LSQCC participated in an Elizabeth House staff meeting to review content and feedback from presentations.
2. Reporting
 - Preparation of the qualitative and quantitative reports, including the annual complaints report.
 - Preparation of the report to the Service Quality and Vigilance Committee (SQVC).
3. Participation at Standing and Special Committees (SQVC)
 - Participated in three meetings of the Service Quality and Vigilance Committee (SQVC).
 - Participated in three meetings of the Quality Improvement Committee (QIC)

The focus for 2013-2014 will be on:

- The promotion of client rights by repeating the series of presentations made by the LSQCC;
- Including more clients from the Family Assistance Program in the series of presentations related to promoting client rights;
- Ensuring that the information concerning the handling of clients' complaints is periodically reviewed with staff and clients;
- Reviewing the complaint pamphlet as well as the by-laws and procedures on the handling of client complaints;
- Reviewing the draft evaluation proposal on the functions of the Local Service Quality and Complaints Commissioner;
- Evaluating whether the contract for the LSQCC should be modified and if so, making any required modifications to the contract for 2013-2014.

Committee for Client Support and Satisfaction (CCSS)

Once again this year, efforts were made to support the Elizabeth House users committee - the Committee for Client Support and Satisfaction (CCSS). The challenges that many current and ex-clients are faced with, in addition to their very young age, make it difficult for them to commit to organizing and participating in CCSS activities on a consistent basis.

A Resource Committee was established several years ago and continues to support the activities of the CCSS and to help develop the capacity of committee members as the committee continues to grow. This resource committee included an administrative technician, a 3rd year student intern (*stagiaire*) when available and a clinical educator who worked closely with the members to coordinate meetings, and to stimulate and support clients in further developing the committee and its activities for the year.

With the support and guidance of the Resource Committee, the CCSS committee was active in the 2012-2013 year. Four committee meetings were held in addition to two meetings with the Executive Director and six sub-committee meetings to move projects ahead.

Activities in 2012-2013 included the following:

- Printing, promoting and distributing the revised "Young Parents' Handbook";
- Promoting user rights to new clients; promoting the committee to Elizabeth House clients which included the design of a recruitment poster and attendance at client activities;
- Recruiting of new members to fill vacant positions;
- Installation of and training on a wireless network and internet connection for the clients in the Residential Program as well as for the use of the Committee members;
- Completing the annual report;
- Submitting the budget proposal for the 2013-2014 year for approval;
- Participating in promotional events such as the Open House, Annual General Meeting, 45th Anniversary Planning Committee and in speaking engagements to promote Elizabeth House and its services;
- Providing feedback from a client's perspective related to strategic planning and client satisfaction survey development.

Objectives for 2013-2014 include the following:

- Creating a link on the Elizabeth House website for users; creating a page on the Elizabeth House website to highlight the goals and activities of the CCSS;
- Holding elections;
- Participating on the Elizabeth House 45th Anniversary Planning Committee; planning a reunion event to maintain membership and recruit members;
- Participating in the Annual General Meeting and Open House;

- Supporting and providing feedback to Elizabeth House on the development of client satisfaction surveys and process;
- Providing input and feedback on the new strategic plan;
- Printing, promoting and distributing the Young Parents' Handbook to Elizabeth House clients, community organizations and partners;
- Evaluating the need for and objectives of a client mentor program.

Strategic Planning

The Strategic Plan (2008-2014)

The strategic plan, including action plans for 2008 to 2014, was approved by the Board of Directors on September 15, 2008. The original plan included three strategic directions. A fourth strategic direction, a continued and expanded focus on client safety, was formally approved by the Board of Directors at its May 2010 meeting.

Priority was given to the strategic direction related to organizational development in the areas of clinical programs and activities, and infrastructure and processes. As well, Elizabeth House expanded its efforts related to client safety.

The Board of Directors and management team determined that the organization had substantially met the strategies and objectives outlined in the 2008-2014 strategic plan and that consultation with the community and a period of reflection were required to set the direction for a three to five year period.

The New Strategic Plan (2013-2016)

A committee of the Board met to plan and oversee the new strategic planning process that is expected to result in a flexible, responsive plan to meet the changing needs of the clientele, the organization, and the community within which Elizabeth House provides services. The committee consisted of three Board members, including the President, as well as the Executive Director and Director of Professional and Rehabilitation Services /Risk Management (DPRS).

Work this year focused on discussions with internal stakeholders to identify the questions that the organization would like feedback on from its stakeholders, in order to improve services. The committee also designed and pilot-tested a stakeholder survey, including a SWOT (Strength, Weakness, Opportunity, Threat) analysis to inform the strategic plan.

Four joint Board and staff meetings were held to look at the internal and external environments, to assess the organization's strengths, weaknesses, to

highlight opportunities and threats, and to identify emerging core issues and proposed strategic directions.

Objectives for 2013-2014 include:

- Administering the stakeholder survey, analyzing the results and confirming or changing the core issues and proposed strategic directions;
- Continuing to find ways to engage both internal and external stakeholders in the process;
- Articulating and approving the next strategic plan;
- Communicating the new strategic plan to stakeholders as part of a two-way communication process;
- Incorporating goals and timeframes into the annual operating objectives and into the Elizabeth House Improvement Plan.

