

56th Annual Report 2008-2009



Therapy, care & support under one umbrella

9460 140 Street Surrey, BC V3V 5Z4 www.centreforchilddevelopment.ca

Executive Summary

The Centre for Child Development of the Lower Mainland doing business as "The Centre for Child Development" achieved the following key results during the period from April 1, 2008 to March 31, 2009 (please see the related sections of the report for more information on each topic)

Organizational Governance, Mission and Policy Priorities

Our 2009 annual planning session brought together Board Directors and Senior Staff "In Pursuit of Excellence as a Preferred Solution Provider", building on the Service, Reputation and Market, and Finance priorities from the previous year.

Staffing levels have continued near full recruitment during the 2008/2009 fiscal year due to the outstanding efforts of Senior Staff across all Departments which has in turn sustained service levels. Nonetheless, given continued high intake and referral rates, waitlists have continued at similar levels to the previous year – ranging from approximately 1 to 2 years. Senior Staff continue to work diligently with all staff towards improving service access and efficiency in an effort to serve as many children and youth as possible as well as possible.

Management of Funds & Revenue Development:

Revenues: The Centre's funders and donors have been steadfast in ensuring children with special needs are supported during these tough economic times resulting in a modest growth in revenues from \$8.7M in 2007/2008 to \$8.9M in 2008/2009.

Volatile economic conditions and related revenue volatility significantly increased the need for active management of The Centre's finances. Therefore, much credit is owed to Chief Financial Officer Kagnew Asaye for achieving this year's TENTH consecutive annual "In the Black" Excess of Revenues Over Expenses of \$4,573, which the Board has placed in reserves.



TONY MILES Chair, Board of Directors



GERARD BREMAULT, MSW, RSW Chief Executive Officer



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The Centre for Child Development

Introduction

The purpose of this Annual Report is to provide members of the society, funders, donors and the public with an account of The Centre for Child Development of the Lower Mainland's performance for the period from April 1, 2008 to March 31, 2009.

As the Broadbent Report pointed out, "voluntary organizations are self-governing agencies which hold a public trust related to a particular mission and they generally use donated funds to accomplish this mission. As a result, these organizations are responsible for what they choose to do and how well they do it. This means they are, at minimum, accountable for: Establishing an appropriate mission and/or policy priorities and ensuring their relevance; Sound management of funds

received from donors and governments and of expenditures; Effective organizational governance (including structures and processes for managing human resources); And the outcomes, quality and range of their programs and services." #1 Given the above accountabilities, this report is organized accordingly.

The Centre provides:

Casting and Splinting Communication Therapy Developmental Medicine Eating Skills Team Equipment Team FASD Key Workers Family Services Support Groups Hydrotherapy Occupational Therapy Physiotherapy Preschool Programs Psychology Recreation Therapy Supported Child Development



Agency Overview

Did you Know?

The Centre was founded 56 years ago on June 17, 1953 by a group of parents in Norm and Mabel Sherritt's living room.

The Centre has been a federally registered charitable society for 55 years, since January 12, 1954.

We've had 2 legal names and 5 operating names for what our kids simply call "The Centre".

(Our original legal name was the "Lower Fraser Valley" Cerebral Palsy Association"; it's now "The Centre for Child Development of the Lower Mainland"; our operating name has changed from the "Children's Treatment Centre" to "Variety Treatment Centre" to "Variety Child Development Centre" to "South Fraser Child Development Centre" to its current shortened version of the legal name: "The Centre for Child Development".)

Norm Sherritt was on the Board of Directors for 40 years and as best we can tell has attended every one of the Annual General Meetings (it's probably a record!)

The Centre's first employee was retired R.C.M.P. Officer Frank Pearson of White Rock who began driving 8 children per day to the Cerebral Palsy Clinic in Vancouver on September 1, 1954.

In 1954 The Centre became a charter member of the Surrey-New-Westminster United Good Neighbour organization, a forerunner to the current United Way.

The Centre has had 6 Executive Directors/Chief Executive Officers. (In November 1960, Marjorie Hardy became the first full-time Executive Director - there is a memorial scholarship in her name for UBC rehabilitation students. She retired February 1, 1971. Dorothy Ladner was Executive Director until 1974 followed by Elio Azzarra until 1981; Sharon Kreutzer until 1987/88; and Ian Moody until 1998. Gerard Bremault since 1999.

Our first Children's Treatment Centre officially opened on September 4, 1961 on the corner of the Surrey Memorial Hospital grounds. It was a 24-foot by 60 foot prefabricated building. We had 7 staff, an active caseload of 23 children and a waitlist of 80 children. The Centre currently operates from 3 sites in Surrey, Delta and Langley. We now have 150 staff, serve 1800 children per year and have 650+ "waits for service."

We got our first eviction notice from Surrey Memorial Hospital in July 1968; It took us until November 1st, 2002 to "forgive" them and rent space to our dear colleagues in the Fraser Health Authority Assessment Network on the 2nd floor of our Surrey site.

