

*Elizabeth House
Annual Report
2013-2014*



Elizabeth House Annual Report 2013-2014.

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NOTE:

Excerpt of Table of Contents for PART 1: Elizabeth House Annual Report 2013-2014, pages 6-32.

TABLE of CONTENTS:	
PART I-EH Annual Report 2013-2014, pages 6-32	
Message from the President and the Executive Director	6
Declaration Regarding the Reliability of Data in this Annual Report	7
About Elizabeth House	8
<u>Our Vision, Mission and Values</u>	8
Our Clients	9
<u>ELIZABETH HOUSE ORGANIZATIONAL STRUCTURE 2013-2014</u>	10
Rehabilitation Services at Elizabeth House	12
<u>What Rehabilitation Means in the Elizabeth House Context</u>	12
<u>Case Management and Intervention Planning</u>	13
<u>The Role of Elizabeth House in Permanency Planning</u>	13
<u>Program Activities and Special Workshops for Clients</u>	15
<u>Child Stimulation Group</u>	15
<u>The Ages and Stages Questionnaire</u>	15
<u>Special Groups and Education Sessions</u>	15
<u>Story Time Workshop</u>	15
<u>Writers in the Community</u>	16
<u>Activities in the Education Program</u>	16
<u>Action Plan on Reading in School</u>	16
<u>“Vous êtes ce que vous mangez” Cooking Course</u>	16
<u>Summer Day Camp</u>	16
<u>Program Development</u>	17
<u>Terrific Toddlers</u>	17
<u>Independent Living Workshop</u>	18
<u>Planning Your Pathway to Autonomy</u>	18
<u>Residential Services (Mother-Child and Prenatal Programs)</u>	18
<u>Intake Statistics for Residential Services Programs</u>	19
<u>Food Services</u>	21
<u>External Services</u>	23
<u>Semi-Supervised and Transitional Apartment Programs</u>	23
<u>Education and Nursery Programs</u>	23
<u>Family Assistance Program</u>	25
<u>Student Internships (Stagiaires)</u>	28
Governance	29
<u>Board Responsibilities</u>	29
<u>Limitation of Responsibility of Board Members</u>	30
<u>Accomplishments 2013-2014</u>	30
<u>Objectives for 2014-2015</u>	31
Accreditation	32

TABLE of CONTENTS:
PART 2-EH Annual Report 2013-2014, pages 33-69

Strategic Planning	33
New Strategic Plan (2014-2017)	33
Partnership and Collaboration	34
Partnerships.....	34
Collaborative Relationships.....	35
Participation on Advisory Tables and Tables de Concertation in Montréal.....	36
Communication Plan/Public Relations	37
Outreach Strategy	37
Two Way Communication and Stakeholder Surveys	37
Increased Exposure through Print, Electronic and Other Media	37
Programs and Services Plan.....	38
Open House	38
Creating Opportunities to Hear the Client Voice	38
Risk Management and Quality Improvement	39
Incident, Accident and Risk Event Reporting	39
Integrated Risk Management and Quality Improvement Committee (IRMQIC).....	41
Service Quality and Vigilance Committee (SQVC).....	43
Quality Improvement Committee	44
Client Satisfaction Surveys.....	45
Handling of Complaints and Promotion of User Rights.....	46
Committee for Client Support and Satisfaction (CCSS)	47
Human Resources Management	48
Hiring and Staffing Changes	48
Human Resources Staffing Levels.....	48
Policy and Procedure Development.....	48
Performance Management	49
Professional Development and Training	50
Employee Complaints Process	51
Employee Wellness Program.....	51
Employee Assistance Program	52
Wellness Committee	52
Volunteers.....	53
Information Technology, Information Security and Confidentiality Agreements	55
Building, Property, and Equipment Management	56
Maintenance, Repairs and Renovations.....	56
Building Security and Systems	57
Equipment Replacement.....	57
Financial Management	58
Grants.....	59
Bill 100	59
Maintien des actifs.....	59
Audit Results	59
Follow-up on Previous Audit Recommendations.....	59

Independent Auditor’s Report on Summary of Financial Statements	61
Summary Statement of Financial Position.....	62
Summary Revenues and Expenses.....	63
Code of Ethics.....	64
Elizabeth House Code of Ethics (Basics)	64
Introduction	64
Organizational Commitments	64
Ethical Standards.....	65
Respect for others.....	65
Professionalism and Objectivity	65
Conflict of Interest	66
Confidentiality and Privacy.....	66
Parental Responsibility and the Importance of Family	66
Client Needs and Development.....	66
Application of the Code of Ethics	67
Avoiding Conflicts of Interest.....	67
Reporting Conflicts of Interest.....	67
Investigating Conflicts of Interest.....	67
Disciplinary procedures	68
Integration of the Code of Ethics	68

NOTE:

Please see Part 1 of EH Annual Report 2013-2014 for pages 6 through 32.

Strategic Planning

New Strategic Plan (2014-2017)

The mandate of the Strategic Planning Committee, in collaboration with the Executive Director, is to define and oversee the strategic planning process with the aim of producing a flexible, responsive plan to meet the 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 (DPRS).