Governance

General Board Responsibilities

Board members of Elizabeth House are whole-heartedly committed to the mission and values of the organization, and to fulfilling governance responsibilities accordingly. The Board of Directors is legally empowered to carry out the following responsibilities in its overall role of directing the affairs of Elizabeth House:

- Assuring that the organization is accredited;
- Setting priorities, approving strategic plans and policies;
- Appointing and overseeing the activities of the Local Service Quality and Complaints Commissioner (LSQCC);
- Overseeing the activities of board committees, including receiving reports and recommendations from the Service Quality and Vigilance Committee in order to ensure users' rights, promptness in processing users' complaints and to contribute to the effectiveness of services provided;
- Overseeing the management of human, financial and information resources, and approving annual budgets, financial reports, audited statements, and clinical and administrative reports including accreditation;
- Appointing senior managers and auditor;
- Holding an annual general meeting.

Board of Directors 2012-2013

Cerise Morris, President
Howard Nadler, Vice-President
Jane Bracewell, Secretary
Claude David, Treasurer
Michele Bourdages
Nooshin Maleki
Sandra Sinclair
Donna Varrica
Linda Schachtler, Executive Director,
Member ex officio

Limitation of Responsibility of Board Members

Board members are protected from any individual liability due to omission, negligence, or malfeasance of any other person associated with Elizabeth House, or related to loss, damage, or expenses of the Corporation.

Board Committees 2012-2013

Executive Committee

Joint Standing Committee (English Montreal School Board and Elizabeth House)

Nominations Committee

Publication Relations (PR) and Communications Committee

Building Committee

Service Quality and Vigilance Committee (SQVC)

Integrated Risk Management and Quality Improvement Committee (IRMQIC)

Accreditation Committee

Strategic Planning Committee

Education Fund Committee

Accomplishments 2012-2013

The Board of Directors focused its efforts this year on making improvements to its functioning as it continued to assess its performance, using Accreditation Canada guidelines and standards.

Highlights include:

- Reviewed accreditation standards and updated the Governance section of the Elizabeth House Improvement Plan (EHIP); added in camera sessions to board meetings;
- Identified and planned education and development sessions for board members on understanding financial reports and capacity-building with respect to fundraising;

- Assessed and discussed its functioning as a board based on the results of the Board Functioning Questionnaire distributed to board members as well as the Accreditation Canada Survey Instrument related to sustainable governance and effective functioning of the board;
- Discussed the importance of bringing the client voice to discussions and invited client input into strategic planning and quality improvement dossiers;
- Board members continued to develop their roles on the Integrated Risk Management and Quality Improvement Committee and the Service Quality and Vigilance Committee;
- Reviewed and revised the by-laws which will be presented for approval at a future general meeting;
- Defined the role and formalized the functioning of the executive committee of the Board and held regular meetings throughout the year;
- Provided leadership to the strategic planning process and the development of the new stakeholder survey:
 - Researched the design and implementation of a stakeholder survey to inform strategic planning and to support regular two-way communication with stake-holders;
 - Further developed the stakeholder survey and environmental scan/questions related to SWOT analysis (identifying strengths, weaknesses, opportunities and threats) to help inform the strategic planning process and support two-way communication with partners and stakeholders;
 - Administered the second annual stakeholder survey at the Open House in October 2012 and reviewed the results.

Objectives for the Board of Directors for 2013-2014

- Adopt the new and revised by-laws.
- Formalize procedures related to aspects of governance; finalize job descriptions and responsibilities of board members; describe and document the recruitment and nominations processes.
- Evaluate board meeting effectiveness by identifying and formalizing mechanisms for feedback to individual board members regarding their role and work on the board.
- Administer the Sustainable Governance Functioning Survey and the Board Functioning Questionnaire.
- Continue to develop the fundraising capacity of board members.
- Continue to hold at least one board development activity each year.
- Actively recruit new members and involve board members and others in identifying and bringing targeted expertise to the board;
- Hold orientation for new members.
- Conduct an annual stakeholder survey.
- Continue to develop the role of board members in relation to risk management and quality improvement on the IRMQIC and SQVC.
- Review the PR/Communication Plan.
- Continue to oversee and participate in the strategic planning process and the collection of stakeholder survey feedback.

Human Resources Management

Hiring and Staffing Changes

In February 2013, the position of Director of Professional and Rehabilitation Services (DPRS) was formally filled by the appointment to this post of the person who had been Acting DPRS for the past two years. Educators and night attendants were hired to populate the on-call list and replace staff on leave. Two part-time secretaries were hired to replace the secretary who retired after 15 years of dedicated service to the organization.

Human Resources Staffing Levels

This year, Elizabeth House operated with 19 permanent full- and part-time employees or 16.44 full-time equivalent positions as compared to 20 and 16.84 last year, respectively. There are (8) trained educators on the on-call list who work replacement shifts as needed. In addition, Elizabeth House also used the services of consultants and occasional laborers.

Employee Numbers and Staffing Levels	2011-2012		2012-2013	
	Number of Employees	Full Time Equivalent	Number of Employees	Full Time Equivalent
Management	2	2.00	2	2.00
Clinical	14	11.84	14	11.84
Administrative & Auxiliary	4	3.00	3	2.60
Total	20	11.84	19	16.44

The significant number of permanent employees who were on sick leave or maternity leave created a void of experienced, senior staff in the residential program. We were fortunate to be able to hire a number of on-call employees to fill the vacant positions, who under the supervision of the Clinical Program Manager, provided consistency and stability to the residential program.