The Surrey site is 40,000 square feet and opened as the "Variety Treatment Centre" on January 11, 1974. Lookout Preschool in Delta opened on October 1st 1979 (yes, that's 30 years ago); no wonder the complete top to bottom renovation courtesy of the djavad mowafaghian foundation was so very welcome in 2008! April 17th 1979 saw the opening of our first group home - Old Yale Road Residence, followed by Variety Children's Villa October 1st 1980, Guildford Glen in 1982 and Newton Place in November 1990. In light of the increasing medical needs of residents, after much heart wrenching transition planning, the transfer of remaining group homes to other specialized adult service providers was finalized in 2002-2003.

The Langley site opened in October 2001 in a "first of its kind' collaboration between two local non-profit, charitable agencies; The Centre and Options Services to Communities Society.

Stephanie C. won the 2007/2008 staff contest to name our electronic case management system by entering a shortened, child friendly form of our umbrella logo: UMBY Linda W. won the 2009 summer staff party hoola hoop contest by popular acclaim

Waitlist time in 1985 was one and half to three months; it is now one to two years...

#1 Ed Broadbent, Panel on Accountability and Governance in the Voluntary Sector, Final Report, "Building on Strength: Improving Governance and Accountability in Canada's Voluntary Sector" (February 1999), p. 17



Services Today

Today's Centre for Child Development

operates with approximately 150 professional staff from 3 locations in Surrey, Delta and Langley reaching out to children in over 65 child care settings; in dozens of schools in all the South Fraser School Districts and in hundreds of family homes.

The Centre delivers medical rehabilitation therapy, care and support to children with disabilities and their families residing throughout the South Fraser Region in Surrey, South Surrey, White Rock, Delta and Langley. The Centre serves children from birth to 19 years of age with a variety of neurological, orthopaedic, development and learning difficulties including cerebral palsy, spina bifida, muscular dystrophy, down syndrome, autism, attention deficit hyperactivity disorder, brain injuries & infections, seizure disorders and other developmental disabilities.

It is the only "one-stop shop"

in the South Fraser region for children with special needs and their families and one of the most comprehensive and specialized paediatric medical rehabilitation centres in the province.

The Centre's professionals include specialized paediatric psychologists, family services and BOARD OF REGISTRATION parent support workers, FOR STATUS MOREON IN IN FASD key workers, ATION OF SOCIAL WORKER occupational therapists, speech-language ATHOLOGISTS pathologists, physiotherapists, early childhood educators, supported child development consultants 0 0 College of and teachers, 0 **Physical Therapists** College of Psychologists of British Columbia recreation specialists, of British Columbia technicians, a dietician and a Doctor specializing in EARLY CHILDHOOD EDUCATORS OF BC developmental paediatrics. PHYSIOTHERAPY ASSOCIATION OF BRITISH COLUMBIA

VELOPMENT

Persons Served and Outcome Areas

The following persons served #3 and outcome areas are central to our business:

Children and youth with disabilities (0-19 years of age) - Outcome Areas:

Ability/Skill/Knowledge: increasing a broad range of personal skills and abilities to overcome, offset or reduce the effect of their disability

Physical Well-being: reducing trauma, stress, pain, deterioration; increasing comfort, strength, mobility, health

Emotional Well-being: reducing trauma, stress, pain, anger, frustration; increasing self-confidence, sense of success, happiness and hope

Independence: reducing helplessness/ dependence; increasing ability to function independently

Social Acceptance/Integration: decreasing isolation; increasing peer acceptance, support, normal relations, participation

Their families and caregivers - Outcome Areas:

Ability/Skill/Knowledge: increasing ability to assist and enable child/youth who has a disability

Emotional Well-being: reducing trauma, stress, grief, loss, pain, anger, frustration; helping to cope with the challenges of raising a child/youth with a disability & increase self-confidence, sense of success, happiness & hope

Independence: reducing helplessness; increasing ability to function independently

Social Acceptance/Integration: decreasing isolation; increasing mutual support amongst caregivers who have children with disabilities and support from caregivers who have typical children

Other service providers to the persons we serve - Outcome Areas:

Ability/Skill/Knowledge: increasing their ability to assist and enable children in their care who have a disability

Social Acceptance/Integration: increasing social acceptance/ integration within these individual sites and the broader community through strategic partnerships & teamwork; creating advocates on behalf of children with disabilities.

#2 This revised "Mission" statement was adopted in 2007 by the Board of Directors. The use of the term "Ends" statement reflects the Board's adherence to a Carver model of governance and an associated set of board governance policies. #3 The use of the term "Persons served" reflects the Association's adoption of CARF Medical Rehabilitation standards. **Ends Statement**

Helping children with special needs reach their potential.*2

Values Statement

The provision of services to children and youth with developmental disabilities and their families shall be based on the following beliefs:

- All children and youth with developmental disabilities have the right to high quality programs and services, which facilitate their physical, social, emotional, and intellectual development.
- Programs and services should be community-based, foster integration of children with disabilities into the community, readily accessible, and developed to meet the individual needs of the child and youth.
- Effective programs and services focus on the child and youth using a family-centered care approach.
- Programs and services will be provided through a collaborative team effort that includes children and youth, parents and professionals working in an atmosphere of equality and mutual respect.



Board of Directors

Our 2009 annual planning session brought together Board Directors and Senior Staff "In Pursuit of Excellence as a Preferred Solution Provider", building on the Service, **Reputation and Market, and Finance** priorities from the previous year:

Profile:

We will continue to build The Centre's profile so that The Centre is top of mind for donations, funding, volunteers and marketing.

