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## Communicating & Understanding this Report

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This report is like an evaluation. It talks about what we do and how we do it. It also demonstrates our achievements and our areas needing improvements.

Kootenay Society for Community Living (KSCL) shares this report with all our Stakeholders, via Board Meeting, AGM, Newsletter, Staff Meetings and KSCL website, as well as at both internal and external meetings of Individuals.



## CARF Accredited Programs and Services

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KSCL received a three-year CARF accreditation in the following service areas, including employment services, community housing, community integration, employee development, employment planning, host family/shared living, child and youth services, and governance standards.

CARF identified many strengths within KSCL:

- KSCL has many long-term staff, which has created a strong, stable, and positive workplace with a highly committed team.
- The organization has a clear and well-developed succession plan for both short-term absences and long-term leadership transitions.
- Individuals served are well supported in understanding their rights through accessible and engaging methods, including video resources.
- KSCL uses strong performance measurement and quality improvement systems that are actively used to improve services.
- The organization is successful in recruiting, training, and retaining staff, with competency-based training and strong staff support.
- The board of directors is engaged, transparent, and committed to KSCL's mission.
- Leadership demonstrates strong care and respect for staff, with many opportunities for growth and long-term career development within the organization.
- KSCL develops meaningful and creative services that support individuals in the community and is highly valued by stakeholders.
- Communication with individuals served families, staff, and home share providers is strong, respectful, and responsive.
- Assessment tools are detailed and effectively used to develop personalized support plans and guide staff training.
- KSCL actively engages with the community, supporting inclusion through events, partnerships, and employment opportunities.

- Residential and home share teams are dedicated and supported, including added leadership presence in rural areas.
- Employment services are strong and person-centered, focusing on individual interests and building successful community job placements.
- Employers report high satisfaction with KSCL services and strong support for individuals in the workplace.
- Staff are committed, respectful, and proud of their work, contributing to a positive organizational culture.

Overall, KSCL demonstrated a high level of compliance across all standards. The organization is to be congratulated on this achievement.



## Where we are and where we plan to be

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KSCL continuously seeks input & feedback from our stakeholders to make changes and improvements upon the services we deliver. As well, KSCL services are geared to enable the persons served to make choices and be included in their community. Here are the areas we focused on in 2025.

- Completion of Eagle Estates – vacancy April 1, 2026.
- Increase training opportunities for front-line staff in regard to stress management, conflict resolution, mental health.
- Keep stakeholders and followers on social media updated on events and success stories of KSCL and those we serve.
- Review housing funding and available land for a new housing development in Nelson
- Hold sessions with all stakeholders to develop and implement a new Strategic Plan for 2026-2029
- Implement a flex position in Community Inclusion programs to allow for more programming at different times
- Reorganized organizational structure to implement change from Senior Residential Care Workers to Program/Residential Coordinators (PC/RC). Also implemented 2 Program Managers who oversee the PC/RC positions by Residential & CI/Homeshare Programs.

# Financial

Revenue			Expenses		
	2025	2024		2025	2024
CLBC & MCFD	94.5%	94.3%	Wages & Benefits	85.8%	85.7%
Rent & Support	3.7%	3.5%	Program Costs	0.36%	0.3%
BCHMC	0.1%	0.1%	Operating costs	9.7%	9.5%
Other	1.7%	2.1%	Other	4.1%	4.5%

## Demographics of KSCL

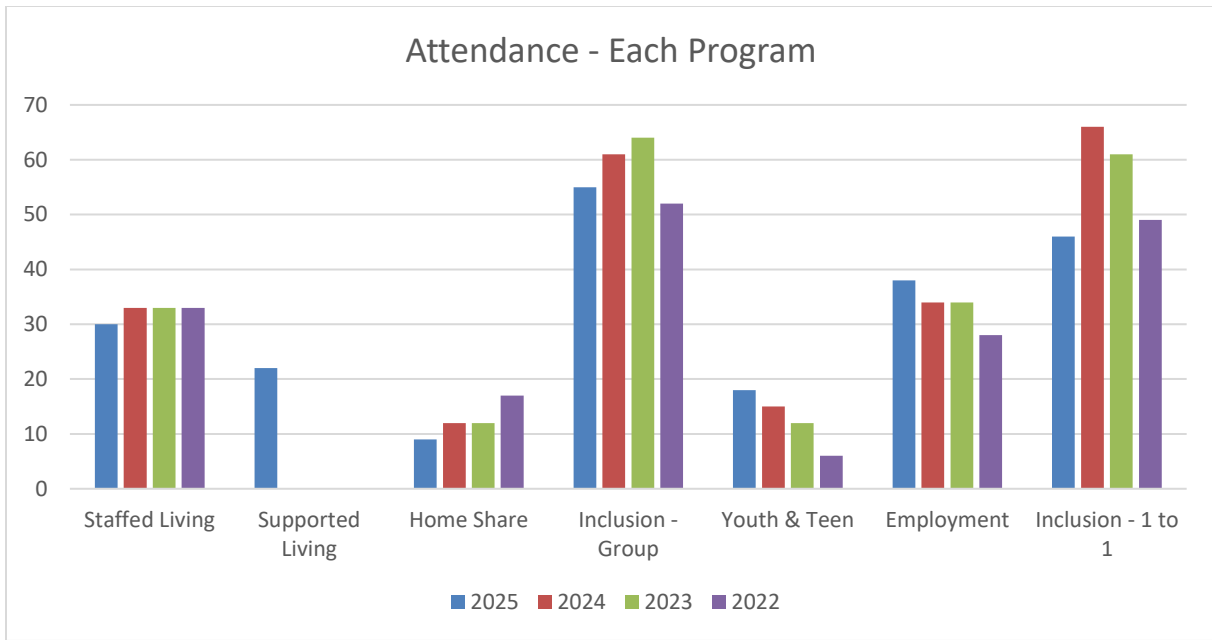
KSCL provides support to a diverse population of individuals. KSCL provides services to individuals who meet CLBC’s identified criteria of having a developmental delay (IQ of 70 or less) or youth referred by MCFD. KSCL is on CLBC’s approved bidder’s list to provide services under CLBC’s Personalized Supports Initiative (PSI). This provides services for individuals with a diagnosis of autism spectrum disorder (ASD) or Fetal Alcohol Spectrum Disorder (FASD) without a developmental delay. *NB (there is a wide range of ability and severity of symptoms with any of the identified diagnoses).*