There was also a need for increased staffing during communicable disease events, such as gastro-enteritis and the seasonal flu, due in part to a difficult cold and flu season.

Policy and Procedure Development

The Manager responsible for Human Resources worked closely with the management team to develop policies and procedures related to employees, *stagiaires* and volunteers.

The orientation and staff retraining policy and procedure was formalized and the orientation program, presentations and materials updated accordingly. All new employees, contract workers, *stagiaires* and volunteers receive a formal orientation prior to working at Elizabeth House. The staff complaints policy and procedure formalized last year was reviewed with staff and was added to the orientation program. The policy on carrying out background police checks on employees, contract workers, volunteers and *stagiaires* was finalized. Finally, the first draft of an

Occupational Health & Safety framework was completed.

Objectives for 2013-2014 include:

- Continuing to formalize and develop human resource policies, in particular a policy on occupational health and safety and a policy on violence in the workplace.
- Present the occupational health and safety framework to staff and gather feedback to inform the new policy.
- Further developing the employee handbook.

Orientation

Staff and volunteer orientation programs were reviewed and further developed in the light of national standards. Elizabeth House continues to provide a two-part orientation to new employees: an administrative orientation which includes an overview of key policies and procedures, including policies pertaining to risk management, human resources, ethics, and infection prevention and control. Employees also receive a departmental orientation, at which they get more in-depth training and details about their department and their tasks. The orientation package was updated to provide more information on risk management, safety and security, and emergency measures procedures. Employees returning from a prolonged leave of absence received a re-orientation prior to returning to their regular duties.

Performance Management

Elizabeth House took another step towards the management of performance as part of its commitment to ongoing improvement. Elizabeth House believes this will contribute to the organization working better together to achieve organizational goals, provide employees with a better understanding of management and organizational expectations, and help direct work in a results based manner.

Formal performance evaluations continue to be done on an annual basis in a two-way communication process with each employee. They are also conducted at the end of the probationary period for new employees. Replacement and on-call workers are now included in the performance evaluation process.

In 2013-2014, the assessment tool will be revised with input from employees and management and a formal policy on performance management will be written and implemented. All employees will have had their performance evaluated.

Professional Development and Training

Elizabeth House supports individual and team development by providing employees with opportunities for ongoing learning and development. Cuts imposed by Bill 100 have

required us to find new, creative and less costly ways to provide training.

As part of the commitment to ongoing improvement and staff development, employees attended a variety of professional development activities. Learning from these conferences and seminars is shared with the staff team following each activity.

Staff members participated in the following external professional development and training activities:

- Sentinel Training on identifying and accompanying someone who is suicidal, given by a representative from Suicide Action Montreal, hosted by CSSS Cavendish;
- Two half-day training sessions, in conjunction with CSSS Cavendish, on the use of the Ages and Stages Questionnaire given by a representative from C.A.S.I.O.P.E. (*Centre d'aide et de soutien aux intervenants et organismes en petite enfance*);
- Presentation given by the Local Service Quality and Complaints Commissioner on client rights and preoccupations, and review of the complaints procedure at an integrated clinical staff meeting;
- Batshaw's Multi-Disciplinary Council Professional Day;
- First Aid training from CSST;
- Let's Talk About It: Four half-day training sessions given by a speech-language pathologist from CSSS Sud-Ouest-Verdun on language development related to children age 0-5;
- *Vivre sa grossesse, sa maternité et sa paternité en processus migratoire*: Half-day conference given by representatives from Maison Bleue, hosted by the Association canadienne pour la santé mentale-Filiale de Montréal;
- Making Room for Dad: moving beyond the dyad: Full day conference addressing the evolving role of fathers in the lives of infants and young children given by the McGill University Division of Child Psychiatry at the Montreal Children's Hospital;
- Presentation given by a representative from Pause Famille, addressing strategies for involv-

ing fathers in family intervention, hosted by ROEJEF (Réseau d'organismes et d'établissements œuvrant auprès des jeunes familles);

- Lien d'attachement: Half-day training, given by ROEJEF (Réseau d'organismes et d'établissements œuvrant auprès des jeunes familles);
- Maison Bleue: Information session, given by representatives from the Maison Bleue, on the topic of common childhood illnesses and symptoms;
- PAP Planning your pathway to autonomy;
- Crisis intervention through the CSSS Cavendish.

In-house training sessions were provided to all staff, and in many cases to clients also, throughout the year. Topics included:

- Falls Prevention
- Infection Prevention and Control
- Hand Hygiene and Respiratory Hygiene
- Security Alert System
- Fire Prevention
- Emergency Evacuation and Fire Preparedness Program
- Identification and functioning of Emergency and Safety Equipment
- WHMIS (Information and Prevention Elements of Workplace Hazardous Materials Information System)
- Review of the internal procedures for incident, accident and event reporting
- Review of existing policies and procedures

Employee Complaints Process

Two years ago, the Board of Directors approved a complaints process for employees as part of the development of human resources policies and procedures. The complaints process is reviewed in the orientation program for new employees. There were no staff complaints.

Employee Wellness Program

Elizabeth House acknowledges the importance of personal and collective wellness in the workplace for the health of individuals, the effectiveness of the organization and for its impact on client satisfaction. Healthy employees provide better services to our clients and can better support the mission and strategic goals of the organization.