The process involved extensive consultation with staff, the Board of Directors, current and former clients, and external partners and stakeholders. Consultation was carried out in two ways: through live discussion with internal stakeholders and through a confidential survey distributed to both internal stakeholders and targeted external stakeholder groups. A review of the feedback on the internal and external factors that affect the organization were examined and revealed four predominant themes:

1. Under the clinical umbrella: the need for access to fathers' programs, for measurable outcomes, for better assistance in cases of clients with mental health issues, and for standardization of programming.
2. Offsetting insufficient government funding through focused fundraising strategies and by exploring new avenues to raise awareness and funds by the Elizabeth House Foundation.
3. Consideration of alternate locations for Elizabeth House in view of inadequate facilities for existing programs, the unknown impact on the neighborhood of the new MUHC super hospital, and future development of services offered to clients.
4. The need for improvement of French-language skills among staff for full engagement in healthcare sector activities and opportunities.



Objectives for 2014-2015 include:

- Completing and approving the new Strategic Plan in early fall 2014;
- Mobilizing the management team to develop an action plan;
- Communicating the new strategic plan to stakeholders as part of a two-way communication process;
- Incorporating strategic goals and timeframes into annual operating objectives and into the Elizabeth House Improvement Plan (EHIP).

Partnership and Collaboration

Elizabeth House values collaboration and continues to work in partnership with other organizations in the Health and Social Service network and the Montréal community to ensure a range of complementary services for our clients, to promote clear and ongoing 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.

The objective for 2014-2015 will be to continue identifying and developing new opportunities for partnerships with organizations and specialized resources that facilitate our work with young families in difficulty.

Partnerships

CSSS Cavendish	Les Maisons Transitionnelles O3 On Our Own
CSSS Sud-ouest Verdun	McGill University Oral Health Centre
Batshaw Youth and Family Centres	Trinity Memorial Church
English Montréal School Board	Unitarian Church of Montréal
Elizabeth House Foundation	



Collaborative Relationships

Aide Juridique Sud-Ouest de Montréal	LaSalle College
AIDS Community Care Montréal	Maison Bleue
Avenir d'enfants	Maison Jean Lapointe
Carrefour Jeunesse-Emploi Notre-Dame de Grâce	Mackay Centre
CCS-Catholic Community Services	MAP-Mères avec Pouvoir
CDN-NDG Public Library	McGill University School of Social Work
Centre Emploi Québec	Montréal Children's Hospital Adolescent Clinic
Centre for Literacy of Québec	Montréal Diet Dispensary
Centre Jeunesse de la Montérégie	Montréal Museum of Fine Arts
Centre Jeunesse de l'Outaouais	Montréal Public Health Department
Centre Jeunesse de Montréal	Mosaik Family Resource Centre
Champlain College Saint Lambert/Longueuil	Native Women's Shelter
Champlain College Lennoxville	Notre-Dame de Grâce Community Council
CLSC Dorval-Lachine	Pointe Saint-Charles Community Clinic
CLSC Lac St. Louis	Regroupement pour la Valorisation de la Paternité
CLSC Lasalle	Royal Victoria Hospital
CLSC Notre-Dame de Grâce	Service de police de la Ville de Montréal, Poste de Quartier 11
CLSC Pierrefonds	Service de police de la Ville de Montréal, Poste de Quartier 16
CLSC René-Cassin	Shield of Athena
CLSC Saint-Hubert	Québec Writers' Federation
Comité Jeunesse NDG	Saint-Raymond Community Centre
CSSS Cavendish	Separated Fathers
CSSS Dorval-Lachine-Lasalle	Tandem Côte-des-Neiges/Notre-Dame de Grâce
CSSS Sud-Ouest-Verdun	Teen Haven
Concordia University	Ungava Tulattavik Health Centre
Dawson College	Vanier College
Douglas Hospital	Volunteer Bureau of Montréal
Ecole Rosalie Jetté	West Montreal Re-adaptation Centre
Foster Pavillion	Women Aware
Generations Foundation	Women on the Rise
Head and Hands	YWCA
Hippy-Quebec	
Kahnawake Community Services	
Lasalle Boys and Girls Club	



Participation on Advisory Tables and Tables de Concertation in Montréal

An ongoing objective is to raise our profile so that professionals and organizations are aware of the specialized services offered by Elizabeth House. Participation on advisory tables has also benefited Elizabeth House due to the exchange of best practice methods and ideas, networking and training opportunities. The organization committed resources to the following tables and/or committees whose work revolves around youth or providing services to families with children age 0 to 5:

Tables de Concertation

- Table de Concertation 0-5, CSSS Cavendish
- Table de Concertation Mères Adolescentes du Sous-Comité du RUIS
- Table SIPPE, CSSS Cavendish (Les services intégrés en périnatalité et petite enfance pour les familles vivant en contexte de vulnérabilité)

Advisory Tables & Committees

- Duff Court Project Coordination Committee
- Anglo Family Council
- My Family, My Community Coordination Committee
- 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 (ROÉJF)



Communication Plan/Public Relations

Elizabeth House continues to implement aspects of its Communication Plan. Objectives were broken down into two main areas for continual improvement: external and internal communication.

Highlights from 2013-2014 activities relate to the following elements of the plan:

Outreach Strategy

The Executive Director continued to promote the organization by speaking to potential funders at special events and meetings, and through fundraising campaign promotion on television. The Boards of Elizabeth House and the Foundation participated in planning an event to mark the 45th anniversary year and to raise our profile for referral and fundraising purposes. The organization increased contacts to recruit staff, interns, Board members and volunteers.

Two-Way Communication and Stakeholder Surveys

The Board of Directors developed a new electronic confidential stakeholder survey. Rich discussions were held with external stakeholders in an expanded and more formal process to inform the new Strategic Plan and excellent feedback was received.