Waitlist and Service Delivery:

We will continue to bring down waitlists by continuously improving service efficiency and effectiveness across a full continuum of service delivery including prevention, education, diagnosis, assessment, support, treatment etc.

Advocacy:

We will provide increased information about the needs and status of children and youth with special needs, developmental disabilities and their caregivers to key decision makers.

Accreditation:

*In October 2007, CARF (Commission on Accreditation of Rehabilitation Facilities) confirmed that The Centre for Child Development had been re-accredited for a period of three years for its Outpatient Medical Rehabilitation Programs - Multiple Service (Pediatric Family Centred) through each of its three sites in Surrey, Langley and Delta. During 2008/2009 work has continued to enhance efficiency and effectiveness through the following continuous quality improvement projects: UMBY: Electronic Case Management System **Consumer Satisfaction Surveys Consumer Access Streamlining** Best Practice Standardized Outcomes Measurement Efficiency Analysis & Improvement



Many thanks and appreciation are owed to the fantastic teamwork and leadership of the entire Leadership Team.



Board of Directors: Back Left to Right: Wayne Robert-Honorary Director; Ken Hahn-Honorary Director; Joanna Whalley-Secretary Middle Left to Right: Andrea Rasmussen-Vice Chair, Tony Miles-Chair, Board of Directors

Front Left to Right: Karla Pearson-Director; Yasmeen Saveed-Director Absent: Emily Wilson-Treasurer, Frank Mesich-Honorary Director



Centre for Child Development Senior Staff & Consultants: Back Left to Right: Foad Shodjai-Acting Chief Information Officer/IT Consultant; Karen Edwards-Director of Occupational Therapy; Heidi Wagner-Director, Recreation and Building Service;

Middle Left to Right: Judy Krawchuk-Chief Operating Officer, Child Development Foundation of BC; Veronica Newell-Director, Physiotherapy; Dr. Brian Katz-Director of Psychology & Family Services; Kagnew Asaye-Chief Financial Officer Bottom Left to Right: Gerard Bremault-Chief Executive Officer; Lesley Taylor-Continuous Quality Improvement Consultant; Janice Dungate-Human Resources Consultant; Christy Faraher-Amidon-Director, Communication Therapy Absent: Mavis Holm-Accreditation Consultant, Heather Basham-Acting Director, Supported Child Development; Cheryl Taylor-Director, Preschools; Dr. Alison Laswick-Developmental Pediatrician



Programs and Services

For a detailed description of the Programs and Services we provide, please visit **www.centreforchilddevelopment.ca**

Service Statistics

The number of children served increased most significantly in:

Physiotherapy (up 39% from 275 during March 2008 to 381 during March 2009) Occupational Therapy (up 32% from 261 during March'08 to 345 during March'09) Eating Skills Team (up 18% from 96 to 113 for the full year).

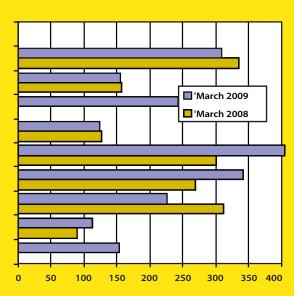
Despite reaching full staffing levels, increased intake and referral rates continue to make waitlist reduction extremely challenging; waitlists have again been restrained from expanding beyond levels of 1-2 years and in some cases are being reduced below this level. In addition to optimizing staffing levels, optimizing efficiency while retaining best practice service quality is a high priority of our Senior Staff Team so as to serve as many children as possible as quickly as possible.



Persons Served per Month (at March of each year)

Supported Child Development Preschools Family Services* (Annual) Recreation Therapy Physiotherapy Occupational Therapy Communication Therapy

Developmental Medicine (Eating Skills Team) Psychology & Parent Support* (Annual)





Management of Funds

Key Achievements:

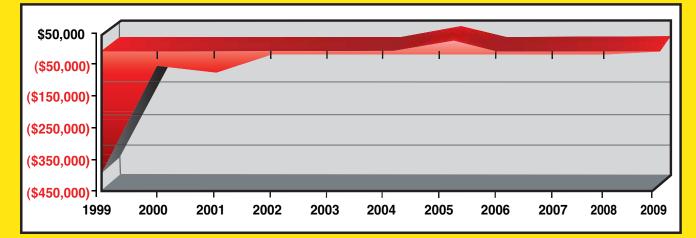
Produced TENTH Consecutive Annual Excess of Revenues Over Expenses. The amount for 2008/2009 is \$4,573. Special credit is owed to Kagnew Asaye, Chief Financial Officer for his continuous diligence regarding The Centre's finances.

This is a particularly noteworthy achievement during a very challenging recession.

As can be seen from Chart 1 below, the impact of the above mentioned ten consecutive annual excesses of revenue was initially to eliminate the cumulative deficiency in unrestricted net assets that peaked in 1999 and subsequently to ensure a consistently positive balance sheet.