Employee wellness was the subject of management and team discussions. Workloads were reviewed and priorities established in an effort to maintain balance, reduce stress in the work environment and ensure that staff worked in a safe manner.

A building inspection was done; the results confirmed that there is no mold in the basement. Air purifiers were purchased for the client living area, family room and two offices. A coffee pod machine was purchased in response to suggestions from staff.

In response to staff with allergies to cleaning products a review of the products used was carried out and some products were changed to accommodate staff health while still meeting infection prevention and control guidelines.

Employee Assistance Program

Elizabeth House is committed to creating opportunities to support the wellness of its employees. To this end, it offers employees free access to professional counseling and legal services. This program continues to be valued by employees.

Worklife Pulse Survey

According to Accreditation Canada, it is widely recognized that the health care environment is one of the most difficult to work in, due to the physical and emotional nature of the work, the high risk of injury, workload and work schedules, and the high rate of change in the work environment. For this reason, the concept of "quality of worklife" is central to Accreditation Canada's accreditation program.

The goal of the Worklife Pulse Survey is to help organizations monitor key worklife areas such as the work environment, individual quality of work life and organizational performance. It provides a snapshot or “pulse” of quality of worklife. As part of our commitment to improving and promoting worklife wellness, Elizabeth House surveys its staff in a confidential survey administered and analyzed by Accreditation Canada on an annual basis. The results help identify strengths and gaps in the work environment, engage staff in discussions about improvement, plan interventions and activities to improve the quality of work life, and develop a clearer understanding of how quality of work life influences the organization’s capacity to meet its strategic goals.

The results of this year’s worklife pulse survey were presented to staff who worked in groups to formulate suggestions for improving various aspects of worklife satisfaction which were shared with management.

Worklife Pulse Survey objectives for 2013-2014 include:

- Incorporating staff feedback and making improvements to increase the quality of life in the workplace.

The Wellness Committee

Wellness Vision: Our vision is a happy and healthy work-place where individuals and the organization can thrive.

Wellness Mission: Our mission is to enhance the wellbeing of Elizabeth House staff, independent workers, and volunteers through initiatives that promote workplace safety, individual and collective health and work-life satisfaction.

Volunteers

Elizabeth House put a focus on recruiting volunteers to provide planned respite for mothers so that they could follow-up on the goals identified in their intervention plans or simply get a break from the new challenges of parenthood. Volunteers are a critical support to our young mothers and their children. Without their help many young mothers would not have any relief or support. They are appreciative of the many hours of help and caring that they have received from the dedicated women who have been part of our volunteer team this year.

There is a policy and procedure to guide the volunteer application and screening process. It includes security and background checks, formal reference checks, role and responsibility descriptions, evaluation questionnaires, and orientation. It has become more difficult to retain persons interested in volunteering due

The Elizabeth House Wellness Committee was struck to support healthy workplace initiatives and work-life balance for employees.

During the October Wellness month, activities included sending out health and wellness tips, including information on hand hygiene, flu prevention, healthy eating and exercise tips. A staff wellness activity focused on developing a wellness board to share ideas on maintaining a healthy worklife balance. Finally, a meeting to focus on staff wellness included healthy foods and gift bags with personal care products which were donated by our local Pharmaprix.

Although the Wellness Committee did not meet as often this year, activities and discussion continued. Employees continued to participate in collective and individual wellness activities. Human Resources sent out information to staff related to health and safety. Creative ways were found to create staff development opportunities during a time when these budgets have been cut (Bill 100), Staff were recognized in ways that were meaningful to them and the Employee Assistance Program was renewed.

Wellness Committee objectives for 2013-2014 include:

- Participating in the consultation regarding the development of the Occupational Health and Safety Policy and the Workplace Violence Policy;
- Discussing the topic of staff recognition with a view to develop a staff recognition program;
- Continue supporting staff wellness activities;
- Promoting staff wellness in conjunction with the Human Resources Department.

to the long delay in obtaining background checks, required for the performance of volunteer work at Elizabeth House.

Volunteers take on many other roles in our community. Elizabeth House also received numerous donations of clothing, baby items and equipment, as well as gifts which were distributed to clients over the holiday period. Corporations have also stepped up to help Elizabeth House with many projects that would otherwise not be realized without the generous outpouring of services, time, equipment and materials.

This past year Elizabeth House received financial donations or donations of volunteer hours, gifts, knitted baby clothes and hand-made quilts from the following organizations:

- Queen of Angels Academy (Youth Philanthropy Initiative students)
 - Roslyn School
 - The Surrey Knitters
 - The Dawson Quilters
 - Girl Guides
 - Billie Jo's Quilters
 - Glasspoole crafters
 - Community Recreation and Leadership Training (CRLT students)
 - Mount Royal United Church Youth Group
 - Villa Ste. Marcelline
- Our thanks go out to the following companies:
- Deloitte – employees volunteered their services to paint client living areas and organize storage space as part of their Impact Day.
 - Fauteaux, Bruno, Bussière, Leewarden (FBBL) – employees painted the supervised and transition apartments as part of their philanthropic work in the community.
 - Sienna Construction – provided consultation services regarding building issues and completed the repairs to a vacant client bedroom so that it could be assigned.

Another group of volunteers are the dedicated and compassionate men and women on the Board of Directors of Elizabeth House and the Elizabeth House Foundation. Our thanks go out to them for the expertise they bring to board discussions, the vision they bring to our strategic plan and the energy they put into the ongoing improvement and development of Elizabeth House and its support network.

