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Performance Analysis Report

2022

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Introduction

Overview

Chimo Community Services produces a Performance Analysis Report each year. We analyze data that has been collected throughout the year with the intent to highlight our strengths as well as identify areas that require improvement. This report summarizes Chimo's efforts to continually improve our services to meet the needs of the people we support.

As the demand for organizational effectiveness increases, so does the need for useful performance analysis. Chimo is dedicated to measuring performance thereby allowing managers to evaluate progress, implement changes, and improve strategies. Performance analysis will help Chimo to:

- Address identified needs
- Improve the effectiveness and efficiency of service delivery
- Monitor results to ensure that goals are being met
- Identify areas for improvement
- Improve stakeholder satisfaction

This report has been developed to satisfy the CARF requirement for an annual performance analysis and will be used in the annual review of Chimo's strategic plan. This document also serves as a review standard that will be used as a benchmark each year. Copies of this report will be distributed to members of the organization's leadership and made available to employees and clients, as well as posted on our website. Chimo's Board will also review the Report in detail, and this will be reflected in the meeting minutes.

Creation of this report included the review of a number of different performance indicators (summarized below) and a formal review of the organization's mission statement.

Background

Chimo operates on a fiscal year, which begins April 1 and ends March 31. Under normal circumstances, the organization will compile end of year data, summarize it in an annual management summary (performance analysis) during the months of July/August (of the following the fiscal year) and use the summary for strategic planning purposes.

General Program Description

Chimo is a non-profit, community-based organization in operation since 1973. The organization's main purpose is to provide crisis services. Chimo offers:

- Counselling PEACE, Stopping the Violence, and Crisis & Suicide Intervention Services, and family education workshops
- Crisis Lines operating 8:00 am to midnight daily
- Outreach & Advocacy including client support, legal services, tax filings, court accompaniment, assistance in finding housing, etc.
- Settlement Services for immigrants and newcomers

- Homeless Prevention through the distribution of rental subsidies
- Rent Bank providing small loans those at risk of homelessness
- Seniors Rent Grant to provide a rent grant for seniors
- Community Engagement facilitating in-school programs for youth regarding suicide, stress, and leadership development
- Nova Transition House providing emergency housing for women/children fleeing abuse

Mission/Vision

Chimo's Mission is to promote justice and address violence by fostering and providing quality, integrated services, education, and housing programs designed to inspire well-being, and healing for people in crisis.

Chimo's Vision is empowering communities free from injustice, violence, and crisis.

CARF Accredited Programs and Services

In October 2021, Chimo participated in its third Commission on Accreditation of Rehabilitation Facilities (CARF) site survey. Our Counselling and Crisis Line programs were awarded another 3-year accreditation, extending to October 31, 2024.

Data Collected

Chimo collects and analyzes data/information, all dedicated to Performance Improvement, from a number of different sources including, but not limited to:

- 1. Financial information including monthly reviews of the organization's financial performance by the organization's leadership;
- 2. Annual risk management assessments to identify potential risks and opportunities for the organization;
- 3. Annual technology assessments to ensure that the organization possesses the equipment necessary to support the success of Chimo's goals/objectives;
- 4. Reports from internal and external health and safety inspections and tests of emergency plans and procedures;
- 5. Surveys completed by stakeholders including clients;
- 6. Informal feedback from clients and staff:
- 7. A formal client complaints and grievances process;
- 8. Critical Incident reports;
- 9. And feedback/results from accreditation surveys.

Business Functions

Strategic Planning

Every 3 years, Chimo's Board of Directors conducts an event and creates a 3–5-year Strategic Plan for the organization. Strategic planning includes brainstorming, risk assessment (internal and external), evaluating the relevance of the current plan (goals/objectives), and determining if the fundamental vision of the organization has changed. Every year, the Executive Director, key employees, and the Board meet to make updates to the Strategic Plan.

In January 2020, the Board met with the Executive Director and Management team to introduce the 2020-23 Strategic Plan. The Management team had an opportunity to engage with the Board to discuss the implementation of the Plan and its impact to the organization. The 2020-23 Strategic Plan includes 3 areas of focus: Operational Excellence, Integrated Case Management, and Diversified Funding.