While many of the people receiving services from KSCL recognize themselves as English Canadian, we also support people whose heritage is recorded as Russian, First Nations, Metis, Scottish, Dutch, German, and Scandinavian. KSCL values the diversity within our community which is reflective of our society. We appreciate and encourage the perspectives of all persons served, stakeholders, caregivers, and community members. KSCL aims to deliver services that are free of discrimination and harassment and accessible to those in need.

### Programs Accessed by Individuals in 2025:

As of December 31, 2025, we had **218 enrolments** in a variety of programs. However, some individuals are in more than one program and counted in each, therefore KSCL is serving **127** individuals. There was growth in the Staffed Living; Youth/Teen and Employment programs. Two catalysts of the changes were Community Inclusion 1 to 1 program in Creston was closed, a new Staffed Living started in 2025 at Eagle Home, and Supported Living is now separated.

Staffed Living	30	Supported Living	22	Home Share	9
Inclusion-Group	55	Youth/Teen	18	Employment	38
Inclusion - 1 to 1	46				



### Individuals - Exit Summary:

In 2025, KSCL supported 28 service exits across Castlegar, Nelson, and Creston. Exits occurred across multiple program areas, often due to changes in individual needs, service suitability, transitions to independence, or relocation.

#### Summary by program:

- Home Share (3 exits):**  
 Individuals transitioned to staffed residential supports or moved into independent living within their communities.
- Community-Based 1:1 (9 exits):**  
 In Castlegar, one individual discontinued service due to suitability. In Creston, eight individuals exited following KSCL giving notice on the local contract.
- Community-Based Adult Group (1 exit):**  
 One individual left service after moving to another community.
- Staffed Living (0 exits):**  
 No exits occurred from staffed residential programs.
- Employment (3 exits):**  
 Exits were due to employment not being a good fit, one youth aging out and continuing independently, and one individual choosing not to continue working.
- Youth Services (12 exits):**  
 In Castlegar, exits were primarily due to service suitability or individuals not proceeding after intake. In Nelson, exits were due to aging out, relocation, or service suitability.

Overall, most exits were related to transitions in personal circumstances, service fit, or life stage changes, with no exits from staffed living services during the year. KSCL will continue to

investigate opportunities for home share placements in our communities, as well as to increase flexibility with scheduling of programs to reduce barriers.

## KSCL Critical/Reportable Incident Review - 2025

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### Critical Incidents

All critical incidents are reviewed annually to identify trends and reduce recurrence where possible.

#### Definition

A critical incident is a serious or unusual event involving individuals receiving services. Incidents are reportable to KSCL, Interior Health, Community Living BC (CLBC), Ministry of Children and Family Development (MCFD), families, and relevant health professionals.

Critical incidents include aggression, abuse, falls requiring medical attention, medication errors, unexpected illness, choking, death, missing persons, and other serious events requiring intervention.

#### 2025 Overview

Total Critical Incidents in 2025: 38 (same as 2024)

Category	Number of Incidents
Unexpected Illness	13
Aggressive/Unusual Behaviour	10
Falls	6
Physical Abuse	3
Emotional Abuse	3
Attempted Suicide	1
Neglect	1
Restricted Practice	1
<b>TOTAL</b>	<b>38</b>

### Reportable Events

KSCL uses ShareVision to track reportable events including minor incidents, behaviours, and medication errors. These are reviewed to identify trends and improve supports.

2025 Reportable Events: 525 (down from 593 in 2024)

**Medication Errors**

2025 Medication Errors: 69 (down from 72 in 2024)

**Recommendations for 2026**

- Continue collaboration with HSCL, DDMHS, Pivot Point Behaviour Consultants, and medical professionals.
- Ensure safe work procedures are in place for individuals identified as high risk.
- Maintain and expand staff training (SIVA, autism support, dual diagnosis, behaviour strategies).
- Strengthen monthly site meetings to review incidents and prevention strategies.
- Continue professional in-services as needed.
- Maintain enhanced onboarding and extended orientation for new staff.

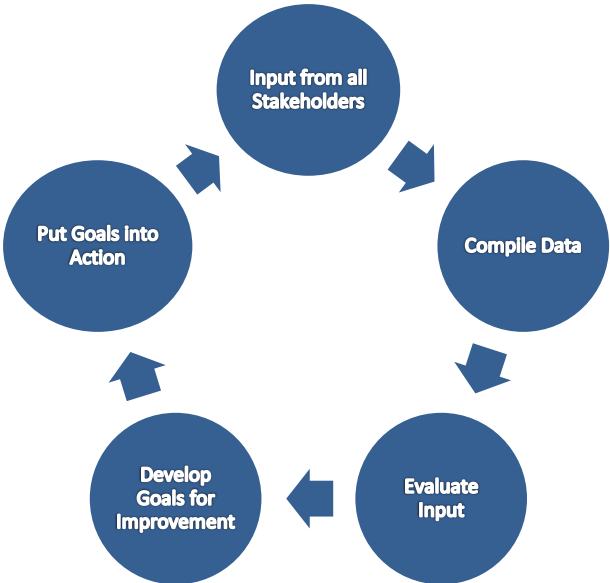
**Summary**

Incident reporting supports ongoing quality improvement, risk reduction, and enhanced care planning. External partners are engaged as needed to support complex cases and ensure safe, person-centred care.

