



# Performance Management Report

2024-2025

Constantly Improving

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**Nanaimo Child Development Centre  
Program Performance Report  
April 1, 2024 – March 31, 2025**

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## **1.0 Introduction**

The Performance Management Team (PMT) plays a vital role in supporting continuous quality improvement at the Nanaimo Child Development Centre (NCDC). This team systematically monitors service outcomes across four key areas:

- **Access**
- **Efficiency**
- **Effectiveness**
- **Satisfaction**

This report evaluates how well our services delivered virtually, in-person, and through work-from-home options are meeting the needs of families, staff, and the broader community.

By gathering and analyzing outcome data, NCDC can make informed, evidence-based decisions to guide the development and delivery of programs. This year's report highlights both the strengths and challenges shown through our performance measurement efforts.

The PMT uses a combination of surveys and statistical analysis to assess outcomes. Data is reviewed annually and summarized here, including demographic information and an update on the actions taken in response to feedback from last year's findings. This ensures stakeholder voices are heard and drive meaningful change.

This report is shared with staff, clients, the Board of Directors, parents, and funding partners, and is made publicly available on our website to promote transparency and accountability.

All data collection and reporting activities are conducted by NCDC's internal PMT, in alignment with **CARF accreditation standards**, ensuring accuracy, validity, and replicability for future reporting cycles.

We gratefully acknowledge the dedication of the Performance Management Team:  
**Vicky Boyd, Nicole Waugh, Kathryn Dawlings, and Claire Vass.**

## 2.0 Follow-Up to the 2024–2025 Improvement Plan

Throughout the 2024–2025 reporting period, NCDC implemented key initiatives to enhance service quality, accessibility, and stakeholder engagement.

- **Advocacy and Funding**

The NCDC Board of Directors continued to actively advocate for increased funding across all program areas in response to the growing needs of the community.

- **Timely Referrals**

Intake staff consistently ensured that families were contacted within two weeks of receiving a referral, thereby supporting prompt access to services.

- **Quality Assurance**

The Program Director and Department Leaders conducted regular reviews of client files, including monitoring of goal tracking, to uphold service accountability and effectiveness.

- **Service Delivery Satisfaction**

The Performance Management Team (PMT) administered annual surveys to parents and caregivers to assess satisfaction with NCDC’s hybrid service model, which includes both in-person and virtual delivery options.

- **Staff Well-Being**

The Executive Leadership Team supported a strong focus on promoting employee mental health by ensuring continued access to mental wellness resources and supports.

- **Secure Communication**

In response to family feedback, NCDC implemented a secure, password-protected process for the electronic distribution of client reports, enhancing both privacy and efficiency.

- **Monitoring Access**

The PMT continued to track access across all program areas to ensure services are still responsive to the evolving needs of families.

- **Staffing Enhancements**

An added part-time position was created in the Family Resource Navigation Department. There are now two part-time Family Resource Navigators: one serving families with children aged 0–6 years and one supporting those with children aged 6–18 years, thereby increasing age-specific support capacity.

### How These Efforts Made Us Better

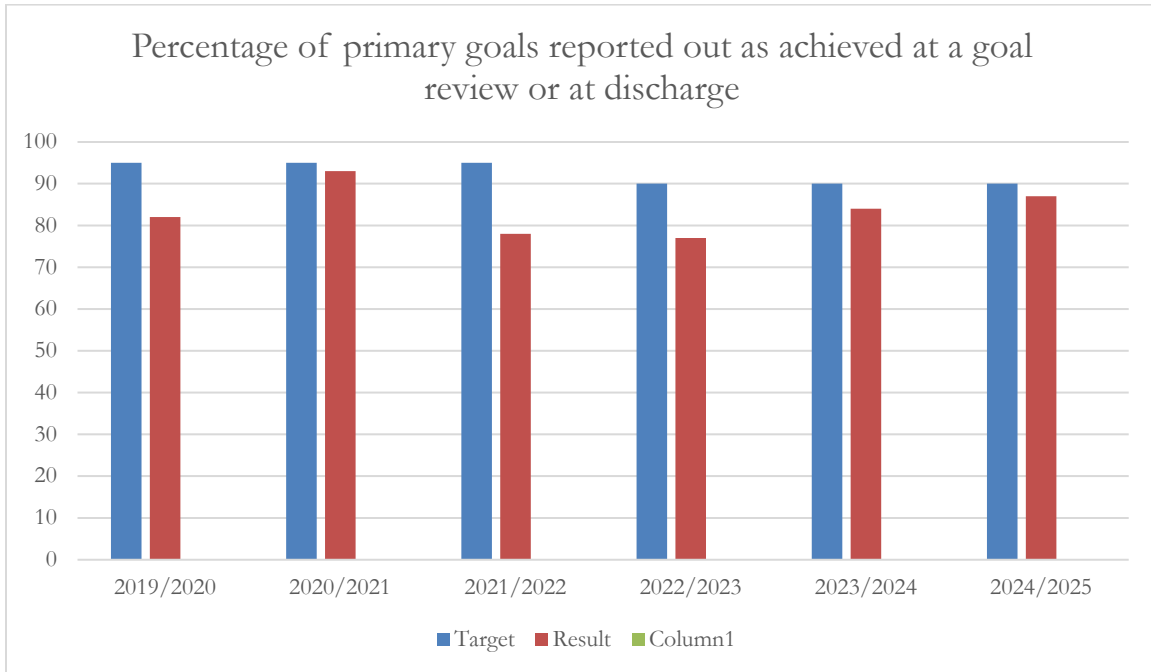
The work of the Performance Management Team centers on gathering and analyzing data in the areas of access, satisfaction, efficiency, and effectiveness. This approach allows NCDC to make strategic decisions that continuously improve the experience of staff, clients, and stakeholders.