Financial Goals

2021-22 Goals:

- To deliver a balanced budget at year end.
- To continue to seek out diversified funding sources to expand our existing programs and meet a growing need for service in our community.

Data Sources:

- Monthly and annual financial statements
- Audited Financial Statements

Follow-Up on 2021-22 Goals:

- We delivered a balanced budget at year end.
- Our efforts to diversity our funding sources were successful. We received funds from Women's Shelter Canada and the Canadian Women's Foundation to expand the counselling program and meet a growing need for service in our community.
- We received funding from the Public Health Agency of Canada to expand our Crisis Line program. This funding was used to hire paid call responders to ensure sufficient coverage of our Crisis Lines.

Impact of Extenuating or Influencing Factors:

 There were no extenuating or influencing factors that prevented us from meeting our financial goals this year.

Comparative Analysis:

• The COVID-19 pandemic was less disruptive to the organization's financial practices than in the previous year; thereby, we were able to meet all financial goals this year.

Identification of Trends:

No trends were identified this year.

Areas Needing Performance Improvement:

• All performance targets were achieved; no improvement required.

2022-23 Action Plan:

- To deliver a balanced budget at year end.
- To continue to diversify funding sources to support and expand our programs.

Risk Management

2021-22 Goals:

- To create a Finance Committee.
- To create and conduct financial training modules with Management Team.
- To recruit personnel for the Management Team.
- To diversify funding to ensure internal capacity to fill emerging roles.

Data Source:

Annual Management Letter from the Auditor

Follow-Up on 2021-22 Goals:

- A Finance Committee was not created.
- Financial training modules were not created or disseminated.
- A Manager of Crisis Lines and Volunteer Programs was hired in July 2021.
- We diversified our funding sources to ensure internal capacity to fill emerging roles.

Impact of Extenuating or Influencing Factors:

 The pandemic continued to create turnover and vacancies on the management team which impeded our ability to create the Finance Committee.

Comparative Analysis:

 As in the previous year, the pandemic impacted staff retention and prevented the organization from creating stability within these key positions.

Identification of Trends:

No trends were identified this year.

Areas Needing Performance Improvement:

 To mitigate the likelihood of staff turnover by recruiting personnel who are the right fit for the organization.

2022-23 Action Plan:

- To hire a Director of Services and a Director of Counselling Services by Summer 2022.
- To reduce staff turnover in management/director roles to ensure stability and consistency within the organization.

Health & Safety

2021-22 Goals:

- To have fewer than 9 Critical Incidents in 2021.
- To provide regular First Aid and de-escalation training to staff.
- To revise some Nova House policy/procedures (conduct more thorough suicide risk assessments with residents during intake, additional staffing during busy evening hours).
- To make environmental modifications (as necessary) to increase workplace health and safety.

Data Sources:

- Annual Critical Incident Review
- Prevention of Unsafe Behaviours Training Attendance List
- Nova House Policy and Procedure Manual
- Occupational Health & Safety Committee Meeting Minutes

Follow-Up on 2021-22 Goals:

- Sixteen (16) Critical Incidents were reported in 2021.
- In November 2021, staff viewed a pre-recorded webinar entitled *Managing High Stress Situations*.
- First Aid training for staff will occur in Summer 2022.
- Nova House policies and procedures were revised to resolve issues highlighted by Critical Incidents.
- Environmental modifications were made, as necessary.

Impact of Extenuating or Influencing Factors:

 The Caring Place location remained closed to walk-in clients in 2021 (due to the pandemic). This likely reduced the number of Critical Incidents that would have occurred in this location.

Comparative Analysis:

• There were more Critical Incidents reported in 2021 (16) than in 2020 (9).

Identification of Trends:

- The majority of Critical Incidents (n = 10; 63%) occurred at Nova Transition House. Four (4) of these incidents involved Accident/Injury and three (3) involved Aggressive Behaviour or Verbal Abuse.
- 25% of Incidents (n = 4) occurred at the Caring Place location.

 One (1) Incident occurred at the Cedarbridge location, and one (1) Incident occurred at Chimo Second Stage Housing. No Critical Incidents occurred at either of these locations in the previous year.