## KSCL Data Collection & Outcomes

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The Data is collected through satisfaction surveys, Individual Support Plan (ISP) stakeholder feedback and ongoing file reviews. It is then analyzed using strategic planning, SWOT analysis, goal tracking to set and monitor progress.



## Data Integrity of the Outcome System

KSCL has a reliable system for collecting, analyzing, and summarizing data, along with an action plan for using that data to improve services. We ensure our data meets the following standards:

- **Reliability** – Data is collected consistently and can be reproduced over time.
- **Validity** – Data accurately measures what it is intended to measure.
- **Completeness** – Data is as thorough and complete as possible.
- **Accuracy** – Data is recorded correctly and regularly reviewed for errors.

## Program Logic Models & Outcome Grids

The Program Logic Model (PLM) acts as a roadmap to show how KSCL measures success for each program and goal. It outlines:

- The program plan
- Expected outcomes
- How those outcomes are measured

Each program is evaluated using six key performance indicators:

1. **Effectiveness** – Measures the impact on individuals
2. **Efficiency** – Assesses how well the program is managed
3. **Service Access** – Evaluates how accessible services are
4. **Stakeholder Feedback/Satisfaction** – Gathers input from participants and stakeholders
5. **Extenuating and Influencing Factors** – Considers external factors that may affect outcomes
6. **Business/Administrative Functions** – Reviews operational and administrative performance

## Quality of Life Domains

Whenever possible, program objectives are connected to the eight Quality of Life Domains, which guide goal setting and outcomes.

Each individual supported by KSCL chooses their own goals and desired outcomes within their program. These domains help define what a meaningful and fulfilling life looks like, both for individuals and for the community.

The eight domains are:

1. **Emotional Well-being** – Feeling happy and safe
2. **Physical Well-being** – Maintaining the best possible health
3. **Material Well-being** – Managing finances and personal belongings
4. **Personal Development** – Learning new skills and increasing independence
5. **Self-Determination** – Making personal choices and setting goals

6. **Interpersonal Relationships** – Having supportive relationships (emotional, physical, financial)
7. **Social Inclusion** – Participating in and being part of the community
8. **Rights** – Having and exercising personal rights

## KSCL Services & Programs – 2025 Outcomes

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KSCL has 7 types of Programs that we gather Outcomes data for:

1. **Staffed Living**
2. **Supported Living**
3. **Home Share**
4. **Community Inclusion – Adult Group**
5. **Community Inclusion – Adult 1 to 1**
6. **Youth**
7. **Employment**

### Staffed Living

KSCL provides staffed residential services across three West Kootenay communities serving 30 Individuals:

- **Castlegar:** 5 programs serving 21 individuals
- **Nelson:** 1 program serving 4 individuals
- **Grand Forks:** 1 program serving 5 individuals

#### Outcomes Summary (2025)

Category	Objective	Goal	Actual
Effectiveness	Physical wellbeing & quality of life	100%	70%
	Relationships & community inclusion	100%	72%
	Self-determination	100%	73%
	Life & self-care skills	100%	57%
Efficiency	Full program capacity	100%	100%
Access	Community participation	100%	84%
	Timely service access	100%	100%

#### Conclusion

- **2024 Average: 73% 2025 Average: 79% Change: +6%**
- Opening of **Eagle House**
- Transition of 29th Street from Staffed Living to Supported Living

## Home Share

- January 2025: 9 providers supporting 10 individuals
- December 2025: 8 providers supporting 9 individuals

### Outcomes Summary (2025)

Category	Objective	Goal	Actual
Effectiveness	Physical wellbeing & quality of life	100%	68%
	Relationships & community inclusion	100%	47%
	Self-determination	100%	N/A
	Life & self-care skills	100%	54%
Efficiency	Provider recruitment	2	66%
Access	Timely provider approval	100%	100%

### Conclusion

- **2024 Average: 58.5% 2025 Average: 67% Change: +8.5%**
- New Home Share Manager hired in June 2025, supporting renewed growth and stability.

## Supported Living

- **Castlegar:**
  - 29th Street House (4 individuals)
  - Community Options (7 individuals)
- **Nelson:**
  - CD House (5 individuals)
  - Bigby (6 individuals)

**Total Individuals Served: 22**

### Outcomes Summary (2025)

Category	Objective	Goal	Actual
Effectiveness	Physical wellbeing & quality of life	100%	55%
	Relationships & community inclusion	100%	12%
	Self-determination	100%	N/A
	Life & self-care skills	100%	48%
Efficiency	Full capacity	100%	87.5%
Access	Community participation	100%	12%
	Timely service access	100%	100%

## Conclusion

- **2025 Average:** 52%
- First year tracking Supported Living separately following CLBC program classification changes.

## Community Inclusion – Adult 1 to 1

Services provided across Castlegar, Nelson, and Creston.

### Outcomes Summary (2025)

Category	Objective	Goal	Actual
Effectiveness	Physical wellbeing & quality of life	100%	62%
	Relationships & community inclusion	100%	52.5%
	Self-determination	100%	57%
	Life & self-care skills	100%	66%
Efficiency	Timely intake	100%	100%
Access	Community participation	100%	59%

## Conclusion

- **2025 Average:** 66% **Change from 2024:** +4%
- Strengthening individualized goal setting aligned with personal preferences.