Increased Exposure through Print, Electronic and Other Media

- **Website**

The website was updated to facilitate access to pertinent information for professionals, as well as potential clients and donors. This included a link to the Canada Helps donation button on the Elizabeth House Foundation website. Employees and volunteers were recruited from job postings and opportunities that were posted on the website. Pertinent reports such as the Accreditation Report and Annual Report are posted for public access.

- **TV Media**

A six-minute live TV interview was done to promote the direct mail fundraising campaign just prior to Christmas. Connections were made with Global TV news anchors and producers, who took a great interest in the deep roots of Elizabeth House in the community.

- **Social Media**

A Facebook page was established and Board Members were encouraged to join LinkedIn to expand our networks.

- **Presentations and Speaking Engagements**

A new presentation package was developed to highlight Elizabeth House services to professionals and potential sources of referral. Senior management gave several presentations. The Director of Professional and Rehabilitation Services and the Clinical Program Manager continued visiting professionals to highlight our specialized services. Presentations were given in May 2013 at a networking event organized by Engagement Jeunesse Montréal, and in March 2014 at Batshaw. Three presentations were made at speaking engagements in the Greater Montréal Area.

- **Internal Communication**

More information was disseminated regarding various topics throughout the organization to ensure that staff, interns and volunteers are aware of important activities, announcements, changes, organizational needs, risk and safety concerns.

Programs and Services Plan

The document describing Elizabeth House services and programs has been completed and will be put into circulation pending approval and translation. The document provides clear information to referring professionals on our programs and services, referral and assessment processes, program objectives, clinical interventions and group work, treatment philosophy and approach, and general and specific admission criteria.

Open House

A mini open house was held in June 2013 in conjunction with the Annual General Meeting to celebrate the opening of the Elizabeth House 45th anniversary year. It promoted our services and helped disseminate information about our work to referring professionals, community organizations and donors.

Creating Opportunities to Hear the Client Voice

Feedback was solicited from client representatives who pilot-tested the new client satisfaction survey before its launch. Client stakeholders had input into the Strategic Plan through the surveys that were carried out to inform the process.

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



Objectives for 2014-2015 include:

- Continuing work with a volunteer on developing a corporate strategy for fundraising
- Updating the Communication Plan
- 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

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 clients, visitors and personnel.

Incident, Accident and Risk Event Reporting

Data on incidents and accidents is submitted to the Ministry of Health and Social Services using a computer program referred to as *Système d'information sur la sécurité des soins et services*, or SSISS.

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 us 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	2013-2014	2012-2013	2011-2012
Accidents	25	10	9
Incidents	9	1	9
Events:			
Intervention-related	40	24	61
General risk	56	29	55
Infection Prevention and Control (IPAC)	28	17	26
Staff work accidents	4	0	7
Totals	162	81	167

From April 1, 2013 to March 31, 2014, a total of 162 incidents, accidents, and risk events were reported, double from the previous year. An increase of 150% in accidents is attributed to two factors: the high number of toddlers and preschool aged children admitted to the residence (7 out of 13 children), and the occupancy rate in the residence which was significantly higher this year.

Several events may not have been preventable as they related to age and stage, or the direct supervision of the children by their mothers; while other situations could have been anticipated. The marked increase in intervention-related reports was due to numerous incidents of co-sleeping (mother with infants) that required repeated intervention.

There were 6 accidents related to breach of client confidentiality compared to one last year. There were 2 medication errors compared to none last year, in addition to 4 incidents (near misses) due to client and staff medications found in the residence.

General risk events almost doubled, in spite of ongoing efforts to distinguish between maintenance requests or needs and actual risk-causing situations. As indicated above, many of the events categorized under general safety were generated by the need to maintain children's safety. The high number of toddlers and pre-school age children in the residence turned out to be useful as it generated discussion about childproofing, and areas of weakness that needed correcting.

The increase in Infection Prevention and Control (IPAC) events is attributed to the spread of illness between children through play and interaction, which is easier to control when dealing with infants. Contrary to last year, the incidents of gastroenteritis were less virulent and did not cause an outbreak within the residence.

There were 5 client falls compared to 4 the previous year. Eight (8) of the 9 falls (counting this year and last) are attributed to factors related to the clients themselves and not a result of inadequate prevention.

A total of 4 work accidents were reported, compared to none last year, 2 of which consisted of falls.



Integrated Risk Management and Quality Improvement Committee (IRMQIC)

The mandate of the Integrated Risk Management and Quality Improvement Committee (IRMQIC) is to oversee the management of risk within the organization, through the analysis of risk situations and the development of policies and procedures to reduce risk.

The IRMQIC met five times, while a subcommittee of staff representatives continued to meet 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 and team meetings, leading to more timely decisions and follow-up regarding risk situations. The committee was satisfied that Elizabeth House has what is needed in place to effectively manage risk.

The organization has maintained a heightened awareness of the importance of health and safety within the culture of the organization. Every year the staff and clients at Elizabeth House are strongly encouraged to receive a seasonal flu and pneumococcal vaccination which is offered free of charge at the CSSS Cavendish. This past year the CSSS Cavendish arranged a special vaccination clinic for Elizabeth House staff and clients at their new location at CLSC de Benny Farm.

A request was made to the Unitarian Church of Montréal in spring 2013 to use the church and its facilities as an alternate shelter, in the event of an emergency (e.g. gas leak) which would prevent the use of Trinity Memorial Church due to its close proximity. The board members of the church passed a resolution on January 15, 2014 agreeing to the request.