Areas Needing Performance Improvement:

- Changes to Nova House Policies and Procedures are required to mitigate the likelihood and severity of Critical Incidents.
- Training of personnel on Policies and Procedures, First Aid, and de-escalation skills is required.

2022-23 Action Plan:

- To provide staff with de-escalation training.
- To provide Nova House staff with reminders of policies and procedures to improve the effectiveness and appropriateness of responses to Critical Incidents.
- To provide First Aid training to all staff.

Cultural Competency

2021-22 Goals:

- To form Diversity & Inclusion Committee and seek insight into different workshops.
- To conduct quarterly staff days, where we will have shared learning opportunities.
- To host a Staff Retreat focused on Chimo's work culture and how to provide services empathically.

Data Sources:

- Human Resources
- Executive Director
- Annual Cultural Competency Plan and Status Report

Follow-Up on 2021-22 Goals:

- The Diversity & Inclusion Committee was not formed.
- Full-day staff meetings occurred in September 2021, December 2021, and March 2022.
- A two-day Staff Retreat occurred in September 2021.

Impact of Extenuating or Influencing Factors:

 The pandemic continued to negatively impact staffing levels. Management determined that it was not feasible to establish a new Committee during a time of limited staff availability.

Comparative Analysis:

 Most 2021-22 goals were met without the need for modifications, unlike in the previous year.

Identification of Trends:

• Due to lifting pandemic restrictions this year, it was once again safe for staff to gather in larger groups and attend in-person workshops and staff days.

Areas Needing Performance Improvement:

- To form Diversity & Inclusion Committee.
- To conduct Diversity, Inclusion, and Cultural training events.
- To include more information on Cultural Competency in communication with volunteers.

2022-23 Action Plan:

- To form Diversity & Inclusion Committee and seek insight into different workshops.
- To conduct one Cultural Competency Training Event for staff.
- To include more information on Cultural Competency, Diversity, and Inclusion in volunteer newsletters.
- To create a language database that documents which language(s) each employee/volunteer can speak.

Accessibility

2021-22 Goals:

- To provide Cultural Competency Training for staff in Winter 2021/22.
- To provide Trauma-Informed Practices Training for staff in November 2021.
- To launch Chinese version of website by late 2021.

Data Sources:

- Staff training schedules
- Chimo website
- Accessibility Plan and Status Report

Follow-Up on 2021-22 Goals:

- Cultural Competency Training for staff did not occur.
- Trauma-Informed Practices Training for staff occurred in November 2021.
- A virtual translator tool with 15 languages is available on the Chimo website.

Impact of Extenuating or Influencing Factors:

• The organization has limited managerial positions, and therefore, management did not have the capacity to organize a Cultural Competency Training event.

Comparative Analysis:

Most 2021-22 goals were met.

Areas Needing Performance Improvement:

• Staff have not received Cultural Competency Training since 2020. There are many new staff members who have never received this training.

• To recruit additional personnel for the Management team to increase ability to plan organization-wide training events.

2022-23 Action Plan:

- To provide Cultural Competency Training for staff in Winter 2023.
- To provide De-escalation Training for staff in May 2022.
- To purchase transparent face masks to allow staff to work with clients with hearing deficits who need to read lips.
- To eliminate waitlists for counselling services by Winter 2023.

Programs

Counselling

Prevention, Education, Advocacy, Counselling, and Empowering (PEACE) Program for Children and Youth Experiencing Violence

The PEACE Program provides individual and group counselling services for children who have experienced abuse, threats, or violence in the home. Support is also provided to caregivers.

Performance Indicators:

Effectiveness outcomes are measured from data collated from PEACE Outcomes Forms, which are discussed between counsellors and persons served at a relevant time during the counselling period. Experience of Services Received and Other Feedback from Persons Served is measured from Client Feedback Forms. Efficiency and Service Access targets are measured via Monthly Statistical Summaries completed by the counsellors.