Objectives for 2013-2014 include

- Retaining committed volunteers and growing the volunteer pool to further support Elizabeth House programming and to provide respite services to our residential clients.

Information Security and Confidentiality Agreements

In compliance with the Law respecting Health and Social Services, Elizabeth House continues to implement its policy and procedures on information security. These govern the evaluation, appropriate use, and adequate protection of personal information as well as the protection of information of legal, administrative, or economic value.

Information security and confidentiality contracts were signed by all staff, board members, *stagiaires*, volunteers and consultants. Information sheets and posters were circulated at all levels of the organization and were integrated into the orientation process for new staff and board members, volunteers, *stagiaires* and consultants.

Elizabeth House meets the basic standards regarding information security and technology as set out in the guidelines from the Ministry of Health and Social Services and the *Agence de santé et des services sociaux de Montréal (15 mesures prioritaires du cadre global de gestion des actifs informationnels - volet sécurité CCGAI)*, taking into consideration the unique circumstances of Elizabeth House: the limitations of the physical space, the computer hardware in use and the budgetary constraints to the purchase / upgrade of computer equipment (hardware or software) etc.

Administration continued to develop a three-year plan (*Plan directeur des actifs informationnels*) regarding information security objectives and projects for information technology, computer equipment replacement plans, and the development of procedures regarding how information is maintained, accessed and stored on computers in offices and in the archives.

Objectives for 2013-2014 include:

- Re-evaluating how information is stored and accessed on the server;
- Signing new employee, volunteer and *stagiaire* information security and confidentiality agreements;
- Continuing to evaluate hardware and software needs;
- Upgrading the server and equipment (network equipment);
- Updating Information Security procedures and guidelines.

Code of Ethics

The Elizabeth House Code of Ethics and Professional Conduct guided staff, board, volunteers, consultants and *stagiaires* as they fulfilled their respective roles and responsibilities over the course of the year. They incorporated the Code of Ethics and ethical considerations into the decisions that they made, in the way they intervened with clients and their families, in the way they interacted with each other as colleagues and co-workers, and in the way they carried out professional acts. They constantly strived to create an atmosphere of understanding and caring within Elizabeth House.

There were no ethical issues affecting the organization that arose over the course of the year.

Elizabeth House Code of Ethics (Basics)

Introduction

The code of ethics sets out the rules and standards of behaviour for everyone at Elizabeth House. Our code of ethics tells clients what rights they have and what their responsibilities are, and what they can expect from Elizabeth House (in terms of treatment, professionalism of staff, respect of confidentiality etc.). Everyone who works for or at Elizabeth House (all full-time, part-time or on-call staff, all volunteers, *stagiaires* (students completing an internship program), members of the Elizabeth House board of directors, as well as contractual workers) must follow the code of ethics.

The code of ethics, along with the professional codes of ethics that apply to the various professionals who work at or for Elizabeth House, as well as the Elizabeth House policies and procedures guide our behaviour.

Organizational Commitments

Elizabeth House is a private rehabilitation center providing a continuum of specialized services to

pregnant adolescents and women, mothers and babies, fathers, and families experiencing significant difficulty in adjusting to pregnancy and to their new roles as parents and caregivers.

1. We believe that a pregnant woman or adolescent 14 and over has the right to determine her plans regarding her pregnancy. We will provide the information and support she needs to make a decision (regarding continuing the pregnancy to term, and the custody of the child), without imposing personal views or judgments.
2. We care about and are committed to the wellbeing of our clients, recognising their physical, emotional, spiritual, social and cognitive needs.
3. We help the young woman (and the young man) who chooses to become a parent to assume this role, while ensuring that the baby has a healthy, stable and safe environment.
4. We involve the client in developing intervention and service plans, listen to what the client has to say and take the client's needs, opinions and desires into account.

5. Our prime concerns are optimizing the healthy development of the child and the young parent.
6. We advocate with and on behalf of our clients according to their needs.
7. As part of the discharge process when a client leaves an Elizabeth House program, appropriate post-discharge services will be determined with the client, and the necessary services will be arranged.
8. We promote ongoing collaboration among youth, families, and colleagues within and outside the health and social service system, in order to provide the best possible services.

Ethical Standards

Regardless of role or position, everybody who works for or at Elizabeth House (all clinical, administrative and support staff, members of the Elizabeth House board of directors, all volunteers, *stagiaires* (students completing an internship program), as well as contractual workers) acknowledges and acts in the spirit of the following principles.

Respect for others

1. We treat everyone with dignity, care and respect, regardless of their race, religion, ethnic origin, socio-economic status, disability, age or what their plans or views regarding the pregnancy are.
2. We provide a residential, educational, and employment environment free from all forms of intimidation, hostility, offensive behaviour, discrimination and sexual harassment.
3. We recognise that everyone is unique. We act in a manner that respects and promotes the understanding of differences and reflects the cultural diversity of our clientele.
 - We work towards the elimination of prejudice, discrimination, and racism.
 - We respect the values, religious beliefs and sexual orientation of our clients.

Professionalism and Objectivity

4. We acknowledge that we are accountable for our actions and decisions. We are aware of

the impact of our actions on others, and act in a manner that exemplifies integrity, consistency and caring. We are all role models for our clients.