A fire prevention worker made an unannounced visit to the residence in April 2013 to conduct a fire safety inspection (subsequent to a consultation in fall 2012). Fire drills were carried out periodically throughout the year to ensure compliance with procedures, and to teach new residential clients how to exit the building safely.

Finger protectors were installed on doors during the month of May 2013 in key client traffic areas in the residence. More finger protectors are to be installed to prevent children from being injured. The verification of window safety in the residence has been added to a regular checklist of responsibilities that are carried out in the residence.

The Client Safety Plan document was updated to include measures or actions taken over the past few years to ensure client safety, and to promote client safety within the organization. The internal form used to report general risk events was further modified based on staff feedback, with the view of making it more user-friendly.

The Medication Policy was revised to ensure adherence to accreditation standards, and to clarify roles and responsibilities (including the responsibility of clients). The clinical staff participated in the review process through meetings held in July and August 2013.

Frameworks for Workplace Violence Prevention and Occupational Health and Safety were developed in consultation with the management team and the Wellness Committee, the SQVC and the Board. The Preventive Maintenance Policy and Procedure has been revised and now includes the inspection of certain second-hand appliances.

Internal training sessions were held with all staff to review policies and procedures pertaining to the following: Infection Prevention and Control protocols, Security Alert System, Hand and Respiratory Hygiene, Emergency Measures and Pandemic Plan, Functioning of the Emergency and Safety Equipment, Falls Prevention, WHMIS, Security of Information, and Client Confidentiality. An administrative agent attended a full-day training session at the Agence de la santé et des services sociaux in February 2014 to learn about the changes to the Ministry forms and to the SSSS program.

Other accomplishments overseen by the IRMOIC or its members:

- Monitored 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;
- Reviewed and approved the quarterly Incident, Accident and Event Report and their recommendations; and were satisfied that risks are being reported and follow-up has been done on reported risks;
- Preventative measures and proactive analyses were done to increase safety and reduce risk for clients, staff and the organization;
- Received and reviewed the client satisfaction survey results;
- Continued development of the Elizabeth House Improvement Plan and integration of the work into the activities of committee members;
- Presented regular reports to the Board of Directors on the activities related to risk management and quality improvement;
- Met regularly with clients in the Residential Program to conduct formal satisfaction surveys or exit interviews.



Risk management/quality improvement objectives for 2014-2015:

The Risk Management section of the Policy and Procedure Manual is to be reviewed, along with an update to the Health and Safety Binder. Some of the pieces of work (below) will be addressed through this process, with attention being given to risk management priorities.

- Follow up on the recommendations from the 2013-2014 annual Incident, Accident and Event Report.
- Renew training on incident, accident and event reporting.
- Continue training with clients and staff on the topics of falls prevention and hand and respiratory hygiene.
- Foster an environment of team work conducive to staff feeling comfortable reporting risk situations and finding solutions to prevent risk.
- Revise the policy on Incidents, Accidents and Events, Reporting, Recording and Monitoring.

- Complete procedures for the management of extreme heat advisories, based on guidelines from the Agence and Public Health Canada.
- Finalize guidelines for integration to Path/Track, for client orientation, building and general safety.
- Revise and shorten sections of the evacuation plan for greater simplicity and clarity.
- Review the Security of Information Policy.
- Finalize the draft Isolation Procedure.
- Modify procedures in the Emergency Measures Binder related to power failures, including the notification of the Coordinator, Administrative & Auxiliary Services (CAAS) during a prolonged power failure, as it affects the building and property, information technology, and safety and security.
- Modify the Work Accident Event Form to include workplace violence/harassment events.
- Expand the Client Orientation Program to include safety procedures, emergency evacuation and drills, transfer procedures from Path to Track, and the discharge and inventory processes.

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 (LSQCC) has the necessary resources to carry out the responsibilities of this office.

The committee is composed of five members – the Executive Director, LSQCC, and three Board members who do not work for or practice their profession in any of the Elizabeth House facilities. In 2013-2014, the committee functioned with the Executive Director, the LSQCC, and two board members.

The SQVC met four times. Members participated actively on Quality Improvement Committee (QIC), focusing on client satisfaction survey development.

Other work of the SQVC included:

- 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 to accept the report at the Annual General Meeting;
- Receiving and reviewing the 2013 Accreditation report;
- Monitoring the adherence to the new bylaw 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 clients in the Residential, Family Assistance and Education Programs;
- Renewing the mandate of the Local Service Quality and Complaints Commissioner for 2014-2015;
- Receiving satisfaction surveys and exit interviews results; reviewing the data being used to make improvements with the goal of increasing client satisfaction;
- Receiving and reviewing the accreditation report, annual operating objectives and the Elizabeth House Improvement Plan.

Quality Improvement Committee

The Quality Improvement Committee (QIC) consists of the Executive Director, the LSQCC, and a member of the SQVC.

The mandate of the QIC 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 QIC met five times and focused its work in the following areas:

- 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.
- Finalized the questions and format of the new client satisfaction survey and pilot tested it.

Objectives for the 2014-2015 year include:

- Articulating a policy and procedure for the gathering, analysis, feedback and use of satisfaction survey results;
- Developing more formal mechanisms for sharing feedback and ensuring follow-up by staff teams and managers;
- Finalizing the general client satisfaction survey based on client feedback over the test year;
- 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 four 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.

The Executive Director met with the residential clients 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 14 mothers this year, as compared to 33 mothers in 2012-2013.