Effectiveness		
Outcome	Performance Target	Results
Clients	-	
Clients will demonstrate an increase in ability to express feelings	80% of clients will report an increased ability to express feelings	100% of clients reported an increased ability to express feelings
2. Clients will demonstrate an increased ability to cope with their feelings	80% of clients will report an increased ability to cope with feelings	100% of clients reported an increased ability to cope with feelings
Caregivers		
3. Clients will have an increased understanding of the challenges facing their children	85% of clients will report an increased understanding of the challenges facing their children	100% of clients reported an increased understanding of the challenges facing their children
4. Clients will have an increased ability to support their children as a result of counselling	85% of clients will report an increased ability to support their children as a result of counselling	100% of clients reported an increased ability to support their children as a result of counselling
Anger Management Groups		
5. Participants will have an increased awareness of their feelings	80% of participants will report an increased awareness of feelings	No Anger Management Groups were offered in 2021-22
6. Participants have an increased ability	80% of participants will report an	No Anger Management Groups were offered in 2021-22

to verbally express	increased ability to		
feelings	express feelings		
7. Participants are	80% of participants	No Anger Management Groups were offered	
able to express anger	will report an	in 2021-22	
in healthier ways	increase in the		
	choice to express		
	anger in healthier		
	ways		
Experience of S	Services Received and	Other Feedback from Persons Served	
Outcome	Performance Target	Results	
The majority of	85% satisfaction	100% of clients reported that counselling at	
clients will report that	rating	Chimo made a difference in their lives	
counselling at Chimo			
has made a			
difference in their			
lives			
		d Other Feedback from Stakeholders	
No objectives set in 2021-22			
		ency	
Outcome	Performance Target	Results	
A significant portion	60% direct service	89% of hours worked were providing direct	
of hours worked will	hours	service	
be providing direct			
service to clients		<u> </u>	
Service Access			
Outcome	Performance Target	Results	
The majority of	90% of clients are	96% of clients were able to be seen within 2	
clients will have their	seen within 2 weeks	weeks of initial contact	
first appointment			
within 2 weeks on			
initial contact	International Control		
Complaints: No complaints were reported in the period.			

2021-22 Action Plan:

- We aimed to hire additional personnel to facilitate groups for both children and parents.
- We aimed to eliminate the waitlist (if additional personnel were hired).
- We aimed to maintain firm boundaries and to not accept clients whose needs did not fit the PEACE mandate, thereby keeping space in the program for clients whose needs did fit.

Follow-Up on 2021-22 Action Plan:

- We did not hire additional personnel to facilitate groups for both children and parents.
- We eliminated the waitlist, even though additional personnel were not hired.
- We maintained firm boundaries and did not accept clients whose needs did not fit the PEACE mandate, thereby keeping space in the program for clients whose needs did fit.

Impact of Extenuating or Influencing Factors:

 Due to the ongoing pandemic, we determined it was not safe to offer children's Anger Management Groups.

Comparative Analysis:

All performance targets were achieved this year.

Identification of Trends:

- The pandemic has created uncertainty and prevented many PEACE clients from meeting their goals. Many clients are hesitant to terminate counselling services during the pandemic and lose the support of their Counsellor. As a result, some clients have stayed in the program past the originally agreed-upon time.
- PEACE Counsellors report an increase in referrals that would be better served by other programs due to a lack of services available in the community. These referrals have been for foster families and parents dealing with substance abuse issues.

Identification of Causes:

• The COVID-19 pandemic has had a large, deleterious impact on the mental well-being of the general population, and has disproportionately affected the well-being of vulnerable populations, such as children experiencing family violence/abuse. At the same time, social service programs have lost funding, have been slow to return to inperson services, and offer very limited virtual services. Therefore, it has become even more difficult to meet the growing needs of our community.

Areas Needing Performance Improvement:

• All performance targets were achieved; no improvement required.

2022-23 Action Plan:

- To hire additional personnel to facilitate groups for both children and parents.
- To continue to maintain firm boundaries and not accept clients whose needs do not fit the PEACE mandate, thereby keeping space in the program for clients whose needs do fit.

Crisis & Suicide Intervention Services (CSIS)

The CSIS Counselling Program is a voluntary counselling service for individuals who are in crisis, have made a suicide attempt, are at risk of doing so, or are bereaved by suicide. Information about crisis and suicidal behaviours, consultation, and/or support is made available to family and friends upon request.

Performance Indicators:

Effectiveness outcomes are measured from data collated from CSIS Outcomes Forms, which are discussed between counsellors and persons served at a relevant time during the counselling period. Experience of Services Received and Other Feedback from Persons Served is measured from Client Feedback Forms. Efficiency and Service Access targets are measured via Monthly Statistical Summaries completed by the counsellors.