By listening to the voices of families and staff, we strengthen service delivery and enhance our advocacy efforts locally and provincially. Feedback not only informs internal improvements—it also empowers us to confidently represent community needs to funders, partners, and policymakers.

Through ongoing reflection, courageous conversations, and collaborative problem-solving, we stay deeply committed to evolving in ways that best serve those who rely on our services.

### 3.0 Effectiveness the quality-of-service results

#### 3.1 Outcome Measure: Maximize clients' attainment of skills and abilities.



#### Measuring Effectiveness Through Goal Attainment

One key indicator of program effectiveness is the extent to which children achieve the goals named in their **Child and Family Service Plans**. These goals are developed in collaboration with families to reflect each child's unique needs and priorities. Goal documents are reviewed at least annually, and progress is tracked through our **Electronic Client Records (ECR)** system.

For this reporting period, a sample of goal documents was reviewed in **September, December, and March**. Results show that **87% of the goals reviewed were achieved**, proving continued progress toward our organizational target of 90%. This is a positive trend, with a **3% increase from the previous year's average of 84%**. While we have not yet reached our target, the upward trend reflects meaningful improvements in service planning and delivery.

### **Outcome Measure 3.2: Enhancing the Mentor Role to Support Implementation of Positive Behavior Support (PBS) in Community Childcare Programs**

The **Positive Behavior Support (PBS)** program is a provincially funded, in-home support service for families of children with special needs—including those with autism—ages 3 to 18 who experience behavioral challenges. PBS is a collaborative, family-centered approach in which individualized assessments, plans, and strategies are developed and implemented in partnership with families. To support plan implementation, families receive both formal and informal training, modeling, and access to up-to-date research and resources.

In addition to supporting families, the **Supported Child Development (SCD)** Program dedicates resources to training staff in community-based childcare and preschool settings in the use of PBS strategies. These programs are supported by NCDC mentors who provide guidance during implementation.

To assess the impact of this mentorship, the **Performance Management Team (PMT)** evaluated how many childcare providers are consistently incorporating PBS strategies into their daily practices. Surveys conducted with 17 participating childcare centers revealed that **100% of respondents are actively implementing PBS strategies on a regular basis**. This is a **10% increase** compared to the previous year, highlighting the positive impact of mentorship and training efforts.

#### **4.0 Efficiency: Measuring Resources Used Compared to Results Achieved**

##### **4.1 Outcome Measure: Minimize Wait Times for Early Intervention Therapies**

One key indicator of efficiency is the length of time families wait to receive early intervention services following a referral. This measure looks at the number of eligible clients who receive an initial programming service within 3 months of intake. Completing an initial consultation with each family allows us to assess a family's individual needs and assign them a service stream which includes one-to-one service, group intervention or access to additional services. This measure includes services provided through **Occupational Therapy, Speech and Language Therapy, Physiotherapy, and Family Development** programs.

Wait time data was collected in **September and December 2024**, and **March 2025**, tracking the period from when a child was assigned to a program to the actual start of service. The average wait time in:

- **September** was 2 months and 14 days,
- **December** was 1 month, 3 weeks, and 4 days,
- **March** was 2 months and 3 days.