CHART 1: THE CENTRE'S UNRESTRICTED ASSETS





Management of Funds Continued

Financial & Administrative Services

The Finance & Administration Department played a key role in supporting the delivery of services to children and families within an increasingly complex set of internal and external requirements for a growing number of key stake-holders. These include persons served, funders, donors, regulators, suppliers, related service providers and staff. Finance and Administration managed thousands of clinical and financial records, while expanding, improving and maintaining the backbone of physical and electronic data and communication systems that support them. The electronic clinical records transformation launched in 07/08 with the introduction of UMBY required much additional continued evolution of hardware and software infrastructure during 08/09. Many thanks are particularly owed to Kagnew Asaye, CFO in concert with the Senior Staff Team and our KnowledgeTech Partners to ensure this continued evolution.

Programs and Services

Chart 2 shows the "tight tracking" of Revenues vs Expenditures during the past several years, while also showing the general rise in the budget during this period. In comparing '07/08 to '08/09,

overall revenues (and expenses) can be seen to have increased modestly.

Overall revenues increased by 2.4% from \$8.7M in '07/08 to \$8.9M in '08/09 primarily due to increased support from the Ministry of Children and Family Development and greater deployment through full staffing which offset reduced revenues from investments (due to lower interest rates; our Chief Financial Officer is owed much credit for ensuring no losses occurred) and the transition of fundraising activities to the Child Development Foundation of British Columbia.

The decline in revenues and expenditures from '01/02 to '02/03 is largely due to the transfer of adult residential services to other agencies.

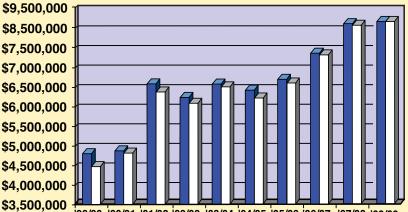
Audited Financial Statements (March 31, 2009): To obtain a copy of the Audited Financial Statements, please contact Gerard Bremault, Chief Executive Officer.



Revenue

Expenses

CHART 2: THE CENTRE'S UNRESTRICTED ASSETS



99/00 '00/01 '01/02 '02/03 '03/04 '04/05 '05/06 '06/07 '07/08 '08/09

Communication Therapy

People Served:

Between April 1, 2008 and March 31, 2009, the Communication Therapy Department served 519 children, which included a total of 2,925 visits. In the month of March 2009, the Department served 219 children, including 239 service sessions. Of the children served, 90% were children with multiple needs that were seen by a team of service providers from this and other agencies. Service frequency ranged from 1 to 5 meetings/episodes per month and each service episode ranged from 30 minutes to three hours. 56% resided in Surrey, 34% resided in Langley, 5% resided in Delta, and 5% resided in White Rock/South Surrey. There was a near doubling of the number of children waiting for service in Surrey and more than a 66% increase in the number of children waiting for service in Langley over the same period last year due to increased volume of referrals. Service was delivered approximately 65% of the time at one of our three sites in Langley, Surrey or Lookout Preschool in Delta and 35% of the time in homes, preschools or daycare centers.

Key Achievements:

The Communication Therapy Department increased their offerings of Hanen parent training workshops and introduced two new workshops for families with children on the waiting list: Let's Get Visual and Body Talk. Staff developed five single page handouts on typical speech and language development with tips on how to promote growth in speech, language and play skills that were distributed broadly to parents and caregivers through preschool, daycare centres, and Ready-Set-Learn preschool drop in centres in Surrey, White Rock, Delta and Langley.

Skill Enhancement:

CT Staff attended these workshops: BC Early Hearing Program; Sensory Integration; MORE: Integration of the Mouth with Sensory and Postural Functions; Service Provision for Children with Dual Sensory (Deaf/Blind) Impairments; Understanding Social Cognition and It's Impact on Autism Spectrum Disorders; Incidental Teaching for children with Autism; Steps In the Right Direction: Aboriginal Issues in Early Childhood Development; Collaborative Partnerships in Paediatric Practice; Supporting Development of Children and Youth with FASD; Hearing Impairment and Cochlear Implants; Understanding Cultural and Linguistically Diverse Cultural Interactions; Inclusion Based Supports; Sensory Strategies for Oral Motor Skills; Working with Preschoolers Who Stutter; Neuroscience in the 21st Century: Through an SLP Lens; Hey, My Brain Doesn't Work That Way!: Understanding Sensory Processing and Promoting Self-Regulation.



Communication Therapy Continued

Provincial Communication Therapy Professional Association:

Director was appointed by the Minister of Health as a member of the first Board of the College of Speech and Hearing Health Professionals of B.C., regulating the practice of speech-language pathologists, audiologists and hearing instrument practitioners. Christy Faraher-Amidon served on planning committee for the 2009 Annual Fall Conference of the BC Association of Speech-Language Pathologists and Audiologists.

Student Training:

CT Department hosted a speech-language pathology practicum student from University of Alberta.

Continuous Quality Improvement:

CT Department reviewed the literature and evaluated three possible outcome measurement tools, selecting the AusTOm (Australian Therapy **Outcome Measure) for Effectiveness Speech** Pathology. This tool allows speech-language pathologists to describe the relative abilities and difficulties presented by a child and their caregiver in the four domains of impairment, activity, participation and well-being in order to monitor change over time. These four domains were judged by the Department to relate very well to both the International Classification of Functions and The Centre's stated outcomes for children and youth with disabilities. Following training and ongoing discussions, staff in the Communication Therapy Department began applying AusTOM ratings following initial speech and language assessments completed in late fall 2008.