Effectiveness		
Outcome	Performance	Results
	Target	
1. Clients will increase	95% of clients will	100% of clients reported an increase in their
their awareness of their	report an increase	awareness of their own inner strengths
own strengths / inner	in their awareness	
resources	of strengths	
2. Clients will have an	95% of clients will	100% of clients reported an increase in their
increased ability to	report an increase	ability to cope with their situation
cope with their	in their ability to	
situations as a result of	cope with their	
counselling	situation	
3. Clients will have an	85% of clients will	100% of applicable clients reported increased
increased awareness of	report increased	awareness of community resources (31% of
community resources	awareness of	clients reported this was 'not applicable' to
	community resources (if	their situation)
	applicable to their	
	situation)	
4. Clients will have an	95% of clients will	100% of clients reported an improved sense
improved sense of	report an improved	of general wellbeing as a result of counselling
general wellbeing as a	sense of general	
result of counselling	wellbeing	
	Ŭ	
Experience of Se	rvices Received and	Other Feedback from Persons Served
Outcome	Performance	Results
	Target	
The majority of clients	90% satisfaction	100% of clients reported that counselling at
will report that	rating	Chimo made a difference in their lives
counselling at Chimo		
has made a difference		
in their lives	amala a a Danahar I a a	d Other Fredherels from Oteleskald
Experience of Services Received and Other Feedback from Stakeholders		
No objectives set in 2021-22		
Efficiency		

Outcome	Performance Target	Results	
The majority of hours worked will be providing direct service to clients	80% direct service hours	82% of adult hours and 58% of youth hours worked were providing direct service to clients	
Service Access			
Outcome	Performance	Results	
	Target		
The majority of clients will have their first appointment within 2 weeks on initial contact	90% of clients are seen within 2 weeks	85% of adults and 89% of youth were able to access their first appointment within 2 weeks of initial contact	
Complaints: No complaints were reported in the period.			

2021-22 Action Plan:

- We aimed to offer community workshops on self-compassion and healthy family communication (if social distancing restrictions were lifted).
- We aimed to hire additional personnel to meet changing demographics and increased need.

Follow-Up on 2021-22 Action Plan:

- We offered a virtual workshop on healthy family communication in October 2021.
- We did not hire additional personnel to meet changing demographics and increased need.

Impact of Extenuating or Influencing Factors:

- Due to the ongoing pandemic, we determined it was not safe to offer in-person community workshops.
- One CSIS counsellor went on sick leave in October 2021. An Interim Counsellor was hired in December 2021 and began working with clients in January 2022. During this transition time, the CSIS program was unable to respond to all inquiries in a timely manner.

Comparative Analysis:

- The Efficiency performance target for direct service hours for youth clients was not achieved this year. CSIS counsellors theorize that this could be due to receiving fewer referrals from Chimo's Community Engagement program (which was on hiatus during the pandemic) and the introduction of a centralized intake agency for youth services in the community.
- Service Access performance was lower this year (100% of adults and 100% of youth in 2020-21).

Identification of Trends:

 The pandemic has created uncertainty and prevented many CSIS clients from meeting their goals. Many clients are hesitant to terminate counselling services during the

- pandemic and lose the support of their Counsellor. As a result, some clients have stayed in the program past the originally agreed-upon time.
- Many clients who normally attended in-person appointments requested virtual appointments during the Omicron wave (December 2021 February 2022).

Identification of Causes:

• The COVID-19 pandemic has had a large, deleterious impact on the mental well-being of the general population, and has disproportionately affected the well-being of vulnerable populations, such as individuals experiencing crisis or suicidal ideation. Individuals who were already suffering from anxiety or depression before the pandemic, now have added stressors to cope with such as social isolation, loss of employment and income, and tense family relationships. The pandemic has exacerbated pre-existing mental health conditions, and intensified feelings of hopelessness and uncertainty.

Areas Needing Performance Improvement:

 Connect with secondary school counsellors to promote program and recruit more youth clients.

2022-23 Action Plan:

• To provide public education workshops and webinars on mental health.