## Community Inclusion – Adult Group

Two Adult Day Programs: Castlegar/Nelson

### Outcomes Summary (2025)

Category	Objective	Goal	Actual
Effectiveness	Quality of life	100%	70.5%
	Relationships & inclusion	100%	55.5%
	Self-determination	100%	31%
	Life & self-care skills	100%	66%
Efficiency	Full capacity	100%	100%
Access	Community participation	100%	100%

## Conclusion

- **2025 Average:** 70.5% **Change from 2024:** +4.5%

# Employment

- One program operating in **Castlegar (EmployME)**
- Program restructuring occurred in 2025 per CLBC direction

## Outcomes Summary (2025)

Category	Objective	Goal	Actual
Effectiveness	Quality of life	100%	31%
	Employment within 6 months	100%	16%
	Skill development	100%	52.5%
Efficiency	Staff training	100%	100%
	Employment retention (3+ months)	100%	100%
Access	Employer engagement	4 businesses	1

## Conclusion

- Significant structural changes impacted outcomes
- Employment supports in Nelson transitioned to Community Inclusion programs

# Youth

Two programs: Castlegar/Nelson

## Outcomes Summary (2025)

Category	Objective	Goal	Actual
Effectiveness	Physical wellbeing	100%	N/A
	Relationships & inclusion	100%	25%
	Self-determination	100%	N/A
	Life & self-care skills	100%	50%
Efficiency	Program capacity	≥ 0	0
Access	Community participation	100%	25%

## Conclusion

- 11 referrals across programs in 2025
- High exit rate, particularly in Castlegar
- Limited engagement in goal setting
- Participation remains the primary focus for program success

## Overall Observations from all Programs

- Most programs demonstrated **modest improvement from 2024 to 2025**
- Strong performance in:
  - **Service access and intake timelines**
  - **Program capacity utilization**
- Ongoing challenges:
  - Achieving **self-determination goals**
  - Increasing **community inclusion outcomes**
  - Strengthening **employment outcomes**

## Satisfaction Surveys – 2025 Results

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Surveys were distributed via email to all active employees at KSCL. All responses were kept fully confidential. The purpose of the surveys was to better understand employee experiences and identify opportunities to improve KSCL as a workplace.

### Permanent Employee

- Response rate: **79%** (59 of 75 employees), a **12% increase from 2024**
- Overall objective: gather feedback to strengthen workplace culture and operations

#### Summary

Overall results are highly positive, with strong employee satisfaction and engagement. Key improvement areas include communication, wellness supports, and professional development. While some recommendations (e.g., wages) fall outside employer control, others—such as recognition and communication improvements—are actionable.

### Casual Employees

- Response rate: **21 of 45 staff**
- All respondents understand job roles and where to access policies

#### Summary

Feedback is largely positive, highlighting strong training and workplace culture. Key opportunities exist in onboarding improvements; wellness supports and continued professional development.

## Stakeholder

- Responses decreased from **21 (2024) to 27 (2025)**
- Majority of respondents:
  - Family members
  - Supported employers

### Summary

- No concerns regarding:
  - Service quality
  - Staff performance
- Administration viewed as accessible and responsive
- Preferred communication method: **Email**

## Individual

The response rate from individuals served remains low, indicating that **online surveys are not effective for this group.**

### Next Steps

- Program Manager to work with SRCWs and Coordinators to:
  - Reinforce importance of feedback collection
  - Explore alternative engagement methods

## Board of Directors

9 out of 10 Board of Directors responded.

### Board Development Opportunities identified:

- Encourage open dialogue
- Continue professional development through:
  - Webinars
  - Board governance training (e.g., BoardVoice, BC CEO Network)

## Overall Conclusion

Across all survey groups, feedback reflects a **strong, positive organizational culture** at KSCL, with high levels of pride, engagement, and satisfaction.

### Key Strengths

- Strong employee pride and engagement
- Positive stakeholder relationships

- Effective training programs
- Committed leadership and governance

### Key Opportunities

- Enhance communication across all levels
- Expand professional development offerings
- Strengthen employee wellness supports
- Improve feedback collection from individuals served
- Continue fostering open dialogue at the Board level

## Combining all the Data

2025 was a planning year for the next Strategic Plan, so we combined outcomes data and fed it into the Five (5) Strategic Priorities, to finish out the Strategic Plan. We also used [KSCL Program and Services 2025 Outcomes](#) and the [Satisfaction Survey 2025 Results](#) and fed those results into the Five Priorities, which are then broken into Objectives. These Objectives outline and guide KSCL on all our outcomes with regards to business functions, how we support & listen to all our Stakeholders, deliver our services, and lead the Society with current & future goals.

## Outcomes for 2025 – Update & Progress

In September 2025, the Board & Stakeholders were informed of the NEW **KSCL 2026-2029 Strategic Plan**, which encompasses Five (5) Strategic Priorities, Objectives for all KSCL's Outcomes.