To increase efficiency of services provided, the CT Department began revision of report templates to:

- provide meaningful information to families and caregivers
- provide professionally appropriate documentation of communication and related issues
- ensure compliance with accreditation standards
- reduce report writing time

Implementation of the revised CT report templates is anticipated for late summer 2009.

Staffing:

Staffing in speech-language pathology remained fairly stable as we welcomed a new UBC graduate to our team. The Pediatric Dietitian, participating with the Eating Skills Team, saw an average of 19 children per month, a slight increase over last year. 27% of those seen were new referrals, up 5% from last year.



Eating Skills Team

People Served:

The Centre for Child Development Eating Skills Team serves children with multidisciplinary developmental concerns whose oral motor difficulties contribute to compromised safety and/or nutritional intake. The Team provides assessment and consultation in the area of feeding to parents and the Primary Care Team. A physician referral is required. The Team consists of a Developmental Pediatrician (.5 FTE), Speech-Language Pathologist (.4 FTE), Occupational Therapist (.2 FTE), Registered Dietitian (.31 FTE), and Psychologist (as required).

The Team's initial goal is to ensure that the child is safe to swallow. Practical strategies are provided to address identified concerns. Strategies involving food textures, positioning, utensils, feeding techniques and sensory issues are discussed.

Key Achievements:

- The Eating Skills Team provided consultation to 113 children this past year.
- Dietary consultation has been expanded to include centre clients who do not require full services of the entire Eating Skills Team (EST).
 Joint follow up consultations with the dietitian and Eating Skills therapists have been occurring weekly, resulting in more efficient service delivery.
- The Speech-Language Pathologist and Occupational Therapist have provided increased follow-up to children assessed by the Eating Skills Team.
- Team members attended a major conference relevant to our area of expertise: Sensory Processing Related to Praxis and Postural Stability, June 2008.
- Together with a young Eating Skills client and his family, Eating Skills Team was featured in an on-line article on the United Way website.
- Andrea Rowan, Speech-Language Pathologist and Manjit Gill, Occupational Therapist presented Sensory Feeding Issues and Treatment Strategies to therapy staff, October 2008. Dr. Alison Laswick, Developmental Paediatrician, and Andrea Rowan, Speech-Language Pathologist presented Food for Thought at Re-Imagining Health Services: Innovations in Community Health conference in November 2008. The Conference was hosted by the Canadian Centre for Policy Alternatives BC and Simon Fraser University's Economic Security Project. This presentation featured our Eating Skills Team model and was highlighted as an example of health innovations in the community in the Jan/Feb 2009 Health Sciences Association Report.
- Andrea Rowan, S-LP and Tricia Lee, Dietitian, presented Look out Stomach, Here it Comes to Langley College students, March 2009.
- EST provided educational opportunities for Speech-Language Pathology and Occupational Therapy Students.
- Team members continue to participate in videofluoroscopic evaluations and team conferences at Sunny Hill Health Centre and BC Childrens Hospital.
- Ongoing liason with programs at Sunny Hill Health Centre, BC Childrens and Surrey Memorial Hospitals to streamline the referral process and reduce duplication of service.
- Direct communication with community Paediatricians, Childrens Hospital paediatric specialists, as well as other community professionals, to optimize quality of care.



Family Services

People Served:

Each Family Service Worker is expected to provide services to 25 – 30 children and families per month. This goal is consistently met or exceeded. Family Service Workers assist in completing referrals for children with complex needs who are referred to the Centre. They also provide support to the Centre's Eating Skills Team in providing liaisons between the family, the child's physicians, and Centre Staff. Family Service workers also provide support to families who are experience crisis situations.

Clinicians in the FASD program see an average of 12 clients per month due to the high degree of need and complex presentations of these children and families. These clinicians provide individual support to families, provide training to professionals and others in the community, and lead a parent-to-parent support program for parents and caregivers of children with FASD or a related disability.

During Fiscal 2008-2009, the Family Services Department served 256 families, with 176 families being served by Family Services Workers and 80 families being served through the FASD Key Worker program.

Key Achievements:

Culturally Responsive Service: We continue to employ a full time Family Service Worker who speaks Punjabi. We have continued to contract with the Fraser Health Region for interpretation services. Family Support: We continued to work with families through professional family support, counselling, advocacy and parent education programs.

A Year of Loss: We were profoundly saddened by the passing of one of our colleagues this year. Clare Ganger began work in 1979 at the Old Yale Residences, and most recently served as a Family Service Worker at the Centre. Clare was a tireless advocate for the families she served and an integral part of our Family Services team. We will not forget her commitment and compassion.

Skill Enhancement:

Staff in our FASD program have provided training to community members and professionals throughout the Lower Mainland. This training has provided caregivers and professionals with information on FASD and best practices in treatment approaches. Our staff are sought out by professionals throughout Metro Vancouver to provide training, and are widely acknowledged in the community as experts in the area of FASD and related conditions.

Mental Health Clinician/Key Worker:

The Centre recruited a master's level clinician who works in both the FASD Key Worker and Mental Health programs. This position has allowed us to provide families with an enhanced service which supplements traditional mental health treatments with specialized knowledge regarding FASD and related conditions.