The significant decrease can be attributed to two factors:

1. The new client satisfaction surveys were used this year and allowed clients more options and longer timeframes for completion. Quarterly meetings were not held with clients to administer the survey. These factors may have resulted in fewer responses and will be looked at more closely over the course of next year.
2. The average length of stay increased from 87 days in 2012-2013 to 130 days this year which resulted in fewer discharges. Interviews were often not possible when discharges were done on short notice.

The new survey was broken down in five areas: accessibility, care and services rendered, interpersonal relations, environment and material resources, and access to services.

Overall, clients expressed satisfaction with food services, infection prevention and control practices, the physical environment, safety and security, intake and discharge processes, the availability of services, to name a few. These results will be used as a benchmark for future satisfaction surveys. The survey highlighted some areas that require attention. These results have been given to the residential managers and the clinical team for follow up, suggestions for improvement and action.



Handling of Complaints and Promotion of User Rights

This is the sixth year that the handling of formal client complaints has been the exclusive mandate of the Local Service Quality and Complaints Commissioner (LSQCC). One complaint was processed and concluded, the same as last year. There were no corrective measures required and the complaint was resolved to the satisfaction of the client, the Commissioner, and the SQVC. The complaint was concluded within the prescribed 45-day time delay. No appeals were made to the Public Protector.

The LSQCC 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 SQVC, as well as to the Board of Directors, in conformity with the policy pertaining to the handling of client complaints.

The 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. As a result, clients continue to express that they are comfortable discussing their dissatisfactions directly with the staff or the supervisor involved.”

The activities of the LSQCC fell into three categories:

1. Promoting Client Rights

- Presentation to the Elizabeth House residents and their clients of the Education Program concerning the Youth Protection processes, and the rights and responsibilities of parents whose children are under Youth Protection were given by the LSQCC, in conjunction with staff members. Clients from the Family Assistance Program were invited to the presentations.
- The LSQCC participated in a 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

- 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 2014-2015 will be on:

- Repeating a series of presentations to promote the Client Complaints Procedure, the Code of Ethics, and client rights and responsibilities - with continued emphasis on including Family Assistance clients and creating links with the Committee for Client Support and Satisfaction (CCSS);
- Finalizing the revision to the Policy and Procedure on the handling of client complaints;
- Reviewing the bylaw regarding the safe provision of services to clients and make recommendations to bring it up-to-date;
- Evaluating whether the contract for the LSQCC should be modified and if so, make any required modifications to the contract.

Committee for Client Support and Satisfaction (CCSS)

Efforts were made to support the Committee for Client Support and Satisfaction (CCSS). The challenges that many current and ex-clients face, in addition to their young age, make it difficult for them to commit to organizing and participating in CCSS activities on a consistent basis.

The Resource Committee (RC) continues to support the activities of the CCSS and to help develop the capacity of committee members as the committee continues to grow. The RC includes an administrative technician, a third- year student intern (stagiaire) when available and a clinical educator who works closely with the members to coordinate meetings, and to stimulate and support clients in further developing the committee and its activities for the year.

Activities in 2013-2014 included:

- Participated in the Annual General Meeting and in the Open House and in speaking engagements to promote Elizabeth House and its services
- Promoted the revised “Young Parents’ Handbook”;
- Maintained an internet connection for the clients in the Residential Program as well as for the use of the Committee members;
- Completed the annual report and budget proposal.

Objectives for 2014-2015 include:

- Creating a link on the Elizabeth House website for users; creating a page on the website to highlight the goals and activities of the CCSS;
- 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;
- Providing feedback regarding client safety handbook;
- Developing a strategy to maintain membership and recruit new members; hold elections, as necessary;
- Participating in the Open House;
- 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.

Human Resources Management

Hiring and Staffing Changes

There were several employees added to the on-call list and one resignation of a full-time permanent employee who left to pursue a career in a chosen field of study.

Permanent educators who were on sick leave or maternity leave began returning to their positions throughout the year which lessened the void of experienced, senior staff in the residential program. Elizabeth House was fortunate to be able to rely on a number of on-call employees to fill the vacant positions. These educators rose to the challenge and together with the Clinical Program Manager are credited with providing support and consistency to clients so that the impact on them was minimized.

Staffing and client attendance in the Nursery program were reviewed and guidelines put in place to better manage resources.

Human Resources Staffing Levels

Elizabeth House operated with 20 permanent full-time and part-time employees or 16.59 full-time equivalent positions as compared to 19 and 16.44 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 labourers.

Employee Numbers and Staffing Levels	2013-2014		2012-2013	
	Number of Employees	Full Time Equivalent	Number of Employees	Full Time Equivalent
Management	2	2.00	2	2.00
Clinical	14	11.59	14	11.84
Administrative & Auxiliary	4	3.00	3	2.60
Total	20	16.59	19	16.44

Policy and Procedure Development

The management team worked together to develop or review several policies and procedures. Several new policies were drafted, including; on-call, transportation of confidential information. Numerous policies are under review or development and are expected to be completed in the coming year.

The Orientation Program was reworked. A package was developed to hand out to staff; a formal presentation was developed to orient staff on key areas; and the program was adapted to include orientation for student interns and volunteers. Staff was consulted on the new Occupational Health & Safety Framework and Workplace Violence Framework. Feedback was incorporated and these frameworks were submitted to the Board of Directors for final approval.

Following a recommendation from the Auditors, Human Resources began updating personnel files to contain basic employment information such as the pay rates in effect for each employee. Employment conditions are now signed by the employee and Human Resources as a record of approval.