### Effectiveness

<b>GOAL: Improve Communication &amp; Collaboration:</b> Utilize professional communication channels to generate dialogue & solution-focused discussions of challenges & trauma informed approaches			
<i>Objective</i>	<i>Action Plan</i>		
	<i>Who is Responsible</i>	<i>Indicator of Success</i>	<i>Completion Date/Review</i>
Strategy for improved communication 1. Add to meeting agenda – open discussion for sharing. 2. Add to surveys- questions re: collaboration methods.	Program & HR Managers	ongoing	Sept 2026

<b>GOAL: Foster Staff Appreciation &amp; Morale</b>			
Organize KSCL wide events to build team morale & appreciation from Staff to Board			
Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy to improve morale 3. Add to surveys- input on activities. 4. Admin/Board – go to worksites – 1 per quarter.	Program & HR Managers	ongoing	Dec 2026
<b>GOAL: Prioritize Trauma-Informed Care:</b>			
Implement in-depth, mandatory trauma-informed care training at orientation and integrate at staff meetings, professional development			
Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy for trauma informed care 5. At orientation – new staff 6. Professional Development topics 7. At Team/Staff meetings integrate topics	Program & HR Managers	Ongoing	Ongoing

## Efficiency

<b>GOAL: Incorporate voice of Service Users:</b>			
Ensure those we serve, and staff are consistently incorporated into planning/decisions			
Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy to improve input 1. Conduct focus groups with individuals. 2. Add to staff meeting agenda	Program Managers	Ongoing	Ongoing
<b>GOAL: Optimize Operational Tasks</b>			
Streamline routines & tasks to reduce staff burdens at each worksite			
Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy to streamline 1. Create a workflow of 24/7 to identify duplication/or opportunities. 2. Implement digital meal planning tool	Program Managers & PC/RC's	Ongoing	Ongoing

## Service Access

<b>GOAL: Evolve Support Models</b> Explore cluster living models and update existing models			
Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy to supported living 1. Opening a new laneway home in Nelson – 4 beds / with Supp. Living contract	KSCL Board & E.D.	Ongoing	Feb 2027
<b>GOAL: Streamline Intake &amp; Planning</b> Optimize Individual Support Plan meetings and intake processes to be person-centered.			
Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy to change: 1. Conduct a review of the ISP process & get feedback from individuals & staff. 2. Develop a transition plan for youth ages 16-24 to include components of housing, education, relationships, and life skills	Program Managers	Ongoing	Ongoing

## Stakeholder Feedback & Satisfaction

<b>GOAL: Strengthen Indigenous Reconciliation Efforts:</b> Increase Indigenous teachings, invite leaders/elders to KSCL events and attend Indigenous events			
Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy to Indigenous teachings 1. Host Cultural learning sessions with indigenous history, values/traditions. 2. Create calendar of events of indigenous events. 3. Offer cultural safety training for staff	Social media & Administration	Ongoing	Monthly - repeated

**GOAL:** Explore strategies to diversify Board experience/expertise:  
Identify gaps in board knowledge to target recruitment/retention efforts.

Objective	Action Plan		
	Who is Responsible	Indicator of Success	Completion Date/Review
Strategy for Board recruitment <ul style="list-style-type: none"> <li>• Conduct a Board Skills assessment &amp; identify gaps.</li> <li>• Develop a recruitment plan with Recruitment committee.</li> </ul>	E.D. & Recruitment Committee	Ongoing	Ongoing

## Extenuating & Influencing Factors for 2025

- Human Resources staff balancing recruitment efforts, orientations, keeping casual pool healthy/available, and staff leaves. It seems to be constant reasons for staff to be off or moving positions.
- Restructured Organizational Chart to create 2 Program Managers and remove Senior Residential Care Worker to Program Coordinators, who are strictly administrative in the worksites, no more split of their time on floor/off floor. Focus on growth of programs, and management of frontline staff.
- CLBC held another Direct Cost Funding Initiative to assist with rising costs of in food, gas, kms, and general supplies, which helped balance the budget.
- CLBC recognized the Employment staff had a different skill sets and have funded those contracts for Vocational Counsellors (also captured in Organization Chart).
- Collective Agreement still not renewed and bargaining continues. Exempt staff were given lifts to keep ahead of the Union staff projected wage lifts, to keep inversion from happening.
- Opening of Eagle Estates, with 8 apartments and 5 bed residential care home. Moves happened with individuals, and 29<sup>th</sup> street home went from a 24/7 Staffed Living home, to a Supported Living home with new residents.
- Finalizing plans for laneway house in Nelson for 4 more beds and another Supported Living home contract with CLBC. CLBC contributed \$140,000 to the cost of building.

# Business Function & Administrative Functions

<b>GOAL: Improve Documentation &amp; Communication Systems</b>			
<i>Objective</i>	<i>Action Plan</i>		
	<i>Who is Responsible</i>	<i>Indicator of Success</i>	<i>Completion Date/Review</i>
Utilizing ComVida & ShareVision 1. Going paperless with employee files and utilizing ShareVision for asset management & maintenance 2. Re-implement Comvida to allow for Bidding Board – efficiency in call outs	Facilities/PC & RC  Payroll Manager / HR staff	Ongoing & Utilization	By end of 2026
<b>GOAL: Rebrand &amp; Re-engage: KSCL name change to reflect growth &amp; change</b>			
<i>Objective</i>	<i>Action Plan</i>		
	<i>Who is Responsible</i>	<i>Indicator of Success</i>	<i>Completion Date/Review</i>
Hire marketing company & website re-design 3. Stakeholder consultation 4. Launch new brand to communities	External company	Ongoing	By mid 2027
<b>GOAL: Support independent Living in all our Communities – Explore strategies to different housing models</b>			
<i>Objective</i>	<i>Action Plan</i>		
	<i>Who is Responsible</i>	<i>Indicator of Success</i>	<i>Completion Date/Review</i>
Strategy to respond to housing needs in Nelson without buying land  1. Laneway Home at Wasson St.- 4 bed Supportive Living Contract	E.D. & Board	Started – June 2026	Complete Jan 2027
<b>CASTLEGAR</b> 2. Affordable housing project – on hold as many builds happening/funding stopped at BCHousing	E.D. & Board	On hold	Reassess – Sept 2027

## Outcomes for 2025

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All the 2025 year's results will be shared with all Stakeholders on the KSCL Website and encompassed in our 2025 Annual Performance Analysis, which is formally presented at the 2026 Annual General Meeting planned for June 16, 2026

The next Outcome Measurement Plan for 2026 will be based on the 1<sup>st</sup> year of the Strategic plan (2026-2029) which encompasses the new goals. All the goals from the 2021-2025 Strategic Plan were met.