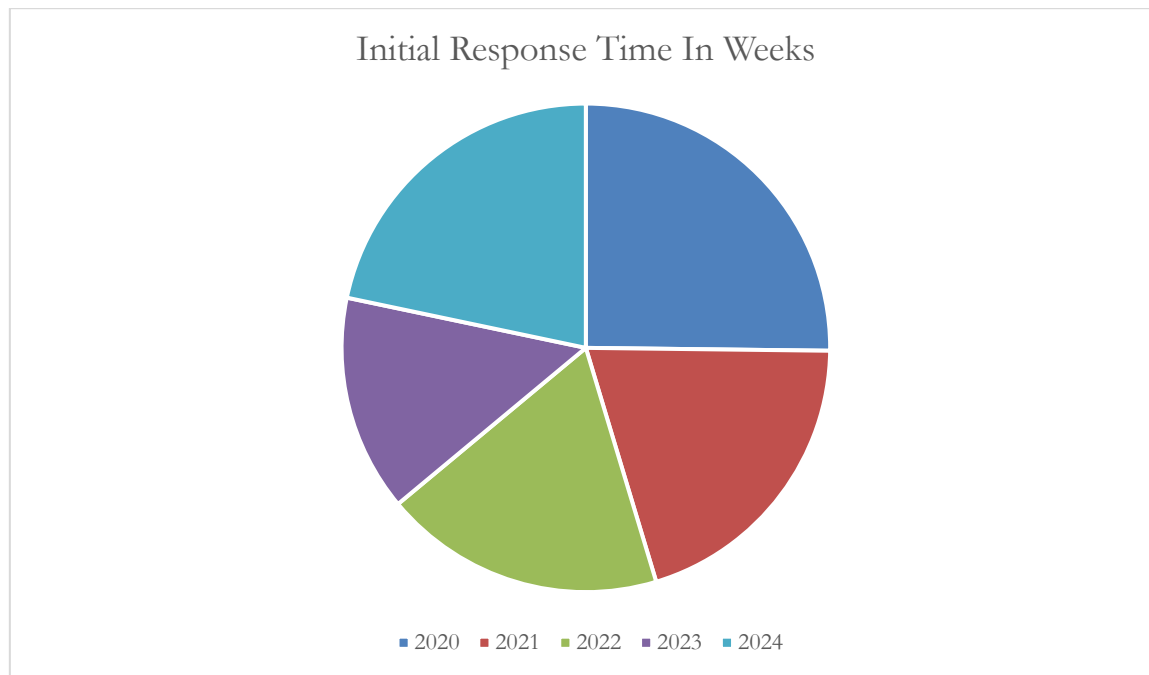
Across the three sample months, the **average annual wait time was 2 months and 4 days**, successfully meeting our target of beginning services within **3 months of assignment**.

This result reflects our ongoing commitment to reducing barriers to access and ensuring prompt support for families in need.

#### 4.2 Outcome Measure: All Families Will Be Contacted Within Two Weeks of Referral

Timely first contact with families following referral is an important measure of service efficiency and responsiveness. For the 2024/2025 fiscal year, families were contacted on average **within 2 weeks and 4 days** of their referral date. While this is an improvement over the previous year, we did **not meet our target of a two-week response time**.

Efforts are ongoing to reduce response times further, and this measure will continue to be watched closely. We stay committed to achieving this goal to ensure that families feel supported and connected to services as early as possible.



### 5.0 Access measuring how and when families reach our services

#### Outcome Measure: Families Report Continued Access to Services Through In-Person or Virtual Delivery

Throughout the pandemic and into the present, the Nanaimo Child Development Centre (NCDC) has still been committed to providing accessible services while prioritizing the health and safety of the community. As part of ongoing evaluation, the Performance Management Team (PMT) looked to better understand caregiver preferences and the effectiveness of our **hybrid service delivery model**, which includes in-person, virtual, and phone-based options.

In **March 2025**, caregiver feedback showed that **97% felt their needs were being met** through their current service delivery format. When asked about preferred methods of engagement:

- **70.59%** preferred **in-person** services,

- **0%** preferred **virtual only**,
- **0%** preferred **phone-based** contact,
- **29.41%** preferred a **combination of in-person and virtual services**.

Families were invited to select more than one method, allowing for a more correct reflection of flexibility and comfort with hybrid approaches.