5. We act in a dependable and trustworthy manner while maintaining professional boundaries and objectivity.
6. We exercise care, prudence, diligence and skills in the performance of our duties, and act honestly and in good faith in the best interest of Elizabeth House and its clients.
7. We know and respect the laws, standards and ethics of our particular professions or occupations, and Elizabeth House policies and procedures.
8. We invest in our personal and professional development in order to carry out our respective roles.

Conflict of Interest

9. We put the interest, the rights and needs of the client and of Elizabeth House before our interest and needs. We avoid actual or potential conflicts of interest, or even the appearance of conflict of interest, in the decisions we make and the way we intervene.

Confidentiality and Privacy

10. We respect the confidentiality of clients. We communicate – whether verbally, non-verbally, or in writing – in ways that respect the privacy of individuals, as well as their right to confidentiality.
11. We do not discuss (confidential) agency business with anyone who does not have a legitimate need to know the information. We respect Elizabeth House policies and procedures regarding communication with the media.

The obligation to maintain confidentiality extends beyond the period of employment or service, and/or the expiration of the mandate of board members.

Parental Responsibility and the Importance of Family

12. We act with the knowledge that parents retain primary responsibility for their children.

13. The mother or father who is a direct client of Elizabeth House is always part of the process when decisions are made regarding intervention plans and about services to her or him, or her or his child.
14. We act with the knowledge that family bonds are vital. We encourage grandparents, siblings, members of the extended family and significant others to be involved in the care and services we provide.

Client Needs and Development

15. We help each client experience success and encourage the fullest possible development of the mother's, the child's and the family's potential.
16. We recognise the potential vulnerability of the clients we serve and use our authority in an appropriate and responsible manner as we carry out Elizabeth House mandates.
17. We provide care and services according to the individual needs of the client, in the most appropriate setting for the client.
 - Clients do not remain in the residential program longer than is necessary to meet the needs assessed at intake, and the purpose for which placement was provided.
 - Development and growth are possible, but the driving force for change has to come from within; we work with the clients to help them achieve their goals. We help them take responsibility and learn to find solutions.
18. We promote a safe and secure environment.
19. We promote responsibility and autonomy.
20. We provide the necessary information and support to allow access to services and resources, and the exercise of individual rights.
 - We communicate – whether verbally, non-verbally, or in writing – in ways that improve the quality of our services. We use clear, accessible language, devoid of condescension.
21. In any intervention the protection and interests of the child take precedence over all other considerations. In any conflict between

the rights and interests of a child, and the rights and interests of the child's parent, the rights and interests of the child shall prevail.

Application of the Code of Ethics

As employees of Elizabeth House, we incorporate our Code of Ethics and ethical considerations into the decisions that we make, in the way we intervene with our clients and their families, in the way we interact with each other as colleagues and co-workers, and in the way we carry out professional acts. We constantly strive to create an atmosphere of understanding and caring within Elizabeth House.

Avoiding Conflicts of Interest

Employees, volunteers, *stagiaires* and persons under contract to Elizabeth House are encouraged to discuss situations in which there may be a perceived or a potential conflict of interest, with their supervisor or with the Executive Director, so that the situation can be resolved in such a way that no conflict of interest arises.

Reporting Conflicts of Interest

Any person who believes that a conflict of interest may or does exist must bring the situation to the attention of their supervisor or the Executive Director (for employees, volunteers and persons employed by or under contract to Elizabeth House), or to the attention of the President or Vice-President of the board (for board members, and any real or potential conflict of interest involving the Executive Director).

Investigating Conflicts of Interest

Should the allegations or situation concern an employee, a volunteer, or a person who has been hired to perform a service for Elizabeth House, the Executive Director shall conduct an inquiry into the situation or allegations, or designate individuals to do so.

Should the situation or allegations concern the Executive Director or a member of the board of directors, the President or Vice-President of the board may then designate individuals to conduct inquiries into the allegations or situation. The

person in question shall be informed in writing that he or she is the subject of an inquiry.

The results of the inquiry will be submitted in writing to the appointing body. The person under inquiry shall receive a copy of this report.

If a potential conflict of interest is identified, the Executive Director or the Board of Directors shall take steps to ensure that it is avoided. If a conflict is found to exist, they will ensure that it is resolved, and that the clients' rights and interests are upheld.

Disciplinary procedures

Any breach or omission of duty or standard prescribed under this code of ethics may entail the imposition of a sanction or disciplinary measures, which may include a warning, a reprimand, temporary suspension or dismissal, or in the case of a board member, the temporary suspension of the member of the board, or his or her removal from the board, according to the seriousness and nature of the derogation.

Should the results of the inquiry result in a recommendation for dismissal, the matter shall be reviewed by a committee of at least two members. For employees of Elizabeth House, the committee shall consist of the Executive Director plus at least one other person appointed by her or him. If the conflict of interest involves the Executive Director,

or a member of the Board of Directors, the committee shall consist of at least two members: the President or Vice-President of the board, plus at least one other person.

All penalties shall be communicated in writing to the individual concerned.

All inquiries and any penalties imposed are to be confidential.

Individuals conducting inquiries as well as the individuals determining and imposing penalties cannot be prosecuted by reason of acts engaged in good faith in the performance of their duties and functions.