Stopping the Violence (STV)

The Stopping the Violence Counselling Program provides individual and/or group counselling and support for women who have experienced sexual assault, violence/abuse in relationships, or childhood abuse and who are still being affected by the trauma.

Performance Indicators:

Effectiveness outcomes are measured from data collated from STV Outcomes Forms, which are discussed between counsellors and persons served at a relevant time during the counselling period. Experience of Services Received and Other Feedback from Persons Served is measured from Client Feedback Forms. Efficiency and Service Access targets are measured via Monthly Statistical Summaries completed by the counsellors.

Effectiveness		
Outcome	Performance Target	Results
Clients will have an increased understanding of the cycle of violence	90% of clients will report an increased understanding of the cycle of violence	100% of clients reported increased understanding of the cycle of violence
2. Clients will increase their sense of control over their lives	90% of clients will report an increased sense of control over their lives	100% of clients reported an increased sense of control over their lives
Clients will maintain an updated safety plan	90% of clients (to whom it is relevant)	88% of clients (to whom it was relevant) reported having a safety plan in place

	will report having a	
	safety plan in place	
Experience of Services Received and Other Feedback from Persons Served		
Outcome	Performance Target	Results
The majority of	90% satisfaction	100% of clients reported that counselling at
clients will report that	rating	Chimo made a difference in their lives
counselling at Chimo		
has made a		
difference in their		
lives		
		d Other Feedback from Stakeholders
No objectives set in 20	21-22	
Efficiency		
Outcome	Performance Target	Results
The majority of hours	Performance Target 75% direct service	Results 81% of hours worked were providing direct
The majority of hours	75% direct service	81% of hours worked were providing direct
The majority of hours worked will be	75% direct service	81% of hours worked were providing direct
The majority of hours worked will be providing direct	75% direct service	81% of hours worked were providing direct service
The majority of hours worked will be providing direct service to clients Outcome	75% direct service hours Service Performance Target	81% of hours worked were providing direct service Access Results
The majority of hours worked will be providing direct service to clients Outcome The majority of	75% direct service hours Service Performance Target 90% of clients are	81% of hours worked were providing direct service Access
The majority of hours worked will be providing direct service to clients Outcome The majority of clients will have their	75% direct service hours Service Performance Target	81% of hours worked were providing direct service Access Results
The majority of hours worked will be providing direct service to clients Outcome The majority of clients will have their first appointment	75% direct service hours Service Performance Target 90% of clients are	81% of hours worked were providing direct service Access Results 58% of clients were able to be seen within 2
The majority of hours worked will be providing direct service to clients Outcome The majority of clients will have their	75% direct service hours Service Performance Target 90% of clients are	81% of hours worked were providing direct service Access Results 58% of clients were able to be seen within 2
The majority of hours worked will be providing direct service to clients Outcome The majority of clients will have their first appointment within 2 weeks on initial contact	75% direct service hours Service Performance Target 90% of clients are	81% of hours worked were providing direct service Access Results 58% of clients were able to be seen within 2 weeks of initial contact

2021-22 Action Plan:

- We aimed to hire additional personnel to offer appointments during the evening and on weekends.
- We aimed to offer a women's group (if additional personnel were hired and social distancing restrictions were lifted).
- We aimed to maintain firm boundaries and not accept clients whose needs did not fit the STV mandate, thereby keeping space in the program for clients whose needs did fit.

Follow-Up on 2021-22 Action Plan:

- We did not hire additional personnel to offer appointments during the evening and on weekends.
- We did not hire additional personnel to offer a women's group.
- We did maintain firm boundaries and did not accept clients whose needs did not fit the STV mandate, thereby keeping space in the program for clients whose needs did fit.

Impact of Extenuating or Influencing Factors:

 One STV counsellor went on sick leave in October 2021. An Interim Counsellor was hired in December 2021 and began working with clients in January 2022. During this transition time, the STV program was unable to accept new clients. The original STV Counsellor returned in February 2022 and all STV clients were transferred once again. Due to staffing shortages and an increased need for service, we currently have a waitlist for STV. We have never had a waitlist for STV in our 30-year history of providing the program.

Comparative Analysis:

- For 11% clients, the maintenance of a safety plan was not relevant to their situation.
- The Service Access target was not achieved this year (94% in 2020-21 vs. 58% in 2021-22).