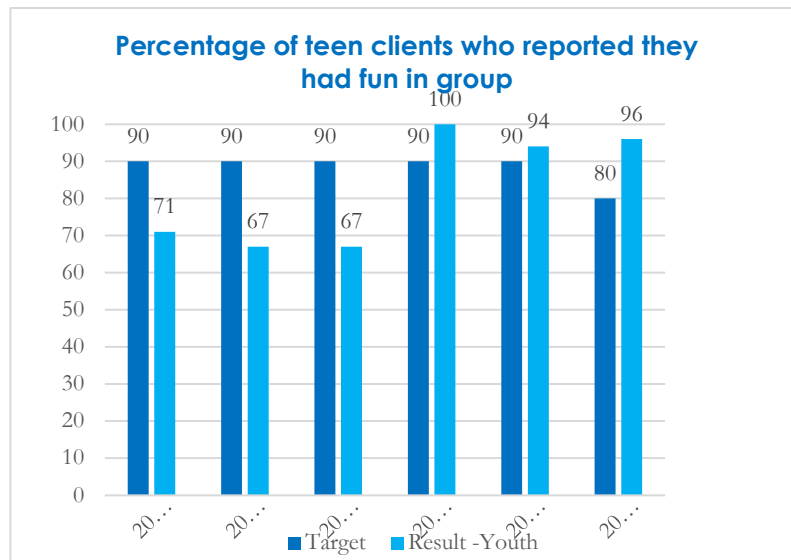
These results suggest that **in-person service delivery is still the most effective way** to meet the needs of families. Notably, there has been a shift back toward in-person service compared to 2024, as the need for virtual service has declined. It will be important to **continue checking family preferences** to ensure that service delivery remains responsive, inclusive, and grounded in best practices.

## 6.0 Family Satisfaction

### 6.1 Outcome Measure: Maximize fun had by youth attending teen group.

As part of ongoing program evaluation, the **Child and Youth Development team** conducted a survey with participants in an **in-person teen group** to assess engagement and enjoyment. When asked if they had fun attending the group, **96% of teens responded "yes,"** while the remaining **4% responded "somewhat."**

This overwhelmingly positive feedback highlights the program’s success in creating a welcoming, enjoyable, and supportive environment where youth feel connected and engaged.



During the reporting period, the **Child and Youth Development Program** continued to offer **goal-focused social groups** for children and youth between the ages of **5 and 19**. These groups are delivered **in person only**, as face-to-face interactions are essential for this population to engage meaningfully in activities, work toward their goals, and recognize their own progress.

The effectiveness of the program is reflected in the **consistent positive feedback** received from participating children, youth, and their families. This feedback underscores the value of in-person engagement in supporting developmental goals and fostering social-emotional growth.

### 6.2 Outcome Measure: Families Report Satisfaction with How They Received NCDC Services (Virtual or In-Person)

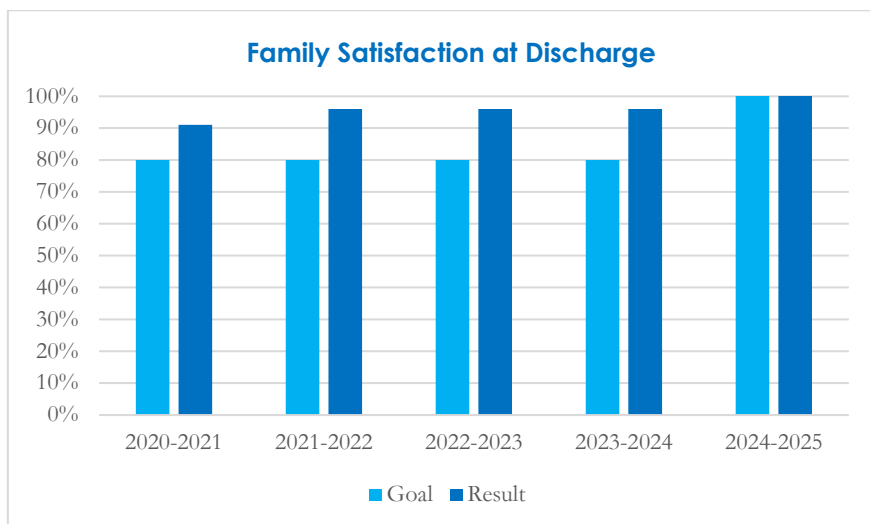
As part of our commitment to continuous improvement, families were asked at the time of discharge to share their level of satisfaction with how services were delivered—whether **in-person, virtual, or a combination of both**. In **March 2024, 97% of families reported being satisfied** with the method through which they received services.