**GOAL: To accomplish the first year's goals from the 2026-2029 Strategic Plan which will be developed & presented to staff in Fall 2026.**

## Accessibility Plan

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### Summary of Barriers, Actions, and Progress

KSCL continues to identify and address a wide range of accessibility barriers across its programs and service locations. These barriers fall into several key categories: architectural/environmental, financial, attitudinal, communication, employment, and transportation.

The following summarizes key trends, actions taken, and progress to date.

### Organization-Wide Accessibility Themes

#### **Architectural & Environmental Barriers**

Several physical accessibility challenges persist across KSCL sites. Key issues include the need for a safe crosswalk near the main building, delays in site repairs, and aging infrastructure that does not fully meet mobility needs.

- Ongoing collaboration with municipal accessibility committees is in place.
- Preventative maintenance processes and annual site walkthroughs have improved contractor efficiency.
- Some upgrades (e.g., accessible housing modifications) remain in planning or request stages.

## **Financial Pressures**

Rising costs of living—including food, transportation, and household expenses—continue to impact individuals and services.

- KSCL has implemented budgeting strategies, pursued grants, and engaged with CLBC regarding funding.
- Families and individuals are increasingly contributing to specialized costs.
- Community supports (e.g., meal programs) and funding increases (e.g., rent supplements) have helped offset pressures.

## **Attitudinal Barriers & Inclusion**

Ongoing education is needed to address stigma and improve inclusion, particularly related to:

- Gender identity and LGBTQIA2S+ awareness
- Perceptions of diverse abilities
- Mental health and workplace burnout

Actions include training, community engagement, and partnerships with advocacy groups. While awareness has improved, continued education is required to strengthen respectful communication and inclusive practices.

## **Staff Wellness & Workplace Culture**

Mental health and burnout remain areas of concern.

- KSCL has implemented training (Mental Health First Aid, resiliency, compassion fatigue) and integrated mental health into OH&S planning.
- Employee Assistance Program (EAP) awareness has increased, though stigma remains a barrier to access.

## **Post-COVID Cultural Shifts**

Some staff demonstrate hesitancy toward community inclusion activities due to safety concerns, cost awareness, and role perception.

- Training and mentoring initiatives are underway to reinforce expectations around quality of life and community engagement.
- Team-based approaches are being used to build confidence and participation.

## **Communication & Technology**

Virtual service delivery highlighted gaps in access to technology.

- KSCL continues to provide technical support and skills training for individuals and staff.
- This remains an ongoing need, particularly for families and individuals requiring additional support.

## **Employment & Staffing Challenges**

Staff shortages have impacted service delivery.

- Recruitment efforts include job fairs, partnerships with training institutions, social media outreach, and referral incentives.
- Succession planning and practicum placements have strengthened staffing pipelines.

### **Transportation Barriers**

Limited rural transportation options continue to affect access to community inclusion.

- Advocacy efforts and grant applications (including for electric vehicles) are ongoing.
- Some service improvements have occurred (e.g., increased HandyDART availability), though gaps remain across communities.

## **Program and Site-Specific Highlights**

### **Bigby Place**

- Parking and safe drop-off access remain key concerns; discussions with municipal partners are ongoing.
- Snow removal by neighboring businesses impacts winter accessibility.
- Changes to participation criteria have limited community integration; alternative inclusive strategies are being explored.

### **Employ Me Program**

- Entrance accessibility (lack of ramp) has been identified but is not currently a barrier for participants. Future modifications remain under consideration.

### **Roalshary (Grand Forks)**

- Community facilities (arena, bowling alley, pool) present accessibility challenges.
- Staffing recruitment has improved in 2024, though long-term sustainability remains a focus.

### **Residential Sites (Various Locations)**

Common themes include:

- Need for accessibility upgrades (e.g., handrails, ramps, bathroom modifications)
- Infrastructure issues (e.g., flooding, uneven walkways, limited mobility access)
- Planning for aging residents and future accessibility needs

Some sites have implemented interim solutions, while larger renovations are pending approval or funding.

### **Community Integration Barriers**

- Some individuals' preferences and shared living dynamics can limit access to community activities.

- Flexible scheduling, family coordination, and smaller group planning have improved participation.

### Financial Decision-Making Supports

- A small number of individuals lack representation agreements, creating challenges in financial management.
- Coordination with CLBC is ongoing, though solutions remain limited in some cases.

## Overall Progress and Outlook

KSCL has made **meaningful progress** in addressing accessibility barriers through:

- Increased training and awareness initiatives
- Strengthened community partnerships
- Improved maintenance and operational processes
- Enhanced recruitment and staffing strategies

However, several barriers remain **long-term or systemic**, particularly those related to:

- Infrastructure and housing limitations
- Rural transportation systems
- Workforce availability
- Broader societal attitudes and inclusion

KSCL will continue to focus on **advocacy, innovation, and collaboration** to improve accessibility and quality of life for all individuals served.

## Complaints

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**KSCL was made aware of only 5 complaints in 2025** from community members, former employees, and families. All concerns were reviewed and managed in accordance with organizational policies, with oversight from the Executive Director and Board of Directors.