Identification of Trends:

- The pandemic has created uncertainty and prevented many STV clients from meeting their goals. Many clients are hesitant to terminate counselling services during the pandemic and lose the support of their Counsellor. As a result, some clients have stayed in the program past the originally agreed-upon time.
- Counsellors continue to notice a trend of former clients asking to return to counselling, whose needs no longer fit the mandates of our programs; these clients are looking for social outlets due to isolation/loneliness caused by the pandemic.

Identification of Causes:

• The COVID-19 pandemic has had a large, deleterious impact on the mental well-being of the general population, and has disproportionately affected the well-being of vulnerable populations, such as women living in violent/abusive situations. At the same time, social service programs have lost funding, have been slow to return to in-person services, and offer very limited virtual services. Therefore, it has become even more difficult to meet the growing needs of our community.

Areas Needing Performance Improvement:

- The Effectiveness, Experiences of Services Received and Other Feedback from Persons Served, and Efficiency performance targets were achieved; no improvement required.
- The Service Access performance target was not achieved. Efforts will be made in 2022-23 to ensure that this target is achieved.

2022-23 Action Plan:

- To expand and diversify the STV program by providing groups (if additional personnel are hired).
- To eliminate STV waitlist.
- To offer intake appointments to at least 90% of new clients within 2 weeks of initial contact.
- To recruit practicum students to co-facilitate the groups.
- To provide public education workshops and webinars on domestic violence and abuse.

Crisis Line Program

The Crisis Line Program answers calls on the Chimo Crisis Line and two provincially networked lines: 1800SUICIDE and 310Mental Health Support. Chimo strives to answer as many calls as possible by ensuring that Volunteers cover shifts.

Performance Indicators:

Effectiveness outcomes are measured from data collected from iCarol (electronic database software) call reports and internal statistics on numbers of Volunteers. It is not feasible to collect data on Experience of Services Received and Other Feedback from Persons Served because Crisis Line Volunteers cannot survey callers after a phone call has ended. Efficiency outcomes are measured using data collected from iCarol call reports. Service Access data are measured using call rate software.

Effectiveness		
Outcome	Performance Target	Results
A portion of Crisis Line callers will feel an increased ability to cope after a call	35% (25% imply/state; 10% inferred by Crisis Line Volunteers) of callers will feel an increased ability to cope after a call	65% (47% implied/stated and 18% inferred by Crisis Line Volunteer) of callers implied/stated/inferred that they felt an increased ability to cope after their call.
2. Crisis Line will maintain a large group of active volunteers; the number of volunteers who resign in a year will equal the number of new volunteers trained	120 active Crisis Line Volunteers will be maintained; the number of volunteers who resigned will equal the number of new volunteers trained	86 active Crisis Line Volunteers were maintained; 36 Crisis Line Volunteers resigned, and 51 new Crisis Line Volunteers were trained.
Not feasible to collect t		Other Feedback from Persons Served
		d Other Feedback from Stakeholders
No objectives set in 20		
•		ency
Outcome	Performance Target	Results
Both Crisis Lines will be covered by volunteers the vast majority of the time that they are open	75% of the time, both Crisis Lines will be covered	35% of the time, both Crisis Lines were covered
2. At least one of the two Crisis Lines will be covered by a volunteer almost all of the time that it is open	90% of the time, at least one Crisis Line will be covered by a volunteer	80% of the time, at least one Crisis Line was covered by a volunteer

Service Access		
Outcome	Performance Target	Results
The majority of Crisis Line calls will be answered immediately	70% of calls will be answered immediately	We currently do not have the technology to measure this.
Complaints: 5 complaints were reported in the period.		

2021-22 Action Plan:

- We aimed to purchase equipment to offer a hybrid model so volunteers could take calls both remotely and onsite.
- The Crisis Line Coordinator (CLC) aimed to support volunteers who struggle with setting boundaries and ending long, non-distressed calls.
- The CLC aimed to follow program policies and follow up with inactive volunteers.
- The CLC aimed to ensure volunteers were meeting their monthly hourly requirements.