Objectives for 2014-2015

- Extend the Orientation Program to include fathers and visitors; in the spirit of ongoing improvement, continue to develop orientation tools;
- Further develop the Employee Handbook;
- Establish a program to encourage staff to verify their payroll information and benefits at least annually;
- Develop a procedure for Human Resources to verify payroll information and benefits annually;
- Assess organizational needs, restructure administrative services, revise job descriptions and hire into any vacant positions;
- Begin to cross train employees to create backup supports for key functions such as payroll, bookkeeping, website maintenance, with a view to succession planning.

Performance Management

As part of its commitment to ongoing improvement, Elizabeth House continues to evaluate performance, provide feedback to employees and set performance objectives for the next period. This is expected to contribute to better collaboration and coordination 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 between supervisors and each employee. They are also conducted at the end of the probationary period for new employees. Replacement and on-call workers are included in the performance evaluation process.

In 2014-2015, objectives include revising the assessment tool with input from employees, management and the Board of Directors with a view to writing a formal policy on performance management.



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.

Staff members participated in the following external professional development and training activities in 2013-2014:

- Three-day training on Therapeutic Crisis Intervention given at Batshaw Youth and Family Centres;
- Grande Rencontre 2013 du Réseau PARcours, Pratiques d'accompagnement du raccrochage scolaire des 16-20 ans: Two-day conference given by the Université du Québec à Montréal Faculty of Social Work on the use of innovative approaches to support vulnerable youth through school;
- Batshaw's Multi-Disciplinary Council Professional Day;
- Training workshop on breastfeeding given by nurses from the CSSS Cavendish SIPPE team;
- The Fear of Fear: Understanding Anxiety/How Blue is Blue? Understanding Depression: Half-day conference given by clinical psychologist, Camillo Zacchia, on anxiety disorders, depression and interpersonal problems;
- Full-day training given by the Agence de la santé et des services sociaux on the new Ministry forms (AH-223) for recording accidents and incidents, and the changes to SSSS (système d'information sur la sécurité des soins et services);
- La Su-Père Conférence: Annual National Conference on the Topic of Paternity in Québec, organized by the Regroupement pour la Valorisation de la Paternité;
- Et qu'en est-il du décrochage scolaire des filles?: Forum on the topic of school girl drop-out rates in Québec, organized by Relais-femmes;
- English Speaking at Risk Youth (16-24) Roundtable Discussion, organized by the Anglo Family Council.
- Jeux d'enfants: training on child stimulation based on the Abecedarian Project.

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
- Overview of Emergency Measures and Pandemic Plan
- Emergency Evacuation and Fire Preparedness Program
- Identification and functioning of Emergency and Safety Equipment
- Security of Information
- Client Confidentiality
- Code of Ethics and Ethical Dilemmas

Employee Complaints Process

Three 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.

Early in the year, employees gathered to discuss the results of the Worklife Pulse Survey and the Safety Culture Survey. Management incorporated the feedback into the Elizabeth House Improvement Plan.

Employee wellness was the subject of management and team meetings. Workloads were reviewed and priorities were established in an effort to maintain balance, reduce stress in the work environment and support everyone to work in a healthy manner. Secretarial and administrative support for clinical manager was identified as a priority in the administrative restructuring.

Discussions also took place over the year regarding vulnerability due to the small size of the organization along with the need to look closely at succession planning. A decision was made to cross train administrative staff to lessen the impact of personnel changes, to offer employees to develop new skills and to provide enhanced job satisfaction.

Opportunities were found to include staff on committees and/or to hear staff perspectives. The Wellness Committee was active in planning activities and providing information to staff on health-related topics. Staff received written recognition for going above and beyond the call of duty, for stepping up in crisis situations, for coming up with new and pertinent ideas, for facilitating communication and for their contribution to the outstanding accreditation results.

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 as a result of Bill 100. Staff was recognized in ways that were meaningful to them and the Employee Assistance Program was renewed.

Air purifiers were purchased to make the work and client living environments more comfortable.

Another review of the cleaning products was carried out and certain ones were changed to accommodate staff health while still meeting infection prevention and control guidelines.

Objectives for 2014-2015 include:

- Continuing to discuss and formalize ways to recognize staff;
- Continuing to cross train staff to ensure coverage of important dossiers;
- Further developing the Wellness Committee and Program
- Finding creative ways to provide professional development to all staff that is pertinent and affordable.

Volunteers

In 2013-2014, 86 volunteers recorded 4127.5 hours of critical work and support to the organization and its clients. Based on a 35 hour work week, these volunteer hours represented the work of an additional 2.26 full time equivalent positions.

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, attend school 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 a break. 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.

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. Food, milk products, baby accessories, toddler dishes, storage containers, pajamas, yoga classes, baby and toddler furniture, and books are just some of the items we received this year.

- Roslyn School staff, students, parents and volunteers
- The Mile End Mission
- Queen of Angel's Academy
- The Surrey Knitters
- Glasspoole Crafters
- Mount Royal United Church Youth Group and Sunday School
- Generations Foundation
- Action Communautaire
- Trudeau Corporation
- NDG Food Depot
- Women who have mobilized their networks to support Elizabeth House – Deija Douglas, Susan Webber, Carolyn Bouchard-MacNeil, Jennifer Heinegg, Christine Homsey, Feyzeh Abdelmoumen





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. Our thanks go out to the following companies for their philanthropic commitments:

- Deloitte – employees volunteered their services to paint the remaining client living areas and organize storage space as part of their Impact Day.
- Fauteaux, Bruno, Bussière, Leewarden (FBBL) – employees volunteered to clean the backyard, do landscaping and create a vegetable garden for clients. New perennials were added to the gardens providing color and a nice seating area for all.
- Sienna Construction – provided consultation services regarding building issues and completed the repairs to a vacant client bedroom so that it could be assigned.
- Merck - provided general clean up of storage and living areas as well as printed and bound the Elizabeth House Cookbook for distribution
- MABE for the donation of an extra large, state-of-the-art fridge.