Integration of the Code of Ethics

The code of ethics has been developed to help us fulfill our functions as we work together to help our clients. This document codifies much that is already in practice, and aims to clarify any points that might be ambiguous. Staff members, volunteers, *stagiaires* and contractual workers are encouraged to bring any questions or comments they may have about the code of ethics to their supervisor, or the Executive Director. Board members are encouraged to speak to the President of the Board of Directors, or to the Executive Director.



Building, Property, and Equipment Management

Maintenance, Repairs and Renovations

Elizabeth House continued to make improvements to the client living areas in 2012-2013.

- New blinds were purchased for the client bedrooms and some of the common spaces.
- Emergency tap lights were installed in client bedrooms, which are battery operated, so in the case of a power failure, or emergency situation, clients have some light.
- The main client kitchen and dining room, the client TV room, several bedrooms, washrooms and the baby kitchen and the semi-supervised apartment were painted.
- The ventilation fans in the client washrooms were replaced.
- A carbon monoxide detector was installed outside furnace room, following a consultation with a fire prevention marshal.
- Smoke detectors at PATH/TRACK were replaced.
- Faucets were replaced in several washrooms and in the kitchen
- The dishwasher was repaired several times and is scheduled to be replaced.
- The overgrown branches on the backyard tree were trimmed as it was a hazard. The branches covered the roof, leaves blocked roof vents, created an ant problem in one of the client rooms. Through a donation of a contractor (Sienna Construction) the tree was trimmed free of charge.
- There were some issues related to ants and insects. Preventive measures were put in place regarding clients returning from a weekend or overnight visit; the exterminator treated specific areas and provided information on how to identify

insect pests and monitor the situation. Weekly spot inspections were carried out when necessary,

A building inspection was carried out. The results will be used in establishing the 2013-2014 repair and renovation plan, with a focus on urgent and important items and on client areas.

The Auxiliary Services request form was updated to simplify the form and streamline work requests. Information regarding hours spent on requests and costs are now incorporated into the monthly summary analysis reports.

Proactive risk assessment regarding child safety was carried out by the IRMQI sub-committee as more toddlers were admitted to the Residential program this year. A child safety inspection was carried out and additional child safety measures were implemented, including the installation of additional gates, door finger guards and corner guards and the purchase of some furniture.

Housekeeping: cleaning procedures were reviewed and the high / low touch protocols for day-to-day activities and when in heightened Infection Prevention and Control (IPAC) situations are being updated.

Objectives for 2013-2014:

- Review the building inspection report and determine repair and renovation priorities;
- Repair the kitchen range hood exhaust fan;
- Assess heating and electricity costs and the possible installation of a more efficient, less costly system;
- Continue assessing child safety measures and formalize childproofing protocols.

Building Security and Systems

All annual inspections of safety and security equipment and systems were carried out on schedule. Staff also received refresher training on the location and use of safety and security equipment.

Equipment Replacement

Elizabeth House has spent a significant amount of money in the past 10 years on computer equipment and systems and technical expertise necessary to maintain these systems. Costs related to computers and technology continue to increase. The organization has received non-recurrent funding in its budget to recognize and cover some of these costs. Upgraded software and equipment are key to having access to the information, systems (ex: incident and accident reporting systems, financial management and reporting systems) necessary for Elizabeth House to function within the *réseau* and to staying abreast of information, changes and requirements of the *Agence de développement de Montréal* and others. This is a challenge as Bill 100 requires cuts in administrative services, including computer software and hardware.



The RITM (*Réseau intégré de télécommunications multimédia*) project was completed. The upgrade to a fibre optic line increased internet speed and access to province-wide system (RTSS).

The following technology-related equipment was purchased:

- 2 laptops (purchased to replace older equipment);
- New back up tapes (purchased to replaced older tapes);
- The server backup battery was replaced;
- An external back up drive for the bookkeeper's computer was purchased;
- Memory was increased in 2 laptops.

The following equipment was replaced in the Rehabilitation programs:

- Mattresses, box springs and linens;
- Toys and equipment for infant stimulation;
- Replacement safety gates;
- The old industrial fridge was replaced with a state of the art refrigerator-freezer;
- Shower curtains and bath mats were replaced in the client bathrooms;
- High chairs and play pens;
- Digital cameras.

Objectives for 2013-2014 include:

- Continuing to implement the activities and tasks identified in the various plans related to building maintenance and repair, renovations, equipment replacement, annual inspections of security and safety equipment and other systems.
- Planning upgrades to computer equipment, servers and software within the special *maintien des actifs* budget allocation.

Financial Management

Elizabeth House continues to rise to the challenges of shrinking budgets while still trying to meet the growing requirements for performance and technology. We continue to do more with less!

Grants

Elizabeth House received a grant from the Elizabeth House Foundation in the amount of \$51,750 to enhance clinical programs and activities beyond what is provided for in the annual operating budget allocated by the Ministry.

Bill 100

As of September 2010 the MSSS put measures in place to obtain budgetary equilibrium and reduce the debt in the *réseau* by 2014. Establishments are required to reduce administrative and information systems expenses, as well as realize reductions through the non replacement of retirees, reductions in training, publicity and travel expenses. Since 2010, Elizabeth House has received a cumulative reduction of \$44,840.

Maintien des actifs

This non recurrent budget allocation was received from the Agence last year to help offset the expense of upgrading information systems software and equipment (including laptops, desktops and servers). There remains a balance of \$5,212 in this budget. Unused amounts are carried over to the next year.