Psychology & Parent Support

People Served:

Children were seen in the department for behavioral consultation, for counseling, and as part of the Centre's Eating Skills Team. Psychology staff met with families at the Centre, in the family's homes, and at schools and daycares. Having a Registered Psychologist on staff provides significant advantages for the Centre's clients, as this is not a service that is typically available at child development centres in British Columbia. In Fiscal 2008-2009, the Psychology Department served 150 families.

Key Achievements:

Multi-Cultural Staff: Despite a significant shortage in the market for doctoral level psychology staff, the Centre provides the services of a Ph.D. level clinician who works as a mental health clinician who provides individual and group interventions to children experiencing behavioral or mental health problems. In addition, this staff person is fluent in Punjabi. This has allowed the department to dramatically increase the amount and range of our services to South Asian families.

Behavior and Mental Health: Psychology staff provided intervention to children and families who are clients of the Centre and have a developmental disability as well as a significant behavioral or mental health concern. Psychology department staff also provide consultation to other Centre staff regarding behavioral and mental health concerns of clients with whom they work.

Toileting: The Centre's parent support worker continues to periodically lead groups for parents who are having difficulty toilet training their children. This group is based on a curriculum developed at the University of British Columbia and has had significant success in helping parents to toilet train their children. Summer Respite: The Centre again was successful in obtaining partial funding from Human Resources and Social Development Canada for our summer respite program. Through this program the Centre hires university students who are interested in pursuing a career working with children with disabilities. We again partnered with Surrey Parks, Recreation, and Culture to provide children with special needs a one-to-one support worker while they participated in one of the day camps run by Surrey Parks, Recreation, and Culture.

Continuous Quality Improvement: Staff participated in key quality improvement, general occupational health and safety, and emergency procedures development and practice. Skill Enhancement: The Centre's Psychology staff provided in-service education to all Centre staff on managing challenging behaviors in children.



Physiotherapy

People Served:

Between April 1, 2008 and March 31, 2009, the department served 813 children, which included a total of 5705 service sessions. In the month of March 2009, the department served 381 children, including 531 service sessions. **Registered physiotherapists** provide individual assessment and treatment, as well as consultation to programs such as the Infant **Development Program** and Supported Child Development. We continue to provide training and support to family members, caregivers, school personnel and other members of the child's team. The focus of physiotherapy treatment is on any delay or disability which affects gross motor abilities, such as walking, standing or crawling. Any child with a physical disability or gross motor delay qualifies for this therapy.

Key Achievements:

Full staffing: As of March 2009, the physiotherapy department has continued to be fully staffed despite ongoing physiotherapy shortages in the province. We are proud of this accomplishment, and of the high quality of service we are able to provide to the children in the region.

Langley School Aged Therapy:

We now have a Centre physiotherapist working in the Langley School District, which has significantly enhanced school therapy for children in Langley.



Physiotherapy Continued

Groups:

Children have access to a therapeutic riding program operated at Pacific Riding for Developing Abilities (PRDA), a strength-training program at the Surrey YMCA, a new playground group in Langley, and two gross motor groups for different levels of gross motor ability at The Centre.

Casting and Splinting Program:

Our Casting and Splinting Program is considered one of the best in the province for children with disabilities. Through our specialized therapy team and rehab assistant, we are able to design and create products on-site for children with unique splinting and casting needs. This year, the program provided 102 splints and casts for children at The Centre, including 74 for lower extremities, and 28 for upper extremities.

Continuous Quality Improvement: Effectiveness:

The department has focused this year on measuring effectiveness, through the selection of outcome measures to track client clinical progress. We are starting with baseline measures this year, in order to have comparative data in the next few years. The department has also added two new strategies to help ensure effectiveness and quality service: "PT Clinical Problem Solving Session" within our education schedule, which allows for group problem solving around complex clinical cases. Peer evaluation joint visits, which allows for therapists to work together in pairs once a year on a client session and to share knowledge for improved client care and ongoing learning/mentoring.

Skill Enhancement See also "Clinical Education" in OT Report:

Several PT staff attended the Pediatric Symposium for Pediatric Therapists in BC.

Student training:

In September, we hosted the UBC clinical site visit for 42 masters level physiotherapy students, including client demonstration sessions.

Equipment Team:

See OT report.



Occupational Therapy

People Served:

The occupational therapy department served 345 children with disabilities during the month of March 2009 (a 32 % increase from March 2008) with a total of 533 visits. Over the course of the year we saw a total of 777 clients for 5598 visits. As well as direct service visits, indirect services were also provided including preparation of materials and home programs, research of appropriate equipment and report writing, We also provided training or support to family members or caregivers during these service meetings.

Service/training to like agencies is also provided on request in areas such as fine motor development; general education on the needs of children with neurological and developmental disabilities; how occupational therapy supports development; and sensory integration. Professional mentorship is also available in areas of specialty for the department such as casting and splinting, assistive technology, eating skills and sensory development.

The Occupational Therapy staff also actively support the training of future Occupational Therapists through supervision of clinical practica for Masters of Occupational Therapy students from affiliated universities in Canada

Key Achievements: Staffing

Over this year we have had three staff go off on maternity leave and one come back from maternity leave. We have been fortunate in being able to fill all the positions and as of Mar 31, 2008 were fully staffed.