- **External Investigation:** An anonymous community complaint prompted a review by Interior Health Authority (IHA). Following a thorough investigation, all allegations were found to be unsubstantiated, and no further action was required.
- **Former Employee Complaint:** A former employee submitted ongoing complaints under a pseudonym and engaged in repeated contact with staff and Board members. The matter was addressed through formal communication and RCMP involvement. Despite these efforts, the individual remained dissatisfied.
- **Family Concerns:** Several family members raised concerns related to service delivery, including staff consistency, individual choice, and temporary disruptions due to

renovations. In each case, KSCL engaged directly with families, implemented action plans where appropriate, and reinforced the rights of individuals receiving services. All concerns were resolved through communication and follow-up.

Overall, while not all complainants agreed with the outcomes, all concerns were thoroughly investigated and addressed. All issues have since been resolved.

## Human Resources

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### Recruitment & Hiring

Recruitment remained challenging in 2025 due to a limited pool of qualified applicants for specialized roles. KSCL continued using multiple recruitment methods, including Indeed, WorkSafeBC, and Selkirk College job fairs. Employee referrals were a key success factor, resulting in seven new hires.

Practicum placements through Selkirk College (Care Aide and EACSW programs) also supported recruitment by allowing potential employees to gain hands-on experience before hiring decisions.

#### A total of 21 new employees were hired in 2025:

- Self-Advocates: 4
- Castlegar Casuals: 11
- Grand Forks Casuals: 2
- Nelson Casuals: 3

### Employee Exits

There were **20 employee exits** in 2025. The most common reasons included relocation, personal circumstances, and other job opportunities. Two exits were due to contract completion, and one was a termination. These trends continue to inform recruitment and retention planning.

### Sick Time Usage

- Paid sick time: **7,372.9 hours** (down from 8,019.58 in 2024)
- Unpaid sick time: **5,048.73 hours** (down from 7,941.71 in 2024)
- Total sick time: **12,421.63 hours**
- Employees using sick time: 127 (up from 121 in 2024)
- Average sick time per employee: **58.05 hours** (down from 66.28)

There were 481 ESA sick days used (slight increase from 478 in 2024).

### Extended Absences

- 7 employees on LTD (all began prior to 2025; one transitioned to sick leave)

- 14 employees on extended sick leave (>2 weeks)
  - 6 returned to work
  - 7 remain on leave into 2026
  - 1 resigned
- 2 employees on WCB:
  - 1 returned to work
  - 1 remains on WCB in 2026
  -

## Overtime

Overtime increased significantly in 2025:

- 2023: 4,540.42 hours (\$207,495.61)
- 2024: 3,880.02 hours (\$188,181.73)
- 2025: 4,668.08 hours (\$254,811.28)

## Grievances

There was **1 grievance** in 2025 related to vacation recalculation after a position change. The grievance was resolved after clarification of consistent policy application.

## Professional Development

### Mandatory Training

KSCL continued mandatory training in:

- Non-Violence Intervention (transitioned from MANDT to SIVA)
- Food Safe
- First Aid
- CLBC & MCFD confidentiality training

In 2025:

- 10 SIVA/MANDT sessions delivered across regions
- 33 First Aid courses completed externally
- OHS training included topics such as mental health, harassment, risk assessment, and workplace safety culture

### Non-Mandatory Training

KSCL expanded professional development through:

- Pivot Point monthly learning sessions (topics included rights, communication, dementia support, and motivation)
- Lumina Learning programs for staff and leadership
- Mental Health First Aid, conflict resolution, communication, and specialized employment training
- Multiple webinars covering leadership, wellness, diversity, and workplace skills

Future focus (2026): psychological health, cultural safety, leadership, communication, and employee wellness.

## Employee Appreciation

### Formal Recognition

- Annual Holiday Party at Chances Casino (~100 attendees)
- Awards of Distinction: Rising Star, Leader, Hero
- Years of Service Awards:
  - 5 years: 7 employees
  - 10 years: 2 employees
  - 25 years: 1 employee
- 1 retirement recognized
- Support provided for major life events (births, deaths, hospitalizations), with increased recognition amounts (\$40 → \$55)

### Informal Recognition

KSCL continues ongoing appreciation through:

- Snacks, thank-you cards, gift cards
- Verbal recognition and check-ins
- Newsletter acknowledgements and gratitude emails
- Health & wellness reimbursement program (\$50)
- Monthly site-level appreciation initiatives

Employee feedback indicates strong value placed on:

- Gift cards
- Verbal recognition
- 1-on-1 check-ins
- Team building
- Regular acknowledgement

## Risk Assessment Summary

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In 2025 our main funder CLBC once again implemented the initiative to recognize inflationary costs that were not funded in Programs and Facility costs. CLBC funded KSCL an additional \$12,000 to alleviate these pressures, which allowed KSCL to focus on needed repairs and maintenance as well as increasing food budgets. CLBC also assisted with contributions towards renovations and repairs and vehicle purchases at a variety of our Staffed Residential sites, also a big help.

KSCL also started the process of building on existing properties already owned by KSCL, namely in Nelson where the City bylaws have now changed to allow laneway housing. KSCL expects to see completion of this 4-bed laneway project by Fall of 2026. This will also expand the contracts held by CLBC by creating a new “supported living” contract, which will support 4 individuals.

KSCL remains viable and continues to be healthy with our service delivery continuing in all areas. All CLBC contracts & MCFD contracts are in place to 2026. KSCL Revenue exceeded \$10 Million in 2025, with a projection to increase to 12 million in 2026.

KSCL continues to see increase in referrals in most areas especially community inclusion for group and one to one service in both Nelson and Castlegar from CLBC.