Audit Results

Elizabeth House underwent another successful financial audit. The auditors reported that the financial matters of the organization are extremely well managed. There were no unresolved differences of opinion with management on financial accounting and reporting matters. Our accounting policies are clear, complete and have been applied consistently. Internal controls were evaluated and were confirmed to be in place.

There were no misstatements resulting from error. Testing of the financial records and enquiries made of personnel did not reveal any instances of irregularities, illegal acts or fraud.

Elizabeth House finished the year with a \$15,040 deficit which can be explained in part by two additional and unexpected funding cuts. These adjustments were applied by the Agence very late in the year (January 2013 and April 2013) totaling \$6,210. High salary insurance costs for employees on medical leaves also contributed to the deficit. As well, the unplanned reduction in grants from the Elizabeth House Foundation impacted the year end result.

Follow-up on Previous Audit Recommendations

The accounting team, as follow-up to the audit recommendations from previous years, continued to segregate duties in an effort to reduce the risk of fraud and to follow best practices related to purchasing, accounts payable, payroll and petty cash. The Treasurer and CAAS met regularly to review procedures, financial reports, accounts payable, bank statements and checks issued.

Objectives for 2013-2014:

1. Review and update the chart of accounts;
2. Formalize accounting procedures to complete the accounting manual;
3. Secure funding from the Foundation or other sources to complement the budget received.

Independent Auditor's Report on Summary of Financial Statements

To the Members of the Board of Directors of
Maison Elizabeth House

The accompanying summary financial statements, which comprise the summary statements of financial position of the Operating and Capital Assets of Maison Elizabeth House as at March 31, 2013 and the summary statements of revenues and expenses of the Operating and Capital Assets Funds and summary statements of accumulated surplus are derived from the audited financial statements of Maison Elizabeth House for the year ended March 31, 2013. We expressed a qualified audit opinion on those financial statements in our report dated June 17, 2013 (see below).

The summary financial statements do not contain all the disclosures required by Canadian public sector accounting standards. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of Maison Elizabeth House.

Management's Responsibility for the summary financial statements

Management is responsible for the preparation of a summary of the audited financial statements in accordance with the applied criteria described in the summary of significant accounting policies in Note 4.

Auditor's Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements".

Opinion

In our opinion, the summary financial statements derived from the audited financial statements of Maison Elizabeth House for the year ended March 31, 2013 are a fair summary of those financial statements, in accordance with the applied criteria described in the summary of significant accounting policies in Note 4. However, the summary financial statements are misstated to the equivalent extent as the audited financial statements of Maison Elizabeth House for the year ended March 31, 2013

The misstatement of the audited financial statements is described in our qualified audit opinion in our report dated June 17, 2013. Our qualified audit opinion is based on the fact that the Organization does not amortize the property and equipment and does not present a statement of cash flows and does not present a comparison of the results for the accounting period with those originally planned which constitute departures from Canadian public sector accounting standards. It is not practicable to determine the impact of these departures. Our qualified audit opinion states that, except for the effects of the described matter, those financial statements present fairly, in all material respects, the financial position of Maison Elizabeth House as at March 31, 2013 and the results of its operations for the year then ended in accordance with Canadian public sector accounting standards.

Chartered Professional Accountants

Montreal, Quebec
June 18, 2013

Extract from Richter S.E.N.C.R.L. Summary Financial Statements.

Maison Elizabeth House

Summary Statement of Financial Position
as at March 31, 2013

Financial Assets	Operating Fund	
	2013	2012
	\$	\$
Cash	82,096	87,191
Term Deposits 0.10% and 1.60% (1.5% to 1.85% in 2011)	186,694	196,471
Due from Other Funds	9,959	10,133
Amounts due from Elizabeth House Foundation	0	0
Accounts Receivable	39,873	29,123
Due from Agence de la sante et des service sociaux	152,051	142,526
	470,673	465,444
Liabilities		
Accounts Payable	364,028	323,419
Deferred revenues		
Agence de la sante et des services sociaux	6,686	6,963
Elizabeth House Foundation	0	19,875
Other	13,416	13,416
	384,130	363,673
Net Financial assets	86,543	101,771
Prepaid expense	743	555
Accumulated Surplus	87,286	102,326
Accumulated Surplus		
Principal activities (un-liberated)	56,288	56,288
Other activities (liberated)	30,998	46,038
	87,286	102,326

Maison Elizabeth House

Summary Revenues and Expenses
for the Year Ended March 31, 2013

Revenues	Operating Fund	
	2013	2012
	\$	\$
Agence de la santé et des services sociaux	1,366,352	1,336,546
Contributions from Elizabeth House Foundation	51,750	52,133
Other Revenues	20,626	3,745
	1,438,728	1,392,424
Expenses		
Residential Services	620,074	534,485
External Services – Day Centre	198,812	203,364
External Services – Family Assistance	80,189	112,234
Food Services	18,197	25,024
Administration expenses	361,332	372,882
Information Systems	25,645	25,922
Maintenance and repairs	53,241	54,124
Housekeeping	16,540	15,721
Building Operations	34,956	33,787
Other	44,782	14,861
	1,453,768	1,392,404
Ancillary activities		
Revenues	5,657	9,201
Salaries and employee benefits	(5,657)	(9,201)
Excess (deficiency) of the ancillary activities	-	-
Excess (deficiency) of revenues over expenses	(15,040)	20



**Elizabeth House
Annual Report 2012-2013**