The final group of volunteers is the dedicated and compassionate men and women on the Board of Directors of Elizabeth House and the 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 2014-2015 include:

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

Information Technology, Information Security and Confidentiality Agreements

Elizabeth House does not have on-site IT support and must hire the services of a skilled technician to maintain the internal computer network, PCs and associated equipment. Costs continue to rise but no additional funding is available to help offset these costs in a small organization. The major issues this year revolved around not having stable internet access following the installation of the new fibre optic cabling. There was a reported case of suspicious activity on one computer which was reformatted immediately and has not recurred. The back-up drive was replaced with a temporary one while measures were taken to replace it with a new one.

The following technology-related equipment was purchased:

- 3 desktop computers;
- Back up drive and new back up tapes
- 2 printers

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.

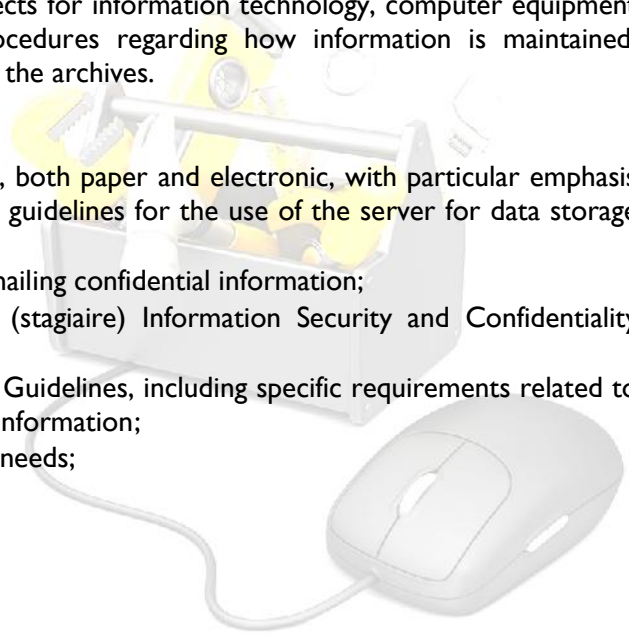
Information Security and Confidentiality Agreements were signed by all staff, board members, interns (stagiaires), volunteers and consultants. Information sheets and posters were circulated at all levels of the organization and were integrated into the orientation process for individuals joining the organization.

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 CGGAI), taking into consideration our unique circumstances: 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 2014-2015 include:

- Developing a plan for the management of data, both paper and electronic, with particular emphasis on the partitioning of the server; develop new guidelines for the use of the server for data storage and retrieval;
- Finalizing the guidelines for transporting and emailing confidential information;
- Signing new employee, volunteer and intern (stagiaire) Information Security and Confidentiality Agreements;
- Updating Information Security Procedures and Guidelines, including specific requirements related to the transportation and emailing of confidential information;
- Continuing to evaluate hardware and software needs;
- Replace the server.



Building, Property, and Equipment Management

Maintenance, Repairs and Renovations

The results of a building inspection were used to establish the Repair and Renovation Plan for the next five years. Plans are in place for preventative and routine maintenance of equipment, building systems and property. The auxiliary services request form was revamped to include maintenance and housekeeping needs. Additional staff was needed during communicable disease events to manage cleaning and disinfection.

Elizabeth House continued to make improvements to the client living areas in 2013-2014.

- The kitchen range hood exhaust fan was overhauled.
- Heating and electricity costs were analyzed and the process to consult experts on a replacement heating system with on more efficient and less costly was begun.
- The emergency fire escape stairs were sanded blasted and re-welded.
- Child safety measures were assessed and safety features continued to be implemented such as finger protectors on doors.
- Painting was done in several bedrooms, the baby kitchen and the second semi-supervised/transition apartment.
- Leaks and plumbing issues were addressed; water damage was repaired.
- The dishwasher was repaired several times and is scheduled to be replaced.
- Ventilation fans were installed in the washrooms.

Objectives for 2014-2015:

- Look into replacing the heating system and the addition of air conditioning throughout the building.
- 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 and this information was added to the orientation programs.

Equipment Replacement

Elizabeth House has spent significant funds 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 following technology-related equipment was purchased:

- 3 desktop computers;
- Back up drive and new back up tapes
- 2 printers

The following equipment was also replaced:

- Photocopier
- Mattresses, box springs, protectors and linens
- Toys and equipment for infant stimulation
- Replacement safety gates
- High chairs and playpens
- Small appliances
- Air purifiers

Objectives for 2014-2015 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 remaining special non-recurrent *maintain des actifs* budget allocation.

Financial Management

Management's Report

The Elizabeth House financial statements were completed by management which is responsible for their preparation and accurate presentation, including estimates and significant judgments.

This responsibility includes the selection of appropriate accounting policies which comply with Canadian Accounting Standards for the public sector as well as the features provided in the Financial Management Manual decreed under section 477 of the Act Respecting Health and Social Services. The financial information found elsewhere in the Annual Management Report is consistent with the information given in the financial statements.