KSCL will continue to pursue affordable housing building options in the Castlegar, Grand Forks and Nelson over the next 2 years.

## Health & Safety – Review & 2026 Outlook

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### **Health and Safety Commitment**

KSCL is committed to maintaining a safe and healthy workplace for all employees. Management is responsible for establishing safety standards, developing safe work practices, and ensuring staff receive appropriate training. Employees are expected to follow safety procedures and actively contribute to maintaining a safe work environment.

### **External Compliance and Inspections**

To ensure compliance with WorkSafeBC regulations, KSCL facilities undergo annual inspections by the Fire Department. Fire prevention systems are also inspected annually by TROY Fire & Safety. All required inspections and corrective actions are completed in a timely manner to maintain safety standards across all sites.

### **Joint Occupational Health & Safety (JOH&S) Committee**

The JOH&S Committee includes employee representatives, management, and union representation, and is co-chaired by both employee and employer members.

Key responsibilities include:

- Monthly review of site inspections and safety drills
- Review of workplace injuries and refusals of unsafe work
- Identification of new health and safety concerns
- Recommendation of corrective actions and policy updates

All members complete mandatory annual safety training, with onboarding training required for new members.

## **Safety Drills and Site Inspections**

Each site conducts:

- Monthly fire drills
- Two additional emergency drills per month (day and evening/night shifts), covering scenarios such as medical emergencies, hazardous spills, earthquakes, and other critical events
- Regular health and safety inspections, with findings reviewed by the JOH&S Committee

All documentation is maintained through ShareVision and reviewed for follow-up actions.

## **Workplace Injury Review and Incident Response**

All workplace incidents, including near misses, are reviewed by the JOH&S Committee. Formal investigations are conducted for incidents requiring medical attention or resulting in lost time. Findings are used to improve policies, procedures, and prevention strategies.

WorkSafeBC claims are reviewed alongside investigation outcomes to ensure full compliance and continuous improvement.

## **Disability Management Institute (DMI) Partnership**

KSCL works with DMI to support employees with occupational and non-occupational injuries. DMI assists with:

- WorkSafeBC claim management
- Communication with stakeholders
- Return-to-work planning and coordination

Employees absent more than five days are referred to DMI to ensure appropriate support and recovery planning.

## **Incident Reporting and Claims Process**

All injuries must be reported, regardless of severity.

- **First Aid / Near Miss:**  
Managed internally, documented, and reviewed by the JOH&S Committee. No WorkSafeBC report required unless medical treatment or lost time occurs.
- **Medical Treatment / Lost Time:**  
Requires WorkSafeBC reporting within 72 hours. DMI manages claim coordination and communication.

All incidents are formally investigated, and reports are submitted to WorkSafeBC within 30 days when required.

## **2025 Injury Data Summary**

- Total reported incidents: **49** (increase from 29 in 2024)
- Near misses: **37**
- Medical treatment/lost time: **12**
- Accepted WorkSafeBC claims: **7**

Highest incident site: **Community Options (19 incidents)**

Injuries included:

- Sprains/strains (multiple body regions)
- Eye injury and bruising
- Concussion
- Mental health-related claim

## **Key Safety Focus**

The JOH&S Committee continues to review all incidents to identify root causes and implement preventative measures. Policies and procedures are regularly updated to ensure compliance and improve workplace safety outcomes.

## **Goals for 2026**

KSCL will focus on:

- Strengthening incident reporting and trend analysis
- Updating Safe Work Procedures and Risk Assessments
- Enhancing employee awareness of rights and responsibilities
- Promoting Employee Assistance Program (EAP) access
- Strengthening collaboration with DMI for RTW planning
- Ensuring ongoing communication with employees on leave (WorkSafeBC Bill 41 compliance)
- Annual safety retraining for all staff
- Expanding health and safety resources and training opportunities
- Establishing a Psychological Health & Safety Sub-Committee
- Supporting a culturally safe workplace aligned with the 2026–2029 Strategic Plan

## **Conclusion**

KSCL remains committed to continuous improvement in workplace health and safety. Through structured reporting, active committee oversight, and strong external partnerships, the organization aims to reduce workplace risk and support employee well-being in a safe, respectful, and resilient work environment.

## Technology

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By reviewing and implementing the technology goals, the Kootenay Society for Community Living (KSCL) will be able to maintain their technological level as well as increase it. These plans are only recommendations and should be reviewed every year to ensure the costs and goals reflect the current direction of technology.

KSCL's 2025 ongoing/continuing goals are:

1. Keep Anti-virus up to date on all computers.
2. Ensure all computers have Microsoft Office 365
3. Continue to replace old hardware/software with current versions.
4. Replace cell phones as required.
5. Investigate & purchase Assistive Technology for individuals.
6. Review IT & current supports.

As with any technology, advances occur daily. This is reflected in the cost of purchasing items. Each time the report is reviewed, updated costs should be included as items purchased today can be half the price six months from now. As well as reviewing costs, new advances should be analyzed to determine if they would meet the needs of the Society and its programs.

## Thank-you!

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KSCL is fortunate to have a dedicated and hard-working team of front-line workers, Administration staff and the Board of Directors. Their work is the core of KSCL to serve individuals that require our support to live full and inclusive lives in their communities. The families/caregivers, the supportive employers and our community members are also key to seeing the successes of inclusion.

This report speaks about the achievements of everyone. Our goals were realized while KSCL experienced growth. For all of that I am thankful. Additionally, thank you to our Funders, the Individuals we serve for your continual support. We look forward to new opportunities in 2026 while keeping Society resilient, strong, and evolving.

Thank you,

*Kathleen Elias*

KSCL Executive Director