This measure is particularly important as we continue to refine our **hybrid model of service delivery**. Regular check-ins with families will remain a priority to ensure that the modes of service presentation continue to meet their needs, preferences, and comfort levels.

### 6.3 Outcome Measure: Maximize Satisfaction of Children and Families at Discharge

To evaluate satisfaction at the point of service completion, a **discharge survey** is mailed to each family along with their discharge documents. During the reporting period, **completed surveys** were returned to the Centre. Of these, **93% of respondents indicated they were satisfied or very satisfied** with the services they received from NCDC.

This outcome **exceeds our target of 80% satisfaction** for the **fourth consecutive year**, reinforcing the quality and consistency of care provided throughout the duration of service.



## 7.0 External Stakeholder Satisfaction

### 7.1 Outcome Measure: For Community providers to collaborate service with the Nanaimo Child Development Centre

An annual survey was delivered to Pediatricians and CYSN Social workers who support families that access services at the Nanaimo Child Development Centre. The survey asked community providers to report how satisfied they were with collaboration with the NCDC. Based on the surveys that were received, 100% of the providers are satisfied with the collaboration with NCDC. According to the feedback written in the surveys, the community providers were impressed with the commitment and services that are provided to the children in our community.

## 8.0 Staff Satisfaction

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### 8.1 Outcome Measure: The NCDC Supports the Mental Health of Its Employees

The Nanaimo Child Development Centre (NCDC) continues to recognize the growing impact of mental health challenges on employees, both in and outside of the workplace. In response, NCDC remains deeply committed to making **mental health and staff wellness a priority**.

Throughout the 2024/2025 year, the Centre facilitated multiple opportunities for staff to stay connected and supported. This included regular gatherings in **zone teams, department teams**, and as a **whole staff group**, with activities taking place both **within the Centre and in the broader community**.

Additional wellness supports included:

- **Access to the CALM app** for guided mindfulness and stress management,
- A resolute **Wellness Committee** that met throughout the year to identify needs and promote staff well-being,
- A **Fun Committee** that organized events and initiatives to enhance team morale and connection.

As a result of these efforts, **100% of staff reported feeling supported** by NCDC in relation to their **mental health and overall wellness**—a strong indicator of the Centre’s success in fostering a healthy and resilient workplace culture.

### 8.2 Outcome Measure: Percentage of Staff Reporting Job Satisfaction

The Nanaimo Child Development Centre (NCDC) takes pride in fostering a **supportive, flexible, and communicative work environment** that promotes a strong work-life balance. Staff satisfaction is a key indicator of workplace health and is reflective of the Centre’s ongoing efforts to create a positive and engaged organizational culture.

For the **2024/2025 reporting period**, **97% of NCDC staff reported being satisfied with their job**. This exceeds our ongoing target of 90% and is a testament to the Centre’s commitment to valuing and supporting its team.

NCDC will continue to prioritize initiatives that strengthen staff satisfaction and build on this positive momentum in future years.

## 9.0 Family Comments – what parents had to say.

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The Nanaimo Child Development Centre continues to receive heartfelt feedback from families, reflecting the meaningful impact of services across programs. These comments speak to the dedication of staff, the accessibility of services, and the overall sense of community fostered at the Centre:

*"A rock-solid staff. Never met such a huge group of amazing women. Thank you so much for everything you do."*

*"Support we as a family get from their rock star support team is greatly appreciated."*

*"Thank you for always listening and finding new resources."*

Families consistently highlight the value of **inclusive, friendly environments, reliable service delivery, and developmentally enriching programs**. Many expressed appreciations for the flexibility of home and daycare visits:

*"Physiotherapy came to my home, which made things very easy for me as I didn't have to disrupt nap times for my baby."*

*"It is invaluable that the visits typically occur in our home or at daycare. It would be more difficult to access those resources if we had to come to the office."*

Others reflected on the personal impact of services:

*"I still go to the CDC baby group, and they have helped advocate for us with our medical team."*

*"I have been so impressed with the support we've received from the CDC, specifically Claire and Callie. I had no idea this agency or service existed, and it has made a huge difference in my family's life and my postpartum experience."*

These testimonials reinforce the importance of responsive, relationship-based care and the lasting difference it makes in the lives of children and families.

### **Consistent Themes: Areas for Improvement**

As part of our commitment to continuous quality improvement, feedback from families and staff has helped identify key areas where the Nanaimo Child Development Centre can strengthen services. The most noted themes for improvement during the reporting period include:

- **Increased time allotted for services** to allow for deeper support and goal progression.
- **Reduced wait times** to ensure timely access to intervention.
- **Expanded programming for school-aged children**, particularly in group and recreational settings.