To fulfill its responsibilities, management maintains a system of internal controls which it considers necessary. It provides reasonable assurance that assets are protected, that transactions are properly recorded in a timely fashion, that they are duly approved and that they are able to produce reliable financial statements.

The management of Elizabeth House acknowledges that it has the responsibility to manage its business in accordance with the laws and regulations that govern it.

The Board of Directors oversees the way in which management fulfills its responsibilities regarding financial reporting and it has approved the financial statements. The Board is assisted in its responsibilities by the Audit Committee. This Committee meets with management and the auditors, reviews the financial statements, and recommends their approval to the Board of Directors.

The financial statements have been audited by the duly authorized CPA firm Richter LLP, in accordance with auditing standards generally recognized by Canada. Its report outlines the nature and the extent of this audit as well as its opinion. The firm, Richter LLP may, without restriction, meet with the Audit Committee to discuss anything that concerns its audit.


Linda Schachtler
Executive Director


Joanna Giammaria
Coordinator, Administrative & Auxiliary Services

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 \$40,522 for clinical programs and activities beyond what is provided for in the annual operating budget allocated by the Ministry of Health and Social Services. The Foundation's granting capacity was significantly less than in years past.

Bill 100

As of September 2010, the Ministry of Health and Social Services put measures in place to obtain budgetary equilibrium and reduce the debt in the réseau by 2014. Establishments have reduced administrative and information systems expenses, as well as realized reductions through the non-replacement of retirees, reductions in training, publicity and travel expenses. Elizabeth House staff has made every effort possible to reduce costs by changing suppliers and negotiating special rates. Since 2010, Elizabeth House has received a cumulative reduction of \$50,599.

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 \$1,520 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 well managed. There were no unresolved differences of opinion with management on financial accounting and reporting matters. The 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 balanced budget and was able to maintain the level of service to clients with grants from the Elizabeth House Foundation totaling \$40,522.

Follow-up on Previous Audit Recommendations

Improvements and corrections were made in 2013-2014, based on the recommendations made by the auditors in the previous year.

The accounting team 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. Management further restricted access to the server in order to reduce the risk of theft and sabotage to the accounting system.

The Executive Director met regularly with the accounting team. The Treasurer and CAAS met regularly to review procedures, financial reports, accounts payable, bank statements and checks issued.

Human Resources began updating personnel files to contain basic employment information such as the pay rates in effect for each employee. Employment conditions are now signed by the employee and Human Resources as a record of approval.

Objectives for 2014-2015:

- Complete a second revision of the Chart of accounts based on feedback from the Board regarding what it would like in terms of the frequency, detail and format of financial reports.
- Continue to formalize accounting procedures to complete the accounting manual;
- Secure funding from the Foundation or other sources to complement the budget received.
- Develop a process to verify and update payroll information annually.
- Gather feedback from the Board to improve the budget projection process.
- Continue to make adjustments to the accounting practices to accommodate the new harmonization requirement.



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, 2014 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, 2014. We expressed a qualified audit opinion on those financial statements in our report dated June 13, 2014 (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 3.

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, 2014 are a fair summary of those financial statements, in accordance with the applied criteria described in the summary of significant accounting policies in Note 3. 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, 2014

The misstatement of the audited financial statements is described in our qualified audit opinion in our report dated June 13, 2014. 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, 2014 and the results of its operations for the year then ended in accordance with Canadian public sector accounting standards.

CPA Auditor, CA, Public Accountancy Permit No.A125137
Montréal, Québec

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

Maison Elizabeth House

Summary Statement of Financial Position
as at March 31, 2014

Financial Assets	Operating Fund	
	2014	2013
	\$	\$
Cash	75,639	82,096
Term Deposits	187,441	186,694
Due from Other Funds	9,959	9,959
Amounts due from Elizabeth House Foundation	0	0
Accounts Receivable	24,764	39,873
Due from Agence de la santé et des services sociaux	150,583	152,051
	448,386	470,673
Liabilities		
Accounts Payable	339,504	364,028
Due from Other Funds	0	0
Deferred revenues		
Agence de la santé et des services sociaux	7,427	6,686
Other	15,296	13,416
	362,227	384,130
Net Financial assets	86,159	86,543
Property and equipment	0	0
Prepaid expense	1,127	743
Accumulated Surplus	87,286	87,286
Accumulated surplus (operating fund/ Fund balance (capital assets fund)		
Unliberated	56,288	56,288
Liberated	30,998	30,998
	87,286	87,286

Maison Elizabeth House

Summary Revenues and Expenses
for the Year Ended March 31, 2014

Revenues	Operating Fund	
	2014	2013
	\$	\$
Agence de la santé et des services sociaux	1,394,316	1,366,352
Contributions from Elizabeth House Foundation	40,522	51,750
Other Revenues	2,730	20,626
	1,437,568	1,438,728
Expenses		
Residential Services	608,352	620,074
Administration expenses	350,749	361,332
External Services – Day Centre	203,491	198,812
External Services – Family Assistance	96,973	80,189
Maintenance and repairs	51,640	53,241
Food Services	25,479	18,197
Housekeeping	18,646	16,540
Building Operations	38,940	34,956
Information Systems	30,232	25,645
Other	13,066	44,782
	1,437,568	1,453,768
Ancillary activities		
Revenues	5,710	5,657
Salaries and employee benefits	(5,710)	(5,657)
Excess (deficiency) of the ancillary activities	0	0
Excess (deficiency) of revenues over expenses	0	(15,040)

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.





**Elizabeth House
Annual Report 2013-2014**