During the summer of 2008, temporary funding was available to allow our School aged Therapy program to continue through the month of August. Traditionally school therapists are laid off for one month during the summer. Continuation of alternate models of service delivery:

Two groups of children in our Early Intervention program were continued to be offered during this year, The Supinators and Learning through Play with Your Preschooler.

Thanks to the temporary funding, a group for school aged clients was offered during summer. The group was offered in conjunction with Recreation Therapy and focused on community independence skills.

This year we welcomed a new private school contract with Fraser Valley Adventist Academy.

Casting and Splinting See PT report Equipment Team:

120 clients were seen for 170 visits for complex equipment needs, primarily wheelchairs and seating systems. This year focus has been placed on developing parent handouts to improve communication and parent education about the equipment assessment and ordering process.



Occupational Therapy Continued

Eating Skills Team: See Developmental Paediatrician report: Continuing Quality Improvement:

- The occupational therapy department has participated in several projects including testing and implementation of UMBY our new data management system and choosing and beginning to implement the Canadian Occupational Therapy Performance Measure which is a well tested, internationally known tool for outcomes measurement.
- The shared waitlist policy we have with Reach Child and Youth Development Society has led to some sharing of policies which is allowing for more equitable access to service for our families in Delta.
- The Early Intervention Occupational Therapists have also examined how we provide service to look for ways of being more efficient.
- We also participated in a provincial committee which developed a form for evaluating the competencies of occupational therapists working in the School Aged Therapy program.

Skill Enhancement:

- To enhance our skills and improve services for children, the Occupational Therapy and Physiotherapy departments worked together to bring Vickie Meade to our centre to present her workshop Partners in Movement in September 2008. This training was opened to the community and as a result, 12 staff were able to attend the course for free.
- The centre participated in the committee that organized the Provincial Paediatric Symposium that was offered in February 2008. This year's symposium focused on the use of the World Health Organizations Classification of Disability. Several staff were able to attend. One OT has been trained in the Partnerships training which will allow our department to provide Partnerships in OT and PT workshops to preschool teachers and Supported Child Development programs in Surrey, Delta and Langley.
- Internal education and journal article reviews were completed on a monthly basis as well as a variety of external training opportunities.

Delivered Seminars:

OT staff have continued to develop and deliver seminars and workshops to a variety of community groups including: Sensory workshops for the Langley and Surrey FAS Keyworker Education sessions, Surrey IDP and the Down Syndrome Parent Support Group, Fine Motor Workshop for Langley Supported Child Development Program, Adapted PE workshop in conjuction with physiotherapy and the Surrey School District, a variety of workshops for SEAs in Langley, Delta and Surrey such as the Nursing Orientation day for SEAs in the Surrey school district where an OT and PT from the centre teach basics of transfers and lifts.

Improving Community Services:

An occupational therapist contributed to each of the following external committees Paediatric OT Council Pacific Infant Child Restraint Advisory Committee (PICRAC) Director of Occupational Therapy Committee Regional Education Committee Surrey IDP Advisory Committee Langley Community Living Days Committee Langley Child and Youth Committee Langley Early Childhood Development Committee Langley Special Needs Advisory Committee Fraser East Child and Youth Mental Health Meeting As well, the department participated in the Langley Community

Living Days and a variety of community resource fairs.



Preschool Program

People Served:

The centre's preschool in Surrey served 80 children monthly, 17 children with disabilities and 63 children without disabilities during the month of March 2009 and a similar number of children in each of the preceding months.

Lookout Preschool located in Delta served 80 children monthly, 16 children with disabilities and 64 without disabilities during the month of March 2009 and a similar number of children in each of the preceding months.

Key Achievements:

Preschool: Maintained high quality delivery of inclusive community-based preschool programs serving the Surrey, White Rock and Delta areas.

Student Placements:

Provided educational practicum placements for students in Basic and Post-Basic Early Childhood Education programs. We also provided a valuable work experience and practicum placements for students in the Kwantlen Access Program for people with disabilities.

Cultural Diversity:

The Centre for Child Development Preschool and Lookout Preschool celebrated Diwali and Chinese New Year.



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Recreation Services

People Served:

Recreation Services Department served a total of 266 clients during the year (214 children with disabilities and 52 adults with disabilities), an average of 122 clients per month and 131 during the month of March 2008. Each client received 1 – 8 service meetings or episodes per month and each service meeting or episode ranged from 45 minutes to 75 minutes. Total number of service episodes or meetings for the year was 3,833.

Key Achievements:

Scheduling of pool-based programs and activities Monday through Friday from 9 am to 5 pm with one program offered in the evening one day per week.

Offered a community-based weight-training program for Centre youth.

Continued involvement and staff support to running of many of the Physiotherapy group programs offered in house and in the community.

Operated a community information and referral system for referring clients to a variety of community programs such as tennis lessons, skiing, weight training, powersoccer, powerhockey, wheelchair basketball and community-based adapted swimming and adapted gym programs.

Offered recruitment, orientation and training to volunteers helping in various therapy and recreation programs.

Provided input and feedback into a new school-based program providing several different adapted physical activities for youth with disabilities in an after-school setting.

Facilitated a joint program with Wheelchair Sports and Sportability to provide adapted cardiovascular and skills training to youth clients of the Centre.