Follow-Up on 2021-22 Action Plan:

- Chimo is transitioning to a hybrid model, whereby new volunteers will work onsite, and volunteers currently working remotely will be phased back into working onsite.
- The CLC supports volunteers struggling to maintain boundaries and ending long, nondistressed calls by providing regular debriefing following challenging calls. As well, the CLC provides psychoeducational materials to volunteers regularly with concrete strategies on boundaries, burnout, etc. In addition, "frequent caller profiles" are updated regularly to reflect individualized care plans for callers who have plans in place and/or require limit-setting.
- The CLC follows up with inactive volunteers regularly to ensure they are maintaining their commitment levels and to provide support when required.
- A part time Crisis Line Responder, as well as 5 casual Crisis Line Responders were hired to ensure that shift coverage is met.
- A Chat Line Coordinator was hired to support the CLC's role, as well as to oversee and develop the Chat Line Service.

Impact of Extenuating or Influencing Factors:

- We received more inquiries this year for volunteer opportunities, but not all applicants were suitable.
- The Chimo Crisis Line and Network Crisis Lines are responding to higher acuity callers, and burnout/compassion fatigue is notable across our Crisis Line Responders.
- Our training was largely moved to a virtual training platform, which made it more difficult to create a space of connection and community for training participants.
- Almost all volunteers opted to work remotely off-site during the pandemic in 2021-22.
- Some volunteers opted to take leaves of absence during 2021-22, and many of those who did cited extenuating circumstances with family and personal health/wellness.
- The former CLC resigned in July 2021 and the existing CLC was hired in September 2021.

Comparative Analysis:

One effectiveness performance target was achieved this year.

• Neither efficiency performance target was achieved this year; this can be attributed to the impacts of the COVID-19 pandemic, as well as turnover in the CLC role.

Identification of Trends:

 We received more inquiries this year for volunteer opportunities, but not all applicants were suitable.

Identification of Causes:

 The COVID-19 pandemic had a significant impact on the Crisis Line program's ability to meet all performance targets. The introduction of the remote response system helped to improve performance, but it does not replicate pre-pandemic conditions.

Areas Needing Performance Improvement:

- New technology is set to be introduced across the Crisis Line Network in 2022, which will aim to improve our efficiency results.
- We will continue to observe staffing levels and may potentially hire additional Crisis Line Responders to fill shifts as needed.

2022-23 Action Plan:

- To introduce new technology across the network in late 2022.
- The CLC will continue to support volunteers who struggle with different aspects of Crisis Call responding through supervision, debriefing, and additional training as needed.
- The CLC will continue to follow program policies and follow up with inactive volunteers to ensure that volunteers are meeting their minimum requirements.
- The CLC will endeavor to facilitate more regular staff meetings, as well as regular supervision for volunteers following their training.

Strategic Plan Actions for 2022-23

The Board of Directors and Executive Director evaluate Chimo's progress within the three foundations of our Strategic Plan. This will support the expansion and sustainability of the three pillars: 1) Access to Housing, 2) Access to Justice, and 3) Access to Crisis Care.

Foundation	Objective	Status
Increase Operational Excellence	Review and update all policies and procedures	Complete
	Review and update all job descriptions	Complete
	Training for the Executive Director	Complete
Increase Diversified Funding	Hire professional fundraiser	On hold
Fullding	Increase social media and marketing presence	Ongoing
	Revamp website	Complete
	Expand granting requests	Ongoing
Investigate Integrated Case Management (ICM)	Map ICM Systems	Complete
	Fine tune record keeping	In progress
	Identify best in class systems for ICM	In progress

We have made significant progress within all three foundations and will continue to review our progress annually to ensure compliance with best practices.

Moving Forward 2022-23

Recruitment is top priority, yet the sector is facing a significant deficit when it comes to the availability of frontline, paraprofessional, and managerial staff. Recruiting the right candidate for a managerial position in this HR environment is essential to the support and the success of each program.

Chimo's focus will be on reconnecting our staff, our partners, our clients, and our community post-pandemic. We aim to re-establish relationships and create new ones. Branding and marketing efforts will increase the awareness of our work in the community and support the growth and expansion of our programs.

One additional goal will be to expand the business functionality of the society which is essential to expanding services. This will result in identifying the funds and hiring a full-time marketing events coordinator.