These insights will guide future planning and inform the Centre’s advocacy, resource allocation, and program development efforts.

## 10.0 Improvement Plan

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### Actions for Organizational and Program Improvement

Based on the findings from this report, several actions have been identified to drive improvements across both organizational practices and specific programs for the next reporting period. These actions aim to address areas of growth and are detailed in the table below. A status update on progress will be provided in the next **Performance Measurement Report**.

Action	Program Area	Person Responsible	Timeline
Advocate for increased funding	All Programs	NCDC Board	2025-2026
Ensure families are contacted within 2 weeks of referral	All Programs	Intake Worker	Monthly
Complete quality assurance checks on files (including goal tracking)	All Programs	Program Director/Department Leaders	Monthly
Survey parents regarding satisfaction with hybrid service	All Programs	PMT	Annually
Continue providing access to mental health resources for staff	All Staff	Executive Leadership	Ongoing
Continue to monitor family access to services	All Programs	PMT	2025-2026

## 11.0 Services

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### Program Overview

While all programs at the Nanaimo Child Development Centre (NCDC) aim to support children, youth, and families, each has distinct mandates, eligibility criteria, and services. Below are detailed descriptions of the various programs:

#### C.A.R.E. Program (Child & Community Advocacy, Resources and Education)

**Mandate:** To provide child and community advocacy opportunities, parent and community education, and access to resources and materials.

- **Child Health Promotion & Prevention** (e.g., Outreach Clinics, Playgroups)

- **Community Advocacy & Capacity Building** (e.g., Workshops, Volunteers)
  - **Therapeutic Toy, Equipment, and Book Lending Libraries**
  - **Lending Library** for parents and community professionals
  - **Parent/Community Education** (e.g., Parenting Groups)
- 

### **Early Intervention Program (EIP)**

**Mandate:** To provide early intervention services in a family-centered model.

**Admission Criteria:**

- Open referral with parent approval
- Birth to 6 years
- Resides within the Lantzville to Ladysmith geographic area, including Gabriola Island

**Services Provided:**

- Early identification and intervention
- Developmental assessments and consultation with families, care providers, and professionals
- Advocacy, education & training, and supportive services

**Professional Staffing:**

- Physiotherapy
  - Speech Language Pathology
  - Occupational Therapy
  - Family Development
  - Infant Development
- 

### **Child and Youth Development Program (CYD)**

**Mandate:** To build family capacity by providing opportunities for clients and families to increase their knowledge and skills, focusing on maximizing social skills, independence, and community integration.

**Admission Criteria:**

- Children birth to 19 years old with identified support needs
- Referral and eligibility criteria set by MCFD - CYSN

**Services Provided:**

- Therapeutic and skill-based individual and group support sessions
- Education and training on topics such as safety, social skills, and behavioral supports
- Consultation with families and community members

**Professional Staffing:**

- Child and Youth Care Degrees

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### **School Age Therapy Program (SAT)**

**Mandate:** To provide Occupational Therapy (OT) and Physiotherapy (PT) services to school-age children, assisting with health maintenance and maximizing the benefits of educational programs through School District 68.

**Admission Criteria:**

- Referrals from School District 68 (SD 68) with parent consent

**Services Provided:**

- Client-focused consultation to school district personnel
- Advocacy and education on health-related needs within educational settings

**Professional Staffing:**

- Physiotherapy
  - Occupational Therapy
- 

### **Supported Child Development Program (SCD)**

**Mandate:** To support inclusive childcare for children from birth to 12 years of age (age 18 in exceptional circumstances) who require extra support in childcare settings.

**Admission Criteria:**

- Open referral system with parent approval
- Children with developmental issues requiring support in a childcare setting.

**Services Provided:**

- Consultation with staff, family members, and childcare settings
- 1:1 support and resources
- Education, screening, and advocacy for inclusive childcare environments

**Professional Staffing:**

- Early Childhood Educators
  - Child and Youth Degree
- 

### **Family Resource Navigator**

**Mandate:** To provide referral and networking services to clients receiving NCDACS services, community partners, and the public, with support navigating community systems, including social, financial, advocacy resources, education, and health-related services.

**Admission Criteria:**

- Open to the public
- Children birth to 19 years

**Professional Staffing:**

- Family Resource Navigator (Degree in Human Services)