Supported Child Development

People Served:

From April 1, 2008 to March 31, 2009 the Supported Child Development program provided consultant services to approximately 380 children living in Surrey and White Rock. Of those children, an average of 180 children received extra staffing support within their child care setting.

In the month of March 2009, we served approximately 307 children living in Surrey and White Rock. Of those, 196 were receiving extra staffing support in the setting of their choice. Of those 196 children, 112 children were receiving their extra support through The Centre's staff, 41 were receiving funding for In Own Home support and 43 were receiving disbursement funding from The Centre to hire a caregiver in the program of their choice.

Supported Child Development Consultants provided training and service to approximately 75 community childcare centres and their staff in Surrey/White Rock.

In 2008/09 we had arrangements in place through cross boundary funding to allow 19 families to receive supported childcare services outside of their home region.



Key Achievements: Staff:

This past year was a year of change for staff in Supported Child Development. After Karen Whitelock's retirement in March 2008, we bid farewell to two staff members, Jenny Freeborn who retired after 22 years of service, and Kerry Duchnycz who left for career advancement.

We were very fortunate to have Cathy Robinson join our team as the Supported Child Development Coordinator/Education Consultant as well as having Tracy Kugi and Jennifer Street join our consultant team. Supported Child Development staff includes thirty-nine Support teachers working in approximately fifty community programs providing ongoing care for approximately 112 children in our region.

Continuous Quality Improvement: UMBY:

In continuing to work with the UMBY data system our biggest challenge has been ongoing training and updating of information. Within Supported Child Development we have 35 support staff working out in the community in approximately 50 different locations.

As UMBY relies on these staff to have access to computers, the challenge to have all data entered properly, updated as necessary and stats recorded on time to submit monthly reports has required great teamwork. Staff who do not have home computers have been creative in finding ways to access UMBY successfully, using libraries, family or friends computers or making time to come into The Centre specifically to access UMBY. Everyone has worked hard to coordinate their time at available computers and our team "UMBYMEISTER", Sharon, has been a great resource for all of us who have questions or require some follow-up training or help.

For staff who do have home computers, we have a group e-mail that allows us to send out information, updates and reminders. Staff without access to computers receive the information via a phone call. The process is evolving and changing as we learn from both our success and our stumbles!



Supported Child Development Continued

OUTCOMES: Assessment tool

In Supported Child Development we have chosen to use the Child Development and Support Needs Assessment tool to track outcome measures. The Consultants worked together to review different options and chose this as the most useful, user friendly tool to measure developmental and social goals for early intervention age children in community programs.

We started using the adapted tool in June with new clients between the ages of two to twelve who are attending community care programs. An initial assessment is completed at start of service and the tool will be updated at least yearly or sooner if the need arises. We have chosen to start this process with our focus being the children between three and school entry. By the end of June 2010 we will be completing our first full year of assessment tracking and are looking forward to what we will find!

Skill Enhancement:

Supported Child Development Consultants took part in The Partnerships Program, Training the Trainers workshops in February 2009. With the training and updated material ready the Consultants will host community workshops in the coming year. The program also sponsors the annual community conference, "Children, The Heart of the Matter" in February and the Surrey Middle Childhood Matters Kid's conference in November. Supported Child Development Staff were involved in a number of educational sessions throughout the year including attending the "Partners in Planning" Children and Youth with Special Needs conference, "Children, The Heart of the Matter" conference as well as a variety of workshops.

Effectiveness/Efficiency: Childminding:

Child Care Options Resource and Referral program provides a mobile Child Minding Program that we utilize on a regular basis for The Centre clients and siblings while parents attend Family Service Plan meetings, Family service groups, and Educational sessions.





Developmental Medicine

People Served:

The Developmental Pediatrician sees children and youth 0-19 years of age who have been referred by their Family Physician or Pediatrician and who are clients of the Centre.

Key Achievements:

1) Provided medical liason between Clinical Services Team and CEO

2) Provided consultation to Senior Staff and Administration regarding clinical service delivery.

3) The Developmental Pediatrician provided consultation and education to Centre therapists and other professionals.

4) The Developmental Pediatrician provided medical leadership to the Centre for Child Development's Eating Skills Team.

5) The Developmental Pediatrician provided direct medical consultation as part of the multidisciplinary Eating Skills Team.

6) Actively engaged in the maintenance of Pediatric Dietary services for The Centre for Child Development.

7) Collaborated and communicated with community Family Physicians, Pediatricians and Pediatric Specialists at BC Children's Hospital and Sunnyhill Health Centre for Children .

8) Collaborated with Surrey Memorial Hospital Feeding Team, Sunnyhill Health Centre Feeding Resource Team and BC Children's Hospital Department of Occupational Therapy.

9) Co- presented "Food For Thought" at Reimaging Health Services: Innovations in Community Health Conference with Andrea Rowan M.Sc., SLP(C) on November 7, 2008. The conference was hosted by The Canadian Centre for Policy Alternatives BC and Simon Fraser University's Economic Security Project.

10) Attended the annual Society for Developmental and Behavioral Pediatrics Conference in Cincinnati Ohio, October 17- 20, 2008.

11) The Developmental Pediatrician maintains consulting privileges at BC Children's Hospital.



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We acknowledge the financial assistance of the Province of British Columbia



